ORIGINAL ARTICLE

Experiences of men in nursing in the 20th century

Experiencias masculinas en la profesión de enfermería en el siglo XX

Experiências masculinas na profissão de enfermagem no século XX

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ABSTRACT

Introduction: In the 20th century, social norms were established that prescribed certain occupations, such as nursing, as exclusively appropriate for women, a notion founded on stigmatization and gender stereotypes. Consequently, men who attempted to pursue and progress in this profession encountered various challenges. **Objective**: To explore the experiences of a sample of men who chose to study Nursing. Methodology: This was a historical qualitative study, conducted between June and December 2023. Thirty male nurses from various regions of Peru participated. Open-ended interviews were carried out and a thematic analysis was performed using IRaMuTeQ software. Results: Seven categories emerged from the analysis: personal perception, family perspective, social perspective, academic environment, work environment, and coping strategies. Nursing was associated with feminine characteristics based on gender norms, leading to barriers for men who chose this profession, as it was perceived as a transgression of traditional gender roles. Conclusion: Men aspiring to be nurses faced deeply rooted gender stigma and stereotypes, which led to social pressure and family conflicts. Despite these challenges, they found academic support that enabled them to pursue their goals. Moreover, they developed various coping strategies to overcome the obstacles of that era.

Keywords: Nursing; Social Stigma; Gender Stereotyping; Social Norms; Nurses.

RESUMEN

Introducción: En el siglo XX se crearon normas sociales que prescribían que algunas ocupaciones como la enfermería eran exclusivamente apropiadas para las mujeres, noción fundada en base a la estigmatización y a los estereotipos de género. En consecuencia, los hombres encontraron obstáculos al intentar ejercer y desarrollarse en esta profesión. Objetivo: Explorar las experiencias de una muestra de hombres que optaron por estudiar la carrera de Enfermería. Metodología: Estudio histórico de carácter cualitativo realizado entre los meses de junio a diciembre del 2023. Participaron 30 enfermeros adultos de diversas regiones del Perú. Se utilizó la entrevista abierta y análisis temático con el software IRaMuTeQ. Resultados: Surgieron 7 categorías: percepción personal, perspectiva familiar, perceptiva social, entorno académico, entorno laboral y estrategias de afrontamiento. Según el género, se asociaba al cuidado enfermero con características femeninas, razón por la cual, los hombres que optaban por esta profesión enfrentaban barreras para estudiar e ingresar al campo laboral, ya que era visto como una transgresión a los roles tradicionales de género. Conclusión: Los hombres que aspiraban a ser enfermeros enfrentaron estigma y estereotipos de género arraigados; esto generó presión social y conflictos familiares. A pesar de los desafíos, encontraron apoyo académico que les permitió perseguir sus metas. Además, desarrollaron diversas estrategias de afrontamiento para superar los obstáculos de aquella época.

Palabras claves: Enfermería; Estigma Social; Estereotipo de Género; Normas Sociales; Enfermeras y Enfermeros.

RESUMO

Introdução: No século XX, foram criadas normas sociais que prescreviam que algumas ocupações, como a enfermagem, eram exclusivamente apropriadas para mulheres, uma noção baseada em estigmatização e estereótipos de gênero. Como resultado, os homens encontraram obstáculos ao tentar exercer e se desenvolver nessa profissão. Objetivo: Explorar as experiências de uma amostra de homens que optaram por estudar enfermagem. Metodologia: Estudo qualitativo histórico realizado entre junho e dezembro de 2023. Participaram 30 enfermeiros adultos de diferentes regiões do Peru. Foram utilizadas entrevistas abertas e análise temática com o software IRaMuTeQ. Resultados: Surgiram sete categorias: percepção pessoal, perspectiva familiar, percepção social, ambiente acadêmico, ambiente de trabalho e estratégias de enfrentamento. De acordo com o gênero, a prestação de cuidados foi associada a características femininas. Portanto, os homens que optavam pela profissão de enfermeiro enfrentavam barreiras para estudar e entrar no mercado de trabalho, pois isso era visto como uma transgressão dos papéis tradicionais de gênero. Conclusão: Os homens que desejavam ser enfermeiros enfrentaram estigma e estereótipos de gênero arraigados, o que levou à pressão social e a conflitos familiares. Apesar dos desafios, eles encontraram apoio acadêmico que lhes permitiu perseguir seus objetivos. Além disso, eles desenvolveram várias estratégias de enfrentamento para superar os obstáculos da época.

