



Original Article

The effects of ambivalent sexism on nursing students' menstrual attitudes

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Abstract

Objectives: This study evaluates the effects of ambivalent sexism on nursing students' menstrual attitudes.

Methods: This descriptive study was carried out with 289 nursing students during the 2017–2018 academic year. A questionnaire developed by the researchers about the students' socio-demographic and menstruation characteristics, the Ambivalent Sexism Inventory (ASI) and the Menstrual Attitude Questionnaire (MAQ) were used as data collection tools. The data were evaluated using SPSS 14.0. The descriptive data are shown as numbers, percentages, means, and standard deviations. Pearson's correlation was used with the ASI and MAQ scores. The threshold for statistical significance was $p < .05$.

Results: The students' mean age was 19.73 ± 1.33 and 37.4% of them were in their first year of study. Their mean ASI score was 76.79 ± 15.31 , their mean hostile sexism subscale score was 40.97 ± 9.87 , and their mean benevolent sexism subscale score was 35.81 ± 8.76 . Their mean MAQ score was 86.86 ± 10.31 . There were no statistically significant correlations between their ASI scale and subscale scores, and their MAQ scores ($p > .05$). There was a relationship between their ASI score and some MAQ subscale scores ($p < .05$).

Conclusion: There were no significant relationships between ambivalent sexism and menstrual attitude. The factors that may affect menstrual attitudes should be investigated in order to improve and maintain students' menstrual attitude.

Keywords: Attitudes; gender; menstruation; nursing students.

Menstruation is a physiological process that is experienced by all healthy women.^[1] It is viewed differently in different cultures.^[2] Attitudes and behaviors related to menstruation can be positive and negative, but negative attitudes have been reported to be more common. They include shame, finding it bothersome, physical and psychological burdens, seeing it as an obstacle, feeling obliged to do something about menstruation and believing in menstrual prohibitions.^[3] Understanding that menstrual attitudes and beliefs are affected by social and cultural norms^[4,5] is the key to improving practices regarding menstruation and protecting women's health.^[6]

Since menstruation differentiates men from women, men-

struation and its consequences and effects are associated with gender issues.^[7] For example, the belief that menstruation affects women's performance can lead to restricting their opportunities in society and making it difficult for them to fulfill their responsibilities. This belief can be an important cause of discrimination against women and a form of social control that can negatively affect their attitudes about menstruation.^[3]

Gender is defined by society as the expression of femininity and masculinity in social settings.^[8,9] Sexism has typically been conceptualized as a form of hostility toward woman.^[10] In their theory of ambivalent sexism, Glick and Fiske describe ambivalent sexism not only as hostility against wom-

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What is known on this subject?

- The effects of menstruation are associated with gender. Nurses are among the groups that will help society to adopt positive attitudes about menstruation and sex.

What is the contribution of this paper?

- No significant correlations were found between scores on the Ambivalent Sexism Inventory and its subscales, and Menstrual Attitude Questionnaire scores.

What is its contribution to the practice?

- This study's results should raise awareness about sexist attitudes and nursing students' menstrual attitudes. The factors related to sexism that affect students' menstrual attitudes should be investigated by other studies.

en, but also as a contradictory mixture of hostile sexism and benevolent sexism. Benevolent sexism sees women as weak and in need of protection; however, hostile sexism subjects women to entirely negative judgments, paternalism and humiliating acceptance. Both sexist perspectives support the acceptance and maintenance of patriarchy and traditional gender roles.^[11]

Nurses are among the groups that will help society to adopt egalitarian attitudes towards gender roles. Therefore, it is important to determine nursing students' gender attitudes and to organize the content of nursing education in order to develop egalitarian perspectives on gender roles.^[12]

This study discusses the effect of ambivalent sexism on nursing students' menstrual attitudes who are affected by gender as a part of the society and affect society as caregivers. Its results can serve as a guide for planning education to reduce the sexist attitudes of students in general, improving nursing students' menstrual attitudes and developing their ability to serve as caregivers for menstruating women.

Materials and Method

The Population and Sample of the Study

The population of this descriptive study consisted of 644 female students enrolled in the nursing department of a state university in Ankara during the 2017–2018 academic year. No sampling method was used. The 289 students who met the inclusion criteria (being enrolled in the nursing department during the 2017–2018 academic year, being female and agreeing to participate) were included in the study. The sample represents 44.87% of the population.

This study's dependent variable was the participants' mean Menstruation Attitude Questionnaire score, and its independent variables were their socio-demographic and menstrual characteristics, and their Ambivalent Sexism Inventory scores.

Data Collection Tools

The study data were collected using a questionnaire about the participants' socio-demographic characteristics (age and year of study) and menstruation (menarche age, menarche cy-

cle, menstrual bleeding duration and menstrual symptoms), the Menstruation Attitude Questionnaire and the Ambivalent Sexism Inventory.

