

Gender relations in professional education: challenges in the field of Nursing*

Relações de gênero na formação profissional: desafios no campo da enfermagem
Relaciones de género en la formación profesional: retos en el campo de la Enfermería

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Abstract

Objective: to understand nursing students' conception about the relationship between gender and professional education. **Methodology:** qualitative research, typified as exploratory-descriptive, carried out in a public institution of higher education in the countryside of the state of Paraíba with 16 students. The data were obtained through a semi-structured script and then analyzed using Bardin's Content Analysis. **Results:** the sexual division of labor, gender inequalities and situations of violence, such as the *Bropriating* phenomenon and the hypersexualization of the female body, were evidenced, in addition to the institutional challenges and the fragility of teachers in the deconstruction of gender relations during the undergraduate stage. **Conclusion:** the study evidences a situation of inequality between genders, emphasized by undergraduate students of the Nursing course, signaling the need for institutional rearrangement, as well as the sensitization of teachers and the academic community to offer an inclusive and equitable education, based on diversity.

Descriptors: Gender Perspective; Teaching; Students, Nursing; Universities; Sexism

Resumo

Objetivo: compreender a concepção dos estudantes de enfermagem sobre a relação entre gênero e formação profissional **Método:** pesquisa qualitativa do tipo descritiva exploratória, realizada em uma instituição pública de ensino superior, do interior do estado da Paraíba, com 16 estudantes. Os dados foram obtidos por meio de um roteiro semiestruturado e analisados pela Análise de Conteúdo de Bardin. **Resultados:** a divisão sexual do trabalho, as desigualdades de gênero e as situações de violência, como o fenômeno *Bropriating* e a hipersexualização do

corpo feminino, foram evidenciadas, além dos desafios institucionais e da fragilidade dos docentes na desconstrução das relações de gênero, durante a graduação. **Conclusão:** o estudo evidencia uma situação de desigualdade entre os gêneros, enfatizada pelos graduandos de enfermagem, sinalizando para a necessidade de rearranjo institucional, bem como a sensibilização dos docentes e da comunidade acadêmica para a oferta de uma educação inclusiva, igualitária, pautada na diversidade.

Descritores: Perspectiva de Gênero; Ensino; Estudantes de Enfermagem; Universidades; Sexismo

Resumen

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Descriptors: Gender Perspective; Teaching; Students, Nursing; Universities; Sexism

Introduction

Nursing was consolidated through the work of pioneering women and continues to be considered a mostly female profession. Since then, care has been related to the characteristics of empathy, sensitivity, attention and submission, which are attributed and naturalized to women, leading to a sexual division of labor in this profession.¹

As a result, this stereotyped image of Nursing interferes with the roles that men and women occupy within the profession, as well as in the field of care. When there is a sexual division, there are also obstacles in the exercise of the occupation, which consequently leads to inequalities in the development of functions, entailing demotivation, devaluation and the loss of professionals with diverse fundamental skills.²

As a result of this scenario, 87% of people who work in Nursing in Brazil are females. This percentage is explained by the fact that society attributes the workforce of women to the profession, which leads to the repetition of a historically rooted prejudice. It is therefore possible to observe this movement through the experiences of university students, since studies confirm the association of homosexuality with men who attend

the course, as well as the difficulty for male students to carry out practical activities in subjects considered feminized during their undergraduate studies.³⁻⁴

It is worth underlining that, although Nursing is predominantly made up of women, this aspect does not eliminate the presence of difficulties faced by them. They already have a history of submission in their lives, as they are considered less strong and capable in various aspects of society, which directly influences the achievement of changes and improvements.¹

In this context, since the university is seen as a place for socializing and training professionals and citizens, it was expected that stereotypes would not be perpetuated in the training of its students. Nevertheless, we can see a scenario in which these discriminatory behaviors are maintained and, consequently, there is an urgent need to break down these culturally naturalized constructions endorsed by the patriarchal system, which is still hegemonic in society, as well as to discuss gender relations and review curricula, valuing diversity and, therefore, mitigating the sexual divisions of professions.⁵

Thus, studying the relationship between gender and professional education is relevant in the scientific sphere, since understanding that Nursing, as a profession, is crossed by the gender perspective, allows us to consider that this element influences the training process. As a result, this research intends to provide more symmetrical reflections and actions between the genders in the teaching-learning process. In this sense, it is important to discuss the associations between gender relations and professional training. To this end, the objective is to understand nursing students' conception about the relationship between gender and professional education.

