

# Patients' Perception of Care Provided By Male Nurses in Alexandria Governorate

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**Abstract:** Male nurses have induced into the profession for a decade and their number is increasing. This represents a challenge and a change in societal expectations. It is believed that intrusion of nursing by males might improve the perception about it and increase diversity of skills in health care team. Gender diversity in nursing is expected to enhance decision making abilities and create a positive, competitive and innovative work climate. **Aim:** The aim of the study was to determine the patients' perception of care provided by male nurses in Alexandria Governorate. **Material and method:** An exploratory descriptive design was used. The study was conducted in five hospitals, namely; Main University Hospital and EL -Hadara Orthopedic Hospital affiliated to Alexandria University, El-Mabara Hospital affiliated to Curative Health Organization, whereas Mabaret El-Asaphra and Alex New Medical Center (ANMC) affiliated to private sector at Alexandria governorate. Patients' perception of care provided by male nurses structured interview schedule was used for data collection. The sample consisted of 300 patients, randomly selected from the previously mentioned settings who were willing to participate in the study. **Results:** the study showed that more than half of the subjects had positive perception regarding male nurse care. Moreover, there was significant difference between gender group and level of perception where (P= 0.000). Also, there was statistically significant difference between age and level of perception where (P= 0.011). In relation to the preferences of receiving care from male nurses it was noticed that mean value of male group was (14.14 ± 2.67) while mean value of female group was (9.11 ± 3.15), a significant difference was found between the two groups where (p<0.001). **Conclusion:** More than half of the patients who receiving care from male nurses having a positive perception. On the other side, a high percentage which cannot be neglected especially for young female patients stated that they felt embarrassed and stressed when male nurses touched them especially during sensitive procedures. Also, they stated the male nurses need more skills in communication and providing sense of caring. **Recommendation:** Male nurse have intense needs in-service training programs in governmental and nongovernmental hospitals regarding nonverbal communication clues that convey sense of caring. Furthermore, Faculty of nursing should adopt graduate male nurses psychologically and educationally after graduation in form of participations in scientific meetings, conferences, graduation magazine and social media support groups. One of the recommended solutions is to updating educational nursing programs to provide equal learning opportunities without gender bias and inducing new specialty for male students.

**Keywords:** Male nurses, Patients' Perception, nurses.

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## 1. INTRODUCTION

Nurse role is very significant and valuable in health care system.<sup>(1,2)</sup> Patients' expectations and perceptions towards nurses, as the front line services, affect greatly on their performance and motivate them to become more caring and more efficient in the multiple roles they play during the 24 hours stay with the patient. Nurses are required to be acting as a care giver, a counselor, an educator and advocator, a coordinator and communicator in very high standards.<sup>(3,4)</sup> Nursing has

been known as feminist profession along centuries as a result of women's compassionate and devoting nature.<sup>(1)</sup> Although that, it opens its doors to recruit more men. So, there is a need for designing strategies in both academic and clinical settings to overcome gender barriers and enhance retention and growth of the profession.<sup>(5)</sup>

In fact, the perception of patient especially female patient toward male nurse as midwifery is always negative.<sup>(6)</sup> Bwalya and Kolala (2015)<sup>(7)</sup> supported that in their study when the majority of women in their sample refused to deliver or taking care from male nurse and they stated that they will feel ashamed if male nurse performs perineal care , abdominal examination or any post- partum care.

In Egypt, male nurses have induced into the profession for a decade and their number is increasing.<sup>(5)</sup> This represents a challenge and a change in societal expectations. Society perception regarding male nurses is seriously positively or negatively.<sup>(8)</sup> Researches revealed an increase in their level of anxiety and tension in work places and even leave the profession as a result of patients' negative attitudes and stress aggravated by gender discrimination.<sup>(9)</sup> Generally, it is believed that intrusion of nursing by males might improve the perception about it and increase diversity of skills in health care team.<sup>(10)</sup> Gender diversity in nursing is expected to enhance decision making abilities and create a positive, competitive and innovative work climate.<sup>(11)</sup>

Briefly, development of nurse-patient therapeutic relationship is a vital aspect of nursing. So, patients have options to choose the gender of supporting health care giver whom they prefer which eventually increases their comfort level<sup>(12)</sup>. Therefore, results of this research are very important in the sense that gives the researchers more insight about the fields/departments where male nurses work<sup>(13)</sup> The health care delivery system in any nation is designed to meet the patient's needs by providing health services that are accessible, affordable, safe, effective and qualitative to them. Studies have shown that patient's satisfaction is an important indicator of quality health care. Also, literature to date has shown nursing care to be an important indicator of patient's total hospital satisfaction. It indicates that quality nursing care should be viewed and practiced from the patient's perspective. So the perception of the patient is very important .This study is conducted to examine patient's perception toward male nurse.

#### **Aim of the study**

The study aimed to determine the perception of patients of care provided by male nurses in Alexandria Governorate.

#### **Research question:**

What is the perception of patients about the care they receive from male nurses?

## **2. MATERIALS AND METHOD**

### **Materials**

#### **Design:**

An exploratory descriptive design was used.

