

Reflections of Female Domination in the Profession over the Nursing Strength: Turkey Sample

Nuriye Buyukkayaci Duman

Hitit University, School of Health Çorum
Turkey

Abstract

Today, nursing is a profession still dominated by women all over the world and in Turkey. In this sense; a society's views of womankind and socio-cultural status of women in that society make up strong and weak sides of the nursing profession. In fact, the need for nursing profession from birth to death makes strong the profession at any rate. However; it is known in the studies conducted that members of the nursing profession rarely consider themselves strong. It may be argued that one of the most important reasons of this finding is such attributions as "weakness and incapacity" attributed to women by the social perspectives on gender.

Key Words: Womankind, Nursing, Strength

1. Introduction

When the historical development of women is examined, it is interesting that they have always been in an existence-struggle 'I am' and have always been incapable of using the strength compared to men; which - undoubtedly- has always affected the nursing profession still regarded as a profession of women today. The present study planned under this argument will discuss the strength of women in the world and in Turkey throughout the history and its reflections over the nursing profession.

1.1. Turkish Women throughout the history and their Power Relations

Throughout the history, inequality between women and men has been one of the basic theories of the social life up to today. Historian Thomson emphasizes that matriarchal race were dominant during the hunting and collecting era of humanity of ancient times but later patriarchal race predominated when agricultural production era started. Hunting became men's job while collecting became women's job. The status of women was negatively affected by the separation of home and work-place. Women were withdrawn from the society into family and lost their status whereas men were driven out of family and rose their status higher (Altuğ, 1997).

Central Asian Turks lived in a democratic and egalitarian society structure in which social functions of nomadic life styles were handed over between the genders. The Orkhon Inscriptions of 7th century mentions Turkish women with respect. Birth of girls in ancient Turkish families used to be seen as a happy event unlike some other tribes. Besides, some women used to pray God to give them daughters. If the Khan was alone in diplomatic talks, the representative(s) of other side were not received by Khan until both Khan and Khatun together received the representative(s). Women were always with their husbands in times of war, political meetings and social relations. Girls used to fight against those who wanted to marry them and did not marry those beaten by them (Uyer, 1997).

The changes of life style occurred when the Turkish society evolved from nomadic life style into settled life style and the effects of the traditions of the communities were felt while the Turkish society moved to Anatolia; which shook the status of women. Women were not different from a sheep herd in the Pre-Islamic Arabian societies. A man was allowed to marry as many women as he liked and to bury his daughter alive. On the other hand; Islam obliges marriage and limits the number of wives. In case of a divorce; man is obliged by Islam to pay alimony. Wives have the right of possession yet the right to use that possession is given to husband. It is seen that women of early Islamic era were employed as teachers, poets, preachers and even soldiers.

However; the effect of Iranians upon Muslim women was so huge that women were oppressed to wear veils, to stay in homes and thus were banned from social activities. National religion of Iran, Zoroastrianism and misinterpretation of Islamic rules which diverted people from sublime and genuine religious rules resulted in wrong practices and caused women to lose an important portion of the rights obtained from the ancestors (Ellis, 1995).

Until recently, the problems of women have been investigated in terms of legal rights given to women and the regional and educational differences in the use of these legal rights have been analyzed. Yet, it is impossible to talk about only one problem of women in Turkish society. For example; it is a fact that a woman who works in rural area unpaid and a woman who works in public office in cities have a common problem resulting from being woman as well as they have different problems in terms of the degree to use their legal rights. Improvement of women's status in the Turkish society started with the Rescript of Gülhane (1839) which approved that civil rights were equal for everybody regardless of race, religion and gender. In 1869; girls were accepted to formal education. The Declaration of Constitutional Monarchy in 1908 considered education of women necessary. A group of women were allowed to be observer in the Parliament. Issues of marriage, polygamy and divorce were fiercely discussed in the Parliament but no solution was attained. Turkish women did their best and more in the World War I going beyond the social rules and boundaries.

