

Assessing the Relation Between Attitudes Towards Gender Roles and Domestic Violence of Nursing And Paramedic Students

Hemşirelik ve Acil Tıp Teknikerliği Öğrencilerinin Toplumsal Cinsiyet Rollerine İle Aile İçi Şiddete Yönelik Tutumları Arasındaki İlişkinin Değerlendirilmesi

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ABSTRACT

Objective: The purpose of study was to assess the relation between attitudes towards gender roles and domestic violence of nursing and paramedic students in a country in the north east of our country.

Methodology: A descriptive, cross-sectional study was used. The study population consisted of 205 nursing and paramedic students in 2014-2015 academic year. The sample consisted of 160 students. Data were collected with the "Demographic Information Form", "The Attitudes Towards Domestic Violence Scale (ATDV)", and "The Gender Roles Attitudes Scale (GRA)". Data were analysed using descriptive statistics such as number, percentage, mean, standard deviation, median, 25th quarter and 75th quarter, Spearman's correlation analysis, and Mann Whitney U test.

Results: The students had equalitarian gender roles and positive attitudes towards domestic violence. Spearman's correlation analysis indicated a positive moderate relation between the attitudes towards gender roles and domestic violence of the students ($r=0.670$, $p<0.05$). Female students had more egalitarian attitudes towards gender roles and more positive attitudes towards domestic violence than male students ($p<0.05$).

Discussion: In conclusion, there is the relation between attitudes towards gender roles and domestic violence of nursing and paramedic students. In order that students can have positive attitudes towards domestic violence, inclusion of gender equality course in the curriculum has been recommended.

Keywords: Nursing students, paramedic students, domestic violence, gender roles attitudes

ÖZ

Amaç: Bu çalışmanın amacı, ülkemizin kuzeydoğusunda bir ilde okuyan hemşirelik ve acil tıp teknikerliği öğrencilerinin toplumsal cinsiyete ve aile içi şiddete yönelik tutumları arasındaki ilişkiyi belirlemektir.

Yöntemler: Tanımlayıcı, kesitsel bir desende araştırma yürütülmüştür. Araştırmanın evrenini 2014-2015 akademik yılında okuyan 205 hemşirelik ve acil tıp teknikerliği öğrencisi oluşturmuştur. Araştırmanın örneklemini ise 160 öğrenciden oluşmuştur. Veriler; Demografik Bilgi Formu, Aile İçi Şiddete Yönelik Tutum Ölçeği ve Toplumsal Cinsiyet Rollerine Yönelik Tutum Ölçeği kullanılarak toplanmıştır. Verinin analizinde, sayı, yüzde, aritmetik ortalama, standart sapma, medyan, 25. ve 75. çeyrek gibi tanımlayıcı istatistikler ile Spearman korelasyon analizi ve Mann Whitney U testi kullanılmıştır.

Bulgular: Öğrencilerin eşitlikçi cinsiyet rollerine ve aile içi şiddete yönelik olumlu tutumlara sahip oldukları belirlenmiştir. Spearman korelasyon analizine göre, öğrencilerin toplumsal cinsiyet rolleri ile aile içi şiddete yönelik tutumları arasında orta düzeyde anlamlı pozitif bir ilişki saptanmıştır ($r=0.670$, $p<0.05$). Kız öğrenciler, erkek öğrencilerden daha eşitlikçi cinsiyet rollerine ve aile içi şiddete yönelik daha olumlu tutumlara sahiptir ($p<0.05$).

Sonuç: Sonuç olarak, hemşirelik ve acil tıp teknikerliği öğrencilerinin toplumsal cinsiyet rolleri ile aile içi şiddete yönelik tutumları arasında ilişki olduğu belirlenmiştir. Öğrencilerin aile içi şiddete yönelik olumlu tutumlara sahip olabilmeleri için toplumsal cinsiyet eşitliği dersinin müfredata entegre edilmesi önerilmiştir.

Anahtar Kelimeler: Hemşirelik öğrencileri, acil tıp teknikerliği öğrencileri, aile içi şiddet, toplumsal cinsiyet rolleri.