Palavras-chave: Enfermagem; Estigma Social; Estereotipagem de Gênero; Normas Sociais; Enfermeiras e Enfermeiros.

INTRODUCTION

Since its beginnings, the nursing field has been profoundly shaped by individuals who have helped define not only its methods but also its social and gender conventions. Florence Nightingale, recognized as the pioneer of modern nursing, played a fundamental role in the strong association between the profession and the female gender. This relationship is evident in the early practices of

nursing, which were often performed by women and bore a religious imprint, deliberately excluding male participation.^{1,2}

Gender inequality, rooted in social dynamics and structures, is particularly prevalent in education and work environments in Peru, where patriarchal norms perpetuate the discrimination and subordination of women. This is exacerbated by factors such as socioeconomic class and ethnicity. Men have benefited from this system, gaining more direct and unrestricted access to employment, education, and personal development opportunities. In contrast, women have had to fight not only against gender stereotypes that confined them to domestic or low-paid jobs but also against a social structure resistant to change.³

It was not until the early 20th century that humanity experienced a significant period of reassessment and change of gender roles. After centuries of effort, and thanks to 19th-century advancements, women began integrating themselves into areas previously dominated by men, such as higher education and certain professions. In this context, nursing emerged as a professional choice because of its qualities and the societal perception of care and assistance as typically feminine tasks. This choice not only demonstrated progress toward equal opportunities but also highlighted the persistence of gender stereotypes.^{4,5}

Beginning in the 1970s, men started entering the nursing profession. This shift placed them as a minority within a female-dominated field, challenging traditional gender notions associated with the profession, and reflecting progress in gender dynamics within healthcare. However, it also impacted their identity due to the stigma and prejudices attached to working in a traditionally feminine domain.⁶ The 20th century was not only marked by advancements in various disciplines but also by an intensification of machismo with a tangible presence across all sectors of society; as a result, male professionals confronted social and familial prejudice as well as academic and professional discrimination when challenging the gender conventions of their time.^{7,8}

Despite the social sanctions and stigmatization associated with pursuing a traditionally female career—such as the attribution of homosexuality and the questioning of their masculinity—these men also benefited from the patriarchal division, which provided advantages simply by being male. This dichotomy manifested in greater career mobility and development opportunities, as well as in the assignment of tasks that valued physical strength and leadership (traits typically associated with masculinity). In this context, male nurses not only negotiated their position within a workplace defined by being historically female but also reinforced and questioned gender norms, relying on male advantages while navigating the demands and constraints of a developing profession. 9,10

In light of the above, the objective of this research was to explore the experiences of a sample of men who chose to pursue a career in nursing, in order to understand how they faced and perceived gender stigma and discrimination in various settings and to identify the coping strategies they employed to confront these situations.

METHODOLOGY

This qualitative study was conducted through interviews with open-ended questions, held nationwide via video call in Peru. Eligible participants were adult male nurses who began working in hospitals or community health centers during the 20th century, as well as those who were retired. Professionals with a disturbed state of consciousness or cognitive function were excluded.

