Nurses' Experiences on Gender: A Phenomenological Study

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A R T I C L E   I N F O

A B S T R A C T

This study aimed to reveal gender-related deficiencies by examining nurses' experiences with gender and to guide these deficiencies in further studies. The study used the transcendental model of phenomenology design from the qualitative research method. The present study prefers the criterion sampling included in the purposeful sampling The study group consisted of five female and five male nurses who worked in a state hospital and had gender experiences. The meetings were recorded and carried out face-to-face with the consent of the participants. According to the research results, a theme named gender was determined. Under this theme, 10 categories and two subcategories were identified. The current study concluded that the gender perceptions of nurses were positive, but they exhibited a traditional approach to the roles given to women and men. They did not receive sufficient education on social gender skills. The authors suggested that gender education should be added to the Women's Health and Diseases Nursing course contents.

INTRODUCTION

One of the concepts that form a social category for the individual since the first years of life is gender (Keskin & Ulucan, 2016). The concept of gender expresses how men and women are perceived by society. Gender is a condition that society desires to see in the individual (Özdemir et al., 2019).

Gender is the socially structured roles and personality traits of women and men apart from their biological characteristics (WHO, 2020). Gender is a concept that includes both sexes. Nevertheless, the roles that each culture expects from men and women are different. The concept of gender was first used by Ann Oakley. Oakley describes the biological separation of men and women with the concept of sex while referring to the unequal attitude of society in parallel with the biological separation from the concept of gender (Ersoy, 2009; Keskin & Ulucan, 2016).

Gender equality does not mean that men and women will be the same; it means that rights and opportunities will not change based on being born as men or women (EICE, 2019). Gender is a learned concept. Since gender is a concept that can be changed and learned from culture to culture and in time, nurses could be made to learn this concept and exhibit the right approaches (Eryılmaz, 2020).

The social learning theory, which holds that gender-related behaviors are acquired through later learning, was developed by Albert Bandura. Bandura argues that by observing the behavior of men and women, giving men and women certain role patterns is learned. The environment in which one life is of great importance in learning to be a man and a woman. Social learning theory has two learning processes. The first is operant conditioning and the second is modeling and imitation (Bandura, 1977). According to Bandura, the basic way to learn through operant conditioning is based on direct experience. The performance rewarded in operant conditioning is likely to be repeated in the future. The child who behaves according to his/her gender is rewarded. Social learning theory suggests that families perceive children as different based on their gender and act accordingly by considering

these differences (Bandura, 1977). The other learning process is modeling and imitating the model of a mother, father, friend, or admired person or hero. In gender roles, girls model and imitate their mothers and female figures model, and male children model and imitate their fathers and male figures. Discrimination based on gender begins in the family. The roles and expectations of society from men and women affect education, family, and business life, hindering the implementation of decisions. Gender inequality makes women worthless (Eryılmaz, 2020). According to the study conducted by Kahraman (2010), gender inequality is found in issues such as educational opportunities, decisions on spouse selection, and working life.

Gender perception is affected by many factors. This perception affects the whole life of individuals. Among the theories that explain how this perception is formed, Bandura's social learning theory is the guide of this study, and nurses' experiences with performative conditioning and modeling and imitation and gender perception they develop from childhood are examined.

The effects of gender are seen at all levels of social life. One is the nursing profession, which is seen as a women's profession. Nursing is considered a women's profession where gender inequality is felt the most. Nursing is a profession that can be practiced by both genders, but society sees it as a female profession. (Ünal Toprak & Turan, 2021). According to the study conducted by Turan et al. (2021), gender affects occupational gender perception and has a positive effect on gender adoption. Changing this perception in society is incumbent on the rulers. On the other hand, it is seen that the gender awareness of nurses is not at a sufficient level. This situation causes patient care to focus on physical symptoms and ignore social, cultural, and economic factors (Coskun & Özdilek, 2012). To exhibit an egalitarian approach to health services, nurses should have sufficient knowledge about gender (Ünal Toprak & Turan, 2021). Nurses are effective in changing the perspectives of individuals with their approaches. Nurses who exhibit an egalitarian attitude will also ensure the strengthening of the nursing profession, which is mostly occupied by women (Karachay Yıkkar et al., 2020). Ünal Toprak and Turan (2021) concluded that the perceptions of male students regarding gender roles were more positive than female students.