The Ambivalent Sexism Inventory (ASI): The ASI was developed by Glick and Fiske (1997).^[11] It has 22 items, 11 about hostile sexism, and 11 about benevolent sexism. The validity and reliability study of its Turkish version was conducted by Sakallı Uğurlu (2002).^[13] Its internal consistency coefficients were 0.87 for hostile sexism, 0.78 for benevolent sexism, and 0.85 for the entire scale. In this study, the internal consistency coefficients were 0.82, 0.79 and 0.84 for hostile sexism, benevolent sexism and entire scale, respectively. Patriarchy can emerge in the forms of hostility and benevolence in society. While hostile sexism is more negative in patriarchy and in the form of dominating women, benevolent sexism is seen as helping women who are considered weak. High subscale scores indicate either hostile and protective sexism.^[11] Permission to use the scale in this study was obtained from Sakallı Uğurlu.

The Menstrual Attitude Questionnaire (MAQ) This questionnaire was developed by Brooks-Gunn and Ruble (1980). It has 33 items in five subscales concerning attitudes toward menstruation:

1. Menstruation as a debilitating event,
2. Menstruation as a bothersome event,
3. Menstruation as a natural event,
4. Anticipation and prediction of the onset of menstruation
5. Denial of any effect of menstruation.

High scores on the MAQ subscales indicate positive attitudes toward menstruation.^[14] The validity and reliability study of its Turkish version was carried out by Firat et al..^[15] The Cronbach's alpha coefficients were 0.79 for the MAQ and 0.68, 0.61, 0.60, 0.42 and 0.73 for its subscales, respectively. In this study, the Cronbach's alpha coefficients were 0.71 for the scale and 0.71, 0.68, 0.70, 0.72 and 0.75 for its subscales, respectively.^[11] Permission to use the scale was obtained from Kulakaç.

Data Analysis

The study data were analyzed using SPSS 14.0. The descriptive data are shown as numbers, percentages, means and standard deviations. The normality of the data's distribution was determined using the Kolmogorov-Smirnov test, and parametric tests were used because they had a normal distribution. Pearson's correlation was used with the ASI and MAQ scores. The threshold for statistical significance was $p < .05$.

Ethical Considerations

Ethical approval to perform the study was obtained from the Ankara University Ethics Committee (20.11.2017, number 19/320), and institutional permission was obtained from the faculty where the study was conducted (16.11.2017, number

E.4876). Permission to use the scales was obtained. Prior to administering the data collection tools, the participants were informed about the aim of the study, and their consent was obtained.

Results

The participants' mean age was 19.73 ± 1.33 . Their mean age of menarche was 13.15 ± 1.14 . Of them, 37.4% were first year, 24.9% were second year, 19.7% were third year, and 18% were fourth year students. Their mean menstrual cycle lasted 29.25 ± 3.6 days, and they experienced a mean of 5.65 ± 1.16 days of menstrual bleeding. Their menstrual symptoms included stomachache, weakness, nausea, loss of appetite, dizziness and vomiting in order of prevalence (Table 1).

The participants' mean ASI score was 76.79 ± 15.31 . Their mean hostile sexism subscale score was 40.97 ± 9.87 , and their mean benevolent sexism subscale score was 35.81 ± 8.76 . Their mean MAQ score was 86.86 ± 10.31 . Their mean subscale scores were: 18.22 ± 4.25 for menstruation as a debilitating event, 13.79 ± 3.94 for menstruation as a bothersome event, 18.75 ± 3.24 for menstruation as a natural event, 18.42 ± 4.67 for anticipation and prediction of the onset of menstruation, and 17.68 ± 2.52 for denial of any effect of menstruation (Table 2).

No statistical correlations were found between the participants' scores on the ASI and its subscales, and their MAQ

score ($p > .05$). There was a negative weak correlation between their ASI score and their MAQ subscale scores for menstruation as a debilitating event, and anticipation and prediction of the onset of menstruation. There was also a positive weak correlation between their ASI score and their MAQ subscale score for menstruation as a natural event subscale ($p < .05$). A negative weak correlation was found between their scores for benevolent sexism and menstruation as a debilitating event, and anticipation and prediction of the onset of menstruation subscale scores. A positive weak correlation was found between their benevolent sexism scores and their MAQ subscale score for menstruation as a natural event ($p < .05$). There was a positive weak correlation between their hostile sexism score and their MAQ subscale score for menstruation as a natural event and denial of any effect of menstruation ($p < .05$) (Table 3).

Discussion

Menstruation is a physiological process that is experienced by all healthy women. It is viewed in different ways in different cultures.^[2] In Turkey, it is commonly described as a negative experience. Women cannot perform many forms of prayers and restrict their lives in public and personal spaces.^[16] In Nepal, menstruating women are described as untouchable. They cannot enter temples and kitchens, do not share the same bed with their partners and do not physically touch their male relatives.^[17] In China, young girls consider men-

Table 1. The distribution of the participants'

Demographic and menstrual characteristics (n=289)	Mean±SD		n		%	
Age	19.73±1.33					
Age of menarche	13.15±1.14					
Year of study						
1			108		37.4	
2			72		24.9	
3			57		19.7	
4			52		18.0	
Duration of menstrual cycle	29.25±3.6					
Duration of menstrual bleeding	5.65±1.16					
Experience of menstrual symptoms*	Yes		No		Sometimes	
	n	%	n	%	n	%
Stomachache	156	54	27	9.3	106	36.7
Nausea	64	22.1	148	51.2	77	26.6
Vomiting	12	4.2	245	84.8	32	11.1
Diarrhea	53	18.3	169	58.5	67	23.2
Loss of appetite	61	21.1	142	49.1	86	29.8
Dizziness	32	11.1	193	66.8	64	22.1
Weakness	145	50.2	39	13.5	105	36.3

*More than one answer was given.

