

The Relationship Between Nursing Students' Attitudes Towards Violence Against Women, Gender Roles and Self-Esteem

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ABSTRACT

Objective: This study aims to determine the relationship between nursing students' attitudes towards violence against women, gender roles, and self-esteem.

Method: The descriptive cross-sectional study was conducted with 100 nursing students who met the research criteria. The study data were obtained using a 25-item information form, the Attitudes Towards Violence Against Women Scale, the Gender Roles Attitudes Scale, and the Rosenberg Self-Esteem Scale-Short Form. Descriptive statistical methods (minimum, maximum, mean, frequency, standard deviation) and Spearman's correlation tests were used to evaluate the relationship between the scales.

Results: The mean age of the students was 20.76±1.49. It was found that 47.0% of the students had witnessed violence, and 21% had been subjected to violence. The scale scores showed that the mean score of the Attitudes Towards Violence Against Women Scale was 132.83±10.06; the mean score of the Gender Roles Attitudes Scale was 161.85±14.41; the mean score of the positive sub-dimension of the Rosenberg Self-Esteem Scale-Short Form was 54.60±9.23, and the mean score of the negative sub-dimension was -20.65±9.69. According to the correlations between the scales, there was a positive significant relationship between the Attitudes Towards Violence Against Women Scale and the Gender Roles Attitudes Scale ($r=.84, p<.050$); and a negative significant relationship between the Gender Roles Attitudes Scale and the negative sub-dimension of the Rosenberg Self-Esteem Scale-Short Form ($r=-.20, p<.050$).

Conclusion: It was determined that the students had contemporary attitudes towards violence against women and gender roles, and that students with opposing attitudes towards violence against women had more contemporary attitudes towards gender roles. While the students' self-esteem was found to be high, students with contemporary attitudes towards gender roles had lower negative self-esteem.

Keywords: Gender roles, nursing student, self-esteem, violence

INTRODUCTION

Gender-based violence, particularly against women, encompasses any act of oppression, coercion, threat, or violence that adversely affects women physically, sexually, and psychologically (1). This issue is a significant public health concern and a severe human rights violation globally, including in Turkey. It hinders women's ability to fulfil their personal and societal roles, impedes their empowerment, and restricts their progress (2,3). In Turkey, the Domestic Violence Against Women Survey (4) reported that 44% of women faced emotional violence, 38% physical violence, and 12% sexual violence.

In healthcare settings, nurses frequently serve as the initial point of contact for women experiencing violence, placing them in a crucial position to intervene. However, current research reveals that many nurses feel inadequately prepared to manage cases of violence against women (2,3). According to some studies this lack of preparedness is due to insufficient education on the topic during their training (5,6,7). While there are studies exploring healthcare workers' attitudes towards gender-based violence, fewer studies specifically address the perceptions and attitudes of nursing students. Available research shows that nursing students, similar to practising nurses, often feel undertrained in recognising and responding

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to domestic violence (2,9-11). University students with high self-esteem typically hold more progressive attitudes towards violence against women, underscoring the importance of fostering high self-esteem in combating violence (10).

Early detection, intervention, and treatment are crucial for women who suffer from violence. Nurses often serve as the initial point of contact in healthcare settings for these individuals. However, many nurses feel inadequately prepared to manage such situations (2,3). Nurses play a vital role in addressing violence against women through detection, treatment, support, and rehabilitation (1,2). They are essential in fostering a culture free from violence by providing prevention, protection, and early intervention services. Therefore, it is crucial to educate nursing students about violence against women and gender roles from the undergraduate level to prepare them to support individuals who have experienced violence (11). This study not only examines the relationship between nursing students' attitudes towards violence against women, their views on gender roles, and their self-esteem but also investigates their own experiences with violence. By including the personal experiences of students in the research, the study highlights the importance of providing support to nursing students themselves. Addressing the effects of violence on the students' well-being is crucial to both their professional development and their ability to support victims effectively. Therefore, the study seeks to reinforce the need for educational interventions that foster self-esteem, awareness, and coping mechanisms, both for future nurses and for students as potential survivors of violence.

MATERIAL AND METHOD

Study Design

This study employed a descriptive and correlational cross-sectional design and was conducted with students from the School of Nursing at a university in Bilecik between October and December 2021. The study population consisted of 348 students: 109 first-year, 96 second-year, 85 third-year, and 58 fourth-year students. A power analysis determined a sample size of 98 students, based on a 95% confidence level, a 0.5 effect size, a 5% margin of error, and 80% power. Ultimately, 100 students were included in the study. The simple random sampling determined for the number of students in the sample. The face-to-face interview technique was used to obtain the data.