The importance of gender inequality in the nursing profession is stark. Nursing is one of the professions where gender inequality is most experienced (Turan et al., 2021). Nurses need to be able to look at all practices from a gender perspective. In her role as an educator and consultant, the nurse is responsible for developing an egalitarian behavior regarding social quality and adopting this egalitarian approach to society and providing egalitarian health services (Özden and Gölbaşı, 2018). Since nursing is seen as a female profession, research has been conducted on the gender status of male nurses (Folami, 2017; Smith et al., 2020; Rabia et al., 2020). A study involving male and female nurses together is rare. In a study on gender roles of female and male nurses, only the roles of women and men were examined using composition (Prosen, 2022). Nursing is a profession in which men and women take part. There is no study in which the individual reflects the gender perception created by the individual to the nursing profession and reflects the gender perception encountered in the nursing profession. This study was carried out to reveal in-depth how individuals gain gender perception and gender roles, how individuals reflect gender perception to their profession, and how these shortcomings should guide further studies. Thus, this study aimed to reveal the deficiencies of nurses regarding gender by examining their experiences with gender and to guide these deficiencies in future studies.

METHODS
Research Design

This study uses the qualitative research method to examine a phenomenon in detail and give meaning to it and prefers the transcendental model of the phenomenology design. The transcendental model is preferred in qualitative research as it brackets individual biases (Moustakas, 1994). In light of this information, the authors chose the transcendental model of phenomenology to determine the nurses' experiences with gender in this study.

Participants

This study preferred the criterion study group, which is one of the purposeful sample types. The criterion study group was determined through

criteria suitable for the study (Yildirim & Simsek, 2021). In this study, the authors determined the inclusion of nurses with experience in gender as a criterion. The study was completed with a total of 10 participants. The study was carried out in a hospital in the Central Anatolia Region. After

institutional and ethical permission was obtained, informed consent was obtained from participants who agreed to participate in the study. The characteristics of the participants were given in Table 1.

Table 1. Participant Characteristics

Participants' Code	Gender	The place lived for the longest time	Marital Status	Uptime	Received gender education
K1	Female	Kayseri	Married	5 years	No
K2	Female	Yozgat	Single	1 year	No
K3	Female	Malatya	Single	3 years	Yes
K4	Female	Samsun	Married	10 years	No
K5	Female	Kayseri	Single	1 year	Yes
K6	Male	Istanbul	Married	2 years	No
K7	Male	Kars	Married	9 years	Yes
K8	Male	Kayseri	Single	4 months	No
K9	Male	Kayseri	Single	4 years	No
K10	Male	Kayseri	Married	9 years	No

Data Collection Tool

Semi-structured interviews were employed to determine nurses' experiences with gender. The purpose of an interview is to reveal the interviewee's feelings, thoughts, and beliefs about a subject (Patton, 2002). This study preferred semi-structured interviews to reveal nurses' ideas about gender based on their feelings, beliefs, and experiences. A semi-structured interview has a more flexible structure and is suitable for reaching new ideas on the subject (Yildirim & Simsek, 2021). The first three authors prepared the interview questions by reviewing the literature (Celebi & Kargin, 2019; Carpenter, 2019; Cuhadaroglu, 2021; Folami, 2017; Prosen, 2022; Smith et al., 2020; Turan & Toprak, 2021). The research questions were evaluated and finalized by other researchers.

For the credibility of the data collection tool, an academic who was an expert in qualitative research and two experts in the field of Women's Health and Diseases Nursing examined interview questions. The first expert proposed separating questions that measure more than one concept within the same question pattern. For example, the interview question "What are the difficulties of being a woman and a man in this geography?" is divided into 'What are the difficulties of being a woman in this geography?' and 'What are the difficulties of being a man in this geography?' The expert also added a question containing Bandura's

theory, on which the first expert study was based. (How did you gain your gender perceptions?). The expert added a question that was considered important for gender by the first expert in the field of Women's Health and Diseases Nursing. (Can you explain what gender means in your opinion? In terms of gender, how do you think your family raised you?) The second expert in the field of Women's Health and Diseases Nursing found the questions appropriate and did not propose changes. After the expert feedback, the final form of the interview questions was given. The interview form consisted of 17 questions.

The first researcher conducted a preliminary interview with two nurses and tested the comprehensibility and applicability of data collection tools. As a result of the preliminary interview, the questions served the purpose and were applicable and no changes were made. Nurses included in the preliminary interview were not included in the study.

