

Caring experiences of male nursing students: A qualitative study

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ABSTRACT

Background: Caring, nursing, and the female gender role are all strongly linked. However, the number of male nurses is expanding globally. This occurrence calls into question the caring experiences of men in the nursing context. **Objective:** The purpose of the study was to explore views of caring in nursing among male nursing students in Brunei Darussalam. **Methods:** An exploratory, qualitative design was used to analyse the students' insights on the meaning of caring. Eighteen students who fit the inclusion criteria were invited using a purposive sampling method. There was two individual interviews (n=2) and four focus groups discussion (n=4), and it was audio-recorded with the consent of the students. These interviews were coded and thematically analysed. **Results:** Three themes have emerged from the data analysis: (1) Caring is about giving holistic care (2) Perceived challenges of exhibiting caring (3) Overcoming the challenges of exhibiting caring. **Conclusion:** The findings show that caring in the context of holistic care is consistent with earlier research. The study has strengthened our understanding of the profession's view of male student nurses. However, more research into the impact of male students' roles and images on nursing practice could better understand their challenges.

Keywords: Caring, Male nurse, Nursing Student, Qualitative, Brunei

INTRODUCTION

The term caring and nursing is commonly associated with a female's role (1). This association is indeed irrefutable, and the female population primarily dominates the nursing profession workforce. However, the number of men embarking and enrolled in the nursing profession gradually increased year by year. Brunei Darussalam is also not exempted from this pattern, despite female nurses still overshadowing male nurses. A total of 466 male nurses was registered in Brunei in 2015, compared to 1781 female nurses (2). This further challenge the traditional stereotype of a man as a being who is incapable or lacking the competency to care for others (3). Men can equally provide care as competent and effective as their female nurses' counterparts (1). Student nurses, who are considered the nursing workforce's future assets, may see the clinical or

practicum area as a training ground that offers an excellent opportunity to practice their clinical skills and provide care to the patients holistically. Bruneian nurses' perspectives, practices, and expressions of caring may all be informed by the Malay Islamic Monarchy's national philosophy. Brunei Darussalam is depicted in this idea as the Malay nation based on the Islamic faith, with a king who serves as the nation's sultan and supreme ruler (4). It complements the Islamic way of life, has brought harmony, mutual respect, and a better understanding between one another and also help to unite the country's people regardless of ethnicity, race and religion. Philosophy has become a compulsory subject in Brunei Darussalam's education system, and a way of life practised in homes and workplaces. This, too, applied in the nursing practice and has been emphasised in the Code of Professional Conduct for Nurses and Midwives in Brunei Darussalam (5) under conduct statement eight, which stated that the "practice should be following the legislations of Brunei Darussalam and the Malay Islamic Monarchy philosophy" and for the nurses to "conduct themselves based on the Malay Islamic Monarchy philosophy and standards in what they do, and in their interaction with the client receiving care as well as with families, communities and other members of the health care team".

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Meanwhile, ethics, social relationships, societal values, and moral views affect nurse care (6). These variables are strongly associated with gender, which may influence caring perceptions and behaviours. Buthelezi et al.'s (7) qualitative study on clinical learning experiences of male nursing students has shown that male nursing students experience more challenges in the clinical setting than female nursing students. The same situation may be seen or encountered among male nurses and male student nurses in Brunei Darussalam, as described in a recent study (8). This is because there may be some limitations and barriers faced when providing care to the patient.

Hence, we undertook a qualitative study using semi-structured interviews to examine perceptions of caring from male nursing students. The broader goal was to explore views among male nursing students in Brunei Darussalam. The objectives of the study were: (1) to explore how caring is perceived by male nursing students (2) to examine the challenges in caring experiences (3) to identify strategies to overcome the perceived cha

METHODS

Design

The study utilised a qualitative method to explore the understanding from another person's perspectives and experiences and interpretation and the meaning they bring and give to events and situations (9). As the study aims to explore the view of male student nurses, which cannot be quantified, the use of qualitative research allows the researcher to gain underlying reasons and uncover trends in thoughts and opinions and dive deeper into the students' perception and understanding of caring.

Sample and recruitment

Purposive sampling was used in the study since it is the most viable method of obtaining relevant and meaningful data. The inclusion criteria are male students across the nursing programme. Recruitment of the students as participants started once approval from the Faculty Research Ethics Committee was obtained. Through the programme leader of a nursing programme who acted as the gatekeeper, an electronic poster was disseminated to the students, followed by a face-to-face briefing. Forty student nurses attended the recruitment briefing sessions, and out of these 40 attendees, 18 students have agreed to participate in this study.

