



Midwifery Education in Practice

Attitudes of midwifery and nursing students in a Turkish university toward lesbians and gay men and opinions about healthcare approaches

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ARTICLE INFO

Keywords:

Lesbian
Gay men
Health care
Midwifery students
Nursing students
Attitudes

ABSTRACT

Lesbians and gay men are subjected to negative attitudes and poor quality health care by midwives in the process of having children and by nurses in the process of receiving general health care services. Our aim was to investigate midwifery and nursing students' attitudes towards lesbians and gay men and their opinions about health care approaches displayed towards them. The study was designed as a cross-sectional and descriptive one and conducted in one midwifery and two nursing schools in a city in Turkey and comprised 1321 students. To assess the participants' attitudes, the Attitudes toward Lesbians and Gays (ATLG) Scale was used. To assess opinions about health care approaches, the students were asked open-ended questions. All the participating students' attitude scores were below the average and they exhibited negative attitudes towards lesbians and gays. While very few of the participants had positive views about health care given to, most of them either had negative views or did not have any opinions. The midwifery students' attitudes were more positive than were those of the nursing students. Students' health care approaches towards lesbians and gay men were insufficient and negative. Educators need to develop training programs, which can help students gain cultural awareness of the health care needs of lesbians and gay men in different cultures before they graduate.

1. Introduction

One of the reasons that lesbians and gays undergo inequality and discrimination is because health professionals have negative attitudes and prejudices toward them. Lesbians and gays suffer from significant health disparities in comparison to heterosexuals, and this inequality is closely associated with sexual and social stigmas (Bergeron and Senn, 2003; Hutchinson et al., 2006; United States Department of Health and Human Services and Agency for Healthcare Research and Quality, 2012; Carabez and Scott, 2016). The evidence shows that the negative attitudes of healthcare workers toward sexual minorities affect their utilization of healthcare services and patient-centered care (Chinn, 2013; Lim et al., 2014). Since they interact closely with patients, it is vital to investigate the attitudes of healthcare professionals toward lesbians and gays.

Although ethical principles in healthcare professions do not allow discrimination, physicians, nurses, and midwives, unfortunately, display negative or prejudiced attitudes toward lesbians and gays, especially in conservative countries (Gelbal and Duyan, 2006; Sakalli, 2006;

Yen et al., 2007; Kelley et al., 2008). In conservative countries such as Turkey, Taiwan, Africa's predominantly Muslim countries, nurses and midwives who have negative attitudes toward lesbians and gays can even be reluctant to give healthcare to lesbian and gay patients (Yen et al., 2007; Ireland, 2013). More specifically, inadequate training and more conservative religious values are both correlated with less acceptance and comfort with lesbian and gay patients (Wilson et al., 2014).

In Turkey, lesbians and gays are disadvantaged compared to other citizens. Turkey does not include any mention of lesbians and gays, in the civil code and does not legally recognize same-sex couples (LGBT rights is human rights, 2011). While there are no laws preventing same-sex relationships in Turkey, and concepts like individuality and freedom have been supported in recent years, religious and conservative lifestyles persist, and discrimination against lesbians and gays in the country is common (Gelbal and Duyan, 2006). Significant social attitudes toward lesbians and gays have emerged and, as a result, lesbians and gays continue to experience prejudice and restrictions in modern Turkish society (Yilmaz and Gocmen, 2015). It is almost

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<https://doi.org/10.1016/j.nepr.2017.11.018>

Received 21 November 2016; Received in revised form 27 November 2017; Accepted 27 November 2017

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impossible to conduct a survey of lesbians and gays in Turkey because it is difficult for them to disclose their sexual identity.

A study to determine the problems lesbians and gays face in Turkey identified that they were exposed to adverse experiences such as being removed from their homes, excluded from their circle of friends, dismissed, and exposed to physical violence. This survey reports 39% of lesbians and gays had to hide their sexual orientation from family, 18% from those at school, and 31% within business circles (Lambda Istanbul homosexual civil society initiative, 2006). Yilmaz and Gocmen's study (2015) reported that lesbians and gays were exposed to serious discrimination, even in the most basic areas of their lives.

In training healthcare workers, patient-centered care and evidence-based practice are fundamental ideals. In order to guide curriculum programming, gaps in education and practice must be understood. Midwifery and nursing education in Turkey has a holistic philosophy in which students are expected to serve their patients without any religious, language, gender, or racial discrimination (Heaslip and Ryden, 2013; Mckenna et al., 2014). However, there may be differences in the realization of this philosophy in the clinical settings. For example, lesbians are not satisfied with their healthcare services, due to the negative attitudes of healthcare professionals and their lack of understanding about lesbians needs or concerns (Hutchinson et al., 2006; Kitts, 2010; Michael, 2015; Yilmaz and Gocmen, 2015; Urwin and Whittaker, 2016). These persistent, unfavorable attitudes may be a sign that the healthcare concerns of lesbians and gays are not integrated into nursing and midwifery education or that healthcare workers have fewer encounters with lesbians and gays in their clinical practice. Unfortunately in Turkey, nursing and midwifery curriculum devotes little time and attention to how they approach this group of patients.

