

# Gender Perspective and Sociology in Nursing

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## ABSTRACT

*Nursing is considered as a noble profession. Nursing helps sick or veil persons by a range of activities that contribute to their health or recovery or a peaceful death. The nursing profession is socio-cultural construction. The work of individual nurses cannot be considered in isolation, but it should be seen within a social context. 'Why women? Why not men?'- isan important question in nursing occupation. Gender affects nursing in many inter connected ways. Gender is influencing the choice of nursing as an occupation. The disadvantage of being female is not limited to doctor-nurse occupations, but also within nursing occupation itself. The profession remains firmly in the hands of men, though they are a minority in numbers in this profession. The paper analyses various gender perspective and sociology in nursing.*

**Keywords:** Nursing, Gender, Sociology,

## Introduction:

"Nurse" word is derivative of the Latin "nutricus" meaning to nourish, to conserve, to foster and to protect. Nursing has been defined as a science, means the knowledge of it is based on facts which form specific laws and principles. The concept of nursing took a wider meaning in the year 1633 when St. Vincent de Paul established the visiting nursing service called "The Sisters of Charity". St. Vincent initiated the training of nurses and encouraged the sisters to study the art of nursing and to attend lectures given by the physician. The nineteenth century heralded the consolidated effort to improve the hospital services and the quality of nursing. WHO highly appreciated the importance of nursing in Alma Ata health declaration of 1978.

Nursing is considered as a noble profession. Nursing is mainly helping either sick or veil persons by a range of activities that contribute to their health or recovery or a peaceful death. Nursing helps individuals in carrying out recommended treatment and enable them to be independent of assistance as soon as possible. It is said that this profession needs loving heart & deserves forempathetic care. It is an art, which requires skills, knowledge and values. In order to provide quality and comprehensive health care facilities to the common people, it is very imperative to increase the nursing workforce and their education.

Gender affects nursing in three ways that are interconnected to each other. First, as nursing is commonly perceived as ordinary 'women's work', it is devalued (Abbott & Wallace, 1990). Second, since nursing is placed within a stark sexual division of labour together with the predominantly male occupation of medicine, gender overdetermines inter-occupational inequalities (Gamamikow, 1978). And Third, with the growth of a predominantly male managerial elite, gender disparities are increasingly becoming an issue within nursing (Hearn, 1982; Carpenter 1977, 1978).

## Nursing through lenses of sociology:

Nursing education or profession is socio-cultural construction, where the women are portrayed in the submissive mode to operate and to serve to the patriarchal values of society. Women are treated as a second-class, where they don't have a sense of full human being; while it's men who are highly appreciated. Women are not receiving the importance according to their work or contribution to the society. Though women are an integral part of health service system, because of socio-biological plus cultural appropriation by the society, they are not enjoying equal status as of men. Women are considered caring or lovable by virtue, and that's why the nursing profession appropriates them. The important question in nursing occupation is 'Why women? Why not men?'. Later this question will explain the relevance of certain circumstance which shapes the nursing occupation. As we know, Sociology can be defined most simply as the study of 'human social life' (Giddens, 2006).

According to sociological approach, work of individual nurses cannot be considered in isolation, but it localises within a social context. In other words, when the sociological analysis is used to the core of individual healthcare experience, either of patients or healthcare workers, it is termed 'sociology in nursing'. 'The sociology in nursing' denotes the matters affecting the profession as a whole, such as its occupational status or recruitment problems. This role of sociology in relation to nursing is always debated

within the literature. Pinikahana (2003) has mentioned that it is important to remember that sociology is only relevant to nurses if it is applied to nursing.

In contemporary time health care system has undergone critical concern, where the role of a nurse is highly significant, whether the healthcare facilities are in hospital or home. Nurse play important and various diverse role in keeping the patient happy. The complexity of disease or surgery enhances the complexity of the demands, expectations, duties and perceptions of and about the nurse. Nurse is the link between the doctor and the patient and relatives. Nurses are taught to take care of the patient and not of their own. However, too often women in their lives as wives, daughters, employers, volunteers, mothers and general caregivers forget to take care of their own emotional needs. Along with this, women are forced to live more for others than for themselves even in places like home and community. These kinds of attitudes most probably welcomed by nursing profession considering that nurturing, caring and loveable nature, all these can be provided by women. These are societal construction where women need to be surrendering herself against her will.