Methodology

This is a qualitative research, typified as exploratory-descriptive. The study population consisted of students of the Bachelor's Degree in Nursing from a public higher education institution located in a town in the state of Paraíba, Brazil. Students over 18 years of age, both males and females, actively enrolled in an undergraduate course were included in the research universe, with those who had suspended their course or were on sick or maternity leave at the time of the research being excluded.

The Bachelor's Degree in Nursing offered by this institution has a curriculum spread over 10 periods, which total a minimum training time of 5 years. The research participants were selected by drawing lots, based on the list of students from each period of the course, obtained from the coordination office. One female and one male student were selected for each period of the course, with the exception of those enrolled in the first and tenth periods of the course. This particularity is explained by the fact that the students are still in the process of adaptation and recognition in the first period; on the other hand, the students in the last period are in the final stages of their compulsory internships, which are generally carried out in other cities.

The collection of empirical material took place between April and May 2021, on previously scheduled dates and times, according to the availability of each participant, through contact via email or telephone call. Due to the restrictive social distancing measures in place because of the COVID-19 pandemic, the interviews were carried out through video calls via *Google Meet*, based on a script of semi-structured questions, and the Free and Informed Consent Form (FICF) was attached as an online form to a research management application.

The questions addressed to the participants were formulated in accordance with the research objectives, as follows: For you, is there a relationship between gender and nursing? How do you explain this relationship? Are there differences between men and women in the professional practice of Nursing? Have you ever witnessed situations in which these differences were evident? How did you feel about them? Tell us about the obstacles you face, as a woman/man, in terms of practicing Nursing during your undergraduate studies. In your opinion, are there situations provided by the degree that perpetuate these obstacles?

The results were analyzed using Bardin's Content Analysis,⁶ which proposes an in-depth interpretation of the messages obtained beyond the apparent discourse, organized into the following steps: Pre-analysis, Exploration of the material and Treatment of the results, inference and interpretation. During the first step, the collected material was read, which made it possible to construct the guiding ideas and select the speeches of each participant based on the proposed objectives. In the second step, the produced empirical material was explored by highlighting the recording units, selecting counting rules and

categories, in addition to determining the themes to be investigated. The last step was carried out through the interpretation of the speeches, defining the interferences and looking for what is hidden in the text and its real meaning.⁶

It should be noted that the development of this study was guided by Resolution nº 466/2012, issued by the Brazilian National Health Council, with the approval of the Ethics Committee through Opinion nº 4.629.358, on April 5, 2021. Participation was voluntary and ensured by the FICF, and the information collected during the interview was for the exclusive use of the researcher in charge, being used only for the purposes of the study, preserving the anonymity of the data and the participants, thus guaranteeing the confidentiality and privacy of the individuals. To this end, each student was identified with the letter S (student), followed by the letter M (male) or F (female), according to his/her self-declared gender during the interview and the numbering corresponding to the order of the interviews.

Results

The research consisted of 16 nursing students, 50% of whom were males and 50% females. The students were between 19 and 24 years old, which totaled 87.5%; 12.5% were between 25 and 30 years old, and the average age was approximately 22.6 years. Most came from the state of Rio Grande do Norte (43.8%), followed by the state of Paraíba (37.5%) and other states (18.7%).

Next, in order to analyze the material, the results were structured into a category called "Femininities and Masculinities: a look at professional education in Nursing", which was divided into two subcategories: "Between privileges and prejudices: gender inequalities in professional education" and "Gender constructions in the university setting: nursing students' perspectives".