They themselves fought in the frontline during the Turkish War of Independence. Turkish women who fought in the frontline took their fighting character seized in the patriarchal period back. Now, there are women officers in the Turkish army. With the foundation of the Turkish Republic, women rights were discussed under the movement of social reforms but it is not soon that did the change occur. With the legal regulation of Civil Code accepted after the abolishment of Sharia Law; women were granted legal rights in 1926. In 1930, Turkish women were entitled the right to vote and the right to be candidate in the local elections. In 1934, the right to be candidate for the Parliament followed. Polygamy was banned and women were given the right to equal divorce. 18 women parliament members were elected in the 1937 election. Marriage became valid not with a religious marriage but with a civil marriage and age limit was required in the marriages. Women became legal inheritors with equal right of possession and heritage rights. They were allowed to work and get the equal payment but if the husband conceded -which was abolished in 1990- and gender discrimination was finally terminated. In this sense; the Civil Code was accepted as a revolution that promoted the status of women (Ülker, 1997).

During the pre-republican era (before the Republic of Turkey); educational and working opportunities of the women in Turkey were extremely limited, they were one of the other spouses (even one of those concubines), they did not have the right to vote and the right to hold an office, they were ignored in population census, they did not have the right to heritage, they worked in fields and villages, they led an isolated life style in cities and they were left to their main role, child-birth. Undoubtedly, the Republican Era (after the Republic of Turkey) entitled women important rights. However, today's situation shows that there is much to do. The first population census in which women were counted was performed in 1927 and the second one in 1935 and population census was continued routinely in this manner (Akin, & Aslan, 2001).

When the statistics are investigated, women started higher education in 1935-1936 academic year for the first time. The rate of female academicians in the universities reached to 36% in 2001-2002 academic year; which is a positive result. When we analyzed the participation of the working women in the decision-processes of spending their incomes; 37.6% of the working women decided how to use their income alone. 52.4% made decisions related to spending their incomes with others. Unfortunately; 9.9% of the working women did not participate in decision-processes of spending their incomes. When we analyzed the distributions of the reactions of the women against domestic violence; 39.2% of the women considered it right to be beaten by their husbands. Again; 16.3% of the women in Turkey considered it right to be beaten by their husbands if they refused sexual intercourse (Dökmen, 2004).

Lack of democratic and open relation in the family system may lead to confusions, disorganizations and chaos; in the case of which use of force may turn into violence and may reduce self-esteem. On the other hand; power is generally shared by adult members of the family and children who participate in decision-making in the healthy families. Sharing power brings the success in the attainment of objectives and in the meeting of the needs of the family members.

If the fact that family is structured by power and by authority is rejected, the interventions will be inappropriate. Urgent situations to be solved will create stress on the family members without healthy decision-making ability. Unhealthy behaviors can be easily altered using the power of the family members with power to change.

Tasks of the State in the empowerment of women (General Directorate of Women's Status and Problems of Prime Ministry of Turkish Republic 2001; Dökmen, 2004) were as follows:

- The way for political organizations and non-governmental organizations should be paved.
- Legal obligation to employ female personnel at a certain rate should be put into force.
- The necessary measures should be taken so that women can get education.
- Legal obligation to appoint female administrators and candidates for political and social organizations at a certain rate should be put into force.
- Legal regulations and administrative measures should be made in order to prevent gender discrimination against women at workplaces.
- Education should be laicized and role of religion in determining social relations should be prevented in order to minimize the negative effects of religion on women.
- Enforcement and implementation of legal reforms regarding violence against women should be watched closely and social measures should be taken and women's shelters should be opened.

As a result; women become stronger and freer as they get rid of the dominance and umbrella of men. The most important two conditions in the women's freedom are enlightenment of women and the change of men's understanding of women; which dates back to history. Women and men are components of the same society. Unless their perspectives for each other change, no alterations are seen in the roles they have adopted. The fact that women who make up at least 50 % of the society are composed of those who lack self confidence, cannot make free decisions and are dependent will not only downgrade that society but also lead to an unhealthy social structure (Turkish Population and Health Survey, 2008).

2. The Relation between Nursing and Strength

It is an undeniable fact that nurses are the luckiest group in terms of having and using the strength because members of all age of the society need nursing services everywhere. Nurses, holding a big importance in building healthy societies, may be said to have big power. However; it is known that nurses rarely consider themselves strong; in which women dominant nature of nursing and its not being considered as a profession and other obstructive factors play a key role (Sungurlu, 1992).

Nurses should first understand the strength in order to use it. It should be understood that strength is a part of reality to be used under working conditions. It is recommended that nurses should know how to develop strength suitable for work place in order to hold it and should use it in order to build strong nurses. Although solutions were found for some of the problems of nursing, many and new problems occur in the course of keeping pace with the developing information age. For example; nurses tell that they do not have power and responsibility because legal authorization for the solution of the problems is absent (Ulusoy, 1993).