A historical research method was chosen, framed within the qualitative paradigm, characterized by analyzing an individual or group in a specific period and location. In this case, life history is used as a key tool to analyze and deeply understand the experience of an individual in a given situation. The use of life histories—specifically, those of male nurses in the 20th century—allows the researcher to

delve into the complexities and nuances of the lives of these healthcare professionals. This approach provides a unique perspective that is not limited to objective data but also captures subjective and emotional aspects, crucial for understanding the lived experience of male nurses.¹¹

Data were collected between June and December 2023 by the researcher JCFD, trained at the undergraduate level with experience in qualitative research, with the support of researcher CJCJ, who holds a doctoral degree and has expertise in research and data analysis. Due to the qualitative nature of this study and its national scope, comprehensive measures were essential to ensure representativeness across the country. To achieve this, two online recruitment methods were devised to create a convenient sample of volunteers. The primary approach was snowball sampling, starting with 10 initial contacts, each representing a different area of the country. The original sample included diverse characteristics, such as various regions of Peru, including both urban and rural areas, to ensure the representativeness of the findings.

The first participants were contacted via social media (Facebook), where they were invited to the study, ensuring they met the inclusion criteria. The lead researcher had no prior relationship with the participants. Information about the study (purpose and objective) was provided, and if they wished to participate, they were asked for a contact phone number to receive additional information. Nurses who agreed to participate were asked to sign the informed consent form and send it via email or instant messaging applications in PDF or JPG, and a date was arranged for the in-depth interview. Subsequently, a hyperlink for the video call was sent along with some guidelines, such as the estimated duration (30 minutes), instructions not to share the link or invite others, and reminders to ensure good audio quality, a stable internet connection, and to keep the camera on. These aspects were verified on the day of the interview to prevent interference and to maintain the quality of the information provided.

A secondary recruitment approach was then implemented, using the network of connections established by the initial participants. This enabled greater accessibility to more participants, including those residing in rural areas, thanks to Peru's broad territory. The final sample consisted of 30 nurses who agreed to participate, with no recorded abstentions or dropouts.

As for the instrument, before its application, the questions underwent a content validation process using input from five experts (two PhDs and three Master's degree holders with experience in qualitative research and the subject matter) and five participants, thus ensuring their relevance and suitability to the proposed topic. Seven open-ended questions were included in the instrument (Table 1) to explore behaviors, thoughts, experiences, and perceptions related to stereotypes, as well as fears and stigma associated with the profession.

By using open-ended questions, a deeper and more explicit analysis was possible, allowing respondents to share their experiences in an illustrative and narrative manner. This resulted in a thorough and detailed description of what it was like to work and study during the 20th century. Given the sample size and to ensure that no experience was excluded, the open-ended responses provided by all participants were analyzed. The interviews lasted 35 minutes on average.

Table 1. Questions in the data collection instrument.

Ouestions

- 1. How did you feel when deciding to study nursing?
- 2. What comes to mind when thinking about the time you told your family you wanted to study nursing?
- 3. Did any of your friends or family react negatively or with surprise while you were studying nursing?
- 4. How many men studied nursing at your university and how did you feel about this?
- 5. What support did you receive from your classmates?
- 6. What specific challenges did you face as a man in a predominantly female profession like nursing?
- 7. What did you do to confront the stereotypes associated with your profession?

Source: Created by the authors.

Once the information was collected, the interviews were transcribed and the data underwent rigorous tests to ensure quality, including a review process with participants to make corrections or clarifications. After their approval, the analysis stage took place, which involved organizing the data, summarizing it, conducting quality checks, ensuring accuracy, and removing incomplete or redundant responses. During the analysis, theoretical saturation of the categories was achieved; however, a corroboration process was followed with subsequent interviews, showing consistency among participants' accounts. Two researchers conducted this process to minimize the risk of bias.