Data Collection Process

Institutional permission was obtained from Social Sciences and Humanities Ethics Committee to conduct the research. Then, information was given about the subject and purpose of the study to the nurses that would be interviewed face-to-face. The time of the interview was planned. The first author collected data through a face-to-face interview. Oral and written consent was obtained

from the nurses who agreed to participate in the study.

Interviews were conducted in the nurse's room. The nurse's room where the interview was going to be held was prepared in advance and any additional factors that might distract the researcher and the participant were eliminated before the interview. With the permission of the participants, the interviews made were recorded with a phone with a voice recording feature to prevent data loss. To relieve the participant in the pre-session, the interview questions were started when the participant felt ready. During the interview, the interview was tried to be deepened with questions such as 'Do you think about this issue, do I understand correctly?' and the participants were allowed to confirm what they said. The interviews lasted about 20-25 minutes. The audio recordings were transferred to the Word program. A total of 61 pages of transcripts were obtained. Finally, the participants were asked whether there were any things they wanted to add or remove. Nurses were given participant numbers according to their genders as female participants (K1, K2) and male participants (E1, E2).

Analysis of Data

This study used descriptive analysis to analyze the data. The reason for using descriptive analysis in this study was that the research question and interview questions started with 'what'.

In the analysis of the data, after the transcript was prepared, the codes were read sentence by sentence and underlined. Then, categories were created from the specified codes. Categories were created taking into consideration the questions. The transcript was re-read by the expert and the codes were converted into word groups instead of words by the expert. For example, the code determined as the behaviors in the answer to the first question was changed by the expert to the behavior of men and women. After the changes were made by the first author according to the expert's recommendations, the code and categories were shown to the expert again and approval was obtained. The question of family and environment was combined because two separate questions asking about the roles of women in the family and environment had common codes (this code was included in the findings except for one code). These two questions were combined because there were common codes (a different code was found in the findings) in two separate questions asking about the role of men in the family and environment. In this study, ten categories were obtained. A single theme was formed by consensus between the expert and the first author (gender).

Validity and Reliability

This study adopted several procedures to minimize and eliminate the factors that threaten validity and reliability (Miles & Huberman, 1994). The procedures were presented in Table 2.

Table 2. Validity Reliability Precautions

Validity	Internal validity	Expert consultation
		Participant confirmation
		Direct quote
		Long-term interaction
	External validity	Explanation of the data collection tool and process
		Explanation of the data analysis process
		Explaining the characteristics of a working group
		Specifying the selection method of the working group
		Description of the application process of the study
		Description of the role of the author
		Explanation of validity and reliability measures
Reliability	Internal reliability	Prevention of data loss using a recorder
		Presentation of findings without commentary
	External reliability	Checking consistency between data

Internal Validity

Internal validity reveals the credibility of the study (Miles & Huberman, 1994). Expert opinion was conducted in two ways to ensure internal validity. In line with the feedback from the experts, the data collection tool was finalized. Secondly, the data analysis was examined by an expert before being written as findings. Necessary corrections

were completed by taking into account expert feedback.

For participant confirmation, the participant's statements were repeated by the researcher during the interview. After the audio recordings were transcribed, the data obtained from the interview were confirmed by the participant. In the findings section, a direct quotation of the participants was included. After the participants were relieved before the interview after a long time of interaction, the interview started.

External Validity

External validity reveals the transferability of the study (Miles & Huberman, 1994). The data collection tool and process to ensure external validity were explained in detail. The analysis of the obtained data was explained with examples. The characteristics of the study group and the reason for choosing the study group were described in detail in the study group section. The application process of

the study was described in detail so that the reader could get a better picture of the process. The role of the authors in the study was indicated.

Internal Reliability

Internal reliability is related to the parts of the research and the consistency of the results (Miles & Huberman, 1994). Voice recordings were taken during the interview to prevent data loss. The analysis of the obtained data was given without comment in the findings section. The researchers agreed on the codes.

External Reliability

External reliability is related to the verifiability of research (Miles & Huberman, 1994). To increase the external reliability of this study, the researchers discussed the consistency of the results and findings sections and received approval from a qualitative research expert.

RESULTS AND DISCUSSION
Meaning of Social Gender

Table 3. Views on the Category "The Meaning of Social Gender"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Responsibilities of men and women	+		+			+			+	
Roles of men and women		+	+							
The behavior of men and women	+									
Expectations from men and women	+									
The life of men and women		+								
Male domination				+						
Engrained misperceptions					+					
The distinction between men and women							+			
Thoughts against gender								+		

Table 3 states that they made nine different definitions for the meaning of social gender. Four participants pointed out that social gender meant the responsibility of men and women. E1, one of these participants, expressed: "The concept of social gender imposes many responsibilities on male and female individuals according to different cultural events".

