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GENDER DISCRIMINATION IN NURSING EDUCATION: EXPERIENCES, DETERMINANTS, AND FUTURE DIRECTIONS

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ABSTRACT

Gender discrimination remains a persistent challenge in nursing education despite growing efforts to promote gender equality. Nursing students experience gender stereotypes, unequal clinical learning opportunities, and discriminatory attitudes from faculty, peers, and patients, which adversely affect their academic performance, psychological well-being, professional identity, and career satisfaction. This narrative review synthesizes evidence from major databases to examine the patterns, determinants, and consequences of gender discrimination among nursing students. The review indicates that male students commonly encounter stereotypes portraying nursing as a female profession and face exclusion from maternity-related clinical training, while female students continue to experience gender-role expectations and leadership barriers. Socio-cultural norms, institutional practices, and inadequate gender-sensitization initiatives contribute to these disparities. The findings underscore the need for gender-sensitive curricula, equitable clinical training opportunities, stronger anti-discrimination policies, and supportive learning environments to promote gender equity and inclusiveness in nursing education.

KEYWORDS: Gender discrimination, Nursing education, Nursing students, Gender bias, Clinical learning and Gender equality.

1. INTRODUCTION

Overview of Gender Discrimination

Gender discrimination refers to the unequal treatment or exclusion of individuals based on gender, restricting equal access to opportunities, resources, and rights because of socially

constructed gender roles and stereotypes (UN Women, 2024; World Health Organization [WHO], 2023). In nursing education, gender discrimination remains a persistent concern despite the profession's emphasis on equality and patient-centered care. Male nursing students frequently encounter stereotypes that nursing is a female profession, social stigma, and limited clinical exposure in maternity and obstetric settings, whereas female students may experience gender-role expectations, bias, harassment, and unequal leadership opportunities (O'Lynn, 2004; Meadus & Twomey, 2011; Kouta & Kaite, 2011; Prosen, 2022). Discriminatory attitudes from faculty, peers, patients, and healthcare professionals negatively affect students' self-confidence, academic performance, clinical competence, psychological well-being, professional identity, and career intentions (Cottingham et al., 2018; Rajacich et al., 2013; Stanley et al., 2016; Prosen, 2022). Addressing these inequities through gender-sensitive curricula, equal clinical learning opportunities, institutional anti-discrimination policies, and gender-sensitization programs is essential for fostering an inclusive educational environment and strengthening a competent, diverse, and equitable nursing workforce (WHO, 2023; International Council of Nurses [ICN], 2021; UN Women, 2024).

2. Gender and the Nursing Profession

The nursing profession has historically been shaped by traditional gender norms that associate caregiving, compassion, and nurturing with women, contributing to its identity as a predominantly female profession (Evans, 2004; Kouta & Kaite, 2011). Although the profession has become increasingly diverse, gender stereotypes continue to influence nursing education and career opportunities for both male and female students. Globally, women constitute approximately 90% of the nursing workforce, reinforcing the perception that nursing is primarily a women's profession (World Health Organization [WHO], 2020; International Council of Nurses [ICN], 2021). As a result, male nursing students frequently experience social stigma, gender stereotyping, questioning of their career choice, and restricted clinical exposure, particularly in maternity and obstetric settings (O'Lynn, 2004; Meadus & Twomey, 2011; Rajacich et al., 2013). Conversely, female nursing students and nurses continue to face gender-role expectations, underrepresentation in leadership and decision-making positions, workplace bias, and barriers to career advancement despite their numerical dominance in the profession (Cottingham et al., 2018; Prosen, 2022; WHO, 2023). Evidence further suggests that discriminatory attitudes from educators, peers, patients, and healthcare professionals negatively influence students' self-confidence, clinical competence, professional identity, academic achievement, and long-term career commitment (Stanley et

al., 2016; Cottingham et al., 2018; Prosen, 2022). Therefore, fostering gender-sensitive nursing curricula, ensuring equitable clinical learning opportunities, strengthening institutional anti-discrimination policies, and promoting equal leadership opportunities are essential for creating an inclusive nursing education system and developing a competent, diverse, and resilient nursing workforce (ICN, 2021; WHO, 2023; UN Women, 2024).