#### **Setting:**

The study was conducted at the following settings:

Five governmental and non-governmental hospitals, where male nurses work, namely;

- a. Main University Hospital affiliated to Alexandria University.
- b. El-Hadara Orthopedic and Traumatology Hospital affiliated to Alexandria University.
- c. El-Mabarra Hospital affiliated to Curative Health Organization.
- d. Mabaret El-Asaphra private Hospital, affiliated to private sector at Alexandria governorate.
- e. Alex New Medical Center (ANMC) affiliated to private sector at Alexandria governorate.

**Subjects:**

The study subjects consisted of a representative sample of 300 patients, Epi info program was used to estimate the sample size of this study based on using 5% acceptable error, 95% confidence coefficient, 50% expected frequency and population size of 1270 (the estimated total number of patients), which revealed a minimum sample size of 300 patients. Simple Random sample was used to select the settings and units and then the subjects.

**Tool of the study:**

**Patients' Perception of care provided by Male Nurses structured interview schedule** This tool was developed by the researcher after thorough review of the related literature <sup>(1, 5, 8, 14, 15, 16)</sup> to explore patients' perception of care provided by male nurses. It contains 2 parts:

**Part 1:** Socio-demographic characteristics of study subjects such as age, sex, marital status, level of education, occupation, residence, department of current hospitalization and length of contact with male nurse.

**Part 2:** It was developed by the researcher and used to explore patients' perception of care provided by male nurses. It consisted of 39 items, which are entitled under 5 dimensions presented as follows: **First**, patients' perceptions regarding preferences of receiving care from male nurses. It included 5 items which were reliable and the test value was (0.827). **Second**, patients' perceptions regarding male nurses' communication. It included 11 items which were reliable and the test value was (0.827). **Third**, patients' perceptions regarding male nurse skills in assessing patients' needs. It included 10 items which were reliable and the test value was (0.994). **Fourth**, patients' perceptions regarding male nurses' Skills and Competences. It included 6 items which were reliable and the test value was (0.994). **Fifth**, general impression about male nurses included 7 items which was reliable and the test value was (0.568). The items had to be rated on a four-point-Likert scale where (1) denoting "strongly disagree" and (4) denoting "strongly agree". Scores of negative points were reversed and their numbers are (A2-A5, B5, C2 an E7). The total score ranged from 39 -156. 39-78 indicated negative perception and 79-156 indicated positive perception.

**Method**

1. An official letter to conduct this study was obtained from the responsible authorities of the Faculty of Nursing.
2. An official letter to conduct this study was obtained from the responsible authorities of the selected hospitals after explanation of its aim
3. The tool used in this study was developed by the researcher after extensive reviewing the relevant and current literature and translated into Arabic language.
4. Content validity of the tool was tested by a jury of seven experts in the related fields of nursing education, nursing administration, gerontological nursing and medical surgical and necessary modifications were done
5. A pilot study was carried out on 10% of total sample of patients (this number were excluded from the study population) selected randomly from the previously mentioned settings in order to test the relevance, reliability and applicability of the study tool.
6. Reliability of the tool was tested using Cronbach Alpha Coefficient test. It was applied to 30 patients. The reliability result for the tool was  $r=0.914$  and ( $r=0.827, 0.994$  and  $0.568$ ) for the dimensions.
7. Data was collected through structured interview schedule that were explained to the subjects. The tool content was explained either individually or for a group of patients.
8. The data collection covered a period of three months starting from the beginning of January 2017 and extending to end of March 2017.

**Ethical consideration:**

1. A written informed consent was obtained from every patient after explaining the study's purpose and reassurance about the privacy and confidentiality of the data was done.

2. It was announced that participation is on voluntary basis and patients have the right to withdraw from the study at any time without any drawbacks

3. The data obtained from all patients of the study were confidential and were used only for the purpose of the study.

#### Statistical analysis:

Data was fed, coded, edited and analyzed using PC with statistical packages for social science (SPSS) version 20.0 for windows. The Kolmogorov-Smirnov test was used to verify the normality of distribution. The selected level of significance was  $P \leq 0.05$ . Descriptive statistics were done using numbers, percentage, arithmetic mean and standard deviation. The used tests were: Chi-square test, Student t-test, Pearson coefficient and Chi square test

### 3. RESULTS

Table (1) shows the distribution of the studied subjects according to their socio demographic data in hospitals. The table clarifies equal distribution (50%) between type of hospital (governmental and non-governmental) and gender group, and nearly one third of the patients (29.7 %) were in their early twenties and below 30 year. Regarding marital status about more than half of the patients (53.3%) were married, while (9.7%) of them were divorced and around more than half of the patients (55.3%) were from urban areas. Regarding educational level the table shows that about one third of the patients (32.3%) had graduated in universities. On the other hand, 16.3% of them completed either primary or preparatory level of education.