K3, who said that the meaning of gender was the roles of men and women, expressed: "The concept of gender is that society imposes responsibilities on people according to their gender".

Nurses have assigned different meanings to women and men in terms of responsibility, behavior, and roles with the meaning of gender. In other words, nurses have evaluated the meaning of gender as gender inequality. The reason why nurses show men as more advantageous in the concept of gender may be due to the negativity of the perspective of women in Turkish society. The fact that Turkish society is a male-dominated society and that women are considered second-class citizens may have led nurses to draw this meaning from the concept of gender. Similarly, Kurt Topuz and Erkanli (2016) stated that men are more advantageous than women in Turkish society, and

they describe women as needy and fragile, and men as managing, directing, protective, physically strong, and acting logically.

Based on the above conclusion, this study will lead to the questioning of stereotypes about gender and will create an awareness of the inequality of the roles attributed to women in society. In other words, nurses' traditional thinking about gender will delay their awareness of gender inequality and prevent them from providing a gender-based health service. Therefore, this study will give them a perspective to eliminate this obstacle. Nurses with a traditional perspective on gender cannot be expected to provide a health service that is sensitive to gender equality. Therefore, nurses need to have a non-traditional perspective on gender so that healthcare could be effective. This study reveals this importance.

The Role of Women in the Family and Social Life

Table 4. Views on the Category "The Role of Women in the Family and Social Life"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Housework	+	+	+	+	+	+	+	+	+	+
Motherhood	+	+	+	+			+	+		+
Passive social life		+				+	+		+	
Passive business life	+	+	+				+	+		
Active business life		+				+				+
Spouse								+		

Table 4 shows seven different views on the role of women in the family and social life. All participants mentioned that the role of women in the family and environmental life was housework. Of these participants, K2 indicated: "In my family life, in other words, I see my mother was responsible for all the cooking, all the cleaning usually belonged to my mother". Seven participants say that the role of women in the family and social life was motherhood. For example, E2 clarified: "But there are things that society imposes. My wife is a housewife taking care of the child".

Nurses thought that women had roles in the family and environmental life such as housework, wife, motherhood, passive social life, passive business life, and active business life. These roles are discussed under two headings below.

Family Life/Social Life: Nurses have stated that women have housework and mothering roles. This result is similar to Green and Black Bull's (2021) results. Contrary to this study, Yıkkar et al. (2020) concluded that nursing students have egalitarian attitudes towards women and men in the family and social life.

This study found that nurses considered tasks such as housework, wife and motherhood, and many responsibilities as the roles of women. These roles were included in the expectations of Turkish society and are internalized by society. It was also considered to be a learned situation due to the patriarchal structure. The fact that housework is seen as a woman's duty offers a traditional perspective and women perceive these roles as their responsibilities (Esen et al., 2017). This result showed that women adopt the roles of housework and motherhood and devote time to these roles and put their development and business life into the background. Therefore, the fact that nurses reflected a traditional perspective in parallel with this result showed that they accepted these roles. Moving from here, this study aimed to give nurses an awareness not to internalize these roles.

Business life: Some nurses evaluated women were active in business life, while others evaluated women as passive. In parallel with this result, Eren et al. (2017) found that the participation rate of women in business life increased and that women continued to assume responsibility for household-related tasks. Thus, researchers concluded that the traditional role of women was not yet fully changed. According to Bandura's (1977) social learning theory, since the child takes the mother as a role model, the mother's passivity in business life causes the child to adopt non-egalitarian roles. Therefore, nurses' role models may have led them to have a traditional perspective on the role of women. In other words, if the role models have traditional attitudes, it would not be possible to break the chain of gender inequality. Therefore, this study was important in terms of providing nurses with the

awareness of replacing the traditional thinking structure formed by taking a role model in terms of gender concepts with a non-traditional mindset.

