

THE UNHEARD VOICES: EXPERIENCES OF MALE NURSING STUDENTS IN FEMALE-DOMINATED CLINICAL ENVIRONMENTS

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Abstract

Background: Nursing is still a female-dominated field, and male nursing learners frequently meet with special challenges in clinical practice. Those gender-based problems may influence their learning, identity, and even emotional well-being in clinical contexts.

Aim: The aim of this study was to explore and understand the lived experiences of male nursing students placed in female-dominated clinical environments.

Methods: To develop profound understanding of the personal experiences of the male students, a qualitative phenomenological design was employed. The study was conducted at Saidu Teaching Hospital, Swat. Purposive sampling was conducted to select 12 final-year male nursing students. Face-to-face interviews were semi structured and conducted in a confidential area. Interviews lasted 45–60 minutes and were audio-recorded with consent. Thematic analysis was used to analyze data with major themes generated using coding, categorization, and member checking to achieve credibility.

Results: Five key themes were identified: stereotyping of roles based on genders, a sense of isolation, inadequate mentorship and representation of males in the workplace, a struggle with professional identity, and resilience and coping mechanisms. Participants stated that they received physical assignments, social exclusion, and did not receive gender-specific mentorship. In spite of these obstacles, the students showed resilience especially through sharing peer bonds, objective end setting, and inner drive.

Conclusion: These results point to a need to create gender-sensitive clinical training arrangements to accommodate male students by providing equal task assignment, inclusive mentorship, and identity formation. By doing so, the problems facing male students can be improved, and their retention increased, as well as the diversity of the nursing workforce.

INTRODUCTION

Gender dynamics, clinical setting, male nursing students, and female-dominated professions in the context of nursing education and clinical life are the key terms in the realization of the uncommon situation of male nursing students in the women-oriented field (Yeshitila et al., 2021). The fact that nursing has been viewed as a female profession over the years makes male voices in this profession to be silenced (Asmare et al., 2022). As male students get into the clinical field in which female nurses and educators are the majority of the population, they face issues with social inclusion, expectations of the roles, and cultural stereotypes. All of them may greatly affect their learning, the creation of their professional personality, and their persistence in the nursing profession (Gauci et al., 2022).

Globally, the prevalence of male nurses remains low. The World Health Organization states that around 10 % of nursing staff are made up of men, though the figure varies slightly depending on the country or region in question (Dillard-Wright et al., 2023). Representation of males in the nursing student population in the South African context and other situations, as well, is not more than 15%, and therefore their occurrence in a clinical outcome is relatively small. Such underrepresentation normally leads to male students being perceived as outsiders or weird lings within the healthcare teams. As a result, such students might experience alienation, lack of support, and even marginalization in an organization where feminine conventions and standards define the working climate (Varghese et al., 2021)

Male nursing students usually encounter both implicit and explicit gender bias that affects their perception and treatment in clinical settings. Stereotyping may go that they are less caring or less effective in some areas of nursing, and most especially when it comes to maternal health or even pediatrics (Xu et al., 2023). Others feel obliged to act in accordance to their traditional masculine traits in terms of physical ability or technical skillfulness, instead of emotionally and social skills required in nursing. Such sexist beliefs can take away the possibility of their full relationships with learning opportunities and professional contacts (Teresa-Morales et al., 2022).

Moreover, the lack of male mentors or role models in nursing education and practice is also a considerable

hindrance, in addition to the stereotypes's existent in society. Male faculty numbers or clinical supervisors are few, and therefore, male students might not be able to find a person to relate to or who can guide them (Gils, 2023). Male students do not have professional representation in their educational journeys, as most of their female counterparts can easily enjoy gender-matched nurturing through mentors and other guides. Failure to see such role models might adversely impact their self-belief, a feeling of belonging, and their future in the nursing profession (Mousa, 2021).