The research questions are as follows:

Is there a relationship between nursing students' attitudes towards violence against women and gender roles?

Is there a relationship between nursing students' attitudes towards violence against women and their self-esteem?

Data Collection Tools

The study data were obtained using a 25-item questionnaire prepared by the researchers based on the literature (2,3,8),

which included demographic information and data on violence against women, the Attitudes Towards Violence Against Women Scale, the Gender Roles Attitudes Scale, and the Rosenberg Self-Esteem Scale-Short Form. Data were collected through an online survey (Google Forms) due to the pandemic.

Attitudes Towards Violence Against Women Scale (ATVAWS): The ATVAWS was developed by Kanbay et al. (12). The scale consists of two identifiable and summable factors with 30 items. The first factor (attitudes towards the body) has 16 items, and the second factor (attitudes towards identity) has 14 items. Items 5 and 24 are reverse scored. The total score of the scale is obtained by summing the scores from the specified factors. A minimum score of 16 and a maximum score of 80 can be obtained from the first factor. A minimum score of 14 and a maximum score of 70 can be obtained from the second factor. The overall scale score ranges from a minimum of 30 to a maximum of 150. Higher scores indicate a negative attitude towards violence against women (i.e., the person is against violence towards women), while lower scores indicate a positive attitude towards violence against women (i.e., the person is not against violence towards women). In the study by Kanbay et al.'s (12), the Cronbach's alpha value for the scale was .80 for the first factor, .83 for the second factor, and .86 for the entire scale. In this study, the Cronbach's alpha value was .86 for the first factor, 0.85 for the second factor, and 0.88 for the entire scale.

Gender Roles Attitudes Scale (GRAS): Developed by Zeyneloğlu and Terzioğlu (13), the GRAS consists of 38 items and five sub-dimensions. The sub-dimensions are as follows; gender role in marriage (8 items), female gender role (8 items), egalitarian gender role (8 items), traditional gender role (8 items), and male gender role (6 items). The scale is a 5-point Likert type, with responses ranging from 5 points (strongly agree) to 1 point (strongly disagree). The total score ranges from a minimum of 38 to a maximum of 190. Higher scores indicate an egalitarian attitude towards gender, whereas lower scores indicate a traditional attitude. The Cronbach's alpha value of the GRAS was .92. In this study, the Cronbach's alpha value was 0.89.

Rosenberg Self-Esteem Scale-Short Form (RSES-SF): Developed by Rosenberg (14) and shortened to 20 items by Lecomte et al. (15), the RSES-SF was adapted into Turkish and validated by Tukuş (16). The scale consists of 10 positively and 10 negatively loaded items. The RSES-SF is scored between +70 and 70, with a Cronbach's alpha value of .91 for positive items and .87 for negative items (16). A high score obtained from the scale indicates high self-esteem. In this study, the Cronbach's alpha value was .87 for positive items and 0.90 for negative items.

Data Analysis

The study data were analysed using the SPSS (Windows 15.0) package programme. Descriptive statistical methods (minimum, maximum, mean, frequency, standard deviation) and Spearman's correlation tests were used to evaluate the relationship between the scales.

Ethical Approval

Ethical approval was obtained from the Non-Interventional Ethics Committee of a university (Decision No: 10; Date: October 21, 2020). Participants received comprehensive information about the study, which adhered to the Helsinki Declaration guidelines. Informed consent was obtained before applying the data collection tools.

RESULTS

The mean age of the students participating in the study was 20.76 ± 1.49 years, with 90.0% (n=90) of the students being in the 18-22 age range, and 86.0% of them being female. It was found that 67.0% (n=67) of the students' mothers and 48% (n=48) of their fathers were primary and secondary school graduates. Additionally, 99.0% (n=99) of the students used social media (Table 1).