Femininities and masculinities: a look at professional education in nursing

In the meantime, when asked about the relationship between gender and nursing, most participants referred to the association between the gender construction in society and its influence on the profession.

Nursing has as one of its pioneers a woman who was Florence; it also has intertwined the issue of nursing with care, where care itself is associated with the female figure. We observe this even within our homes, that care is usually determined to the woman, to the mother and not to the father [...]. (SM3)
Nursing is mainly composed of women [...] and our profession, I believe, that the fact that it is not valued, unfortunately, is because it is composed of women. (SF6)

The speeches made by SM3 and SF6 show the knowledge on the part of these participants about the sexual division that exists in society, where the role of women is directed towards domestic and unpaid care. Furthermore, the participants mention Nursing as a profession associated with the female figure and ingrained stigmas and stereotypes.

Between privileges and prejudices: gender inequalities in professional education

From the testimonies, we can see the impact of gender inequality in society and in the work process related to Nursing, as generators of devaluation and prejudice.

The reports [...] of the boys in relation to suffering prejudice for having chosen this area of activity, as if this diminished their masculinity. (SF16)
[...] Having a man within the nursing team becomes easier [...]. The man [...] is a more virile person, and he has more strength in relation to the woman. (SM5)
Because I'm a straight man, I'm privileged [...], but we see some situations where I'm putting myself in a speech situation in which I'm not affected by almost any situation of prejudice. Therefore, I think it's more a question of being able to build security for other people, with the Health users themselves feeling at ease. (SM13)
I think that when we go to the administrative area, we have a little prejudice that revolves around us being women, not having enough administrative ability [...] it's never easy for us, it's never easy in fact [...] For us, everything is more difficult. (SF16)

In light of the above, students SM5 and SM13 highlight the prejudice they experience when they choose a profession that is presumed to be for women, as if entering a type of training course that is mostly for women is something that interferes with their virility and self-affirmation of masculinity. Conversely, participant SF16 mentions that privileges attributed to men make it difficult to recognize women's ability and intelligence.

In addition to gender inequalities, other excerpts highlight the production of violence, specifically the eroticization of the profession.

*Procedures that require the patient to be naked [...] I think patients still confuse a little! The female nurse is there, a beautiful nurse, a hot nurse, that kind of thing [...]. I think these are the obstacles, these are situations of harassment. (SF10)
I believe that women don't have so much credibility [...] they have a little difficulty in imposing themselves, in being taken seriously. Within my experience [...] I have witnessed the nurse say one thing and the doctor say another, and what the female nurse said is correct, but what the male doctor said was taken into account. I think that even because he is a doctor, but also because of the male figure in this position that naturally exists, culturally exists. (SF8)
[...] I would imagine that some problems that I could face in my internship or some job would be the issue of harassment, getting paid less because of it, but as I'm a man, so I don't worry too much about that, because I know that won't happen [...] because I'm a man [...] I don't worry about these things about gender [...]. (SM9)*

The situation mentioned by the students refers to the devaluation of women in different areas, including situations of violence experienced on a daily basis, as reported by SF8. The process of hypersexualization of the female body and the devaluation of women's speech are also noticed, according to SF10. However, even in the face of these situations, there is a lack of interest on the part of male students in the importance of fighting for gender equality, since the system favors them, according to SM9.

Gender constructions in the university setting: nursing students' perspectives

Through students' testimonies, it is continually possible to infer that most refer to a scenario of little discussion in terms of gender in the university setting, a situation that perpetuates these inequalities.