**Table (1): Distribution of the studied subjects according to their socio demographic data in hospitals (n = 300)**

| Socio-demographic data   | No. | %    |
|--------------------------|-----|------|
| <b>Type of Hospital</b>  |     |      |
| Governmental             | 150 | 50.0 |
| Nongovernmental          | 150 | 50.0 |
| <b>Gender</b>            |     |      |
| Male                     | 150 | 50.0 |
| Female                   | 150 | 50.0 |
| <b>Age in years</b>      |     |      |
| 20 – 30                  | 89  | 29.7 |
| 31 – 40                  | 67  | 22.3 |
| 40 – 50                  | 70  | 23.3 |
| >51                      | 74  | 24.7 |
| <b>Marital status</b>    |     |      |
| Single                   | 69  | 23.0 |
| Married                  | 160 | 53.3 |
| Divorced                 | 29  | 9.7  |
| Widowed                  | 42  | 14.0 |
| <b>Area of residence</b> |     |      |
| Urban                    | 166 | 55.3 |
| Rural                    | 134 | 44.7 |
| <b>Educational level</b> |     |      |
| Illiterate               | 51  | 17.0 |
| Read and write           | 52  | 17.3 |
| Primary or preparatory   | 49  | 16.3 |
| Secondary                | 51  | 17.0 |
| University or higher     | 97  | 32.3 |

Table (2): Shows the distribution of the studied subjects regarding occupation, department of current hospitalization and duration of contact with male nurses. Concerning patients' occupation, it was observed that about one quarter of the patients (26%, 24.7% and 25%) respectively, had governmental work, private work and housewife work, while 9.3% of them were retired. In relation to department, it was observed that about more than one fifth of the patients (29.7%, 24% and 29.3%) respectively were in medical, surgical ward and coronary cardiac unit (CCU). On the other hand, 17% of them were in orthopedic wards. According to duration of contact with male nurse about 42.3% were between 1-5 days, while; only 9.7% were between 11-15 day.

**Table (2): Distribution of the studied subjects regarding occupation, department of current hospitalization and duration of contact with male nurses**

|   | No. | %    |
|---|-----|------|
| <b>Occupation</b>                                   |     |      |
| Governmental work                                   | 78  | 26.0 |
| Private work  | 74  | 24.7 |
| Housewife   | 75  | 25.0 |
| Retired   | 28  | 9.3  |
| Manual workers                                      | 45  | 15.0 |
| <b>Department of current hospitalization</b>        |     |      |
| Medical wards                                       | 89  | 29.7 |
| Surgical wards                                      | 72  | 24.0 |
| CCU   | 88  | 29.3 |
| Orthopedic wards                                    | 51  | 17.0 |
| <b>Duration of contact with male nurses per day</b> |     |      |
| < One   | 65  | 21.7 |
| 1 – 5   | 127 | 42.3 |
| 6 – 10  | 49  | 16.3 |
| 11 – 15   | 29  | 9.7  |
| > 15  | 30  | 10.0 |
| Total   | 300 | 100  |

Table (3) Shows the distribution of the studied subject's perception regarding their preferences of receiving care from male nurses. The table indicates that more than half of the patients (58.7%) agree receiving care from male nurses while, about 41.3% did not prefer receiving care from male nurses especially females. On the other hand, more than half of the patients (61%, 59.7%, and 58.3%) respectively, they felt disturbed if male nurse performed perineal care, urethral catheterization and helping in urination and defecation, while, more than half of the patients (58%) disagreed that they were disturbed if male nurse performs abdominal examination.

**Table (3) Distribution of the studied subject's perception regarding their preferences of receiving care from male nurses**

|   | Statements  | Agree |      | Disagree |      |
|---|---|-------|------|----------|------|
|   |   | No.   | %    | No.      | %    |
| 1 | I prefer receiving care from male nurses.                                   | 176   | 58.7 | 124      | 41.3 |
| 2 | I will be disturbed if male nurse performs abdominal examination.           | 126   | 42.0 | 174      | 58.0 |
| 3 | I will feel ashamed if male nurse performs perineal care.                   | 183   | 61.0 | 117      | 39.0 |
| 4 | I will be disturbed if male nurse perform urethral catheterization.         | 179   | 59.7 | 121      | 40.3 |
| 5 | I will be embarrassed if male nurse assists me in urination and defecation. | 175   | 58.3 | 125      | 41.7 |

NB-strongly agree, agree= agree, strongly disagree, disagree= disagree

Table (4) shows the distribution of the studied subject perception related to male nurses' communication. The table indicates that the majority of the patients (80.3%, 87.3%) respectively agree that male nurse maintains eye to eye contact and communicates with a clear tone of voice, while, about three quarters of the patients (71%, 71.3% and 79.7%) respectively agree that male nurse gave them chance to ask questions, listened to their complaints carefully and treated them with compassion and kindness, while about three quarters of the patients (71.7%) disagree that male nurse communicates with them harshly and without respect to their complaint. Also, more than half of them (58%) disagree that male nurse brings the sense of caring by holding their hand & giving a pat on shoulder. Moreover, about two thirds of the patients (63.3%, 65.7%, 61.3% and 64.3%) respectively agree that male nurse asks about their condition frequently, answers all their questions; discussed their condition & treatment plan and responds immediately for their calling.