Data collection

The data was collected from two individual interviews (n=2) and four focus group discussions (n=4). The purpose of the one-on-one interview is to accommodate students who are uncomfortable voicing their opinions in a group setting. The study was conducted throughout January 2021. An email reminder was sent to the participants two days before the interview date that they had chosen. Of 18 students, two students were interviewed individually, and sixteen were in the focus group interview. In total there was four focused group discussion and with 3-5 students per group. The students were briefed about the study and provided a consent form for them to read and sign. After they signed the consent form, the students were administered a socio-demographic form to fill in. With specific number coding, e.g., II01 for Individual Interview session one and FGD 1, FGD 2, FGD 3 represents students who registered for focused group discussion. All the sessions were audio-recorded with consent from participants, and the principal researcher also took field notes throughout the interview session to aid in transcribing. Whether for an individual interview or focus group discussion, the data collection for the study was done in a private room in the institution for privacy purposes. The interviews started with the question: Tell me what your view of nursing as a profession is. Follow-up questions were asked about their views on caring in nursing, the perceived barriers when providing care during clinical placement, and the strategies they used to overcome the barriers mentioned.

Data analysis

The audio-recorded interviews were transcribed verbatim by the principal researcher and analyse manually using thematic analysis. Both the individual interview and focus group discussion interviews were analysed in a process inspired by the guidance of Graneheim et al. (10) and Graneheim and Lundman's (11) All authors engaged in the analysis process; there was frequent movement between the raw data and the analytical pieces throughout the process. The comprehensive units and the final three themes were discussed repeatedly among the research team to obtain consensus.

Rigour

The four aspects of trustworthiness in qualitative research, credibility, dependability, conformability and transferability (12), have been recognised and applied in this study. The

students were guided through the interviews with semi-structured open-ended questions that allowed them the freedom to speak as much as they wanted regarding their experiences. The interviews strived for promoting dialogue and asked for clarification of the narratives to achieve credibility. Furthermore, the analysis process was conducted in a reflective dialogue between the researchers. To accomplish dependability, all of the researchers conducted the interviews. The recordings were transcribed verbatim, and quotes from the participants are presented in the findings for conformability. The findings might be transferred to inform other male student nurses' understanding of caring and perceived challenges in working and in the profession. However, individual readers must evaluate the feasibility of transferring the results.

RESULTS

This study identified three themes from the male nursing students' experiences of establishing caring in the health care context in Brunei Darussalam: caring is about giving holistic care, perceived challenges of exhibiting caring and overcoming the challenges of exhibiting caring.

Theme 1: Caring is about giving holistic care

The majority of students refers caring as to the provision of care to the patient as a whole, and this does not only limit to the physical needs but also attending to the patient's psychological, emotional, social, and even spiritual needs of which they called it as giving the patient a 'holistic care'. They believed that every patient has different needs and should be addressed individually regarding the care provided and should not be stereotyped and assumed that "one type of care fits all". The majority also claimed that caring is a process and is provided until the patient is discharged.

Previously I was attached to the male medical ward. There are many different types of sick people with different disabilities, and we took care of them individually according to their needs (Participant 5, FGD 1)

However, some students claimed that care is still provided to the patient, even after hospital discharge through a follow-up review.

For me, caring is a continuous process and does not stop when the patient is discharged because they still need to undergo follow-up care or review at the hospital (Participant 2, FGD session 1)

Some students also expressed that caring for the

patient holistically also refers to the family members' involvement (including carer) as part of their care. They mentioned that when a patient is admitted into the ward, the primary carer or family members who looked after them will also automatically become a part of their responsibility during care provision. They believed that family members or carers are also an integral part of their care. The main reason for this is Brunei Darussalam's family-oriented setting which is further influenced by religion and local culture. This element has been nurtured and embedded in Bruneian's identity since childhood. A student described:

One time, I attended to a patient who has a carer (his wife). The patient has been admitted for three months, and the wife expressed how tired she was (looking after her husband) and unable to go back home for three months, so we also need to care for the family member's health too! As a nurse, not only we care about the patient, but we also care about the family members that stayed (Participant 5, FGD session 3).

One of the students quoted on how answering any questions or clarifying any doubts raised by the family members or carers as part of caring:

We also took care of the family members too. For example, if they have any questions or anything, then we will try as much as possible to help them (Participant 3, FGD session 2).