Psychosocial influences are significant determinants of clinical experiences of student nurses who are males. They also experience some sort of discomfort, self-consciousness, or even isolation; at least those belonging in departments that always perform intimate care tasks. Such experiences would lead to stress or anxiety, and students might not reveal the challenges because of the fear of being ridiculed or misunderstood. In other instances, the mental pressures may affect progress, retention or choice of continuing the nursing program by the students (Constantinou & Wijnen-Meijer, 2022).

Although nursing education has tried to incorporate the areas of diversity and inclusion, most of the clinical settings have not completely adopted the practices that promote gender equity. Male students can be incidentally denied some learning opportunities, assigned a position based on stereotypes or abused by staff or patients with microaggressions (Lee et al., 2023). What is needed is some institutional-based interventions that include gender-sensitivity trainings, provide mentorship and institutional-based policy changes that will allow all students to enjoy a more accepting and supportive clinical learning environment (Amin et al., 2025).

This paper aims to discuss the experience of nursing male students in a female-dominated clinical setting. Their voices tend to be left out during the debate over nursing education and gender parity. This research will educate schools and health policymakers about the necessity of adopting inclusive approaches to accommodating male learners by grasping their problems, coping behaviors, and attitudes. These issues need to be addressed, so that a balanced, diverse

and effective future range of the nursing efficiency workforce can be met.

Methodology

The qualitative research design was used in the study to understand the experiences of male nursing students in female-dominated clinical settings. The phenomenological approach was also used to understand deeply the lived experience of the participants in relation to how they perceived, interpreted, and navigated around the challenges plus dynamics of these clinical settings.

The research was performed in Saidu Teaching Hospital and Swat, which is a significant social institution of public healthcare, along with the related nursing education organizations. The participants were identified using purposive sampling and were male nursing students in the final year of a Bachelor of Science in nursing degree who had completed clinical placements within the hospital. The inclusion criteria were being in at least a year of clinical rotations and being willing to share personal experiences with gender dynamics in clinical practice. Until data saturation was achieved, twelve participants were recruited.

Data collection procedure

Respondents were interviewed in a semi-structured manner, and face-to-face interviews were conducted in a clean and private room inside the hospital to make the respondents feel comfortable and to maintain confidentiality. The interviews were done between 45 and 60 minutes and based on an interview guide with open-ended questions to clarify perceptions, challenges, coping strategies, and interpersonal interactions of the students in clinical placement. All the interviews with the participants were audio-taped after their informed consent, and then transcribed verbatim to analyze.

Data analysis procedure:

The analysis followed a thematic approach, as outlined by Braun and Clarke (2006), to extract recurring patterns and themes from the interview data. Every transcription proceeded from verbatim documentation to maintain participants' authentic words unmodified. The recorded interviews were read multiple times to ensure immersion and to identify the initial codes. We placed these codes into themes and sub-themes that depicted the regular patterns in the narratives of the participants. Member checking consisted of the provision of key summaries of the thematics back to participants to check their correctness and credibility of interpretations.

Credibility, dependability, confirmability, and transferability are strategies that were applied to guarantee the reliability of the study. Engagement overtime, peer debriefing, and audit trails were elements that helped in a credible and reliable research process. To address any bias that may arise due to the researcher, a reflexive journal was kept. Rich contextual descriptions of cases and participant backgrounds were given to facilitate transferability to cases that are analogous.

Results and analysis

Demographic Characteristics of Participants

Twelve final year male nursing students taking part in the study were enrolled in four institutions, and all were in their 7th semester. More of the participants were in the Royal College of Nursing (n=4), then the Swat College of Nursing (n=3), the Zalan College of Nursing (n=3), and Pak Swiss Nursing College (n=2). The age sample was the most prevalent (23-24 years), signifying a rather homogeneous age sample. This allocation depicts a gender balance of male undergraduate nursing students in major institutions in Swat (Table 1).