**Table (4): Distribution of the studied subjects perceptions related to male nurses' communication**

|    | Statements  | Agree |      | Disagree |      |
|----|---|-------|------|----------|------|
|    |   | No.   | %    | No.      | %    |
| 1  | Male nurse asks about my condition frequently.  | 190   | 63.3 | 110      | 36.7 |
| 2  | Male nurse is keen to give me chance to ask questions.  | 213   | 71.0 | 87       | 29.0 |
| 3  | Male nurse answers all my questions.  | 197   | 65.7 | 103      | 34.3 |
| 4  | Male nurse is not a hurry to discuss my condition & treatment plan.                                   | 184   | 61.3 | 116      | 38.7 |
| 5  | Male nurse communicates with me harshly and without respect to complaint as a patient.                | 85    | 28.3 | 215      | 71.7 |
| 6  | Male nurse listens to my complaints carefully.  | 214   | 71.3 | 86       | 28.7 |
| 7  | Male nurses respond immediately for my calling.   | 193   | 64.3 | 107      | 35.7 |
| 8  | Male nurse maintain eye to eye contact with respect to cultural boundaries (without embarrassing me). | 241   | 80.3 | 59       | 19.7 |
| 9  | Male nurses treat me with compassion and kindness.  | 239   | 79.7 | 61       | 20.3 |
| 10 | Male nurse communicates with a clear tone of voice.   | 262   | 87.3 | 38       | 12.7 |
| 11 | Male nurse brings the sense of caring by holding my hand & giving a pat on shoulder etc...            | 125   | 41.7 | 174      | 58.0 |

NB-strongly agree, agree= agree, strongly disagree, disagree= disagree

Table (5) Shows distribution of the studied subject's perceptions regarding male nurses' skills in assessing patients' needs. This table indicates that the majority of the patients (85%, 76.3%, 71%, and 76.7%) respectively, agree that male nurse treats them with respect, monitors their safety and security, gives them care in a clean and safe environment and respects their privacy while performing nursing procedures. Moreover, about (65%, 51%, 69.3%, 69% and 58% respectively) of the patients agree that male nurse provides them with health education which needed for their condition, helps them to express feelings by encouraging communication, promotes their self-esteem, respects confidentiality of all their information and assists them to make informed health care decisions. In addition, about more than one quarter of the patients (27%) agree that male nurse neglects their needs; on the other hand about three quarters of the patients (73.0%) disagree.

**Table (5): Distribution of the studied subjects' perceptions regarding male nurses' skills in assessing patients' needs**

|   | Statements  | Agree |      | Disagree |      |
|---|---|-------|------|----------|------|
|   |   | No.   | %    | No.      | %    |
| 1 | Male nurse provides me with health education which needed for my condition. | 195   | 65.0 | 105      | 35.0 |
| 2 | Male nurse neglects my needs.   | 81    | 27.0 | 219      | 73.0 |
| 3 | Male nurse treats me with respect.  | 255   | 85.0 | 45       | 15.0 |



|    |  |     |      |     |      |
|----|--|-----|------|-----|------|
| 4  | Male nurse monitors my safety & security.  | 229 | 76.3 | 71  | 23.7 |
| 5  | Male nurse gives me care in a clean and safe environment.  | 213 | 71.0 | 86  | 28.7 |
| 6  | Male nurse helps me to express feelings by encouraging communication.                                    | 153 | 51.0 | 147 | 49.0 |
| 7  | Male nurse promotes my self-esteem.  | 208 | 69.3 | 90  | 30.0 |
| 8  | Male nurse respects my privacy while performing nursing procedures by closing door, window and curtains. | 230 | 76.7 | 70  | 23.3 |
| 9  | Male nurse respects confidentiality of all my information.   | 207 | 69.0 | 93  | 31.0 |
| 10 | Male nurse assists me to make informed health care decisions.  | 174 | 58.0 | 126 | 42.0 |

NB-strongly agree, agree= agree, strongly disagree, disagree= disagree

Table (6) Shows distribution of the studied subject's perceptions regarding male nurses' skills and competences. The table indicates that about three quarters of the patients (74.3%, 74%, 76%, 71%) respectively, agree that male nurse conducts nursing activities skillfully, is knowledgeable about their illness, works effectively with a team and use problem solving skills. In addition, more than three fifths of the patients (64.3%, 64%) respectively, agree that male nurse manages time and resources effectively.

**Table (6): Distribution of the studied subject's perceptions regarding male nurses' skills and competences**

|   | Statements   | Agree |      | Disagree |      |
|---|--|-------|------|----------|------|
|   |  | No.   | %    | No.      | %    |
| 1 | Male nurse conducts nursing activities skillfully. | 223   | 74.3 | 77       | 25.7 |
| 2 | Male nurse is knowledgeable about my illness.      | 222   | 74.0 | 78       | 26.0 |
| 3 | Male nurse works effectively with a team.          | 228   | 76.0 | 72       | 24.0 |
| 4 | Male nurses use problem solving skills.            | 213   | 71.0 | 87       | 29.0 |
| 5 | Male nurse manages time effectively.               | 193   | 64.3 | 107      | 35.7 |
| 6 | Male nurse manages resources effectively.          | 192   | 64.0 | 108      | 36.0 |

NB-strongly agree, agree= agree, strongly disagree, disagree= disagree

Table (7) Shows distribution of the studied subjects' perceptions regarding general impression about male nurses. The table indicated that more than three quarters of the patients (78.7%, 75.3% and 84%) respectively agree that male nurses are important members in the health team, will improve image of nursing and have a tidy and professional uniform. About more than half of the patients (65%, 53.3%) agree that male nurses have more self-confidence than female nurse and physicians prefer working with male nurses than female nurses, while about two fifths (35%, 46.7%) respectively of them disagree.

