Volume 3, Issue 10, 2025

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

LIVED EXPERIENCES OF MEN FACING NURSING STEREOTYPES IN LAHORE, PAKISTAN: A PHENOMENOLOGICAL INQUIRY

Bushra Parveen[*1], Razia Afzal[2]

[*1,2]*Head Nurse, Government Teaching Hospital, Shahdra, Lahore, Pakistan*

[*1]m.raffay2017@gmail.com, [2]khanrazia595@gmail.com

DOI: https://doi.org/10.5281/zenodo.17972084

Keywords

Male nurses, Gender stereotypes, Lived experiences, Phenomenology, Pakistan

Article History

Received: 18 October 2025
Accepted: 30 November 2025
Published: 18 December 2025

Copyright @Author

Corresponding Author: *
Bushra Parveen

Abstract

Background: *Nursing is widely stereotyped as a low-status, female-dominated profession requiring limited education and autonomy. In Pakistan, such gendered perceptions are strongly shaped by cultural norms, often placing male nurses at social and professional disadvantage. Although the number of men entering nursing is increasing, their experiences of stereotyping and marginalization remain insufficiently explored.*

Aim: *This phenomenological inquiry aimed to explore the lived experiences of men facing nursing stereotypes in Lahore, Pakistan, focusing on how male registered nurses perceive and navigate gender-based challenges within healthcare settings and society.*

Methods: *A qualitative descriptive phenomenological design was adopted. Seventeen male registered nurses were purposively selected from three teaching hospitals in Lahore: General Hospital, Services Hospital, and Jinnah Hospital. Data were collected through semi-structured interviews and analyzed using Colaizzi's phenomenological method. The COREQ checklist guided qualitative reporting.*

Results: *Three themes emerged: stigma associated with men in nursing, resilience and coping strategies used by male nurses, and perspectives on the future role of men in the nursing profession in Lahore.*

Conclusion: *Male nurses experienced both acceptance and discrimination. Despite stereotyping and workplace challenges, they demonstrated resilience and a strong desire for professional recognition and social respect.*

INTRODUCTION

Nursing as a profession has long been shaped by powerful social images and stereotypes that influence how nurses are perceived by the public and how they construct their professional identity. Globally, nursing is often portrayed as a feminine, subordinate, and low-status occupation, despite its complex knowledge base, ethical responsibility, and clinical autonomy (Hoeve et al., 2014; Morales et al., 2022). These stereotypes not only undermine the professional image of nursing but also reinforce gendered expectations that marginalize men who choose nursing as a career. Historically, men have played important roles in nursing; however, their contributions were gradually obscured as nursing became socially framed as "women's work" (Mackintosh, 1997). Such entrenched perceptions continue to shape contemporary attitudes toward male nurses across diverse cultural contexts.

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

Existing international literature highlights that men who enter nursing often do so while negotiating social stigma, questions about masculinity, and limited societal acceptance. Studies from Ghana, Iran, Saudi Arabia, and other regions reveal that male nurses are frequently stereotyped, face role strain, and experience discrimination within both professional environments and wider society, yet they also demonstrate resilience and strong professional commitment (Appiah et al., 2021; Banakhar et al., 2021; Zamanzadeh et al., 2013). These experiences influence motivation, job satisfaction, and retention, while simultaneously shaping how male nurses redefine caring, professionalism, and gender norms within healthcare. Qualitative phenomenological research has proven particularly effective in capturing such lived experiences and the meanings individuals attach to them (Creswell & Creswell, 2018; Salvador et al., 2022).

In Pakistan, and specifically in Lahore, nursing remains strongly feminized and socially undervalued, making the experiences of male nurses especially complex and under-researched. Cultural constructions of masculinity, social status, and occupational prestige further intensify the stereotypes faced by men in nursing, often affecting their professional identity and social belonging. Despite a gradual increase in male enrollment in nursing programs, empirical evidence exploring how male nurses experience, interpret, and respond to these stereotypes is scarce. Therefore, this phenomenological inquiry seeks to explore the lived experiences of men facing nursing stereotypes in Lahore, Pakistan, contributing context-specific insights to the global discourse on gender, professional identity, and nursing practice.

Materials and Methods

Research Design

A qualitative descriptive phenomenological design was adopted to explore the lived experiences of men facing nursing stereotypes in Lahore, Pakistan. Descriptive phenomenology focuses on understanding how individuals experience a phenomenon in their everyday lives, emphasizing rich descriptions of meanings rather than theory generation. This approach was considered appropriate to capture male registered nurses' perceptions of professional identity, stereotyping, and social positioning within a female-dominated profession.