Table 1: Demographic Characteristics of Participants (n = 12)

Participant ID	Age (Years)	Institution	Semester
P1	24	Swat College of Nursing	7 th
P2	23	Royal College of Nursing	7 th
P3	24	Zalan College of Nursing	7 th
P4	24	Pak Swiss Nursing College	7 th
P5	23	Royal College of Nursing	7 th
P6	25	Swat College of Nursing	7 th

P7	23	Zalan College of Nursing	7 th
P8	24	Pak Swiss Nursing College	7 th
P9	24	Royal College of Nursing	7 th
P10	23	Swat College of Nursing	7 th
P11	24	Zalan College of Nursing	7 th
P12	23	Royal College of Nursing	7 th

The research identified five central themes based on lived experiences of male nursing students in female-oriented clinical settings. The stereotyping of roles based on gender became one of the most crucial factors since individuals were frequently assigned difficult or non-nursing duties. Most students complained of loneliness, not being able to fit in with older girls and feeling left out. One being the lack of male mentorship, students again expressed that there are no male role models or individuals in the faculty

that they could look towards for guidance. Other issues such as professional identity difficulties, were also very prevalent as students had a challenge in balancing their value as nurses with societal perception. Students exhibited resilience and survival skills via peer support, family encouragement, and self-motivation despite these setbacks. The combination of these themes magnifies the social and institutional hurdles that male students must overcome within the clinical context (Table 2).

Table 2: Summary of Major Themes Identified from Thematic Analysis

S No.	Major Theme	Description
1	Gender-Based Role Stereotyping	Male students were often assigned non-nursing or physical tasks due to gender.
2	Feelings of Isolation in Clinical Settings	Participants reported social exclusion and limited peer integration.
3	Lack of Male Mentorship and Representation	A lack of male faculty or clinical supervisors was a recurring concern.
4	Professional Identity Challenges	Difficulty in establishing a nursing identity in a female-dominated field.
5	Resilience and Coping Strategies	Students used peer bonding, internal motivation, and family support to cope.

As illustrated by the thematic analysis, male learners in nursing experienced role stereotyping based on gender, with many performing physical activities and being regarded as less competent in emotional care. There were feelings of isolation, as students experienced difficulties in associating with female

peers and detachment. Gender-specific support became necessary due to the absence of male guidance and often resulted in a loss of relatable figures. Although these challenges were experienced, students illustrated their resilience by supporting each other, motivating themselves, setting goals, and becoming emotionally detached to cope with them (Table 3).

Table 3: Themes and Sub-Themes from Participant Narratives

Theme	Sub-Themes
Gender-Based Role Stereotyping	✓ Delegation to lifting/moving tasks Perceived as less competent in emotional care
Feelings of Isolation	✓ Difficulty fitting in with female peers Emotional withdrawal during rotations
Lack of Male Mentorship	✓ Absence of male clinical guides Need for gender-specific support and understanding
Professional Identity Challenges	✓ Conflict between self-perception and societal views Struggling with the public image of nursing

Resilience and Coping Strategies	✓ Peer support among male students Self-motivation and goal setting Emotional detachment
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Discussion

The results of this study point to the multidimensionality of the challenges faced by male nursing students in female-dominated clinical spaces, providing a more complex picture of the professional experience of these men in this field. This research found evidence that male students also experience gender related stereotyping of roles, through being assigned physical or non-nursing activities (e.g. lifting or transporting patients), a trend also observed by Brown & Waller (2022) who reported similar experiences in gender-based expectations during clinical placements. These stereotypes destroy any attempt at a whole identity nursing and reduce male student access to emotionally sensitive, or otherwise communication-based, patient care functions, which are fundamental to the activity of nursing practice.

The sensation of isolation was strongly expressed by participants, following qualitative systematic-review results (Smallheer et al., 2022) indicating that male nursing students tend to experience feelings of isolation or emotional distantness within clinical settings where most peers are women. Peer integration and related social support that can be lacking in such settings may lead to decreased learning satisfaction and professional confidence. Comparatively, Skan et al. (2025) observed that some male students in universities may internalize these feelings, but others may utilize them as a driving force to question the status quo, suggesting that coping mechanisms are different among individuals and institutions.