*Today, as undergraduate, students we identify the problem, but we can't break it [...] we don't have guidance from the teachers themselves [...]. (SM3)
My class always had few men and there was a man who [...] the teacher of the subject put [...] always as the favorite of the class [...] when a girl said one thing and he said the same thing with different words, it was what he said that was accepted. (SF4)
[...] there are many people who still go through the undergraduate stage like this, with a lot of doubts and prejudices as well. (SF2)
I think people don't discuss this at the academic level, as these discussions are more punctual [...] we see this [inequalities] leaving the walls of the University, reaching the fields of work [...] reaching the levels of our major representatives [...] I think that this is not discussed in undergraduate courses and ends up going to our entire reality as Nursing. (SF4)*

I think the male student ends up losing [...] so the person who is receiving care creates even more obstacles and the teachers say "Oh, because he is a man! The patient has the right not to want to be cared for by a man.", but so he does not try to go deeper and talk about it. (SF10)

In light of these testimonies, we can see the fragility of the discussion on gender during academic training, where debates are specific and inequalities are perpetuated through conduct expressed by teachers who privilege the speech of male students over that of female students, i.e., a scenario that fosters gender culture.

Discussion

Since ancient times, society has established the social roles of women and men. From this perspective, women occupy a space of submission to men, performing domestic and reproductive care duties, based on practices learned and reinforced from childhood, during play, which perpetuates and strengthens the construction of stereotypes. All this domestication fosters an atmosphere of inequality, which is established over the years and continues to the current days, consolidated by a patriarchal and misogynistic culture, historically established in society.⁷

Throughout history, social tradition has alluded to women being responsible for caring for the home, family and husband, without pay or rights, while men were given the power to make political, religious, social and cultural decisions, situations that were legitimized by law.⁸ Thus, in this context, Nursing emerged based on the idea that women would have the natural conditions required to exercise care with mastery, through zeal, affection and docility, attributes that are part of existing stereotypes, where the idea of a profession always associated with the female figure.⁹

Nevertheless, Nursing is a rare global exception, where the theories and professional foundations were created, for the most part, by women, who are currently recognized as pioneers of the Science of Caring for others, such as, for example, Florence Nightingale, Ana Néri, Wanda de Aguiar Horta, among others. Accordingly, Nursing has established itself as a profession that provides women with a living wage and financial independence.⁹

However, even though nursing has been consolidated as a profession regulated by law, with a salary, it is still undervalued and invisible in society, as it devalues

women's work due to historically pre-established gender issues, where the care actions and the profession were/are attributed only to women.¹⁰

Consequently, in the field of Nursing, as it is considered a female profession, many men find it difficult to choose to enter this pathway, as portrayed in the testimonies of the surveyed students. They are often discriminated against, especially by other men, and questioned about their sexual orientation because they do not follow the hegemony present in society, failing to opt for careers considered masculinized.^{11*}

In the pertinent literature, it can be seen that men who enter this professional career are directed to management and leadership positions, where the best hierarchical positions are reserved, as well as to specialty positions that require greater physical effort and where they are valued for their characteristics of rationality, virility and strength, which are presumed to be inherent to men. This fact is often justified by the deep-rooted macho culture in which men are considered superior to women, whether in terms of physical or intellectual ability.¹² This data can be identified in some of the reports in this study, where one of the students puts himself in a superior position to women, when he refers to the attributes considered masculine and that, for this reason, there is a need for the presence of a man in the nursing team.

Thus, the recognition of the privileges granted to men by male students can be seen in the testimonies of this study. Nonetheless, while recognizing the situation, there is no in-depth reflection on gender inequality. Similarly, another study found a similar result when asked about gender relations, where men tend to be direct and less discursive, position that shows that men may be more aware of their privileges, although they do not want to lose them. That is why they continue to naturalize them as if they were intrinsic to the male condition. This attitude contributes to the maintenance and reproduction of patriarchal and sexist logic, acting in a more subtle and disguised way.¹³⁻¹⁴

Such privileges are imposed by heteronormativity, which makes men hypervalued and superior to women, labeled as incapable and fragile, and therefore they are socially unimportant.⁸ This is due to the process of feminization of the profession, where women are still undervalued for their work, even though they are part of the workforce. This aspect is due to the massive influx of women into the job market, accompanied by low pay and little social prestige.¹³⁻¹⁵

Furthermore, there is an inferiorization of jobs that are mostly held by women, such as Nursing. This scenario is the result of the relationship between capitalism and patriarchy, where women are allowed to perform labor that was previously not allowed, and are appropriated by capitalism, which manages the work process with devaluation, both in terms of pay and recognition.¹⁶

That said, we can see that the lack of recognition for women results in low employability or even difficulties in terms of establishing themselves at hierarchical levels in organizations, either because they are not appointed to administrative positions or because they deal with resistance to staying, due to the difficulty in terms of legitimizing their speeches,¹⁷ as can be noted in the testimonies of the participants in this study.