3. Importance of Studying Discrimination in Nursing Education

Understanding gender discrimination in nursing education is essential for promoting equity, improving educational quality, and developing a competent and diverse nursing workforce. Gender-based discrimination restricts equal access to learning opportunities, clinical experiences, and professional development, while adversely affecting students' academic performance, self-confidence, psychological well-being, and professional identity (Meadus & Twomey, 2011; Rajacich et al., 2013; Prosen, 2022). Despite increasing emphasis on gender equality, persistent stereotypes continue to shape nursing education. Male students commonly experience social stigma, prejudice, and limited participation in maternity and obstetric clinical placements, whereas female students may encounter gender-based harassment, unequal expectations, and barriers to leadership and career advancement (O'Lynn, 2004; Kouta & Kaite, 2011; Cottingham et al., 2018). These inequities not only compromise students' educational experiences but also reduce workforce diversity, hinder recruitment and retention, and exacerbate the global nursing shortage (World Health Organization [WHO], 2020; International Council of Nurses [ICN], 2021; WHO, 2023). Addressing gender discrimination through gender-sensitive curricula, equitable clinical training, supportive institutional policies, and faculty development is therefore essential for creating inclusive learning environments and advancing gender equality and quality nursing education (UNESCO, 2024; UN Women, 2024; WHO, 2023).

4. Global and Indian Context

Gender discrimination remains a persistent challenge in nursing education despite global efforts to promote gender equality. Nursing is still perceived as a female profession, with women comprising nearly 90% of the global nursing workforce (World Health Organization [WHO], 2020). Consequently, male nursing students often face stereotypes, social stigma, and restricted maternity clinical exposure, while female students may experience gender bias, harassment, and unequal expectations (O'Lynn, 2004; Meadus & Twomey, 2011; Prosen, 2022). These experiences adversely affect students' confidence, academic

performance, and professional identity (Cottingham et al., 2018). In India, evidence on gender discrimination among nursing students remains limited despite expanding nursing education. Further research is needed to inform gender-sensitive policies and create inclusive learning environments (Divya Raghavan et al., 2023).

5. Need for the Review

Despite increasing attention to gender equality in healthcare, evidence on gender discrimination in nursing education remains limited and fragmented, particularly in India (Prosen, 2022). Most studies focus on specific aspects such as male nursing students' experiences or workplace discrimination, with few providing a comprehensive understanding of discrimination among undergraduate nursing students. Synthesizing existing evidence is therefore essential to identify the prevalence, determinants, consequences, and research gaps related to gender discrimination. Such evidence can inform gender-sensitive curricula, inclusive clinical learning environments, and institutional policies that promote equity and strengthen nursing education and workforce development (World Health Organization [WHO], 2020; UNESCO, 2024; UN Women, 2024).

6. Objectives of the Review

1. To examine the experiences of gender discrimination among nursing students.
2. To identify determinants associated with gender discrimination in nursing education.
3. To review the consequences of gender discrimination on students' academic and professional development.
4. To highlight future directions for research, policy, and educational practice.

7. METHODOLOGY

This narrative review synthesized existing evidence on gender discrimination among nursing students, focusing on their experiences, determinants, consequences, and future directions. A comprehensive search of **PubMed, Scopus, CINAHL, Web of Science, and Google Scholar** was conducted using MeSH terms and keywords related to gender discrimination, nursing students, nursing education, clinical learning, and gender stereotypes. Peer-reviewed English-language studies published between **2004 and 2025** were included. Quantitative, qualitative, mixed-methods, and review studies involving undergraduate or postgraduate nursing students were considered, while studies on practicing nurses, editorials,

conference abstracts, dissertations, and duplicate or methodologically inadequate publications were excluded. Eligible studies were screened and synthesized narratively under themes related to gender discrimination experiences, determinants, consequences, and implications for nursing education and policy.

8. Concept of Gender Discrimination in Nursing Education Definition

Gender discrimination in nursing education refers to the unequal treatment or exclusion of nursing students based on gender, resulting in unequal access to educational opportunities, clinical training, academic resources, and professional development. It may occur through direct discrimination or indirectly through institutional practices, policies, and sociocultural norms that disadvantage particular gender groups (UN Women, 2024). In nursing education, discrimination can occur in classrooms, clinical placements, faculty–student interactions, peer relationships, evaluations, and patient care, undermining equity and inclusiveness (Prosen, 2022). The **World Health Organization (WHO, 2023)** identifies gender as a key social determinant influencing education and professional development. Consequently, gender discrimination adversely affects students' academic performance, psychological well-being, professional identity, career aspirations, and long-term commitment to the nursing profession (Cottingham et al., 2018; WHO, 2023).