When examining the data related to violence against women, it was found that 84.0% (n=84) of the students followed news about violence against women through social media. 21% (n=21) of the students had experienced violence, with

Table 1. Demographic Characteristics of Students and Data on Social Media Use

Characteristics	n	%	
Age (20.76±1.49)	18-22	90	90.0
	23-27	10	10.0
Gender	Female	86	86.0
	Male	14	14.0
Class	1	4	4.0
	2	36	36.0
	3	35	35.0
	4	25	25.0
	Illiterate	6	6.0
Mother's Graduate Level	Literate	7	7.0
	Primary School	67	67.0
	High School	18	18.0
	Graduate or Master's Degree	2	2.0
	Illiterate	2	2.0
Father's Graduate Level	Literate	6	6.0
	Primary School	48	48.0
	High School	26	26.0
	Graduate or Master's Degree	18	18.0
Use of the Mass Media	Yes	87	87.0
	No	13	13.0
Use of Social Media	Yes	99	99.0
	No	1	1.0

physical violence being the most common type at 10.0% (n=10). Furthermore, 47.0% of the students had witnessed violence, with physical violence being the most commonly witnessed type at 24.0%. The rate of experiencing violence within the family was 11%. In the case of encountering violence against women, 85.0% of the students were inclined to report it to the relevant authorities, with police stations being the most preferred institution at 91.0% (Table 2).

When examining the scale scores, the average score for the Attitudes Towards Violence Against Women Scale (ATVAWS) was 132.83 ± 10.06 , the average score for the Gender Roles Attitudes Scale (GRAS) was 161.85 ± 14.41 , the average score for the positive subscale of the Rosenberg Self-Esteem Scale-Short Form (RSES-SF) was 54.60 ± 9.23 , and the average score for the negative subscale was -20.65 ± 9.69 (Table 3).

Table 2. Students' Data on Violence Against Women

Characteristics	n	%	
Following News on Violence Against Women	Social Media Applications	84	84.0
	Mass Media	16	16.0
	Yes	21	21.0
Experiencing Any Violence	No	79	79.0
	Physical	10	10.0
Type of Violence Experienced	Psychological	9	9.0
	Sexual	1	1.0
	Economics	1	1.0
Witnessing Violence	Yes	47	47.0
	No	53	53.0
Type of Violence Witnessed	Physical	24	24.0
	Psychological	19	19.0
	Sexual	1	1.0
Witnessing Violence Within the Family	Economics	3	3.0
	Yes	15	15.0
Experiencing Violence Within the Family	No	85	85.0
	Yes	11	11.0
Attitude Towards Encountering Violence Against Women	No	89	89.0
	Reporting to the Relevant Authorities	85	85.0
	Remaining Unresponsive	5	5.0
Places Approached in the Case of Violence Against Women	Undecided	10	10.0
	Gendarmerie Stations	27	27.0
	Police Stations	91	91.0
	Social Services Agency	28	28.0
Witnessing Violence Within the Family	112 Emergency Call Centre	32	32.0
	Public Prosecutor's Office	16	16.0
	Family Court	15	15.0

Table 3: Scale Scores

Scales	$\bar{X} \pm (SD)$	Min	Max
Attitude Towards the Violence Against Women Scale	132.83±10.06	30	150
<i>Attitudes Towards Body Subscale</i>	73.43±3.05	16	80
<i>Attitudes Towards Identity Subscale</i>	59.40±7.87	14	70
Gender Roles Attitudes Scale	161.85±14.41	38	190
<i>Egalitarian Gender Role Subscale</i>	38.12±2.97	8	40
<i>Female Gender Role Subscale</i>	27.95±4.47	8	40
<i>Gender Role in the Marriage Subscale</i>	37.61±3.57	8	40
<i>Traditional Gender Role Subscale</i>	32.95±5.08	8	40
<i>Male Gender Role Subscale</i>	25.22±2.06	6	30
Rosenberg Self-Esteem Scale-Short Form			
<i>Positive Dimensions</i>	54.60±9.23	10	70
<i>Negative Dimensions</i>	-20.65±9.69	-10	-70

Table 4: Correlations Between Scales

Scales	A	A1	A2	B	B1	B2	B3	B4	B5	C1	C2
Attitude Towards the Violence Against Women Scale (A)	1.00										
<i>Attitudes Towards Body Subscale (A1)</i>	.66*	1.00									
<i>Attitudes Towards Identity Subscale (A2)</i>	.98*	.56*	1.00								
Gender Roles Attitudes Scale (B)	.84*	.49*	.84*	1.00							
<i>Egalitarian Gender Role Subscale (B1)</i>	.61*	.42*	.59*	.68*	1.00						
<i>Female Gender Role Subscale (B2)</i>	.70*	.37*	.71*	.86*	.52*	1.00					
<i>Gender Role in the Marriage Subscale (B3)</i>	.64*	.45*	.62*	.77*	.57*	.57*	1.00				
<i>Traditional Gender Role Subscale (B4)</i>	.78*	.42*	.78*	.90*	.56*	.71*	.68*	1.00			
<i>Male Gender Role Subscale (B5)</i>	.38*	.22*	.39*	.40*	.21*	.20*	.18	.27*	1.00		
RSES-SF Positive Dimensions (C1)	.10	.03	.11	.18	.14	.19	.07	.19	.23*	1.00	
RSES-SF Negative Dimensions (C2)	-.10	-.11	-.08	-.20*	-.16	-.16	-.16	-.15	-.33*	-.57*	1.00