A nurse who wants satisfaction with her job should first feel strong. To do so, she should ask herself the following questions and should evaluate herself: "How much strength do I have?", "How can I change the decreasing factors of my strength?", "What are my own obstacles?", "What is the source of my strength?", "How much can I succeed?". During the evaluation process; these questions should also be emphasized with the following questions: "How and to what extend have I been affecting the society?", "Do we reach our objectives?", "Does the nursing have control over its own scope and practices?" in short "how are we affected by being strong or weak?". A nurse should study what and where the strength is; how it is used or how the patients are affected by the way the strength is used in order to use the strength (Velioğlu, 1982).

Opinions that are obtained in the studies about the weakness of the nursing are divided into two groups. Weakness is related to character and personality of the nurse and the interventions should be in a way to change the behaviors. The structure of the institution affects weakness of the nurse and interventions should be in a way to influence the strength of the nurse in the profession.

Studies on strength in nursing field are very limited in Turkey. However; there are studies that demonstrate that job satisfaction is not at the desired level, job quitting is common, organizational commitment is low and motivation is poor; which is related to improper use of the strength.

Low motivation may be seen due to fact that manager nurses do not use proper strength appropriate for the workers and institutions. Manager nurses who are one of the components that make nursing services effective should understand and use strength. It is essential to understand and to use strength effectively in order to reinforce a successful relation of organization and management and to reinforce the workers (Duygulu, 2001).

Edmunds and Scott draw attention to some points that reinforce the position of the nurses who want to use strength and make the following recommendations:

- a) Know well those with whom you work together
- b) Get support from an expert for your plans
- c) Find different sources to provide work satisfaction. Obtain professional commitment of those stronger than you
- d) Nurse should first ask herself “what is my strength?”
- e) Demand for the sources in order to reach your objectives because having sources is important.
- f) Let your work be known. Get an active role in the institution. Publish what you do in press.
- g) Develop yourself in a field of which you are capable and you are trained. Make yourself to be known by everybody in this field. Make yourself somebody to whom everybody should consult (Bahçecik, & Koca, 2000; Korkmaz, 2001).

There are some criteria for the nursing to be strong. These criteria are as follows: nursing should be regarded as a profession, education should cover a certain period, the profession should provide the service that society needs, the profession should functionally be independent, the nursing professionals should have commitment, there should be professional sociality in nursing and membership of a professional association should be attained.

It should be based on a theory for a job to be a profession. As the knowledge store is increased, the job equally becomes a profession. Continuous research in a profession increases knowledge level. Yet, researching in nursing is something new but not enough. With the master degree programs started in 1960s at the nursing schools in Turkey, researching in nursing was brought to agenda. However; the results of the researches have not been conveyed to the practice enough due to educational problems and other difficulties and therefore these studies are not capable enough to direct the service. Also; it is observed that nurses cannot spare enough time for the nursing researches due to their intense and heavy working conditions (Bahçecik, & Koca, 2000; Korkmaz, 2001). Today, there are different basic educational levels in nursing. These are nursing education of vocational health high schools (secondary education), nursing school of associate degree programs and nursing education of undergraduate degree programs. In 1985, health colleges were shut down and were substituted with vocational health high schools (secondary education) and nursing school of associate degree programs (2 years).

In 1996, nursing school of associate degree programs (2 years) were substituted with vocational health schools of undergraduate degree (4 years). When strength profiles of nursing is analyzed in terms of educational levels; it is seen that nurses who have lower educational graduation in nursing are more dependent while performing tasks, function using a traditional woman role, have poor professional consciousness and professional responsibility, start the job at an early age, are passive, serve as an assistant personnel, experience high withdrawals and have no expectation of promotion and opportunity. It may still be argued that rate of withdrawal from nursing profession is high among the nurses who graduated from vocational health high schools (secondary education) and these nurses who constituted the biggest part of the nursing personnel are highly dependent while performing tasks and undergo poor economic conditions and professional problems (overtime working, kindergarten, vacation). As for the nurses who graduate from nursing school of associate degree programs, it may be suggested that they are semi-dependent while performing tasks, are active professionals but have limited ability to make decisions, remain in the profession for a long time, have a better professional consciousness, are inquisitive at the beginning of the nursing profession and their economical status are better.