Another student described trying to meet the carers' needs as part of caring, too, as seen in the quotation below:

We do not just attend to the patient, but the carer too! Sometimes we will ask if they wanted to take a short walk outside or, if they are cold, maybe we can provide them with a blanket. (Participant 15, FGD session 4)

Theme 2: Perceived challenges of exhibiting caring

Gender differences in providing care do not appear to be a key concern among the students. While they are only assigned to male wards for their clinical placement, the students face some barriers and challenges during their care provision. The significant finding shows that the students' care is determined by allocation of nursing tasks and the patients themselves.

The majority of the students described how their presence in the ward is commonly associated with the 'extra duty,' especially manual handling of the patients or lifting heavy objects. They expressed

their frustration on how some nurse managers and staff nurses also set this expectation. They can see a difference in the treatment they received compared to their female student nurse counterpart. Some male students expressed their desire to be more engaged in other nursing-related skills like their female student nurse counterparts rather than just focusing on the 'extra duty,' which has been automatically assigned to them. As one of the students quoted:

In the healthcare setting, they always look for male student nurses, even though we got something to do during that time. There is this one time, and I was lifting five patients in a day! The staff nurses will be like, 'Where is that male student nurse? All right, come come come! Transferring a patient from the operating theatre to the ward and then lift heavy objects (Participant 14, FGD session 4).

However, some of the students held that they do not mind being involved in manual handling of patients or lifting heavy objects as they feel that their presence in the ward is acknowledged and they feel needed. They also believe that all these 'extra duties' is also part of caring for the patient. When asked how they feel for always being involved in a physical task, one of the students happily quoted:

You feel superior! When they specifically picked you, you felt stronger every time they asked you to carry heavy objects (Participant 13, FGD Session 4).

Some of them also mentioned that being involved in a physical task and manual handling means that it is more efficient when being done by the male nurses.

For example, if a female colleague finds it challenging to transfer a patient from bed to chair, why would you force them? A female nurse may take 2 hours to physically handle the patient, while male nurses may do it in 2 minutes (Participant 15, FGD Session 4).

When providing care to the patient by the students, the care is usually determined by the patient themselves. The analysis shows that gender differences do not influence the care provision provided rather than the patient's personal experience or encounter in the past. This is because the patient prefers competent and caring nurses over nurses who are viewed as unpleasant when providing care and treatment towards them in the past, making them generalise the care they received. One of the students

quoted on how a male patient preferred female nurses because of the treatment that he received in the past, which led to his assumption that all male nurses are rough when assisting with personal hygiene:

I am used to hearing the patients talking about how they would prefer to look for a female nurse. I guess they may perceive male nurses can be slightly rough when washing or cleaning them. I think they have not encountered male nurses who are gentle and good at taking care of people. I know a few of them (Participant 15, FGD session 4).

Theme 3: Overcoming the challenges of exhibiting caring

According to the students, there were no specific ways to overcome the barriers and perceived challenges they had faced when exhibiting caring. The majority of them mentioned that the only way to deal with the challenges of always being involved in manual handling is by accepting and acknowledging that it is part of their learning experience. The priority is to look at the patient's needs as the primary duty. Most of the students stated that this is what they have signed up for when they join nursing, and therefore they just had to deal with it and try to look at it from the positive side. They also emphasised how the national philosophy may have influenced their perception of the given tasks. The majority of the students described that Islamic principles of true intention matter the most. Everything they do during the provision of care is for learning purposes and the patient's benefit. Several of the students quoted:

I know the number of tasks given can be overwhelming most of the time. However, I tried to take it positively and wholeheartedly accept it because it is too part of learning and our responsibilities, and what matters for me is that I get the job done! (Individual Interview 2).

To overcome the challenges, we need to refresh our intention and purpose of joining this course. Equally important is to have a positive mindset and perceived challenges as a learning process. When we have a clear sense of helping the patients, perhaps that can help us overcome obstacles. We must not take advantage of the patient (Participant 11, FGD Session 3).

Other students also expressed how they should have expected this when they first signed up to join the programme, and they just had to deal with:

I do not mind getting involved with the manual handling of the patient and lifting heavy things. As far as I know, it is part of our responsibilities when being in this profession. Of course, we must know our limits and that we do not overwork (Participant 9, FGD Session 2).

We signed up for this profession. For example, no matter what we say, if a nurse said that he does not want the caring aspect, then he must ask himself why he signed up for all this in the first place. Come on. You got to be prepared for this. If you do not have the passion, it is better to be a non-nursing professional (Participant 14, FGD Session 4).