The transcribed data were analyzed using the R Interface for Multidimensional Analysis of Texts and Questionnaires (IRaMuTeQ), Version 7. IRaMuTeQ provides lexical analysis, a method for understanding the meaning and organization of words within a given text. This analytical methodology identifies keywords, linguistic patterns, and semantic connections within the textual material. In the first phase of data analysis, Descendant Hierarchical Classification (DHC) was conducted, which organizes concepts into groups based on their similarities at different hierarchical levels, resulting in the creation of a dendrogram. This technique then categorizes the most similar concepts into broader expressions, providing a systematic perspective on connections between components and allowing for thematic analysis. Using information from this semantic set, the corpus was read to gain a comprehensive understanding of how these words are used, the contexts in which they are used, and the meanings assigned to them by participants.

Words were included in their respective semantic classes based on the following criteria: a frequency greater than twice the average occurrence in the corpus and a link to the specific class.

Finally, a reflective content analysis was conducted using the DHC. After reviewing the established semantic classes, various thematic groups or areas of interest were associated, guiding the content analysis to delve deeper into the meaning and context of these groups.¹²

This study was approved by the Ethics Committee of the Faculty of Health Sciences at Universidad Nacional de Cajamarca under Resolution No. 388-2022-FCS-UNCEs. Participation was voluntary, no personal or sensitive data were collected, and informed consent was provided. Video call recordings were stored on the researcher's computer, with assurances that they would not be

disseminated in full or in excerpts, thus ensuring confidentiality. Additionally, codes were assigned to the collected interviews using the letter P (Participant) followed by the number corresponding to their participation, so P1 was assigned to the first participant, and so on.

RESULTS

The sample consisted of 30 male nurses, including adults (60.0%) and older adults (40.0%), married (45.2%) or engaged (54.8%), from urban (19.6%) and rural (80.4%) areas. Participants were from the northern (44.0%), central (36.0%), and southern (20.0%) regions of Peru, with 80.0% currently employed and 20.0% retired.

The collected data were processed, generating a corpus of 102 divided into 38 distinct categories, which indicated a multitude of semantically similar words, classified into 12 textual segments. The software deemed these elements as relevant and retained them for further analysis. The average number of words per text section was 16. Using Descendant Hierarchical Classification (DHC), six different thematic classes were identified. These represent collections of words frequently used by the subjects in each response, detailed as follows.

Class 1: Individual Perception

These testimonies reflect the various pressures and stigmas faced by men who chose to study nursing. These pressures come not only from family and friends but also from society in general, which could have significantly affected the students' self-esteem and motivation.

"Studying nursing turned out to be more challenging than I imagined. The pressure from family, friends, and society lowered my self-esteem, I got depressed and didn't want to continue studying nursing." (P3)

"The motivation to study nursing was short-lived because my family refused to accept my desire to become a nurse. They wanted me to study another career." (P7)

"It is sad to realize that some people still hold such narrow views on what should be appropriate for someone of a particular gender." (P27)

There is a strong influence of gender expectations rooted in the perception of nursing as a predominantly female profession. This was reflected in the disapproval and lack of support from family and friends, as well as feelings of shame and perceptions of contempt for choosing a traditionally feminized career.

"I felt ashamed for studying a woman's career. I think that choosing nursing does not mean I have less interest in women; rather, I am drawn to a profession that involves caring for, supporting, and providing assistance to those in need, regardless of their gender." (P9)

"I felt frustration seeing how my professional choice was devalued based on prejudice." (P13)

"Every time someone asked me what I was studying, I would mention a different career out of fear of being judged and rejected by my friends." (P29)

Class 2: Family Perspective

Gender stereotypes persisted within families, where the decision of male members to study nursing was questioned, associating it with a supposed lack of masculinity or particular sexual preferences. As a result, male household members experienced a diminished sense of authority, scrutiny, or social stigma within their environment due to another male member choosing nursing as a career.

"They refused to support me at the time because they wondered how, as a man, I could choose a woman's profession. They even questioned if I liked women, as they considered that caregiving was solely a woman's responsibility." (P2)

"When people asked my father what I was studying, he sometimes would avoid answering and change the subject until the person forgot about it. Other times, he mentioned a different profession out of fear of his friends' judgment and what people might say." (P10)

"My sisters were more supportive, agreeing with my decision. In contrast, my brothers disagreed with my career choice." (P10)

"They would repeat every day that I'm weird for studying nursing and that only my sisters could study nursing because they are women." (P12)

Family pressure was further exacerbated by the perception that nursing is a lower-prestige career compared to more "masculine" careers like medicine, undermining the participants' self-esteem and confidence.