Setting and Sampling

The study was conducted in three major public-sector teaching hospitals in Lahore: General Hospital, Services Hospital, and Jinnah Hospital. Seventeen male registered nurses were purposively selected based on the following criteria: (1) currently working as registered nurses in the selected hospitals; (2) having a minimum of two years of clinical experience; (3) willingness to share personal experiences; and (4) ability to communicate effectively in Urdu or English. Purposive sampling enabled the selection of participants with direct and meaningful exposure to the phenomenon under investigation. Written informed consent was obtained from all participants, and no withdrawals occurred during the study.

Data Collection

Data were collected through in-depth, semi-structured interviews conducted between mutually agreed times, either before or after duty hours. Interviews lasted approximately 30–45 minutes and were conducted in locations convenient to participants, ensuring privacy and comfort. All interviews were audio-recorded with permission, supplemented by field notes to capture non-verbal cues and contextual observations. The interview guide was pilot-tested with two male nurses who were not included in the final sample. To minimize researcher bias, bracketing was practiced throughout data collection.

Semi-Structured Interview Guide

Could you please share some background information about yourself (e.g., age, education, years of experience, current role)?

How do you describe your identity and role as a male nurse working in Lahore?

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

What are your perceptions about men entering and working in the nursing profession?
Can you describe any situations in which you experienced stereotyping, discrimination, or other challenges because you are a male nurse?
How would you describe the work environment in your healthcare facility?
How do you usually cope with or manage unfavorable or stressful situations at work?
In what ways does your workplace support or fail to support men in the nursing profession?
Have you observed any issues related to gender diversity or inclusivity for men in nursing? If yes, please explain.
What measures or interventions, if any, have been implemented to address challenges faced by male nurses?
How do you personally support or encourage other men who are working in or considering nursing as a profession?
In what ways have your experiences as a male nurse influenced your personal life and professional development?
What are your future career plans within or beyond the nursing profession?
What message or final thoughts would you like to share regarding men in nursing?
How do you envision the role and status of men in nursing in Lahore and Pakistan in the coming years?

Data Analysis

Data analysis followed Colaizzi's seven-step phenomenological method. This involved repeated reading of transcripts for familiarization, extraction of significant statements, formulation of meanings, clustering of meanings into themes, development of an exhaustive description, identification of the fundamental structure of the phenomenon, and participant validation of findings. This systematic process ensured that the analysis remained grounded in participants' lived experiences.

Scientific Rigor

Scientific rigor was ensured using the criteria of credibility, dependability, confirmability, and transferability. Credibility was enhanced through prolonged engagement, member checking, and peer debriefing. Dependability and confirmability were supported through detailed documentation, reflexive journaling, and maintenance of an audit trail. Transferability was facilitated by providing thick descriptions of the study context and participants. Reporting followed the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist.

Ethical Consideration

All participants provided written informed consent and were assured of confidentiality, anonymity, and the right to withdraw at any stage. Ethical principles outlined in the Declaration of Helsinki were strictly followed throughout the study.

Table 1. Major themes, meaning, theme clusters, and keywords.

Keywords/Phrases		Theme Clusters	Major Themes	Meaning
Gender gap Gender disparity Indifferences He-man	Only for females Failed doctors Stereotyping Indifferent Stigma	Gender stereotyping		
Pseudo-doctors Not for men Female work	Female dominating Trouble-makers Misbehaving	Nursing is for females	**The stigma of Men in Nursing**	This theme downplays the idea that men in the predominantly female nursing profession have a wide range of deep issues.

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

Conflict makers Misconceptions Intimate touch Homosexuals Mischief-makers	Rude behavior Misinterpretations Sexual harassment Macho man Malicious Subclass	Male nurses are failed doctors		
Stronger Overtime Masculinity Extra shifts Braver Adversaries Rising up Withstanding problems Realization COVID-19 Pandemic Better person	Instincts Hardworking Workplace violence Challenges Navigation Commitment Bullying Reflection Perseverance Determination Zeal Professionalism Strong	Masculine instinct Committed in rendering extra shifts Stronger and braver to face adversaries	**The "Murses": Male nurse rising above the challenges**	This theme highlights the ways in which male nurses successfully navigate the unique hurdles they face while providing care to patients in a variety of settings.
Leadership Sense of purpose Role model Career break Management Social learning Love for nursing Futuristic Education Practice Research Change agent Spear headers	Breaking norms Punjab' health vision Helping hand Career opportunities Creativity Innovativeness Contemporary New ideas Contribution Administration Brotherhood	Breaking the stereotyping and be a role model Vast career opportunity Helping hand in achieving Punjab's Health Vision	**The future of male nurses in Pakistan**	This illustrates how male nurses may aid in the development of the nursing profession in a way that is in line with the Punjab's health Vision reform agenda.