This study aimed to determine midwifery and nursing students' attitudes toward lesbians and gay men and to consider opinions about their healthcare in various settings. As researchers we are also conscious of using correct terminology and referred to recommended web sites such as the USA GLAAD media reference guide (<https://www.glaad.org/reference/lgbtq>) for assistance.

2. Background

Several studies demonstrate that healthcare professionals have prejudices against lesbians and gays and exhibit homophobic attitudes and a lack of knowledge (Hutchinson et al., 2006; Kitts, 2010; Dorsen, 2012; Michael, 2015). Lesbians and gays state that when they reveal their sexual identity, they are peeping, or subjected to inappropriate behaviors or insulting responses from healthcare professionals; others complain that their privacy is not protected (Wilton and Kaufmann, 2001; McNair, 2003; Eliason et al., 2010). Lesbians and gays who are willing to utilize healthcare services report that they feel uncomfortable by healthcare workers' prejudiced views (Albarran and Salmon, 2000; Yen et al., 2007; Yilmaz and Gocmen, 2015).

Studies conducted in both European and Islamic countries found that students medical and nursing exhibit negative attitudes toward lesbians and gays (Röndahl et al., 2004; Dinkel et al., 2007; Campo-Arias et al., 2010; Obedin-Maliver et al., 2011; Banwari et al., 2015; Guan et al., 2015; Papadaki et al., 2015; Lim and Hsu, 2016). With the gradual increase of lesbians and gays in society, and because healthcare professionals continue to have negative attitudes toward them, attention is being drawn to the integration of better healthcare for lesbians and gays into the nursing and midwifery curriculum. Furthermore, the issue of lesbian and gay health is being discussed among specialist midwives and nurses (Keepnews, 2011; Chinn, 2013).

While research on the evaluation of nursing students' attitudes toward lesbians and gays is available in countries such as Midwest USA (Eliason and Raheim, 2000; Dinkel et al., 2007), Sweden (Röndahl et al., 2004), Western Australia (Chapman et al., 2012), Southwest USA (Cornelius and Carrick, 2015), but in Turkey little research is available. In addition, research that evaluates midwifery students' attitudes

toward lesbians and gays is scarce. Otherwise, in the Turkish culture, attitudes about lesbians and gays have been explored in many studies, including Sakallı and Uğurlu (2001), Yildiz et al. (2003), Gelbal and Duyan (2006), and Cirakoglu (2006) in university students, and Mitrani (2008) among undergraduate students, teachers, police officers and medical doctors.

3. Method

3.1. Participants

The study was designed to be cross-sectional and descriptive. It was conducted with students in two nursing schools and in one midwifery school in a city in Turkey during the fall semester of 2014–2015. Nine out of 400 midwifery students and 70 out of 1000 nursing students who did not want to participate were excluded from the study. Therefore, the study included 1321 students (391 midwifery and 930 nursing students).

3.2. Measures

The personal information form included two sections (Yen et al., 2007; Röndahl, 2009; Guan et al., 2015). The first section contained questions about the participating students' age, gender, marital status, class, etc. In the second section, they were asked open-ended questions about their views on healthcare approaches such as “Have you ever met lesbian and gay patients during healthcare implementation in the hospital?” and “What would your approach toward lesbian and gay patients be when you have to meet their health care needs ? ?”

The Attitudes Toward Lesbians and Gay (ATLG) Scale, developed by Herek (1988), was used for the study. Cronbach's alpha reliability coefficient of the ATLG Scale was determined to be 0.80. The modified ATLG Scale was used to assess the attitudes of the participants regarding the lesbian and gay population. The scale was adapted to the Turkish language by Gelbal and Duyan (2006). The ATLG Scale consisted of 10 questions; five explored attitudes toward lesbian women (ATL subscale) and five attitudes toward gay men (ATG subscale). The ATLG Scale is measured using a 5 point Likert scale; scores range from 5 (strongly agree) to 1 (strongly disagree). The minimum possible score to be obtained from the ATLG scale is 10 and the maximum is 50 (5 and 25 from the ATG subscale and 5 and 25 from the ATL subscale, respectively). High scores refer to positive attitudes toward lesbians and gays low scores refer to negative attitudes toward lesbians and gays. Cronbach's alpha was 0.91, and it was 0.798 for the ATLG scale tested in Turkey by Gelbal and Duyan (2006). In our study, Cronbach's alpha value of the ATLG Scale was 0.86.

3.3. Data collection

After receiving the necessary permissions to conduct the study, the students were informed about the appropriate days and times for the research. Next, the students were informed of the purpose of the research and the researchers obtained their informed consent before the class started (after receiving permission from the relevant teaching staff).

Finally, the survey forms were distributed to the students who agreed to participate in the research. It took students about 10 min to fill in the questionnaires. The participants were told that: participation was voluntary, they should not write any personally identifiable information on the questionnaire, the collected data would be used for research purposes only, and their credentials would be kept strictly confidential.

3.4. Data analysis

For the statistical evaluation of the data obtained, the Statistical

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