Corroborating these ideas, in another study, when interviewing the population served by Primary Care in the town of Duque de Caxias, it was found that most women showed apprehension when referring to the nurse's work in administrative activities. Although they were aware of the technical and scientific knowledge that these professionals possessed, the informants felt that nurses would not be suitable for management positions in the services. This shows that, although women have made progress and are becoming more qualified in their field of knowledge, there is still a prejudiced worldview in society regarding the professional abilities and competences of these social agents.¹⁸

Linked to this context, there is also the hypersexualization of women's bodies, constantly observed in the media, carnival costumes, art, photographs, cinema and advertisements, where they are always portrayed under the male gaze, which emphasizes sensual women and sex appeal. Thus, the majority of the Nursing staff is made up of women, causing them to become victims of violent situations, since stereotypes full of sensuality and sex appeal have been constructed, guided by the historically rooted patriarchal model of objectification and eroticization of women's bodies.¹⁹ These preconceptions often trigger situations of harassment and sexual harassment, which damages the relationship between patients and professionals and sets up a mistaken worldview. We observed that the testimony of one of the participants reproduces this same discourse in this research.

This fact is still seen in the media, which contributes to this popular imagination. Recently, in a note, the Federal Nursing Council (COFEN, as per its Portuguese acronym) spoke out against an actress who shared a photo in which she was wearing a “sexy nurse” costume, a situation that leads to the eroticization of the profession. COFEN called the attitude a disservice to women and stressed that the sexual connotation is unacceptable, given that Brazil is a highly sexist and violent country towards women. Furthermore, the note pointed out that 85% of the nursing professionals are females and that almost all of them have suffered some kind of harassment, which makes the attitude even more unfortunate, since this type of practice encourages female bodies to remain subordinate and machismo to continue to be reproduced within working practices, through the eroticization of the profession.^{14, 20}

Another similar situation of violence emphasized in the testimonies deals with the subordination of nursing professionals to physicians. Thus, even with technical knowledge and decision-making ability, nurses are submitted to physicians’ decisions, since their speeches become devalued in the care context. In this sense, it is urgent to emphasize that studies show that this conflict is real in their daily work, as a kind of professional competition. Nevertheless, it should be noted that, among the professions in the area of health, medicine holds the power over the others, a fact that is reinforced by the Medical Act,²¹ and also noticed in the testimony of one of the participants in this research.

In addition to the situations mentioned above, there is also the presence of sexist language in women’s daily lives, which happens in a trivialized and silent way in society, especially in sexist behaviors and attitudes, as identified in this study. The phenomenon evidenced here is called *Bropropriating*, a term in English used to define situations in which the woman exposes her idea and is not heard; however, the man appropriates the idea of female authorship, assumes the word, repeating exactly what was said, is heard and congratulated by the discourse. Such an event is characterized by the disregard of women’s protagonism and the annulment of the legitimacy of their speeches.²²

In view of the above, despite the achieved advances, it is understood that inequalities and gender-related violence continue to be perpetuated. There is still a wage gap, as well as discrimination and lack of protection at work for women, which hurts the right to equality and, consequently, acts as a violation of the dignity of the

person.²³ This situation is reported by a male student; however, there is a lack of knowledge, or lack of interest, about the importance of the struggle for gender equality. This indifference evidences the desire not to break with sexist practices and discourses, since there are no real intentions to change male privileges and the subordination of women, a scenario that, consequently, guarantees the maintenance of male domination and patriarchal practices.