INTRODUCTION

Domestic violence (DV) has been considered as an important public health problem in Turkey (1,2). DV has negative effects on women's health. As a result of domestic violence, women experience physical and mental health problems, such as injury, chronic pain, sexually transmitted diseases (3), depression, anxiety, somatization (4), posttraumatic stress disorder, thoughts of suicide (5), and insomnia (6). Women also exposed to violence during pregnancy have a higher incidence rate of abortions (7). Because of these health problems, women are admitted to health institutions and seeking help from health professionals. Health professionals equipped with the positive attitudes towards DV respond to DV more effectively (8).

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According to Zacharoula et al. (9), health care workers didn't have the required training and skills to cope with and manage violence against women in a professional manner. In another study (10), it was found that most health care workers lack fundamental knowledge about the issues surrounding DV itself and appropriate agencies that can offer help. They also lack skills in identifying and discussing this issue with patient. Therefore, integration of training and skills to cope with and manage domestic violence into nursing and other health care schools curriculum is most important. In addition, the lack of understanding about DV call for a closer look at undergraduate primary health care professionals' knowledge and attitude to deal with this serious public health issue (11).

There are many studies carried out for undergraduate students receiving education in the health field in Turkey. These studies pointed out that students' attitudes towards DV were negative and they were unable to recognize signs of violence against women (12-14). Of available studies, Bradbury-Jones and Broadhurst (15) reported that nursing and midwifery students lacked confidence in recognizing and responding to abuse and were concerned about the implications of this for their future practice as registered practitioners. Beccaria et al. (16) indicated that nursing students were under prepared to deal with intimate partner violence (IPV) in clinical practice. They had also limited and stereotypical beliefs regarding what constitutes IPV and who perpetrates it.

Some studies pointed out that the gender role attitudes of health care students were in line with traditional views, which affects adversely attitudes towards domestic violence (12,17,18). Natan et al. (19) found that normative beliefs, subjective norms, and behavioural beliefs affected nursing students' intention to screen women for DV. Coleman and Stith (20) measured nursing students' attitudes towards victims of DV. They found that the students with more egalitarian sex-role beliefs were more sympathetic to battered women than those students with more traditional sex-role attitudes. These results showed that there was a relation between attitudes towards gender roles and domestic violence. Therefore, the aim of this study is to assess the relation between attitudes towards gender roles and domestic violence of nursing and paramedic students in a country in the north east of our country.

METHODS

Design

A cross-sectional study was used to assess the relation between attitudes towards gender roles and domestic violence of nursing and paramedic students receiving education at state medical vocational high schools.

Sample

The study was carried out at a state medical vocational high school in Giresun province in 2014-2015 academic year. All of nursing and paramedic students (n=205) receiving education at 2nd, 3th, 4th grades in this school constituted the universe of the study, a sampling method wasn't used, and all of the students were attempted to contact. The

reason why any sampling method wasn't used is presence of one health vocational high school in Giresun province center. In the study, 160 students who agreed to participate in the study constituted 78% of the universe of the study. The school depends on the Directorate of National Ministry. Nursing and paramedic students have received professional education during four years. After they graduated, they can work as nurse and paramedic in all health institutions. They also can receive undergraduate education in nursing and paramedic departments of state universities if they gain the right of vertical passage.

Measures

Data were collected with the "Demographic Information Form" that includes the introductory information of the students such as age, gender, place of living, mother and father educational status and "The Attitudes Towards Domestic Violence Scale (ATDV)", and "The Gender Roles Attitudes Scale (GRA)".

The ATDV Scale was developed by Şahin and Dişsiz (21). The ATDV Scale which consists of 13 items and assesses interiorized labelling has four subscales; "The Normalization of Violence" (NV), "The Generalization of Violence" (GV), "The Causality of Violence" (CV) and "The Hiding of Violence" (HV). The items of the Likert scale are rated as "absolutely disagree" (1 point), "disagree" (2 point), "undecided" (3 point), "agree" (4 point) and "completely agree" (5 point). The highest possible score from the scale was 65 and the lowest was 13. The increase in the score indicates that the students had positive attitudes towards domestic violence. The instrument's total Cronbach alpha internal consistency coefficient was found to be 0.72.

GRA was developed by Zeyneloğlu and Terzioğlu (22). The GRA Scale which consists of 38 items and assesses interiorized labelling has five subscales; "Equalitarian Gender Role" (EGR), "Female Gender Role" (FGR), "Marriage Gender Role" (MGR1), "Traditional Gender Role" (TGR) and "Male Gender Role" (MGR2). The egalitarian attitude items of the Likert scale are rated as "absolutely disagree" (1 point), "disagree" (2 point), "undecided" (3 point), "agree" (4 point) and "completely agree" (5 point). The traditional attitudes items of the Scale are rated inversely. The highest possible score from the scale was 190 and the lowest was 38. The higher scores from the GRA Scale indicated that the students had more egalitarian attitudes towards gender roles. The instrument's total Cronbach alpha internal consistency coefficient was found to be 0.92.