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

Results

Three major themes emerged from the analysis of the lived experiences of male registered nurses working in public-sector teaching hospitals in Lahore, Punjab. These themes were derived from multiple interconnected theme clusters that reflected participants' daily professional and social encounters. The three overarching themes were: (1) The stigma of men in nursing, (2) "The Murses": male nurses rising above the challenges, and (3) The future of male nursing in Lahore, Punjab. Table 1 presents a summary of the key phrases, theme clusters, major themes, and their operational meanings.

3.1. Theme 1: The Stigma of Men in Nursing

The first major theme, "The stigma of men in nursing," captures the deeply rooted societal and professional misconceptions faced by male nurses in Lahore. Participants described how working in a predominantly female profession exposed them to stereotyping, social exclusion, and devaluation of their professional identity. Three theme clusters emerged under this theme: gender stereotyping, nursing is for females, and male nurses are failed doctors.

3.1.1. Gender Stereotyping

Gender stereotyping reflected participants' experiences of being judged and labeled based on culturally constructed notions of masculinity. Male nurses reported being perceived as socially deviant, rude, or unsuitable for caregiving roles, often without any personal interaction.

"People already make assumptions before knowing us. They think male nurses are aggressive or abnormal. Some even question our masculinity just because we chose nursing." (P12)

3.1.2. Nursing Is for Females

Participants commonly encountered the belief that nursing is exclusively a women's profession. This perception was frequently expressed by patients and their families, who preferred female nurses for care delivery.

"Many times, patients or attendants directly ask for a female nurse. They believe men do not belong in this profession, especially in bedside care." (P7)

3.1.3. Male Nurses Are Failed Doctors

Another recurring misconception was that male nurses were unsuccessful medical school applicants. Participants reported that this narrative undermined their professional credibility and competence.

"Some people think we are nurses because we couldn't become doctors. It hurts because nursing is a conscious choice, not a failure." (P15)

3.2. Theme 2: "The Murses": Male Nurses Rising Above the Challenges

The second theme, "The Murses: male nurses rising above the challenges," highlights how participants demonstrated resilience, professionalism, and determination in response to stigma and adversity. The term "Murses" was used by participants to describe their distinct identity within a female-dominated profession. Three theme clusters emerged: masculine instinct, commitment to rendering extra shifts, and stronger and braver to face adversaries.

3.2.1. Masculine Instinct

Participants described drawing upon personal strength, self-reflection, and emotional control to manage stressful and hostile situations.

"Being a man in nursing has taught me patience and maturity. I've learned how to respond calmly, even in situations where we are provoked or misunderstood." (P3)

3.2.2. Committed to Rendering Extra Shifts

Male nurses reported a strong sense of responsibility, particularly during emergencies and crises such as the COVID-19 pandemic. Many emphasized their willingness to work extended hours and take on additional responsibilities.

"During COVID-19, we stayed back for extra shifts without hesitation. We knew the system needed us, and we stepped up." (P10)

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

3.2.3. Stronger and Braver to Face Adversaries

Despite facing discrimination, bullying, and workplace challenges, participants remained committed to their profession. They viewed nursing as a source of pride and personal growth.

"Every challenge made me stronger. I remind myself that being a nurse is an honor, and I am proud of what I do." (P5)

3.3. Theme 3: The Future of Male Nursing in Lahore, Punjab

The third theme, "The future of male nursing in Lahore, Punjab," reflects participants' optimism regarding the evolving role of men in nursing and their contribution to health system strengthening. Three theme clusters emerged: breaking stereotypes and being role models, vast career opportunities, and contributing to Punjab's health system reform.

3.3.1. Breaking Stereotypes and Being Role Models

Participants expressed a strong desire to challenge prevailing stereotypes and inspire younger men to consider nursing as a respectable and meaningful career.