The perception of this type of posture denotes the urgency of discussing and problematizing gender inequalities within the university context, so that thoughts and behaviors like these are not perpetuated in the future. This fragility may be related to the scarce discussions about gender relations in the university environment, which, as a place of social transformation, should be an environment for discussion, orientation and deconstruction of stereotypes; however, what is found is a social institution that reproduces the patriarchal model prevalent in society.²⁴

In this investigation, the students portray a reality that is still common. In this sense, a study in which the course plans unveil the absence of subjects that enable debates on gender and sexuality, reinforcing and reproducing the gender patterns that exist among academics, is pointed out.⁵

Accordingly, the reality is different in the campus where this research was carried out, since there are subjects that address gender discussions, albeit in a subtle way, namely: "Theoretical bases of Nursing in women's health", "Nursing in men's health" and "Women, health and diversity", which directly address gender inequalities. It is noteworthy that the subject "Women, health and diversity" is optional in the curriculum of the Bachelor's Degree in Nursing.

Continuing, in another testimony, a participant in this research emphasizes a scenario in which the gender relation interferes in the fields of work and institutional representations, such as, for example, the university itself. Research reveals that there is a late insertion of women in management positions in Higher Education and that they generally face difficulties related to recognition, performance and credibility at work. These confrontations take place mainly in the relationship with male colleagues, due to

the different ways mobilized not only to intimidate female managers and put the functions developed by them in the background, but also to doubt their competences to be in leadership positions.²⁵⁻²⁷

Furthermore, this lack of knowledge about gender relations on the part of teachers causes situations of gender violence in the classroom itself, as shown in the participant's testimony, where the *Bropriating* phenomenon is evident. For reasons such as this, the difficulties in terms of discussing gender in Universities are continuous, since these institutions are included in a patriarchal, sexist and misogynistic social model, which reproduces such values.⁹ In due time, it should be underlined that these institutions are absent from assuming the leading role they have in cultural and social transformation, and it is urgent to emphasize that there is a gap in the approach and discussion of this theme, presented in a limited way by teachers, given the cultural and social standard in which they are inserted.²⁸

The lack of guidance on the part of the teachers, exposed through the participant's testimony, can be explained by the fact that many teachers are afraid and insecure in terms of addressing this theme in the classroom. Such a posture can be justified by the absence of the appropriate training on the subject or even by the stigmas, prejudices and private convictions, which can cause resistance.²⁹

These situations are just some of the reflexes found due to social constructions of gender. The discourses portray difficulties faced by male students who entered a profession considered feminine by society, corroborating another study in which undergraduate students identified obstacles, especially in the area of Gynecology, as well as prejudice when relating nurses to homosexuality.⁴

In the meantime, some limitations of this study should be listed, as follows: with the COVID-19 pandemic, the research was carried out virtually, which limited the capture of participants' expressions and feelings to a factor; it is also restricted to a local scenario, located in a town in the countryside of the State of Paraíba, which presents its sociocultural and regional particularities and, therefore, subject to influences; furthermore, the excerpts from the listed testimonies reflect the subjectivities and individual interpretations of the study participants, which is why there is no definitive conclusion, but possibilities for the chain of conversations and productions on the

theme. Accordingly, it is suggested that the investigations be extended to other scenarios, in order to know other realities.

In view of this, it is pertinent that these gender stereotypes be deconstructed based on conversations and reflections on Nursing know-how. It is also important that the subjects, events and meetings broaden the view of the biological dimension, often dominant in health courses, and integrate possibilities for discussions based on the sociocultural conditions of the population and the professional training in force. As a contribution, it is believed that this research can enrich the considerations on the need to reformulate the pedagogical projects of the courses, based on their construction and their epistemological advances, as well as to encourage evaluations regarding the social practice of Nursing as a profession.

Conclusion

The results showed a situation of gender inequality associated with the female stereotype, which is perpetuated during the Undergraduate Nursing Course, so that the feminization process existing in this profession was investigated in this study. Situations of prejudice, violence and difficulties imposed by society on the female gender are posed by the students, revealing a prolonged unequal situation in different spheres. Nevertheless, the perception of these inequalities is mainly reported by female students, which confirms that male students still have a sexist and stereotyped view.