**Table (7): Distribution of the studied subjects' perceptions regarding general impression about male nurses**

|   | Statements   | Agree |      | Disagree |      |
|---|--|-------|------|----------|------|
|   |  | No.   | %    | No.      | %    |
| 1 | Male nurses are important members in the health team.          | 236   | 78.7 | 64       | 21.3 |
| 2 | Male nurses will improve image of nursing.                     | 226   | 75.3 | 74       | 24.7 |
| 3 | Male nurses have more self-confidence than female nurse.       | 195   | 65.0 | 105      | 35.0 |
| 4 | Physicians prefer working with male nurses than female nurses. | 160   | 53.3 | 140      | 46.7 |
| 5 | Male nurses have a tidy and professional uniform.              | 252   | 84.0 | 48       | 16.0 |
| 6 | Patients prefer male nurses.                                   | 95    | 31.7 | 205      | 68.3 |
| 7 | Male nurses will worsen the image of nursing.                  | 71    | 23.7 | 229      | 76.3 |

NB-strongly agree, agree= agree, strongly disagree, disagree= disagree

Table (8) shows distribution of patients' total perception in relation to care provided by male nurses. It reveals that more than half (62.3%) of the subjects had positive perception regarding male nurse care, while (37.7 %) of their perception was negative.

**Table (8): Distribution of patients' total perception in relation to care provided by male nurses**

| Level of perception | No.        | %            |
|---------------------|------------|--------------|
| Negative perception | 113        | 37.7         |
| Positive perception | 187        | 62.3         |
| <b>Total</b>        | <b>300</b> | <b>100.0</b> |

Table (9) shows relationship between general characteristics of studied subjects and level of perception. It reveals that there was a highly statistically significant difference between gender group and level of perception where P= (.000) and shows positive relation between gender group and level of perception. Also, there was statistically significant difference between age and level of perception where P= (.011) and comparison shows positive relation between age and level of perception.

**Table (9): Relationship between general characteristics of studied subjects and level of perception**

| General characteristics  | Perception                       |      |                                  |      | $\chi^2$ | P       |
|--------------------------|----------------------------------|------|----------------------------------|------|----------|---------|
|                          | Negative perception<br>(n = 113) |      | Positive perception<br>(n = 187) |      |          |         |
|                          | No.                              | %    | No.                              | %    |          |         |
| <b>Gender</b>            |                                  |      |                                  |      |          |         |
| Male                     | 40                               | 26.7 | 110                              | 73.3 | 15.461*  | <0.000* |
| Female                   | 73                               | 48.7 | 77                               | 51.3 |          |         |
| <b>Age in years</b>      |                                  |      |                                  |      | 11.058*  | 0.011*  |
| 20 – 30                  | 44                               | 49.4 | 45                               | 50.6 |          |         |
| 31 – 40                  | 28                               | 41.8 | 39                               | 58.2 |          |         |
| 40 – 50                  | 21                               | 30.0 | 49                               | 70.0 |          |         |
| >51                      | 20                               | 27.0 | 54                               | 73.0 |          |         |
| <b>Marital status</b>    |                                  |      |                                  |      | 2.364    | 0.500   |
| Single                   | 28                               | 40.6 | 41                               | 59.4 |          |         |
| Married                  | 60                               | 37.5 | 100                              | 62.5 |          |         |
| Divorced                 | 13                               | 44.8 | 16                               | 55.2 |          |         |
| Widowed                  | 12                               | 28.6 | 30                               | 71.4 |          |         |
| <b>Area of residence</b> |                                  |      |                                  |      | 1.177    | 0.278   |
| Urban                    | 58                               | 34.9 | 108                              | 65.1 |          |         |
| Rural                    | 55                               | 41.0 | 79                               | 59.0 |          |         |

$\chi^2$ , p:  $\chi^2$  and p values for **Chi square test** for comparing between the two groups

\*: Statistically significant at  $p \leq 0.05$

Table (10) shows relationship between occupation, department of hospitalization, duration of contact and level of perception. It reveals that there was no statistically significant difference between occupation, department of hospitalization, duration of contact and level of perception.



**Table (10): Relationship between occupation, department of hospitalization, duration of contact and level of perception**

|  | Perception                    |      |                               |      | $\chi^2$ | P     |
|--|-------------------------------|------|-------------------------------|------|----------|-------|
|  | Negative perception (n = 113) |      | Positive perception (n = 187) |      |          |       |
|  | No.                           | %    | No.                           | %    |          |       |
| <b>Occupation</b>                                  |                               |      |                               |      |          |       |
| Governmental work                                  | 28                            | 35.9 | 50                            | 64.1 | 6.789    | 0.147 |
| Private work                                       | 27                            | 36.5 | 47                            | 63.5 |          |       |
| Housewife (Retired)                                | 36                            | 48.0 | 39                            | 52.0 |          |       |
| (Retired)  | 6                             | 21.4 | 22                            | 78.6 |          |       |
| Manual workers                                     | 16                            | 35.6 | 29                            | 64.4 |          |       |
| <b>Department of current hospitalization</b>       |                               |      |                               |      |          |       |
| Medical wards                                      | 34                            | 38.2 | 55                            | 61.8 | 1.363    | 0.714 |
| Surgical wards                                     | 30                            | 41.7 | 42                            | 58.3 |          |       |
| CCU  | 33                            | 37.5 | 55                            | 62.5 |          |       |
| Orthopedic wards                                   | 16                            | 31.4 | 35                            | 68.6 |          |       |
| <b>Duration of contact with male nurses (Days)</b> |                               |      |                               |      |          |       |
| < One  | 20                            | 30.8 | 45                            | 69.2 | 2.639    | 0.620 |
| 1 – 5  | 53                            | 41.7 | 74                            | 58.3 |          |       |
| 6 – 10   | 18                            | 36.7 | 31                            | 63.3 |          |       |
| 11 – 15  | 12                            | 41.4 | 17                            | 58.6 |          |       |
| > 15   | 10                            | 33.3 | 20                            | 66.7 |          |       |