"If young boys see us succeeding and respected as nurses, they will realize that nursing is not about gender, but about service." (P14)

3.3.2. Vast Career Opportunities

Male nurses recognized nursing as a profession offering diverse career pathways, including clinical specialization, education, management, and research.

"Nursing gives opportunities in many areas. It is not limited to bedside care; you can grow professionally in many directions." (P6)

3.3.3. Contributing to Punjab's Health System Reform

Participants viewed themselves as essential contributors to improving healthcare delivery in Punjab, particularly through workforce strengthening and inclusive practices.

"The health system in Punjab needs committed professionals. Male nurses can play a vital role if given equal respect and opportunities." (P9)

Discussion

This phenomenological inquiry provides an in-depth understanding of the lived experiences of male registered nurses in Lahore, Punjab, highlighting how gendered stereotypes, professional challenges, and future aspirations shape their nursing identities. Guided by Colaizzi's phenomenological framework, the findings reflect participants' authentic meanings and interpretations of their experiences, remaining grounded in their narratives while allowing common patterns to emerge across accounts (Colaizzi, 1978). The methodological rigor of this study, including pilot-tested interviews and transparent reporting, strengthens the credibility and trustworthiness of the findings and aligns with established qualitative standards (Dikko, 2016; Tong et al., 2007).

The first major theme, the stigma of men in nursing, resonates strongly with international evidence demonstrating how nursing continues to be socially constructed as feminine work, marginalizing men who enter the profession. Participants' experiences of gender stereotyping, being labeled as "failed doctors," and facing patient resistance mirror findings reported in diverse cultural contexts, where male nurses' competence and intentions are frequently questioned (Brown, 2009; McAllister & Brien, 2020). The perception of nursing as a female-only profession, as reported by participants in Lahore, is consistent with studies showing patients' preference for female nurses, particularly in intimate care situations (Adeyemi-Adelanwa et al., 2016). Moreover, concerns related to sexualized interpretations of male nurses' touch highlight how masculinity intersects with caregiving, reinforcing suspicion and moral scrutiny around male presence in bedside nursing (Harding et al., 2008). These findings underscore how deeply entrenched social norms continue to influence professional interactions and public trust.

The second theme, "The Murses": male nurses rising above the challenges, illustrates participants' resilience, adaptability, and professional commitment despite ongoing adversity. Similar to qualitative studies conducted

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

in other healthcare systems, male nurses in Lahore reported drawing upon inner strength, self-reflection, and perseverance to cope with workplace discrimination and violence (Salvador et al., 2021; Salvador, 2022). The willingness of male nurses to render extra shifts, particularly during crises such as the COVID-19 pandemic, reflects a strong sense of duty and aligns with evidence that nurses often respond to systemic gaps by overextending themselves to maintain patient care (McAllister & Brien, 2020). Experiences of workplace violence and bullying reported by participants further echo global concerns regarding nurses' safety, emphasizing the need for institutional policies that address gender-based vulnerabilities in healthcare settings (Salvador et al., 2021).

The third theme, the future of male nursing in Lahore, Punjab, highlights participants' optimism and vision for a more inclusive nursing profession. Male nurses perceived themselves as potential role models capable of challenging stereotypes and reshaping public perceptions of nursing. This aligns with literature suggesting that increased visibility and leadership of men in nursing can contribute to redefining masculinities and promoting gender diversity within the profession (Brown, 2009). Participants' recognition of diverse career opportunities in nursing and their desire to contribute to health system strengthening reflect broader discussions on workforce development and professionalization in healthcare systems (Almalki et al., 2011). Such aspirations suggest that supporting male nurses through equitable policies, professional development, and public awareness initiatives may enhance retention and improve the overall image of nursing in Pakistan.

Conclusion

Male registered nurses in Lahore continue to face persistent gender-based stereotypes and workplace challenges; therefore, targeted institutional policies, gender-sensitive training, and public awareness initiatives are essential to promote inclusivity and professional equity in nursing. Strengthening mentorship, leadership opportunities, and protective workplace mechanisms will not only support male nurses but also contribute to a more resilient and effective healthcare workforce in Punjab.

REFERENCES

Adeyemi-Adelanwa, O., Barton-Gooden, A., Dawkins, P., & Lindo, J. L. M. (2016). Attitudes of patients towards being cared for by male nurses in a Jamaican hospital. Applied Nursing Research, 29, 140–143. https://doi.org/10.1016/j.apnr.2015.06.015.