"My father insulted me, saying I was the shame of the family, questioning how I could study that profession, insisting that I should choose medicine as it has more prestige and renown." (P8)

"With that profession, you won't gain any renown, and you should choose medicine where you'll earn more." (P17)

Class 3: Social Perspective

These findings provide a stark insight into the challenges and stigmatizations faced by men who chose to pursue nursing. Firstly, they highlight how the stigma associated with this professional choice impacted social relationships and community integration. Schoolmates isolated and ridiculed the students, resulting in a hostile and alienating environment.

"My schoolmates isolated me; they looked down on me and began to harass me with mean jokes." (P21)

Moreover, the participants expressed that media played a significant role in perpetuating gender stereotypes by associating nursing exclusively with women. This representation reinforces prejudices and stigmatizes men who pursue this career, undermining their self-esteem and legitimacy in their professional choice.

"The media associated women with the nursing profession, reinforcing prejudices against men who choose something they enjoy." (P23)

Discrimination and stigma also manifest in social settings, where men studying nursing are subjected to ridicule and hurtful comments. Social pressure and fear of judgment from others can lead to shame and concealment of their professional choice, negatively affecting the student's self-esteem and emotional well-being.

"The neighbors laughed when they saw me in my uniform for my practicum." (P30)

"The way they talked about male nurses was offensive and absurd. Anyone who decided to become a nurse had to think twice because they were bound to be stigmatized. Initially, I felt ashamed about others knowing what I was studying. That was very hard for me at the time." (P24)

Furthermore, the profound social pressure and stigma associated with men who choose to study nursing are revealed. The seemingly innocent act of displaying a photograph with female classmates triggered a series of derogatory remarks from the student's father's friends. These comments reflect the persistence of entrenched gender stereotypes in society, which link the choice of a "feminine"

profession to an individual's sexuality and masculinity. Additionally, the fact that the student's father intervened and ordered the photograph to be removed suggests the influence and power of these social expectations over family decisions.

"I remember taking a picture with my female classmates and displaying it in a frame in my house. That same day, I received several comments from my dad's friends that made me feel bad, such as, 'Another one who likes women's things,' and 'he probably doesn't like women.' Shortly after, my dad made me take down the frame." (P24)

Class 4: Academic Environment

The testimonies associated with this theme offer a positive perspective on the experience of men in the academic environment of nursing. Despite being a minority in the field, some students highlight how they were welcomed by their female classmates and how they felt integrated into the university setting.

"When I enrolled in university, I was the only man, and I felt very strange. My female classmates made me feel good; I did not experience discrimination from them; rather, they included me in team projects." (P7)

The presence of understanding and supportive female classmates seems to have contributed to creating an inclusive and supportive atmosphere for male students. Additionally, some testimonies indicate that having a romantic relationship with a female classmate helped to alleviate the feeling of being "different" and normalized their presence in a predominantly female environment.

"I didn't feel alone in the classroom because there were two men, which made it easier not to feel out of place. My classmates did not question my sexuality or hold stereotypes about me. I think having my girlfriend among my classmates helped." (P9)

Additionally, it was found that the faculty did not perpetuate gender stereotypes or discrimination against male students. On the contrary, many instructors expressed respect and admiration for the bravery of those who chose to study nursing, which contributed to strengthening their self-esteem and motivation.