*: $p < .050$ Spearman's correlation

Table 4 shows the correlations between the scales. Accordingly, a strong statistically significant positive correlation was found between the ATVAWS and the GRAS ($r = .84, p < .050$). A weak statistically significant negative correlation was found between the GRAS and the negative subscale of the RSES-SF ($r = -.20, p < .050$), while no significant correlation was found between the ATVAWS and the subscales of the RSES-SF ($p > .050$) (Table 4).

DISCUSSION

The study revealed that the nursing students had progressive attitudes towards violence against women and gender roles. The mean ATVAWS score of the students was 132.83 ± 10.06 , indicating a strong opposition to violence against women. Additionally, the mean GRAS score was 161.85 ± 14.41 , and the students held egalitarian views on gender roles. In Büyükgöze et al. (17), it was also found that 98.4% of nursing students used social media. In the world, social media applications have become widespread communication tools whose popularity and use are rapidly increasing, especially among young people. Today, social media has become a means for individuals to follow developments occurring around the world instantly, aside from being a source of entertainment (18-20).

The study revealed that 47.0% of the students had witnessed some form of violence, and 21.0% had experienced violence

themselves (Table 2). Sabancıoğulları et al. (10) found similar results, with 47.9% of students witnessing violence and 20.5% experiencing it. Likewise, Alan Dikmen and Marakoğlu (2) reported that 51.8% of students had witnessed violence, and 21.4% had been subjected to it. In this study, physical violence was the most witnessed (24.0%) and experienced (10.0%) form of violence. The incidence of violence within the family was 11.0%. Diaz et al. (21) reported that one-fifth of nursing students had experienced physical violence, and Karabulutlu et al. (22) found that 18.2% of students had experienced physical violence, with 95.0% of these incidents occurring within the family. The students' average score on the ATVAWS was 132.83 ± 10.06 , indicating a strong oppositional attitude towards violence against women. This may be influenced by the students' family structures, the high proportion of female participants, socioeconomic factors, their general opposition to all forms of violence, their progressive views, and their empathy for women who have been subjected to violence, especially since a significant number (47%) had witnessed violence. The average score on the GRAS was 161.85 ± 14.41 , reflecting an egalitarian attitude towards gender roles. According to the score students not only oppose violence against women but also support gender equality.

There was a positive correlation between the GRAS and the ATVAWS scores (Table 4). As students' egalitarian attitudes increased, so did their opposition to violence against women. This is consistent with the findings of Kodan Çetinkaya (23), who reported an inverse and significant relationship between attitudes towards gender roles and tendencies towards violence. There was no significant difference between the RSES-SF and the ATVAWS scores. While violence is often seen as a factor that lowers self-esteem, Sabancıoğulları et al. (10) found that nursing students with high self-esteem exhibited more progressive attitudes towards violence against women. In the current study, the lack of a significant relationship between attitudes towards violence against women and self-esteem could be due to the generally high ATVAWS scores among the students.

LIMITATIONS

The study has some limitations. The study was conducted with some nursing students at a single university.

CONCLUSION

This study found that nursing students had progressive attitudes towards violence against women and gender roles. Additionally, students with more progressive views on gender roles tended to have lower negative self-esteem. These findings underscore the importance of incorporating gender roles and self-esteem education into nursing curricula to prepare students to effectively address and support individuals who have experienced violence.

However, beyond education, it is equally crucial to provide targeted support for students who may have personal experiences with violence. Screening nursing students for their own experiences of violence could be recommended as part of a broader initiative to ensure their well-being. This would allow educators and healthcare professionals to identify students who might need psychological or emotional support and provide them with the necessary resources. By addressing the students' personal experiences with violence, institutions can better prepare them to support others effectively, ensuring they are emotionally equipped to handle the challenges of caring for victims of violence in their future careers.

Ethics Committee Approval: This study was approved by the ethics committee of the Non-Interventional Ethics Committee Of Bilecik Şeyh Edebali university (Decision No: 10; Date: October 21, 2020).

Informed Consent: Written consent was obtained from the participants.

Peer Review: Externally peer-reviewed.

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