Almalki, M., FitzGerald, G., & Clark, M. (2011). The nursing profession in Saudi Arabia: An overview. International Nursing Review, 58(3), 304–311. https://doi.org/10.1111/j.1466-7657.2011.00890.x

Appiah, S., Appiah, E. O., & Lamptey, V. N. L. (2021). Experiences and motivations of male nurses in a tertiary hospital in Ghana. SAGE Open Nursing, 7, 23779608211044598. https://doi.org/10.1177/23779608211044598.

Banakhar, M., Bamohrez, M., Alhaddad, R., et al. (2021). The journey of Saudi male nurses studying within the nursing profession: A qualitative study. Nursing Reports, 11(4), 832–846. https://doi.org/10.3390/nursrep11040078.

Brown, B. (2009). Men in nursing: Re-evaluating masculinities, re-evaluating gender. Contemporary Nurse, 33(2), 120–129. https://doi.org/10.5172/conu.2009.33.2.120.

Colaizzi, P. F. (1978). Psychological research as the phenomenologist views it. In R. S. Valle & M. King (Eds.), Existential phenomenological alternatives for psychology (pp. 48–71). Oxford University Press.

Creswell, J. W., & Creswell, J. D. (2018). Research design: Qualitative, quantitative, and mixed methods approaches (5th ed.). Sage Publications.

Frontier in Medical & Health Research

ISSN: (e) 3007-1607 (p) 3007-1593

Dikko, M. (2016). Establishing construct validity and reliability: Pilot testing of a qualitative interview for research. The Qualitative Report, 21(3), 521–528. https://doi.org/10.46743/2160-3715/2016.2243.

Harding, T., North, N., & Perkins, R. (2008). Sexualizing men's touch: Male nurses and the use of intimate touch in clinical practice. Research and Theory for Nursing Practice, 22(2), 88–102.

Hoeve, Y., Jansen, G., & Roodbol, P. (2014). The nursing profession: Public image, self-concept and professional identity. A discussion paper. Journal of Advanced Nursing, 70(2), 295–309. https://doi.org/10.1111/jan.12177.

Mackintosh, C. (1997). A historical study of men in nursing. Journal of Advanced Nursing, 26(2), 232–236. https://doi.org/10.1046/j.1365-2648.1997.1997026232.x

McAllister, M., & Brien, D. L. (2020). Paradoxes in nurses' identity, culture and image: The shadow side of nursing. Routledge. https://doi.org/10.4324/9781351033428

Morales, T. C., Pérez, R. M., Hernández, A. M., & Ramírez, F. C. (2022). Current stereotypes associated with nursing and nursing professionals: An integrative review. International Journal of Environmental Research and Public Health, 19(13), 7640. https://doi.org/10.3390/ijerph19137640.

Salvador, J. T. (2022). 'Triple-A: Acquaint, analyse and act': Insights of nurse educators towards workplace violence in Saudi Arabia. Journal of Nursing Management, 30(6), 1811–1822. https://doi.org/10.1111/jonm.13799

Salvador, J. T., & Alqahtani, F. M. (2020). The phenomenon of aging: The adaptation of Filipino elderly. Activities, Adaptation & Aging, 44(4), 309–326. https://doi.org/10.1080/01924788.2019.1692466

Salvador, J. T., Al-Madani, M. M., Al-Hussien, A. M., et al. (2022). Revisiting the roles of neonatal intensive care unit nurses towards vision 2030 of Saudi Arabia: A descriptive phenomenological study. Journal of Nursing Management, 30(7), 2906–2914. https://doi.org/10.1111/jonm.13637.

Salvador, J. T., Alqahtani, F. M., Madani, A. M. M., et al. (2021). Workplace violence among registered nurses in Saudi Arabia: A qualitative study. Nursing Open, 8(2), 766–775. https://doi.org/10.1002/nop2.679.

Tong, A., Sainsbury, P., & Craig, J. (2007). Consolidated criteria for reporting qualitative research (COREQ): A 32-item checklist for interviews and focus groups. International Journal for Quality in Health Care, 19(6), 349–357. https://doi.org/10.1093/intqhc/mzm042.

Zamanzadeh, V., Valizadeh, L., Negarandeh, R., Monadi, M., & Azadi, A. (2013). Factors influencing men entering the nursing profession, and understanding the challenges faced by them: Iranian and developed countries' perspectives. Nursing and Midwifery Studies, 2(2), 49–56. https://doi.org/10.5812/nms.12583