$\chi^2$ , p:  $\chi^2$  and p values for **Chi square test** for comparing between the two groups

\*: Statistically significant at  $p \leq 0.05$

Table (11) Shows comparison of mean scores of male and female patients' perception toward care provided by male nurses in governmental and non-governmental hospitals. Concerning patients' perceptions regarding preferences of receiving care from male nurses. It was noticed that that mean value of male group was  $(14.14 \pm 2.67)$  while mean value of female group was  $(9.11 \pm 3.15)$ . There is a significant difference and positive relation between two groups where  $p < 0.001$ . Also, in relation to patients' perception regarding male nurses skills in assessing patients' needs. It was observed that the mean value of male group was  $(29.31 \pm 5.37)$  and female group was  $(27.25 \pm 6.54)$  in which there was a significant difference between the two groups where  $p = 0.003$ . In addition, there was a significant difference between the two groups where  $p = 0.002$  regarding general impression about male nurses.

**Table (11): Comparison of mean scores of male and female patients' perception toward care provided by male nurses in governmental and non-governmental hospitals**

| Dimension of Comparison   | Gender of patients |                  | (t) Test | P Value |
|---|--------------------|------------------|----------|---------|
|   | Male (n = 150)     | Female (n = 150) |          |         |
| <b>Patients' perceptions regarding preferences of receiving care from male nurses</b> |                    |                  |          |         |
| Total score (Mean+SD)   | $14.14 \pm 2.67$   | $9.11 \pm 3.15$  | 14.935*  | <0.001* |
| <b>Patients' perceptions regarding male nurses' communication</b>                     |                    |                  |          |         |
| Total score (Mean+SD)   | $31.0 \pm 5.38$    | $30.19 \pm 6.25$ | 1.208    | 0.228   |

|   |                |                |        |         |
|---|----------------|----------------|--------|---------|
| <b>Patients' perception regarding male nurses skills in assessing patients' needs</b> |                |                |        |         |
| Total score (Mean+SD)   | 29.31 ± 5.37   | 27.25 ± 6.54   | 2.982* | 0.003*  |
| <b>Patients' perceptions regarding male nurses' skills and competences</b>            |                |                |        |         |
| Total score (Mean+SD)   | 17.13 ± 3.79   | 16.49 ± 4.13   | 1.399  | 0.163   |
| <b>General impression about male nurses</b>   |                |                |        |         |
| Total score (Mean+SD)   | 20.54 ± 4.0    | 19.13 ± 3.92   | 3.078* | 0.002*  |
| <b>Overall</b>  |                |                |        |         |
| Total score (Mean+SD)   | 112.12 ± 17.44 | 102.17 ± 19.59 | 4.648* | <0.001* |

t, p: t and p values for **Student t-test** for comparing between the two groups

\*: Statistically significant at  $p \leq 0.05$

#### 4. DISCUSSION

Nursing has been a feminist occupation for many years. Therefore, it is extremely important to find out the attitudes and perception of the society towards male nurses<sup>(17)</sup>. So, this study was done to evaluate the perception of the patients towards care provided by male nurses.

Regarding patients' total perception in relation to care provided by male nurses, it was found that among more than half of the patients (62.3%) in governmental and non- governmental hospitals generally have positive perceptions regarding care provided by male nurse. This finding gets in line with Lemin (1982)<sup>(18)</sup> who reported that inspite of the prevalence of negative attitudes, some patients do exhibit positive attitudes, and he found that 70% of patients surveyed reported care provided by male nurses was fully acceptable, 25% responded it was moderately acceptable, and only 5% reported the care was unacceptable.

Also, according to Lodge et al (1997)<sup>(19)</sup> 65% compared to 17% of the patients believed that female and male nurses, respectively, could meet all of their needs. These results were congruent with our study in which nearly half of the patients expressed rejection of receiving care from male nurses. On the other hand the current study revealed that 58.7% of them agreed on acceptance of receiving care from male nurses. This finding was congruent with Koç et al (2010)<sup>(20)</sup> in his study In Turkey who reported that 60 % of the adult patients stated that nursing is an occupation for both genders and they can receive the care from both male and female. In addition, Demiray et al (2013)<sup>(21)</sup> and Demiray et al (2012)<sup>(22)</sup> reported that 69% of the patients wanted to be cared for by male nurses. This result is congruent with Rob (1991)<sup>(23)</sup> who concluded that the number of male nurses tends to increase obviously and both males and females can be good nurses.