Furthermore, situations of institutional challenges were found in this study, such as, for example, the fragility of teachers in the deconstruction of gender inequalities, corroborating the perpetuation of the situation. Therefore, the results signal the urgent need to improve the preparation of teachers, in order to use the university setting as a place of transformation, as well as to combat stereotypes, contribute to and stimulate gender equality in society, through the achievement of the university triad.

References

1. Cleary M, West S, Arthur D, Kornhaber R, Hungerford C. Women in health academia: Power dynamics in nursing, higher education and research. *J Adv Nurs*. 2019;75(7):1371-3. doi: 10.1111/jan.13999

2. Carlsson M. Self-reported competence in female and male nursing students in the light of theories of hegemonic masculinity and femininity. *J Adv Nurs*. 2019;76(1):191-8. doi: 10.1111/jan.14220
3. World Health Organization (WHO). State of the world's nursing report - 2020 [Internet]. Geneva (CH): WHO; 2020 [cited 2022 Apr 23]. Available from: <https://www.who.int/publications/i/item/9789240003279>
4. Vidal PA, Queiros ES, Lima Junior ES. Discussões de gênero do enfermeiro no campo profissional. *Foco (Vila Velha)* [Internet]. 2023 Aug 17 [acesso em 2024 ago 20];16(8):e2443. Disponível em: <https://ojs.focopublicacoes.com.br/foco/article/view/2443>
5. Huggías S, Celeste Juncal L, Ximena Guerbi M. Breve análisis con perspectiva de género sobre la educación universitaria. *Trayectorias Univ*. 2022 sept 16;8(14):105. doi: 10.24215/24690090e105
6. Bardin L. Análise de conteúdo. Almedina: Edições 70; 2020.
7. Sales LEL, Faria BEM. A mulher no mercado de trabalho: um estudo de caso na empresa Maria Pinheiro. *Altus Ciênc*. 2022;14(14):182-202. doi: 10.5281/zenodo.6366137
8. Catani LO, Silva JB. Políticas públicas contra o machismo como instrumento viabilizador de reconhecimento e efetivação da cidadania feminina. *Rev Húmus* [Internet]. 2017 [acesso em 2022 abr 28];7(20). Disponível em: <http://periodicoeletronicos.ufma.br/index.php/revistahumus/article/view/6756>
9. Carmo KM, Silva EF, Lima MARM, Oliveira PS, Moura RF. Perfil da enfermagem brasileira sob a perspectiva de classe, gênero e raça/cor da pele. *CED*. 2024 mar 05;16(3):e3549-9. doi: 10.24215/24690090e105
10. Gugel SCR, Duarte CS, Lima APL. Valorização da enfermagem brasileira: analisando aspectos históricos e de gênero. *Nursing (São Paulo)*. 2020;23(264):3930-3. doi: 10.36489/nursing.2020v23i264p3930-3937
11. Santos LM. Male nursing practitioners and nursing educators: the relationship between childhood experience, social stigma, and social bias. *Int J Environ Res Public Health*. 2020 Jul 09;17(14):4959. doi: 10.3390/ijerph17144959
12. Nogueira CM, Passos RG. A divisão sociosexual e racial do trabalho no cenário de epidemia do COVID-19: considerações a partir de Heleieth Saffioti. *Cad CRH*. 2020;33:e020029. doi: 10.9771/ccrh.v33i0.36118
13. Silva MZ, Ames AC, Giordani MS. Discriminação salarial de gênero e a percepção dos agentes: análise na profissão de controller. *Rev Cat Ciênc Contáb*. 2020;19:1-18. doi: 10.16930/2237-766220202908
14. Voks DJ, Silva VV. A manutenção do patriarcado através da imagem de um novo homem na Revista Claudia (Década de 1990). *Fronteiras (Dourados)*;24(44):224-39. doi: 10.30612/frh.v24i44.16522
15. Macedo RM. Resistência e resignação: narrativas de gênero na escolha por enfermagem e pedagogia. *Cad Pesqui*. 2019;49(172):54-6. doi: 10.1590/198053145992
16. Silva GTR, Almeida DB, Oliveira NL, Laitano ADC, Santos VPFA, Queirós PJP. Estudos sobre a imagem das enfermeiras: cinco décadas entre a imagética e suas repercussões. *Esc Anna Nery*. 2020;24(4):e20200063. doi: 10.1590/2177-9465-EAN-2020-0063