Data Collection

The data was collected during theoretical courses in the academic spring term. Official written permission was received from national education directorate and school management before starting the study. Then the students were informed about the study, and data collection forms were implemented to the students, who voluntarily agreed to participate in the study, in the classes. The implementation of data collection forms lasted for about 15-20 minutes. First-year students have been excluded from the study because all department in the school receive coeducation in the first year, not separating to departments yet.

Statistical Analysis

The Statistical Package for Social Sciences (SPSS, Chicago, IL) for Windows version 16.0 was used for data entry and analysis. Descriptive statistics such as number, percentage, mean, standard deviation, median, 25th quarter and 75th quarter were used to summarize data. The variables didn't exhibit normal distribution according to Kolmogorov Smirnov test. Spearman's correlation analysis was performed to determine the relationship between students' gender roles attitudes and attitudes towards domestic violence. Mann Whitney U test was used to determine effect of gender on gender roles attitudes and attitudes towards domestic violence, and statistical significance was accepted as $p < 0.05$ for the test.

Ethical Considerations

Written consent was obtained from the director of the school. The study was conducted according to the ethical guidelines set out in the Declaration of Helsinki. Written consent was received from the students' parents before questionnaire forms being applied. Verbal consent was received from the students themselves after written consent was received from students' parents. All participants were informed of the purpose and design of the study. Participation in the study was voluntary.

RESULTS

Average of age of the students participated in the study is 16.73 ± 0.82 . As shown in Table 1, 67.5% of the students are females, 77.5% of those have nuclear family structure and 74.4% of those have been living in the country. Fathers of almost half of the students (46.9%) have educational level of high school or over, mothers of only 25.6% of the students have educational level of high school or over. While mothers of 78.8% of the students don't working in any job, fathers of 15.6% of students don't working in any job.

Table 1. Demographic Characteristics of Sample (n=160).

		N	Percentage
Gender	Female	108	67.5
	Male	52	32.5
Family type	Nuclear	124	77.5
	Large	36	22.5
Place of living	Country	119	74.4
	Town	34	21.2
	Village	7	4.4
Mother educational status	< high school	119	74.4
	≥ high school	41	25.6
Mother working status	Working	34	21.2
	Not working	126	78.8
Father educational level	< high school	85	53.1
	≥ high school	75	46.9
Father working status	Working	135	84.4
	Not working	25	15.6
Marital status of parents	Married	151	94.4
	Divorced/single parent	9	5.6

Median scores obtained from GRA and ATDV scales have been shown in Table 2. The students' total GRA median score is 146.50. EGR median scores of the students are 36.00, FGR median scores of those are 25.00, MGR1 median scores of those are 35.00, TGR median scores of those are 27.00, MGR2 median scores of those are 23.00. The students' total ATDV median score is 54.00. NV median scores of the students are 22.00, GV median scores of those are 13.00, CV median scores of those are 11.00, HV median scores of those are 8.00.

According to Pearson correlation analysis (Table 3); a positive correlation was found between gender roles and those including hiding of violence ($r=0.415$, $p=0.000$), causality of violence ($r=0.280$, $p=0.000$), generalisation of violence ($r=0.621$, $p=0.000$), normalization of violence ($r=0.711$, $p=0.000$). On the other hand, a positive correlation was found between domestic violence attitude and those including male gender role ($r=0.661$, $p=0.000$), traditional

Table 2. Mean Scores of Gender Roles Attitudes Scale and Attitudes Towards Domestic Violence Scale.

	X±SD	Median	25th Quarter	75th Quarter
Gender Roles Attitudes Scale				
Equalitarian gender role	34.81±5.62	36.00	32.00	39.00
Female gender role	24.96±4.99	25.00	22.00	28.00
Marriage gender role	33.93±5.64	35.00	31.00	38.00
Traditional gender role	26.54±6.06	27.00	22.00	30.00
Male gender role	22.86±5.10	23.00	20.00	27.00
Total gender roles attitudes	143.12±20.98	146.50	131.00	158.00
Attitudes Towards Domestic Violence Scale				
The normalization of violence	21.35±4.13	22.00	20.00	25.00
The generalization of violence	12.66±2.66	13.00	12.00	15.00
The causality of violence	10.74±2.61	11.00	9.00	12.00
The hiding violence	7.21±2.52	8.00	6.00	10.00
Total score	51.97±9.50	54.00	47.00	58.75

Table 3. The Relationship Between Students' Gender Roles Attitudes and Attitudes Towards Domestic Violence.