"There were only a few men; I don't remember the exact number. The nursing instructors were women, and they did not speak negatively about us men. They expressed respect and admiration, saying that we were brave for choosing the nursing profession, and they encouraged us to continue progressing." (P15)

"Some male instructors who taught Biology, Chemistry, and Anatomy performed their teaching well, and I did not feel any stigmatization from them." (P1)

Class 5: Work Environment

The testimonies here provide a concerning view of the work environment for men in the nursing field, where gender stereotypes and discrimination prevail. At the time, hospitals, clinics, and health centers predominantly employed female nursing staff, leading to men being perceived as unusual and, in some cases, stigmatized as homosexual. This negative perception was exacerbated by the deeply rooted belief that nursing is traditionally a female profession, resulting in the exclusion and marginalization of men in the workforce.

"In hospitals, clinics, and health centers, everyone was female, so men were viewed negatively. They thought I was gay." (P30)

"We were excluded as men because the nursing profession was predominantly female." (P30)

Gender discrimination is also reflected in hiring practices, where men often encounter obstacles to employment compared to their female counterparts. There is a clear preference for hiring young female nurses, and job advertisements frequently specify a requirement for women to fill nursing positions. This discrimination results in unfair situations, such as in the testimony where a less experienced woman is awarded a job over a more experienced man solely based on her gender.

"It was rare for a male nurse to be accepted for a job. Doctors only chose young nurses to work in their offices." (P13)

"In job advertisements, they only required women to work as a nurse." (P29)

"I remember there was only one job opening at the hospital, and they chose my female classmate because she was a woman, even though I had more experience." (P22)

Moreover, men who manage to secure employment in the nursing field often face distrust and prejudice from patients. They are perceived as less gentle and capable compared to their female colleagues, which raises doubts about their professional competence and caregiving abilities, negatively affecting the nurse-patient relationship and undermining the quality of care.

"There was a time in my life when I couldn't find work; no one would hire me because they showed resistance and disapproval because I am a man. After many attempts, I finally got a job in a very remote rural area. Perhaps no one wanted that position because of the distance and the danger, so they had no choice but to hire me." (P11)

"Patients had more trust in female professionals. I don't know what they thought, but they whispered that I lacked the gentleness required for caregiving simply because I was a man." (P29)

Class 6: Coping Strategies

The support of loved ones, such as mothers and sisters, can be crucial in overcoming stigma and discrimination. The encouragement and strength provided by family can instill the confidence necessary to persevere in the nursing profession despite the challenges.

"The people who supported me were my mother and siblings; they encouraged me and gave me strength to complete my studies. I am grateful to them for the trust they placed in me. They told me that studying nursing is valuable and deserving of respect, and it should not be a source of shame or concealment." (P2)

A fundamental strategy that emerges from these testimonies is distancing oneself from negative influences and seeking a supportive and understanding environment. By surrounding themselves with supportive people and avoiding situations that perpetuate derogatory comments, students of that time were able to maintain a positive attitude and remain focused on their professional goals.

"...distancing myself from negative influences and surrounding myself with supportive and understanding people was my best strategy. Similarly, avoiding situations and individuals that perpetuate derogatory comments helped me maintain a positive attitude focused on my professional goals." (P9)

Additionally, seeking support among classmates and within the nursing community provides a safe space to share experiences and receive guidance on how to handle stigma and discrimination constructively. Solidarity among classmates and access to student or professional support groups can strengthen students' resilience and help them overcome the challenges associated with pursuing a career that defies gender norms.

"My classmates were aware of the reality we were facing; they were the only ones who listened to me and advised me not to withdraw from the program." (P15)

"Seeking resources and support networks within the nursing community, such as student or professional support groups, offered me a safe space to share experiences and receive guidance on how to manage stigma and discrimination constructively." (P21)

The search for support among peers (other men studying nursing) emerges as a significant source of emotional strength and confidence for the student.