The Role of the Men in the Family

Table 5. Views on the Category "The Role of the Men in the Family"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Monetization	+	+	+	+	+	+	+	+	+	+
Help with housework	+		+		+			+		+
Fatherhood			+			+	+	+		
Passive social life		+				+			+	
Working life		+	+		+					
Being strong	+			+	+					
Being a leader	+									

Table 5 includes the views on the role of men in the family. All participants mentioned that the role of men in the family was to earn money. One of these participants, K4, expressed: "...I think society has pressure on them. I think men have to support the house, and men have to be strong". E3, who said that the role of men in the family was to help with housework, declared: "My father helps my mother as much as possible, taking care of his children". E1, who said that the role of men in the family was fatherhood, clarified: "Men generally have the role of supporting the house and father, especially in Anatolia at the age of 13 and 14...". Nurses thought that men have roles in the family and social life such as earning money, helping with housework, fatherhood, passive social life, working life, being strong, and being a leader.

Family Life/Social Life: Nurses stated that men had a role in helping with housework and fatherhood. This result is similar to Green and Black Bull's (2021) results. These results showed that the roles of the father and mother were not equal and that the role of the woman was greater. These results, which suggested that the role of men was less, may be due to a patriarchal social structure that includes gender discrimination. In other words, in patriarchal societies, the fact that women take more domestic work and men occupy auxiliary positions was an indicator of gender discrimination (Cangoz, 2013; Kahraman et al., 2014). Contrary to these studies, Ozden and Gölbası (2018) found that health workers thought differently and they arrived at the conclusion that the role of men and the role of women were not more than each other. Adopting egalitarian roles showed the level of development of countries. In this study, it was revealed that these roles were equal in Turkish society. Therefore, the determination of gender roles in this study constituted the first step in the fight against gender inequality.

Business Life: The most prominent role of men was to earn money. Men were strong and occupied leading positions in business life. One of the areas where traditional roles were the most prominent was business life. This situation created a great burden for men (Ünal Toprak & Turan, 2021). This showed that gender inequality affected men as negatively as it affected women. This study would raise awareness so that these negative effects can be eliminated.

The Difficulty of Being a Woman

Table 6. Participant Opinions on the Category "The Difficulty of Being a Woman"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Childcare	+		+		+	+	+	+	+	+
Violence	+	+	+	+	+			+		+
Housework	+	+				+		+	+	+
Birth	+	+		+						
Restrict		+		+						
Underestimation	+		+							
Humiliation		+								
Home subsistence							+			
Passive social life							+			
Discrimination in the workplace								+		
Obstruction of education							+			

In Table 6, the views on the category of difficulty of being a woman are included. Eight participants said that the challenge of being a woman was to take care of children, and E5 stated*:* "... busy with difficulties I can say women again assume the burden of childcare'".

Seven participants touched on violence related to the difficulty of being a woman. E3, one of these participants, indicated: "I said about the difficulties of being a woman, or because the society has a role perception, they have problems in some issues because they are accused of not complying with it, they can be exposed to violence because of their clothes".

Referring to housework regarding the difficulty of being a woman, E1 pointed out: "She has many difficulties without taking time for herself. They suffer all the difficulties that a patriarchal society brings. In these difficulties, cleaning the house, cooking for the people of the house...".

In this study, the difficulty of being a woman was stated by nurses as childcare, violence, housework, childbirth, restriction, being seen as worthless, humiliation, home support, passive social life, and discrimination in the workplace. In parallel with this result, Ünal Toprak and Turan (2021) stated that women experienced difficulties such as being subjected to violence, being oppressed, being interfered with their clothing, and being forced to serve their family members continuously. Participants learn about gender roles through various experiences and by taking society as role models (Bandura, 1977). Therefore, the characteristics of the role women present could also be considered difficulties. Women need the right role models and experiences of equality to overcome these challenges. This need must be met in a very short time in Turkish society. Therefore, this study was important in terms of expressing a need for nurses to be the right role models. If nurses can be the right role models for women in the hospital environment, they will also make it easier for women to overcome the challenges mentioned above.

While female nurses expressed the violence, childbirth, worthlessness, and restriction of women as the difficulty of being a woman, male nurses expressed childcare and housework as the difficulty of being a woman. This situation showed that male nurses did not see situations such as violence against women, childbirth, the depreciation of women, and the restriction of women as problems or were not aware of these problems. The fact that violence was not seen as a problem by male nurses may be an indication that they became insensitive to violence against women and femicides (Yılmaz et al., 2009). As a matter of fact, according to Organization for Economic Cooperation and Development (OECD) 2019 data, the rate of women in Turkey who accept that it is justified for a husband/partner to beat his wife/partner under certain conditions is 13.3%. These data showed that even women who were subjected to violence in society became desensitized to the phenomenon of violence and supported this study.