Attitudes Towards Domestic Violence**		Gender Roles Attitudes***					
		MGR2	TGR	MGR1	FGR	EGR	Total score ¹
HV	r	0.468	0.324	0.271	0.260	0.272	0.415
	p	0.000	0.000	0.001	0.001	0.001	0.000
CV	r	0.339	0.222	0.280	0.087	0.139	0.280
	p	0.000	0.005	0.000	0.271	0.080	0.000
GV	r	0.599	0.441	0.604	0.251	0.467	0.621
	p	0.000	0.000	0.000	0.001	0.000	0.000
NV	r	0.635	0.553	0.636	0.431	0.459	0.711
	p	0.000	0.000	0.000	0.000	0.000	0.000
Total score	r	0.661	0.511	0.594	0.351	0.440	0.670
	p	0.000	0.000	0.000	0.000	0.000	0.000

*P<0.01 level of significance.

**NV: Normalization of Violence, GV: Generalization of Violence, CV: Causality of Violence, HV: Hiding of Violence.

***EGR: Egalitarian Gender Role, FGR: Female Gender Role, MGR1: Marriage Gender Role, TGR: Traditional Gender Role and MGR2: Male Gender Role.

gender role(r=0.511, p=0.000), gender role in marriage(r=0.594, p=0.000), female gender role (r=0.351, p=0.000), and egalitarian gender role(r=0.440, p=0.000). As the scores from the GRA Scale increased, the scores from the ATDV Scale increased. These results showed that nursing and paramedic students who reported having traditional gender roles had negative attitudes towards domestic violence. Graphic 1 shows the relation between gender roles attitudes and attitudes towards domestic violence.

As shown in Table 4, there was statistically significant difference in attitudes towards gender roles (z=7.911, p=0.002) and domestic violence (z=4.340, p=0.000) according to gender.

Table 4. Scores of GRA and ATDV According to Gender.

	Female	Male	Test value	P value
	X±SD	X±SD		
Gender roles attitudes¹				
EGR	36.81±3.97	30.65±6.27	6.214	0.000
FGR	26.28±4.25	22.21±5.31	4.702	0.000
MGR1	36.27±3.35	29.07±6.31	7.134	0.000
TGR	28.72±4.57	22.01±6.31	6.623	0.000
MGR2	24.42±3.69	19.63±6.06	5.125	0.000
Total score	152.53±13.59	123.60±20.23	7.911	0.000
Attitudes towards domestic violence**				
NV	22.84±2.25	18.25±5.28	5.703	0.000
GV	13.32±1.75	11.30±3.57	3.454	0.001
CV	10.95±2.38	10.30±3.01	1.752	0.080
HV	7.53±2.26	6.53±2.91	1.866	0.062
Total score	54.65±6.17	46.40±12.45	4.340	0.000

*EGR: Egalitarian Gender Role, FGR: Female Gender Role, MGR1: Marriage Gender Role, TGR: Traditional Gender Role and MGR2: Male Gender Role.

**NV: Normalization of Violence, GV: Generalization of Violence, CV: Causality of Violence, HV: Hiding of Violence.

DISCUSSION

The first findings obtained in our study point out that mean scores of GRA Scale of the students are 143.12 ± 20.98. In the studies assessing gender roles attitudes of nursing students, mean scores of GRA Scale of the students were determined respectively as 104.76 ± 12.67 and 102.65 ± 9.92 (23,24). According to the results of the study, it is seen that the scores obtained from the scale are lower than those of the individuals of our sample. Similar results with our study were obtained in another study of which sample is constituted of nursing and medical students, investigating gender attitudes of university students (25). It was determined that while the students have traditional views regarding work life and marriage, they have egalitarian views regarding social life and family life. Nevertheless, in a study, the mean scores of GRA Scale of the health science students including paramedic students were 112.42 ± 13.94 (26), 113.38 ± 15.21 for nursing students, and 119.81 ± 11.43 for paramedic students. In same study, a significantly higher mean total score was found in paramedic students. In line with these results, nursing and paramedic students in this study can be said to have egalitarian gender roles.