17. Rodrigues Júnior EW, Rodrigues AC, Silva IAR, Ferreira GM. A inserção da mulher no mercado de trabalho na área da tecnologia. Rev Eletrônica Fac Invest Ciênc Tecnol [Internet]. 2021 [acesso em 2023 maio 20];3(1):1-17. Disponível em: <http://revista.institutoinvest.edu.br/index.php/revistainvest/article/view/32>
18. Ribeiro DFS, Gaspar DRFA, Santos LP, Silva MBT. The nurse's professional identity on the Primary Health Care Users perception. Rev Bras Enferm. 2022;75(3):e20200974. doi: 10.1590/0034-7167-2020-0974
19. Poiares IR, Ribeiro MB. Representação social da enfermeira no Brasil contemporâneo. Rev Vernáculo. 2019;44:10327. doi: 10.5380/rv.v0i44.60611
20. Conselho Federal de Enfermagem (COFEN). Erotização da Enfermagem é desserviço às mulheres e estimula violência sexual [Internet]. Brasília (DF): Conselho Federal de Enfermagem; 2021 [acesso em 2022 abr 28]. Disponível em: http://www.cofen.gov.br/erotizacao-da-enfermagem-e-desservico-as-mulheres-e-estimula-violencia-sexual_93068.html
21. Pursio K, Kankkunen P, Sanner-Stiehr E, Kvist T. Professional autonomy in nursing: an integrative review. J Nurs Manag. 2021;29(6):1565-77. doi: 10.1111/jonm.13282
22. Silva TC, Medeiros PM, Hanazaki N, Fonseca-Kruel VS, Hora JSL, Medeiros SG. The role of women in Brazilian ethnobiology: challenges and perspectives. J Ethnobiol Ethnomed. 2019;15(1):44. doi: 10.1186/s13002-019-0322-3
23. Cordeiro Neto AF, Guimarães I, Oliveira LL. Mulher no mercado de trabalho: ensino superior e construção de plano de carreira em João Pessoa. ReCaPe. 2022;12(1):54-81. doi: 10.23925/recape.v12i1.48035
24. Maito DC, Panúncio-Pinto MP, Severi FC, Vieira EM. Construção de diretrizes para orientar ações institucionais em casos de violência de gênero na universidade. Interface (Botucatu). 2019;23. doi: 10.1590/interface.180653
25. Corrêa RLT, Oliveira M. Mulheres gestoras universitárias: perfil e enfrentamentos (2010-2020). Cad CEDES. 2024;44(122):94-105. doi: 10.1590/CC271188
26. Bublitz S, Beck CLC, Silva RM, Sturbelle ICS. Perfil dos enfermeiros docentes atuantes em programas de pós-graduação "*stricto sensu*" de instituições públicas. Rev Enferm UFSM. 2019;9(e5):1-15. doi: 10.5902/2179769231556
27. Tait MM, Feltrin R, Souza G. Brecha de género en la ciencia en tiempos del COVID-19: una visión general de Brasil. Redes (Bernal). 2021;26(51). doi: 10.48160/18517072re51.49
28. Lima ACS, Alves MJH, Pereira EV, Pereira AP, Albuquerque GA, Belém JM. Gênero e sexualidade na formação de enfermeiros no ensino superior público brasileiro: estudo documental. Rev Enferm Cent-Oeste Min. 2021 jul 23;11. doi: 10.19175/recom.v11i0.3877
29. Rossi JPG, França FF. A metodologia WEBQUEST no contexto das questões de gênero: experiências de educadoras em debate. Rev Interfaces Educ. 2020;11(32):213-43. doi: 10.26514/inter.v11i32.4492

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