"Surrounding myself with a circle of friends, like my male classmates, improved my self-esteem and confidence. Moreover, recognizing the value and importance of the nursing profession, regardless of gender stereotypes, can help maintain motivation and resilience in the face of adversity." (P27)

Another effective strategy was to educate and inform loved ones about the importance and value of nursing. By changing the perspectives of those around them, students can foster a more understanding and accepting environment regarding their professional choices. This can help reduce stigma and discrimination in their personal and family environments, promoting greater support and validation for the nursing profession.

"By educating and informing my loved ones about the importance and value of nursing, it was possible to change their perspective to some extent. This helped foster a more understanding environment, especially in terms of accepting nursing as my profession." (P25)

DISCUSSION

It is natural for societal and family pressure to affect the self-esteem and motivation of men who decide to pursue a profession historically associated with women. However, it is important to remember that career choices should be based on personal interests, skills, and passions, rather than the expectations of others. Social pressure, particularly from family, can have both positive and negative influences on professional choices. Respondents highlighted parental and peer pressure to change careers, as well as feelings of inferiority for not choosing medicine. León-Menoscal and Briones-Rivas report that it is common to assume that when a man decides to study nursing, it is due to low socioeconomic status or a lack of knowledge, as it is thought that this would hinder the desire or possibility of studying medicine, leading them to choose nursing instead.¹³

As society progresses, it is crucial to challenge outdated gender norms and foster an inclusive environment where all individuals, regardless of gender, feel empowered to pursue their dreams and professional goals without feeling shame or discrimination. It has been noted that for men, these considerations can even influence their motivations to choose and pursue a career that is socially deemed feminine.⁷

Discussing the contributions of both men and women to the development and growth of nursing is essential for shaping and improving the experiences of male students.¹³ Respondents highlighted the role of educators in enhancing their academic experience by creating a supportive environment conducive to learning, which also served as a tool for promoting positive coping strategies.

Something that stands out in this study is the perception that positive experiences significantly countered negative ones when choosing the profession, a theme commonly referenced in the literature. 14 Despite this, respondents noted that in the previous century, the work environment was complex for men practicing nursing, with difficulties stemming from patients who considered them less competent due to their gender. A systematic review conducted by Paladines Tene et al. reported a correlation between gender and quality of care, as well as a gendered approach to patient care, reflecting the experiences described by the respondents. 15

Finally, the participants shared positive coping strategies such as surrounding themselves with support networks with shared interests, influencing family perceptions, or sharing information with friends, as well as avoidant strategies like attempting to steer clear of environments perceived as unhelpful. Authors like Mora-Heras¹⁴ and Bartfay et al.¹⁶ mention that nursing programs hinder the retention of male students, and various gender barriers have been identified within curricula that require addressing and resolution.^{17,18}

It is essential to provide emotional and psychological support to those facing challenges due to gender stereotypes in their career choices. Nursing is a noble and rewarding profession, and all individuals who choose this path deserve respect and recognition for their dedication to caring for others.

Nursing is a fundamental and valuable profession, regardless of the gender of its practitioners; therefore, there should be no stigma or discrimination associated with being a man studying nursing. It is crucial to challenge gender stereotypes and promote diversity across all professional fields, including training and practice in nursing.

CONCLUSIONS

Men aspiring to become nurses faced stigma and deeply rooted gender stereotypes, resulting in social pressure and family conflicts. Despite these challenges, they found academic support that allowed them to pursue their goals. Most notably, they reported that, despite gender barriers in their training, the encouragement from educators motivated them to continue their studies. Furthermore, they developed various coping strategies to overcome the obstacles of that era, primarily linked to the support of friends and family. This study has some limitations such as its small sample size and the inclusion of participant experiences that may not represent other professionals in the same context and timeframe.

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AUTHORSHIP:

JFD: Conceptualización, Curación de datos, Análisis formal, Captación de fondos, Investigación, Metodología, Recursos, Validación, Escritura - borrador original, Escritura - revisión y edición. CCB: Conceptualización, Curación de datos, Análisis formal, Captación de fondos, Investigación, Metodología, Escritura - borrador original, Escritura - revisión y edición.

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