9. Types of Gender Discrimination

Gender discrimination in nursing education occurs in multiple forms across academic and clinical settings. **Direct discrimination** involves explicit unequal treatment, such as restricting male students from maternity or obstetric clinical placements (O'Lynn, 2004). **Indirect discrimination** arises when institutional policies or practices unintentionally create unequal learning opportunities (Prosen, 2022). **Interpersonal discrimination** includes biased attitudes, harassment, or differential treatment by faculty, peers, patients, and healthcare professionals (Meadus & Twomey, 2011). **Structural discrimination** is reflected in organizational policies, curricula, and practices that reinforce gender inequalities (World Health Organization [WHO], 2020). **Implicit discrimination** results from unconscious gender biases that influence expectations, evaluations, and professional interactions (Cottingham et al., 2018).10.

Theoretical Perspectives

Several theories explain gender discrimination in nursing education. **Gender Role Theory** suggests that socially assigned roles portray nursing as a female profession, reinforcing stereotypes about men's suitability for care giving (Eagly, 1987). **Social Role Theory** argues that traditional gender-based occupational roles contribute to prejudice and stigma toward male nursing students (Eagly & Wood, 2012). **Liberal Feminist Theory** attributes discrimination to unequal access to educational opportunities, institutional resources, and leadership, advocating equal rights and opportunities regardless of gender (Tong & Botts, 2018). **Social Learning Theory** explains that gender stereotypes are learned through family, education, media, and social interactions, influencing attitudes and behaviors within nursing education (Bandura, 1977).

11. Gender Stereotypes in Nursing

Gender stereotypes remain a key contributor to discrimination in nursing education, as nursing is widely perceived as a female profession associated with caring and nurturing (Evans, 2004). Male nursing students often face stereotypes, questions about their career choice, and restricted access to maternity and obstetric clinical placements, while female students may experience gender-based harassment and unequal leadership opportunities (O'Lynn, 2004; Meadus & Twomey, 2011; Cottingham et al., 2018). These stereotypes negatively affect students' confidence, academic performance, professional identity, and career satisfaction. Addressing these challenges requires gender-sensitive curricula, inclusive clinical training, faculty sensitization, and institutional policies that promote equality and diversity in nursing education (Prosen, 2022; World Health Organization [WHO], 2020).

12. Global Burden and Trends International Evidence:

Gender discrimination remains a global concern in nursing education. Male nursing students often face stereotypes, social stigma, and restricted maternity clinical exposure, while female students experience gender bias and limited leadership opportunities, affecting their professional development and career satisfaction (O'Lynn, 2004; Meadus & Twomey, 2011; Prosen, 2022; World Health Organization [WHO], 2025).

Regional Differences

The nature of gender discrimination varies across regions. In Western countries, male students commonly report stereotyping and limited clinical exposure, whereas in many Asian

countries, including India, traditional gender norms affect both male and female students (Başar & Demirci, 2018; Yang et al., 2021; Divya Raghavan et al., 2023).

Recent Trends

Recent evidence highlights the need for gender-sensitive curricula, equitable clinical training, and stronger institutional policies to promote gender equity in nursing education (World Health Organization [WHO], 2025; Prosen, 2022).

13. Experiences of Gender Discrimination among Nursing Students Classroom Experiences:

Male nursing students often experience stereotyping, social isolation, and exclusion from maternal health discussions, while female students may encounter subtle biases related to leadership and technical competence (Meadus & Twomey, 2011; Kouta & Kaite, 2011; Cottingham et al., 2018).

Clinical Placement Experiences

Male students are frequently excluded from maternity and obstetric clinical placements because of patient preferences and institutional practices, whereas female students may face traditional caregiving expectations, limiting equitable clinical learning (O'Lynn, 2004; Prosen, 2022).