It is important to note that reductionist sociobiological model of gender role differentiation led to women's second class like status within the profession of nursing as well as between professions of medicine and nursing. The model denotes that emotional, expressive and caring qualities of women are an extension of their maternal functions; while men are more scientific, rational, instrumental and decisive by nature. In 1982, Hearn coined term 'patriarchal feminine' for such type of social construction of female role; feminine because it accords to the feminine, 'caring' stereotype; patriarchal because in doing so it reinforces female subordination. This concept involves judgment about the value of various human activities. Sayer has pointed out that the activities categorised in the male domain are valued more highly than those adjudged appropriate for women (Sayers, 1982).

#### **The sexual division of labour:**

Gender is the most prominent difference in the composition of medicine and nursing as a profession. Since their evolution as organised professions, medicine is male-dominated occupation, and nursing is a female-dominated occupation. Victorian doctor-nurse-patient relationships could be equated with husband-wife-child relationships (Gamarnikow, 1978). Doctors, by their monopoly over diagnosis and treatment, decide who should be a patient and what should be done to them. Role of nurses is limited, and that is to assist the doctors and to maintain a comfortable and hygienic environment for the patients. Nurses have no right to make decisions for the patient whom they are looking for and treating. This can be compared to the situation of household or family, where Husband makes all decisions, and wife has no or very limited say in it. The disadvantage of being female is not limited to doctor-nurse occupations, but also within nursing occupation itself. Though men are a minority in numbers in the profession of nursing, the profession remains firmly in the hands of men and women occupy less senior posts than their male counterparts. In India too, it is seen that Nursing Advisor to Government of India (which is considered as the senior most post of nursing in India), President of INC (Indian Nursing Council) or TNAI (Trained Nurses' Association of India), are almost male.

#### **Gender, occupational choices and nursing:**

With changes in society, there is a change in women's economic role within the family as well as outside. With the advent of industrialisation or globalisation in the country, scopes are widening for occupational mobility for women. Also, the attitudinal change in larger societal level helps to bring unpaid economy to paid economy for women, which was discussed by Labour and Planning Commission of India in 1990-91. The number of women workers has increased explicitly in the tertiary sector of the economy. Women's economic role has undergone a radical shift from home base to industry based, and they are also accepting these changes in a positive way. It is also observed that women prefer the nursing profession because this profession is almost suitable for them and they are naturally fit into it. A significant portion of women workers in the country is employed in the nursing profession.

Though work is one of the man's important social functions, all work is not considered prestigious and also all work is not given the same prestige. One could notice changes in social recognition and categorisation of occupation. The choice of occupation or career is not free but tends to be determined by the number of factors outside the control of an individual. Different types of personalities are affected by and suited to different kinds of occupations. Values also have an important role to play in the choice of occupation. They develop through a socialisation process which is influenced by social and economic factors. Many times as a result of sudden events, one is forced to make an unplanned occupational choice

since the final decision is based on crucial events and most of the people plan their livelihood according to their interests, abilities and opportunities.

The nursing profession has been perceived as the smart profession to pursue. There are more female nurses than male nurses. There are various reasons that either preventing or not attracting men to nursing. Multiple justifications, social or financial, are given for man's decision of not entering the profession. The majority of public and even some nurses believe that the profession is still a feminine one. Sometimes, nurses are the subject of erotic fantasy. It is important here to note that public image of nursing is based on gender perspectives. There is also the issue of pay in nursing occupation. Men think that nursing is a low paying occupation and they feel disincentive in comparison to other men, as on an average men earn more than women.

### Conclusion:

The nursing word itself portrays servitude for other or subservience to fellowmen. Nursing is still seen as the Florence Nightingale profession, and it is still very female-dominated. The patriarchal notions prevalent in society decides what kind of work women should do. The society is responsible for the status of women either at home or in the occupation of nursing. What women are supposed to do in the family, nurses are supposed to do in the hospitals!

We can say that gender remains one of the most important factors in nursing. Though effects of gender on nursing profession may be changing over a period of time, these changes reflect general trends in the position of women in our society. There is gender segregation that correlates strongly with both, inter- and intra-occupational differentials. There is dual exploitation of women nurses due to the intersectionality of identity they carry; one is due to their gender role, and the other is due to lower status of nursing profession itself in comparison with doctors.

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