Therefore, to overcome such a situation, the students will usually negotiate with the patient and look for another nurse to assist them. If no other nurse is available, they would usually apologise in advance, provide a proper explanation, and seek consent from the patient before proceeding with the nursing care. This ensures that the patient understands and feels a sense of respect. A few of the students quoted:

If there are no other available nurses during that time, you will have to deal with it, for example, apologising and adequately explaining the situation to them. For sure, they (the patients) will understand (Participant 13, FGD Session 4).

Some even mentioned that seeking consent and communication is the key to overcome such situations:

I usually seek consent to deal with it, where the communication part (giving proper explanation) comes in (Participant 8, FGD Session 2).

DISCUSSION

This study aimed to examine male student nurses defined the exhibition of caring in a healthcare context. The results identified the students' emphasis on the concept of holistic care. The principle of holistic care has existed for a long time in nursing. This is in the purview of nursing education, which considered the person as a whole, and similar to other countries whereby the nursing curriculum and practicums emphasise the physiological, psychological, spiritual, emotional, social and relational aspects of the human beings and become the foundation of nursing practise (13). Holistic care has also been recognised as the heart of nursing science, and it is a comprehensive model of caring (14, 15). Zamanzadeh et al. (16)

identified that it encompasses other aspects of the patient's care, including the medication, art of communicating, self-help and complementary treatment received during care provision.

Meanwhile, the significance of the family members or carer is emphasised in many studies. For example, Dossey et al. (17) also stated how holistic caring involves interacting and caring for the patient as a person and his or her family and the environment. This finding suggests that holistic care helps the students to understand the patients and their needs in-depth. When they know that different patients have different needs, individualised care can then be provided. Individualised care is an essential concept since its benefits include better patient outcomes and increased patient satisfaction and engagement, allowing both caregiver and patient goals to be met (18).

In terms of challenges of exhibiting caring, the students reported that the task allocation and patient themselves mainly determined the challenges. In task allocation, for example, it is mainly focusing on manual handling of patients and lifting of heavy items. Previous literature also suggested similar findings whereby the physical nature of men and the masculine role leads to their expectation to perform manual handling and heavy physical work and ensure the safety of their female colleagues (8, 19). Chan et al. (20) found that male nursing students in Hong Kong also experience being assigned extra tasks, increasing their workload and hindering them from performing their duties. While they did not oppose doing extra manual work and accept it as a part of care provision despite this, such findings are consistent with previous studies whereby male students were used mainly for heavy lifting (21). This also suggests that male nurses are rarely portrayed as highly skilled and intelligent (22). As a result, the nursing profession may be hampered by persistent negative images of professional male nurses.

Meanwhile, the majority of the students reflected that some patients are reluctant to receive treatment regardless of the nurses' gender, and it is not because of them being male student nurses. This is because of their previous encounter or experience, making them selective in providing care and prefer competent care. Furthermore, given descriptions of care showed that gender was not a factor in defining care; instead, it was characterised by compassion; showing interest in the person and behaving in a manner that demonstrates empathy. This study further

supported similar qualitative research by Colby (23). In other words, gender may be irrelevant to a nurse's ability to care, as both male and female nurses can be competent and effective (24).

In overcoming the challenges, the students described that respecting the patient as an individual is paramount. Other strategies also include the consideration of the national philosophy when exhibiting caring. This includes the importance of having a company or chaperon such as female nursing colleagues or family members to accompany them when giving nursing care or assessing the patient. This is similar to other previous studies from overseas, which mentioned the importance of chaperon or accompanying (25). The idea of having a chaperon present during the provision of care does not only protect the patients from the possibility of inappropriate conduct but also serves to protect male nurses who are focusing on the patient's needs as their primary duty. This is true especially for male student nurses who are not concerned about their gender but only focus on delivering the best care possible (26).

LIMITATIONS

The only limitation of the study is that it only focuses on male nursing students enrolled in one nursing institution. Therefore, it is deemed appropriate to include other nursing institutions to obtain a more comprehensive view of the topic.

CONCLUSION

The study provided insight into the perception of caring by male nursing students and the perceived challenges that male nursing students generally faced when exhibiting caring in the healthcare context. Several strategies were adopted to overcome these challenges, which is beneficial in improving nursing care provided by the current and future student nurses and male nurses in general. Overall, the student expressed that not only the perspective of caring in nursing should be holistic, but it should also be consistently aligned with the country's national philosophy of the Malay Islamic Monarchy. This research has strengthened our understanding of the profession's view of male student nurses. However, more research into the impact of male students' roles and images on nursing practice could better understand their challenges.

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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