In addition, about more than half of the patients felt disturbed if a male nurse performed perineal care, urethra catheterization and assisted them in urination and defecation. Because of both socialization and stereotyping, some female patients do not consider nursing care from a male to be professional. Receiving intimate care from a male nurse is often described as embarrassing for the patient. Conversely is the care provided by a male physician. This is due to negative attitudes regarding male-nurses in addition to cultural and false religious beliefs which act as barriers to accept the idea of performance of such duties by a male nurse<sup>(24, 25)</sup>.

Several studies supporting the finding that it is a very stressful experience for both parties to take care of female patients by male nurses, especially the young ones. That is very true especially when delivering an intimate nursing care for the opposite gender. Research revealed that most of the male nurses reported that male patients rarely refused their care, whereas it was more common for female patients to do so.<sup>(26,27,28,29,30,31)</sup>

Congruent with these results comes the study of Ahmad and Alasad (2007)<sup>(32)</sup> who reported that only 3.4% of female patients preferred male nurses to care for them and they added that nursing was a profession that only women could do. These findings and opinions also were congruent with Çelik et al.(2012)<sup>(33)</sup> who reported that 53.2% of female patients stated that nursing is a job for women and refused to accept perineal care, urethral catheterization or bathing by male

nurse. Moreover, Lodge et al (2002)<sup>(34)</sup> reported that the patients in the gynecology service would be uncomfortable about a male nurse helping them either because of sex role stereotyping or seems to be more acceptable to be exposed by a male gynecologist but not a male nurse or lack of experience with male nurses.

As regarding male versus female patients' perception of receiving care from male nurses, it was found that there was a highly significant statistical difference ( $t=14.935$  &  $p. =0.001$ ) in their perception with a very high satisfaction for male patients. This result is congruent with Kouta (2011)<sup>(35)</sup> who stated that 69% of female patients preferred female nurses, and only 3% preferred male nurses, and they stated that they believed that women were better matched for the nursing profession as they have the ability to enhance patient morale more than men<sup>(7)</sup>. Also, Howell et al. (2002)<sup>(36)</sup> and Lodge et al (1997)<sup>(19)</sup> in their study reported that there was a significant difference in the preferences of patients as the majority of patients preferred female nurses, as they felt more comfortable and less self-conscious in the presence of a female nurse and lack of confidence in the ability of male nurses as well as embarrassment about the idea of receiving intimate care from male nurses.

As regards patient's perceptions related to male nurses' communication. Tagg (1981)<sup>(37)</sup> in her research illustrated that patients stressed that therapeutic relationship between nurse and patient depended on good use for communication skills regardless the gender of the nurse.<sup>(38)</sup> In this respect, the finding of the present study revealed that the majority of the patients reported that male nurses use verbal and non- verbal communication skills with respect to cultural boundaries and they are satisfied with nurses' communication. Ünsal et al (2010)<sup>(39)</sup> reported also that 85.8% thought that men can be as good as women in nursing skills, and communication skills was one of them. In contrast, this result contradicted with Tezel and Balçı.(2008)<sup>(40)</sup> who reported that most of the patients stated that they could experience difficulties about communicating with a male nurse.

On the other hand, the current study revealed that about more than one third of the patients agreed that male nurse has some difficulties in communication skills. These findings were in accordance with Jeffrey and Jackson (2001)<sup>(41)</sup> who concluded that the communication of information about illness and treatment appeared to be the most frequent source of patients' status deterioration. Also, Wallin and Lundgren (2000)<sup>(42)</sup> pointed out that there was a communication gap between nurses and their patients that leads to patients' disability to ensure quality of nursing care provided to them.<sup>(43)</sup>

On investigating patients' perception regarding meeting their needs the results revealed that around three quarters of the patients reported their needs were met in a respectful manner and in safe clean environment. In addition, they kept privacy and confidentiality of the patient which lead to patients' satisfaction in terms of meeting both general health care needs and condition-specific needs. According to patient's words, male nurses made their best for meeting their physical and psychological needs such as helping to express feelings, giving them emotional support to cope with their disease and giving them a sense of safety and security by holding their hands and giving a pat on shoulder.

These findings are congruent with Sellers (2013)<sup>(6)</sup> who reported that the majority of his study's participants believed that male nurses created an environment which was conducive to patient care and responded urgently to the patients most of the times. Also, Adeyemi (2015)<sup>(44)</sup> in his study about attitudes of patients towards being cared for by male nurses in a Jamaican Hospital found that most participants perceived male nurses as moderately responsive to patient needs.

In contrast, these findings were contradicting with Hardin et al (2008)<sup>(45)</sup> who reported that the majority of female patients perceived that male nurses are not suitable as a caregiver, and all female patients refused to receive their care from male nurse. Their refusal seemed to be based on what they perceived as gender bias rather than on professional ability.

Concerning male nurse's skills in assessing patient's needs, the findings of the current study revealed a high significant statistical difference between satisfactions of male patients as compared to the diverse gender. In this regard, Jeffrey and Jackson<sup>(41)</sup> stated that in order to be able to meet patients' expectations, nurses should know the patients and understand their needs. For male nurses to understand and meet the needs of their patients, they must establish therapeutic relationships with their clients, and the quality of those relationships is directly related to the quality of communication between nurse and client<sup>(46)</sup>.