It may be said that nurses who graduate from nursing education of undergraduate degree programs use their functions independently, are active, participate in decision-making mechanism as they obtain experience, have a perfect professional consciousness, adopt team spirit, start the profession at adult age and remain in the profession for a long time, speak foreign languages, are inquisitive, want to be promoted and publish academic studies. Nurses who take graduate education get self-realization, produce original knowledge and philosophy, participate in professional activities and are members of an association, are role models, are policy makers and direct the team. As seen; strength of the nursing profession emerges differently at different educational levels.

The third criterion presupposes that prestige of the nursing profession will increase in the society as its quality increases. In Turkey, it is a reality that nursing profession do not meet the health needs of the society exactly yet.

Another criterion, functional independency of the profession, means that workers should adjust, perform and control their behaviors freely. Control comes from inside the worker in the developed professions; that is to say that members of a profession use self-control. These kinds of professions have powerful institutions to affect laws and regulations. It is very important for the nurses to participate in organizational and managerial responsibilities while health services are planned and implemented.

Another criterion that makes nursing a profession and gives it power is professional commitment. Professional commitment in nursing has always been poor. Many nurses quit the profession after marriage or adapt themselves to the status quo in the face of problems.

The last criterion of professionalization is sociability and membership of a professional association. Sociability is the identification of members of the profession with the society, culture and fate. The fact that nursing is generally isolated from the society, passive, introvert and has a giving characteristic makes nursing profession obligatory; which is an outcome of the traditional culture. Nurses do not sufficiently participate in social activities in which all other health care personnel participate at a high rate. Nurses should create a collective professional strength instead of traditional roles and should use it for the sake of humanity (Korkmaz, 2001).

2.1. Strength of Nurse

2.1.1. Knowledge Strength: One of the factors that determine professionalism is the quality of education and teaching. Profession becomes strong with information equipment. A profession based on scientific foundations expands its information border thanks to the researches continuously performed. That practice should be governed in line with the results of the scientific researches of the nurses is important in decreasing the cost of the health services. At the same time; knowledge one possesses is a power source in the professional sense. However; nurses are supposed to have acquired the abilities to use the knowledge in the most appropriate way.

2.1.2. Strength to Change: As emphasized by International Council of Nurses; nurses serve individuals, their families and societies everywhere. One of the biggest strength sources of the nurses who work with humans is the total number of the people that nurses can affect. Nurses have a big strength as they help people give meaning to their lives, to revise and to reconstruct their past experiences.

2.1.2. Autonomy Strength: It is recommended that nurses should be more interested in health policy making processes in their institutions and should participate in shaping the future of health care. Nurses should take over responsibility in the case that others may intervene care which is their field. Nurses may perform actions based on information and evidence by using their autonomy within their responsibilities while they perform their dependent and independent functions. The autonomous area is that the nurses implement the nursing process during care and -in this sense- they intervene together with the patients on their behalf. It is necessary for the nurse to have acquired autonomy while helping the patients get their autonomy.

2.1.3. Communication Strength with Patients: Patient-nurse interaction is the most important area of care; the importance of which has mostly been ignored. But, the positive effects of the correct language used by the nurses on the patients are known. Reflections of the effects of the strength over the interaction bring positive benefits for nurse-patient relation as well as for the institution. Nurses hold a key position in the team because they uninterruptedly serve for 24 hours for the patients and are accessible; which is undoubtedly an undeniable strength area for them. But, many nurses consider this situation as their misery rather than strength. However, nurses are needed to change this point of view, to evaluate and protect their fields.

Nurses who are aware that they use strength have enforcement, persuasion, order, control and love. Orlando emphasizes that correct understanding of the patients and meeting their needs with an appropriate interaction is instructive, constructive and satisfactory not only for the patients but also for the nurses (Korkmaz, 2001). It is necessary to know nurses' roles (care giver role, decision maker role, protector and advocator role and counselor role) and functions in order to understand the strength of the nurses.

Conclusion

It depends on many factors (such as standardized educational level, institutionally explained task definitions and restructuring of their working conditions) for the nursing to be a stronger profession. Besides; we are of the opinion that improving socio-cultural levels of the women in the society will render nursing which is a female dominant profession stronger.

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