Identifying the Parts of a Research Article

Research articles contain several consistent sections or parts. Understanding these elements will aid you in evaluating the research presented in the article.

**Title and Author information:**
The title provides information on the main idea or focus of the article, and the authors are listed, usually with their affiliation.

**Abstract:** A brief summary of the article; may include keywords.

**Introduction:**
Provides background, states the purpose of the research, and may cover previous research or provide the hypothesis. This part may or may not be labeled.

**Method or methodology:**
Describes how the research was conducted, including the study sample, assessment measures, and procedure.

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**Attitudes and Stereotypes of Male and Female Nurses: The Influence of Social Roles and Ambivalent Sexism**

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Social role theory proposed that the gendered division of labor leads to the development of gender stereotypes that are consistent with the social roles that men and women frequently occupy. According to ambivalent sexism, gender prejudices stem in part from an unequal distribution of power and status. These theories appear particularly relevant to nursing because (a) the majority of nurses in Canada are women, (b) many male nurses report stigmatizing experiences and gender-based occupational barriers, yet (c) men are overrepresented in the higher paying or more “masculine” aspects of the job. Nursing and non-nursing students (N = 145) from a small Canadian university reported on their attitudes and stereotypes of male and female nurses. Regression analyses revealed that female nursing students generally reported more positive attitudes and stereotypes of both male and female nurses than did the male or female non-nursing students. Participants scoring higher (vs. lower) in benevolent sexism or lower (vs. higher) in hostile sexism reported more positive attitudes toward female nurses. In addition, participants scoring higher in hostile sexism reported more negative stereotypes of male and female nurses than did participants scoring lower in hostile sexism. The implications of men entering an occupation currently dominated by women, and how that might challenge existing justifications for inequalities in power and status, will be discussed.

**Keywords:** nursing, social role theory, ambivalent sexism, gender

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There are global concerns of a nursing shortage (e.g., American Association of Colleges of Nursing, 2010; Canadian Nurses Association, 2008; Center for Nursing Advocacy, 2003; Health Workforce Australia, 2012). To address this potential nursing crisis, numerous suggestions have been offered, including that nursing programs actively recruit from currently untapped subpopulations (e.g., Mrazek, 2000; Newell-Wilhite & Shifer, 2001; Sherrod, Sherrod, & Rasch, 2006). In addition, efforts have been made to increase diversity in the nursing field to increase patient comfort and to provide more effective care to the diverse patient populations that nurses serve (Berdarz, Schim, & Doorenbos, 2010; O’Lynn, 2012; Sullivan, 2000). Greater diversity in the nursing field would promote a culture of inclusion and acknowledgment of different approaches and perspectives that could benefit nurses as well as patients (Berdarz, Schim, & Doorenbos, 2010; Maxwell, 2005). Research suggests that racial and ethnic diversification of nursing is a slow process (Jimenez-Cook & Kleiner, 2005). Promoting gender diversity in nursing, however, is lagging even further behind (Sullivan, 2000).

Currently, men in nursing face a number of educational barriers, including social isolation (e.g., lack of role models and mentors, lack of peer support), failure to acknowledge and discuss gender differences in expressions of care (e.g., physical touch used by men vs. women); sexism (e.g., professors and textbooks that refer to nurses solely with feminine pronouns; animal comments in the classroom); suppression of the contributions men have made to the field of nursing (e.g., textbooks and nursing programs that ignore the historical role of men in nursing; lectures and textbooks that only portray women as nurses); and media portrayals of male nurses as socially or sexually deviant (Meadus, 2000; Roth & Coleman, 2008; Sherrod, Sherrod, & Rasch, 2006). Many of these barriers may stem from—or be exacerbated by—gender stereotypes and prejudices (Clow & Ricciardelli, 2011; Meadus, 2000; O’Lynn, 2004). To recruit and retain greater numbers of men into...
Results

Unfortunately, because of the small number of male nursing students, it was necessary to remove these three participants from all analyses. Participants with incomplete data remained in the sample but were removed from analyses when they did not provide complete responses. For example, if an analysis used four items and a respondent had not answered one of the four items, that respondent would be removed from that particular analysis. Many of the ambivalent sexism indexes correlated with each other and

Discussion

Researchers have recognized that gender inequality exists within the nursing profession and that considerable obstacles face men who wish to pursue a career in nursing (e.g., Meadus, 2000; O’Lynn, 2012; Sherrod et al., 2006). We wished to introduce ambivalent sexism and social role theory to the discussion of resistance toward men in nursing. As social role theory would predict (e.g., Eagly, 1987), female nursing students possessed more positive attitudes and stereotypes of male nurses than did both the male and female non-nursing students (Hypothesis 1). Although there are few men in nursing, female nursing students see male nursing students and male faculty in their classrooms and

Conclusion

More men are needed in nursing (e.g., Meadus, 2000; Newell-Witrow & Slusher, 2001; O’Lynn, 2004; Sullivan, 2000). Our findings suggest that participants with greater exposure to men in nursing (female nursing students) possessed more positive attitudes and stereotypes of this group than did other students. Participants higher (vs. lower) in benevolent sexism toward women held more positive attitudes of female nurses, whereas participants higher (vs. lower) in hostile sexism (toward men or women) possessed more negative stereotypes of male and female nurses. Our findings suggest that ambivalent sexism is related to gender inequality in nursing and may be an important factor in perception.

References