One of the issues identified in this research was the absence of male guides. This concurs with studies by Derrer-Merk et al. (2023), who identified mentorship as key to leadership identity and professional confidence among novice leaders with an accent on gender-minority roles. Lack of male role models among clinical faculty inhibits the process by which male students can imagine themselves in leadership or specialist nursing positions in the future. Nevertheless, in contrast to certain past-works which propose general mentorship (Schwab & Dupuis, 2022), this research study particularly highlights the relevance of gender-specific mentorship owing to

challenges male nursing students face due to social expectations.

There was a clear theme of professional identity struggle with students reporting conflicts with their personal identity and how the general population perceived nursing as being a women-dominated profession (Amos & Epstein, 2022). This is consistent with the results of Park and Hong (2022), which considered the issue of identity under formation among healthcare students under the influence of societal stereotypes. Conversely, Hettich, (2025), implied that sound academic program intervention could promote firm professional identity that was significantly lacking in the institutions analyzed here. Interestingly, despite these obstacles, male students in the present study showed a significant level of resiliency and adaptive coping skills (Morley et al., 2022). They turned to bonding with fellow male students, their own motivation, and preparation to keep their stress down and stay on track academically. This agrees with the findings of Caputo & Ross (2023), who have written about the importance of mentoring self-efficacy and peer support to increase persistence and learning among marginalized groups. Likewise, Bandyopadhyay et al. (2022), discovered that structured mentorship programs positively affected the leadership potential and psychological well-being of male nurse leaders.

In this research, there was a division with the integrative review by Decosimo (2022), which focused mainly on the external structural changes that could minimize moral distress among early-career nurses. Although external reforms are essential, our results show that internal mental strength and support of peers are no less important in terms of acute coping (Rockinson-Szapkiw et al., 2022). Additionally, the emotional detachment coping mechanism appeared as perhaps antipodal to empathic development suggested by Gower et al. (2022), and casts doubt on the viability of such defense mechanisms in the long run, affecting the quality of care and the mental health status of students.

In general, the research provides promising contributions to the existing debates surrounding

gender inclusivity in nursing education. It highlights that academic institutions and clinical educators should practice gender-sensitive mentoring, promote inclusive cultures in wards, and help male learners reconcile professional identity development. An examination of these results in comparison to what is already in the literature points to areas of similarities as well as contextual sensitivity issues that must be considered in future policy and curriculum formulations to aid gender diversity in nursing.

Conclusion and Recommendations

This paper has examined how male nursing students experience a spectacular interaction between gender stereotypes, isolation, a lack of mentors, identity discordance, and resilience in a female-dominated clinical setting. The results pointed out that male students are, in most cases, role stereotyped, either deployed to arduous responsibilities or in the process, left out of patient care procedures that need mental aptitude. Many expressed an experience of social and professional isolation; both due to lack of peer support and male role models. Such experiences have influenced their self-confidence and the ability to develop a clear professional identity. However, the resilience could be highlighted as students resisted peer bonding, inner motivation, and adaptive coping efforts, which corroborated their drive to succeed despite cultural and structural impediments.

On the basis of these findings, a number of recommendations may be suggested to foster a more inclusive and supportive environment of nursing aimed at male students. To start with, nursing schools and clinical facilities must launch gender-sensitive mentorship programs to ensure access to male faculty members or working nurses able to offer guidance and advocacy. Second, gender equity and professional identity development should be discussed in the curriculum and clinical training modules to ensure that learners are ready to work in diverse group dynamics. Third, clinical supervisors should be trained to prevent gender-stratified task delegations, so that all students get equal learning opportunities in terms of clinical procedures and their roles in patient care.

Moreover, nursing leadership is also advised to adopt a policy which specifically promotes inclusiveness, including anonymous feedback channels, gender-

awareness training and peer-support groups. Finally, research into bigger, heterogeneous populations and long-term professional results of male nurses should be pursued in the future to help achieve gender balance and equity at large in the nursing profession.

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