The Difficulty of Being a Man

Table 7. Participant Opinions on the Category "The Difficulty of Being a Man"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Monetization	+	+	+	+	+	+	+	+	+	+
Emotional load	+	+	+	+	+			+		
Heavy duty work							+			

In Table 7, the opinions on the category of difficulty of being a man were included. All participants answered about how to make money and about the difficulty of being a man. K1 of these participants expressed her opinion: "I can be pressured to not be like this man, otherwise I have to make money all the time, I have to take care of my family all the time", K5 explained her idea as follows"... it could be more economically strained".

Nurses stated that the difficulty of being a man was earning money, emotional burden, and working in heavy jobs. Avcı et al. (2016) concluded that one of the areas where men experience the most difficulty is making money. The widespread acceptance in society that men should become rich and make money may have led them to see making money as a difficulty (Avcı et al., 2016). Turan et al. (2021) emphasized that men assume serious responsibilities in terms of earning money.

Although men have difficulties in terms of earning money, only their earning money can later lead the man to show power toward women (Yılmaz et al., 2009). Thus, in terms of gender equality, it is necessary to develop mechanisms for women to earn money. In this sense, the fact that the female nurses in this study worked and made money is strong evidence that this mechanism has improved. Therefore, this study proposes an opinion on increasing the number of female employees in society.

This study showed that gender roles had negative effects on men, where gender roles were not only limited to women. In the literature, while considering the gender perception of men and women, there was no information about the awareness of the difficulties experienced by the sexes. This study would contribute to the literature in this respect.

Meanings of Words about Women

Table 8. Views on the Category "Sayings about Women" and the "Subcategory of the Meanings of Words about Women"

Codes	Codes/Participants
He who does not beat his daughter beats his knee	Finishing (K1)
	Violence (K2, K4)
	Obedience (K3)
	Social pressure (E2)
	Devalue women (E4, E5)
Like mother, like daughter	Responsibility for raising children (K1, E1)
Don't miss the stick from the woman's back and the colt from her belly	Caring about fertility (E2, E3)
Let the one who gives birth to a boy boast and the one who gives birth to a girl beat her	Depreciating women (K2)
If you leave the girl to her own heart, she will either run with the drummer or the piper	Woman's inability to make the right decision (K3)
Don't interfere in men's business with the dough of your hand	Housework (K4)
Buy the field from the stony place and get the wife from a home with brothers	Caring about fertility (K5)
The female bird builds the nest	Putting all responsibilities on women (K5)
Men should know how to bring; women should know how	A woman knows how to be content (E1)

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to suffice	
No hand should be raised to the woman	The woman is Precious (E3)
Heaven is at the feet of mothers	The woman is Valuable (E4)
If anyone cries, it is the mother that cries, the rest cry lies	The woman is Valuable (E5)

In Table 8, the views on the category of sayings about women and the subcategory of the meaning of words about women were included. In the interview questions, participants were asked about the proverbs and idioms they know about women, but the participants said that they were not sure that the sayings they said were proverbs or idioms. When the literature was examined, we found that some sayings were not proverbs and idioms, so to avoid data loss, those sayings were not removed and the category was determined as sayings related to women.

K1 expressed her opinion as follows for the promise that he who does not beat his daughter beats his knee: "As far as I understand from here", K2 articulated: "I think it is a bad word about this woman, that is, an education that was not given when her daughter was young if you do not make up for it in time, you will beat your knee in the future, so you will be sad, I think it is a bad thing, it is said that the tree bends when it is young, but this word escapes to violence".

This study concluded that nurses used negative expressions about the words and meanings of women. For example, negative expressions such as "not missing the stick from the woman's back and the colt from her tummy " and "Do not interfere in the man's business with the dough of your hand" were used. These words expressed that there were negative meanings for nurses such as childbearing duty, raising children, and being seen as worthless and violent.

Male nurses had positive sayings for women. These were the sayings that emphasize the motherhood characteristic of the woman. Therefore, male nurses stated that women should be respected for being mothers. This study argues that women should be respected because they are women, and this sense guides male nurses.

Many studies were conducted on the representation of women in proverbs (Hussein, 2008; Hussein, 2009; Maria, 2018; Storm, 1992; Turan et al. 2021). These studies showed that women talk a lot, are kept in the background, are physically weak, and their living space is limited to marriage and family. These negative results are in line with the results of this study. The adoption of these negative results by nurses showed that they adopt the sayings they use in their lives and reflect these proverbs negatively on their lives (Turan et al. 2021).