Faculty Attitudes

Gender stereotypes among faculty can influence teaching, clinical assignments, and student evaluations, whereas supportive faculty foster inclusive learning environments (Meadus & Twomey, 2011; Cottingham et al., 2018).

Peer Interactions

Male students often report teasing, social isolation, and questioning of their career choice, while female students may experience gender bias in academic activities (Evans, 2004; Stanley et al., 2016).

Patient-Related Discrimination

Patient preferences during intimate care frequently restrict male students' clinical exposure and reinforce gender stereotypes (O'Lynn, 2004; Kouta & Kaite, 2011).

Experiences of Male and Female Students

Male students generally report greater discrimination, whereas female students continue to face gender bias, limited leadership opportunities, and occasional harassment (Cottingham et al., 2018; Divya Raghavan et al., 2023; Prosen, 2022).

Psychological and Emotional Experiences:

Gender discrimination contributes to stress, anxiety, reduced self-confidence, and weakened professional identity, potentially affecting academic performance and career commitment (Cottingham et al., 2018; Ayar et al., 2025).

14. Determinants of Gender Discrimination Family and Social Factors

Family attitudes, cultural beliefs, social stereotypes, and community norms strongly influence nursing students' experiences of gender discrimination. Supportive families enhance professional confidence, whereas traditional gender-role beliefs may discourage men from pursuing nursing and reinforce stereotypes that care giving is primarily a female responsibility (Evans, 2004; Stanley et al., 2016). Cultural expectations and social stereotypes often portray male nurses as less compassionate and female nurses as natural caregivers, while religious and community norms may restrict male students' participation in intimate patient care, thereby limiting clinical learning opportunities (Kouta & Kaite, 2011; O'Lynn, 2004; Cottingham et al., 2018; Prosen, 2022).

Educational Factors

Educational environments play a crucial role in shaping students' experiences. Gender-inclusive curricula, supportive faculty, equitable clinical supervision, and strong institutional anti-discrimination policies promote fairness and equal learning opportunities. In contrast, gender-biased teaching practices, unequal clinical assignments, institutional culture, and variations in resources across government and private institutions may reinforce discrimination and limit students' professional development (Meadus & Twomey, 2011; O'Lynn, 2004; World Health Organization [WHO], 2021; Divya Raghavan et al., 2023; Ayar et al., 2025).

Organizational Factors

Hospital culture, gender-sensitive policies, and leadership support significantly influence nursing students' clinical experiences. Inclusive workplace cultures, effective grievance mechanisms, and supportive leadership reduce discriminatory practices, strengthen professional identity, and improve students' educational outcomes and career commitment (Cottingham et al., 2018; Prosen, 2022; WHO, 2021).

15. Consequences of Gender Discrimination

Gender discrimination has significant academic, professional, and psychological consequences for nursing students. It reduces motivation, self-efficacy, and academic

performance while limiting clinical competence through unequal learning opportunities, particularly in maternity and specialized clinical settings (Kouta & Kaite, 2011; O'Lynn, 2004; Meadus & Twomey, 2011; Cottingham et al., 2018). Discriminatory experiences also contribute to stress, anxiety, burnout, reduced self-esteem, and poor psychological well-being (Prosen, 2022; Ayar et al., 2025). Furthermore, gender bias weakens professional identity, lowers career satisfaction, and increases intentions to leave the nursing profession. In contrast, supportive faculty, inclusive learning environments, effective mentorship, and equitable institutional policies improve professional commitment, job satisfaction, and retention (Stanley et al., 2016; Divya Raghavan et al., 2023; World Health Organization [WHO], 2021).

16. Strategies to Reduce Gender Discrimination in Nursing Education

- **Gender-Sensitive Curriculum:** Integrate gender equity, diversity, and professional ethics into nursing curricula to challenge stereotypes and promote inclusive learning environments (World Health Organization [WHO], 2021; Prosen, 2022).
- **Faculty Development:** Train educators in gender sensitivity, inclusive teaching, and unbiased student evaluation to ensure equitable educational practices (Cottingham et al., 2018; Ayar et al., 2025).
- **Mentorship Programs:** Establish mentorship initiatives to strengthen students' confidence, professional identity, resilience, and career development, particularly for underrepresented groups (Meadus & Twomey, 2011; Stanley et al., 2016).
- **Anti-Discrimination Policies:** Implement and enforce clear institutional policies, confidential reporting systems, and grievance mechanisms to prevent and address gender discrimination (WHO, 2021; International Council of Nurses [ICN], 2021).
- **Student Support Systems:** Provide counseling, peer support, academic guidance, and mental health services to help students cope with discrimination and enhance well-being (Prosen, 2022; Cottingham et al., 2018).
- **Awareness and Sensitization Programs:** Conduct regular workshops and awareness campaigns to reduce gender stereotypes and promote respectful, inclusive educational and clinical environments (WHO, 2021; Kouta & Kaite, 2011).