Concerning patients' perception as regards male nurses' skills and competences, the current study revealed that the majority of the patients agreed that male nurse conducted nursing activities skillfully; they were knowledgeable about their illness, worked effectively with a team and used problem solving skills. These findings get in line with Madoka et al

(2006)<sup>(47)</sup> who reported that male nurses were able to perform all duties which female nurses do with the same quality. In addition, the patients stated that male nurses are faster and have high quality of work especially in fast-action locations of healthcare including ICUs, operating rooms, trauma centers and emergency rooms, and their good knowledge enables them to answer all questions regarding diagnosis or care. Also, Kleinman (2004)<sup>(48)</sup> stated that male nurses are more suited to performing work requiring technical skills. Such a perception may be due to the gender-biased view that men are good at handling machines and possess better problem-solving skills. Conversely came the results of the current study which revealed that more than third of the patients displayed disagreement that male nurses could effectively and efficiently manage time and use resources.

As regards the general impression about male nurses, the present study revealed that more than three quarters of the patients agreed that male nurses were important members in the health team and they would improve the image of nursing and have more self-confidence than female nurses. According to the patients' words, they stated that at the first time of admission of males in nursing they refused the idea of receiving care from males but after they dealt with them, this idea changed because male nurses worked harder and they did activities which were difficult for female nurses to perform. So, the presence of males in health team is very important.

This result is consistent with Ekinçi et al (2014)<sup>(49)</sup> who reported that 73.8% of the patients agreed with the thought that there would be less difficulties about the occupation when men become nurses, and 92.5% of the patients agreed with the view that male nurses would help their female colleagues in duties that require physical strength since they are capable. Also, these results are supported by a study conducted by Hodes (2005)<sup>(50)</sup> about general attitudes towards men in nursing. This study revealed many positive ideas from the study's subjects about the value of men in nursing, and they stated that there is effective targeting from male recruits into nursing profession in an attempt to redress the balance.

Moreover, the results of the current study revealed that about more than one third of the patients did not agree that the physicians prefer male nurses than female and more than two thirds of them do not prefer male nurses in general. According to patient's words, the majority of the physicians prefers to work with female nurses than male because of the nature of females as they are kindfull, respectful and obey orders and they are not trouble makers more than male nurses. They do not prefer males as they are aggressive, harsh with physicians and patients and bring problems from everything. In addition, other physicians prefer male nurse because they are strong and do activities that cannot be done by females.

In addition, Wynaden (2006)<sup>(51)</sup> reported that in some provinces male nurses were not hired and administrations gave preferences to female nurses, as all the major positions are held by the male physician in hospitals and they don't want any male nurses. Because they are afraid of being challenged and they would show resistance to any mistake done by them.

The findings of the current study revealed significantly high difference in perception of both sexes regarding male nurse. In this concern, the study revealed that about three quarters of male patients as compared to only half of female patients held positive perceptions for male nurses. Also, Fottler (1976)<sup>(52)</sup> found statistically significant differences between the patients' socio- demographic features and whether they preferred a male or a female nurse. This finding is congruent with the findings in the current study which demonstrated a significant statistical difference when comparing perception of different patients' age group. This result showed a more positive perception described by higher age groups.

This finding is congruent with Koç et al (2010)<sup>(20)</sup> who stated that the patients who were older than 67 thought that nursing was an occupation for both men and women. Also, it was found that sometimes, the embarrassment might be due to the age of the female patients. Male nurses feel less embarrassed about taking care of older female patients and they feel more comfortable caring for older female patients than younger ones. Older patients were thought to be more open-minded about the idea of receiving care from male nurses and less suspicious about the motives of the male students in providing nursing care to them<sup>(27)</sup>.

Furthermore, the present study revealed no significant differences between patients' total perception and their other characteristics such as marital status, area of residence, level of education, department, occupation and period of contact. These findings were contradicting with McMillian et al (2006)<sup>(53)</sup> who stated that a direct correlation exists between perception of acceptance regarding men in nursing and level of education. This means that the decision to accept male nurses are profoundly affected by culture regardless the level of education of the person.

## 5. CONCLUSION

We can conclude from this study that half of the patients who receiving care from male nurses having a positive perception as they were satisfied with the care provided by male nurses. On the other side, a high percentage which cannot be neglected especially for young female patients stated that they felt embarrassed and stressed when male nurses touched them especially during sensitive procedures. Also, they stated the male nurses need more skills in communication and providing sense of caring.

## 6. RECOMMENDATIONS

In the light of the findings of the current study the following recommendations can be made:

- Faculty of nursing should adopt graduate male nurses psychologically and educationally after graduation in form of participations in scientific meetings, conferences, graduation magazine and social media support groups.
- Patient's approval should be obtained during sensitive procedures such as abdominal and perineal examination about preferred nurses' gender.
- Develop and implement in-service training programs in governmental and nongovernmental hospitals in Egypt regarding nonverbal communication clues that convey sense of caring.
- Nursing education programs should provide support to assist male nurses in the developing effective strategies to provide health education counseling.
- Encouragement of male nurses about how to manage time and resources effectively.
- Encouraging continuing education of male nurses in form of in-service training programs or post graduate studies.
- Updating educational nursing programs to provide equal learning opportunities without gender bias and inducing new specialty for male students.
- Applying skills in building trust relation while keeping professional relationship especially with young age and different gender.
- Periodic evaluation should be made about care provided by male nurses and to what extent patients are satisfied with it and work on shortenings and weaknesses through inservice training programs.

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