Another important finding of our study is that students' attitudes towards domestic violence is at a good level, even not at above the average, that is to say, at desirable level. While mean scores of the students participating in our study, for attitudes towards domestic violence, are as 51.97 ± 9.50; those were found as 25.23 ± 8.75 in the study of Tufan-Koçak et al. (13) in which the same scale was used. The students were determined to have traditional views in the study in which Kaplan et al. (12) investigated nursing students' professional roles towards domestic violence and domestic violence against women. In the studies of Kanbay et al. (17) and Karabulutlu (18), it was found that nursing students had negative attitudes towards domestic violence. When viewing the results of the studies in related literature, it is seen that nursing and paramedic students participating in this study have positive attitudes towards domestic violence.

According to the study of Beccaria et al. (16), nursing students had limited and stereotypical beliefs regarding what constitutes domestic

violence and who perpetrates it. They were also under prepared to deal with violence cases in clinical practice. In another study (27), it was found that nursing students were unfamiliar with the characteristics of abuse, screening questions and demand patterns for specific intervention. They did not identify their own Professional role. Nursing students experienced lack of the confidence in recognizing and responding to abuse, and felt in insufficiently prepared to deal with DV (15). Apart from these studies, Gerber and Tan (28) determined that nursing students have very positive attitudes towards domestic violence and abused women. As a result of these studies, it can be said that the knowledge and attitudes of the health science students are negative in general. However, the students involved in our study have more positive attitudes.

Another important finding of our study is that students' gender roles attitudes affected their attitudes towards domestic violence. Domestic violence against women in recent years is defined as a gender-based violence (29-31). Patriarchal gender role is one of the factors influencing attitudes towards intimate partner violence, and patriarchal belief is a risk of accepting intimate partner violence (32). In a Turkish study, male college students who had more favorable attitudes toward patriarchy viewed wife beating as more acceptable and blamed women for eliciting the violence (33). The attitudes towards domestic violence of the students are negative as a result of the traditional structure of community. In other words, nursing and paramedic students have equalitarian gender roles, view violence against women as unacceptable.

Final finding obtained in our study is that the students' gender roles attitudes and attitudes towards domestic violence are affected of their genders. Likewise, in a study in which gender roles of two hundred and thirty six university students including nursing students were investigated, it was determined that male students had more traditional views than female ones in the fields such as working life, social life, marriage and family life (34). In a study performed by Saçan et al. (35) to determine gender roles attitudes of a vocational high school and a health high school students, males were determined to have more traditional gender roles than females. In a review study, it was seen that nursing students' gender roles attitudes wasn't affected of their genders (23). Thus, we can say in line with findings of our study that gender is an important variable affecting gender roles attitudes.

STUDY LIMITATIONS

There are three limitations in this study. The first limitation of the study is not being performed in a broad sampling. Since the study was performed with students studying in a medical vocational high school in Giresun province center, study findings can be considered as limited. Therefore the results can not be generalized to all health professions students studying in medical vocational high school. The second limitation of the study is that the gender roles attitudes and attitudes towards domestic violence of nursing and paramedic students were not compared. The last limitation of the study is that gender distribution among nursing and paramedic students was unknown. In this study, gender affected the attitudes of students. For these reason, to reveal the association between gender and nursing or paramedicine is important.

CONCLUSION

Assessment of gender roles attitudes and attitudes towards domestic violence of nursing and paramedic students receiving education at state medical vocational high school, and determination of whether gender affects these attitudes and whether a relationship exists between gender roles attitudes and attitudes towards domestic violence were intended in our study. It was determined in our study that nursing and paramedic students have equalitarian gender roles attitudes and their gender roles attitudes and genders affected attitudes towards domestic violence. These students studying in the field of health will begin to work as health professionals after completing their educations and will give care services to people from both genders. They can be more effective in identification of violence cases, providing necessary support, treatment and rehabilitation for women exposed to violence, and they can manage these traumatic experiences more effectively if they have positive gender roles attitudes.

It might be recommended that the knowledge level about DV and attitude towards DV of health care students should be evaluated. Their gender roles attitudes and the effect of GRA on identification and management of DV should be assessed. Also, health care students should be necessarily given gender equality course and domestic violence course.

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