17. Research Gaps

- **Limited Evidence from India:** Research on gender discrimination among nursing students in India is limited, with most studies focusing on practicing nurses. More

context-specific studies are needed among undergraduate nursing students (Divya Raghavan et al., 2023; National Medical Commission, 2023; Prosen, 2022).

- **Underrepresentation of Undergraduate Students:** Existing literature largely examines registered nurses rather than undergraduate nursing students, leaving gaps in understanding students' academic and professional experiences (Meadus & Twomey, 2011; Kouta & Kaite, 2011; Cottingham et al., 2018).
- **Lack of Longitudinal Research:** Most studies are cross-sectional, providing limited evidence on the long-term effects of gender discrimination on professional identity, career progression, and retention (Prosen, 2022; Stanley et al., 2016).
- **Limited Intervention Studies:** Few studies have assessed the effectiveness of gender-sensitization programs, mentorship, curriculum reforms, or institutional policies to reduce gender discrimination in nursing education (World Health Organization [WHO], 2021; Ayar et al., 2025).
- **Need for Multicenter Research:** Existing evidence is largely based on single institutions, limiting generalizability. Multicenter studies across diverse nursing colleges are needed to strengthen evidence for policy and practice (Divya Raghavan et al., 2023; WHO, 2021; Prosen, 2022).

18. Future Directions Future Research Directions Suggestions for Future Research (Concise)

- **Conduct multicenter and longitudinal studies** to examine the long-term effects of gender discrimination and improve the generalizability of findings (Prosen, 2022; World Health Organization [WHO], 2021).
- **Evaluate gender-sensitization interventions**, including faculty training, workshops, and awareness programs, to reduce gender bias (Ayar et al., 2025; Kouta & Kaite, 2011).
- **Assess institutional anti-discrimination policies** and grievance mechanisms to promote equitable learning environments (WHO, 2021; International Council of Nurses [ICN], 2021).
- **Integrate gender equality into nursing curricula** and evaluate its impact on students' knowledge, attitudes, and professional behavior (WHO, 2021; Prosen, 2022).
- **Promote inclusive clinical learning environments** by reducing patient-related bias and ensuring equitable clinical experiences (O'Lynn, 2004; Meadus & Twomey, 2011).
- **Strengthen mentorship and leadership programs** to enhance students' professional

identity and career development (Stanley et al., 2016; Cottingham et al., 2018).

- **Expand research in India and other low- and middle-income countries** to generate context-specific evidence and culturally appropriate interventions (WHO, 2021; Divya Raghavan et al., 2023).
- **Adopt mixed-methods and implementation research** to evaluate gender-equity initiatives and inform nursing education policies (Prosen, 2022; WHO, 2021; Ayar et al., 2025).

19. CONCLUSION

The reviewed literature indicates that gender discrimination remains a persistent challenge in nursing education, affecting classroom learning, clinical training, and professional development. Male students commonly experience stereotypes and limited clinical opportunities, while female students face gender bias and unequal expectations, negatively influencing academic performance, professional identity, psychological well-being, and career development (Kouta & Kaite, 2011; Cottingham et al., 2018; Prosen, 2022).

Promoting gender equity through gender-sensitive curricula, inclusive learning environments, and supportive institutional policies is essential to improve nursing education and patient care. Future research should prioritize multicenter, longitudinal, and intervention-based studies, particularly in India and other low- and middle-income countries, to strengthen evidence and inform policy and practice (World Health Organization [WHO], 2021; International Council of Nurses [ICN], 2021; Meadus & Twomey, 2011; Divya Raghavan et al., 2023; Ayar et al., 2025).

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