Sayings about Men

Table 9. Opinions on the Category "Words about Men"

Codes and reasons	Participants
Men do not cry	Emotion suppression (K1, K4, E1, E5)
	Strong male (K2, K4, E2)
Manly men have sons.	Male supremacy (K5, E1, E2)
	Men's worthiness (E3)
Men should know how to earn; women should know how to save	Monetization (K3, E5)
A man earns his crust	Monetization (E3, E4)
Debt is the whip of the brave	Monetization(K1)
Boys are like arrows; they are not in every house	Male supremacy (K2)
The path to the heart of the man passes through his stomach	Men's worthiness(K3)
The chimney of the house without a man does not smoke.	Valuableness of men(K4)
I will be the man here	Male supremacy(E4)

Regarding the saying that men do not cry, E1 stated: "There is a saying that men don't cry, and when a man cries at a young age, he is stigmatized by saying that a man does not cry. We see our elders crying. We cry without anyone seeing. A word stuck by society, suppressing the feelings of

men". K4 expressed: "They say a man doesn't cry, he has to be strong, he has to endure in silence".

For the statement that manly men have sons, E2 explained: "There is a saying that manly men have sons. This saying stems from the patriarchal structure. Men who have daughters want to have sons. In some parts of Türkiye men get married twice when their first wives do not give birth to sons. These words are the reflection of the society that sees men as superior".

This study concluded that nurses used positive expressions about men. When the meanings of these words were examined, participants stated that men were strong, valuable, earning money, and superior. Other studies on proverbs showed similar expressions such as men providing and protecting the family's livelihood, being brave, and representing authority (Diabah & Amfo, 2018; Maria, 2018; Turan et al. 2021). These results showed that the nurses participating in this study learned the role of men based on the words they heard and knew. For example, the phrase "men do not cry" led to the perception in Turkish society that men suppress their emotions and become strong. This perception was evaluated as the difficulties of being a man as well as the role of men as nurses. This situation revealed that gender also affected men negatively. Although it was generally emphasized that men were positively affected by gender perception in the literature (Esen et al., 2017; Sis Celik et al., 2013; Yılmaz, 2009), as seen in the results of this study, they were negatively affected by gender perception of men. Thus, this study rejected negative perceptions such as men being authoritarian, and gave nurses a way to change their perceptions by advocating for equality between men and women.

Findings for the Category of "the Family Upbringing"

Table 10. Participant Views on the Category "The Family Upbringing"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Based on equality between men and women		+	+	+	+			+		
By making a distinction between men and women						+	+		+	
The way men should bring money						+				+
In such a way that the woman stands on her own feet	+			+						
In such a way that the man is superior	+									
Supporting			+							
In a way that does not help with household chores						+				
To help with household chores							+			
Based on customs							+			
Based on advice								+		
Based on the continuation of the lineage										+

In Table 10, the views on the category of the family's upbringing are included. Five participants answered the family's upbringing based on equality between men and women. Of these participants, K4 expressed her opinion as follows: "... my family didn't have that mentality. I saw something like this in the family of those around me, the girl cooks and cleans, we didn't have anything like that, we were being directed to school...".

Although most of the nurses said that they were raised based on equality between men and women in their families, when the other results of

this study were considered, we saw that equality was not actually in question. The reason why the participants defended this idea was thought to be due to the increased inequality between men and women compared to the previous years. In addition, the reason why female nurses thought that they were raised based on equality between men and women in the family may be because they were not aware of this inequality and did not see this situation as inequality.

According to Bandura's (1977)'s social learning theory, gender perception is formed by taking role models and experimenting, especially in children between the ages of 3-7 (Bandura, 1977).

In other words, the roles of the mother and father have a great influence on the upbringing process. Therefore, nurses may have taken their families as role models and experienced them at a young age. The traditional perspective within the family is an obstacle to the change of gender perception. From this point of view, this study showed that the family was also an important factor in changing the perception of gender in a positive way. The roles of the mother and father would lead to a positive change in this perception of the child. Therefore, developing gender perception should start with family education, as mentioned in social learning theory.

The Impact of Roles on Working Life

Table 11. Participant Opinions on the Category "The Impact of Roles on Working Life"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Negative	+	+		+	+	+	+	+	+	+
Positive			+							+

Table 11 shows that the impact of roles on working life was formed in two codes, positive and negative. K1, one of the participants who said that gender hurts working life, expressed her thought as follows: "Because there is a perception that even patients who are women adopt when they see a male nurse, they wonder if he can do it. Or they are afraid of embarrassment, but they approach the female nurse more moderately".

K4 uttered her opinion on the negative effects of role on working life as follows: "Nursing is like the duty of women. When our colleagues are sitting on duty, the girls brew tea, even in the hospital environment, we have seen very few men washing dishes in the hospital environment like us. They make us feel like we're doing our duty at home...".

We concluded that gender roles had positive and negative effects on working life. The participation of women in working life was evaluated as having a positive effect on the nurses. On the other hand, most nurses stated that gender negatively affects working life. While women exist in business, they also continue in their traditional male-dominated roles.

Professions are shaped according to the gender stereotypes imposed by society. Occupational distinctions linked to gender roles are formed in every society (Prosen, 2022). Participants in the study of Kahraman et al. (2014) stated nursing was

a female profession and interpreted this profession as a profession that did not require strength. Therefore, the participants felt that male nurses were not necessary for this profession because they were strong. McDonald (2013) concluded that nursing professionals should work in places that require strength, such as emergency services and intensive care. In addition, male nurses had greater opportunities than female nurses in terms of professional advancement (Prosen, 2022). From this point of view, the reflections of the traditional perspective on gender continue in the profession of nursing. In this study, it was argued that nursing was not a female profession and that men could also work in this profession.

Fernández-Feito et al. (2019) emphasized that male nursing students were traditionally compared to women in their perspectives on gender, that this difference might affect professional values, and that the focus should be on these students during academic education. Prosen (2022) concluded that gender differences complicate close contact between nurses and patients. In this study, findings were parallel to the literature. The traditional perspective influences professional service. Therefore, this study argued that gender differences should not disrupt nursing services and that a female nurse should serve a male patient and a male nurse should serve a female patient in line with

professional values. In addition, this study revealed that the reflection of women's negative roles in society on the profession was one of the most important obstacles in front of the nursing profession respected and leading.

Ways of Developing Perception

Table 12. Participant Opinions on the Category "Ways of Developing Perception"

Codes	Participants									
	K1	K2	K3	K4	K5	E1	E2	E3	E4	E5
Taking a model	+	+	+		+	+	+	+	+	+
By experiencing		+		+	+		+	+		
Seeing different cultures	+					+	+	+	+	
By reading books	+					+				
By studying	+								+	
Watching TV							+			
Recognizing roles that don't make you happy					+					

Table 12 states that nine participants responded that people could develop perceptions based on models. Of these participants, E5 expressed: "... their perception of gender was that the father works and the mother is a housewife, and then with the training I received, I saw that this changed as far as I saw around me, I started to apply what I saw...". Five participants responded that people could develop perceptions based on experiences. Of these participants, K2 stated: "... I think that men and women are equal by learning and experiencing the equality of men and women...".

This study determined that nurses took the family and environment as a model while gaining the perception of social gender, they were influenced by different cultures, they read books, they watched television and they changed roles that did not make them happy. The majority of nurses said that they imitated their family and environment at a young age, but over time they changed some of these perceptions with their own experiences. Bandura's (1977) social learning theory suggests that learning gender behaviors consists of two processes. These are modeling or experimentation. This study showed that these two processes worked together in nurses. While there were factors such as experiencing different cultures, reading books, receiving education, watching television, and being aware of roles that did not make one happy, there are factors such as being influenced by people from different cultures and being affected by the environment where they are educated. This study was important in that it was a qualitative study that explored Bandura's modeling and experience processes together in depth

CONCLUSION

The present study concluded that nurses adopted the traditional gender perspective of Turkish society. Since the majority of nursing, which is a professional profession, is performed by women, the disadvantages of being a woman were also reflected in the profession. In this study, the reflections on gender in the nursing profession and how nurses gain gender perception were described in detail. While revealing the reflection of the negative impact of the gender perception of Turkish society on women in the nursing profession, awareness was raised by examining in depth how this perception was formed and the first step of change was realized. In addition, it was determined in depth what kind of negativities the gender perception, which was not equal in the nursing profession, caused in society.

The current study used only interviews as a data collection tool. The fact that there were contradictions between the nurses' discourses showed that the interview was inadequate and that these views should be enriched with different data collection tools by making data diversification.

Most nurses stated that they did not receive gender education. Thus, some of the nurses did not reach depth in their explanations about gender. From this point of view, the concept of gender should be included more deeply in nursing-related education. This study revealed that nurses were not at the desired level regarding gender. With experimental or action research designs, studies could be carried out to bring gender to the desired level.

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