Table 2. The Distribution of the Participants' Mean Ambivalent Sexism Inventory (ASI) and Menstruation Attitude Questionnaire (MAQ) Scores

Scales	Mean±SD	Possible minimum-maximum values	Marked minimum-maximum values
ASI	76.79±15.31	22–132	30–112
Hostile sexism	40.97±9.87	11–66	13–63
Benevolent sexism	35.81±8.76	11–66	13–62
MAQ	86.86±10.31	31–155	53–117
Menstruation as a debilitating event	18.22±4.25	7–35	7–30
Menstruation as a bothersome event	13.79±3.94	5–25	5–25
Menstruation as a natural event	18.75±3.24	5–25	7–25
Anticipation and prediction of the onset of menstruation	18.42±4.67	8–40	8–32
Denial of any effect of menstruation	17.68±2.52	6–30	12–26

Table 3. The Relationships Between the Participants' Ambivalent Sexism Inventory (ASI) and Menstruation Attitude Questionnaire (MAQ) Scores

Scales	MAQ	Menstruation as a debilitating event	Menstruation as a bothersome event	Menstruation as a natural event	Anticipation and prediction of the onset of menstruation	Denial of any effects of menstruation
ASI	r=-.086 p=.146	r=-.131 p=.026	r=-.103 p=.081	r=.209 p<.000	r=-.185 p=.002	r=.111 p=.059
Benevolent sexism	r=-.113 p=.054	r=-.139 p=.018	r=-.138 p=.019	r=.204 p<.000	r=-.208 p<.000	r=.065 p=.268
Hostile sexism	r=-.003 p=.960	r=-.062 p=.295	r=-.008 p=.888	r=.128 p=.029	r=-.068 p=.248	r=.138 p=.019

struation shameful of and refer to it with indirect expressions such as grand aunt.^[18] In Sweden, although the tendency to see menstruation as a natural part of being a woman is common, it is still seen as a special phenomenon that needs to be hidden.^[19] The premenstrual period and menstruation are associated with feeling like crying, tension, weakness, physical illness, mental instability and being out of control.^[7]

The participants' mean MAQ score was 86.86±10.31. Their mean subscale scores were: 18.22±4.25 for menstruation as a debilitating event, 13.79±3.94 for menstruation as a bothersome event, 18.75±3.24 for menstruation as a natural event, 18.42±4.67 for anticipation and prediction of the onset of menstruation, and 17.68±2.52 for denial of any effect of menstruation. These results are similar to those of Sönmezer and Yosmaoğlu,^[20] Özdemir et al.,^[2] and Yılmaz and Şahin.^[21] The participants scored highest on the menstruation as a natural event subscale. This result, like that of Güvenç et al., shows that nursing students have tendency to regard menstruation as natural.^[22] This may be explained by their professional education.

In this study, the participants' mean hostile sexism subscale score was 40.97±9.87, and their benevolent sexism subscale score was 35.81±8.76. Tarhan et al. conducted a study with a group of university students whose hostile sexism score was

similar at 40.30±9.51. In the same group's mean benevolent sexism subscale score was 43.17±8.25.^[23] The nursing students in this study got a lower mean benevolent sexism subscale score, which indicates that benevolent sexism is lower among nursing students. This difference may be the result of nursing education. The mean benevolent sexism subscale score of female students at vocational health high school in a study by Mızrak Şahin and Özerdoğan^[8] was lower than that of this study. Tekkaş et al.^[24] did a study with 309 nursing students and reported that their benevolent sexism subscale scores decreased as their year of study increased.

No statistical correlations were found between the ASI subscale scores and the MAQ subscale scores ($p>.05$). Temel et al.^[25] found no statistically significant relationship between mean scores of the Premenstrual Syndrome Scale and the Gender Roles Scale in their study conducted with 1,515 university students. Marvan et al. carried out a study including 106 19–46 year-old women (mean age of 29.08) and found relationships between beliefs and attitudes about menstruation, and ambivalent sexism. They also found that high scores for hostile sexism were related to shame about this subject and denial of effects of menstruation. Ghiasi^[26] found that gender role orientation had little to moderate effect on women's attitudes toward menstruation. The differences be-

tween the results of this study and those of Marvan et al. and Ghiasi may have resulted from differences in the study samples.

Limitations

This study was limited to undergraduate nursing students at a state university. Its results can only be generalized only to the participants.

Conclusion

This study found that most of the nursing students saw menstruation as a natural phenomenon. No significant relationships were found between ambivalent sexism and menstrual attitudes. Factors related to sexism may affect students' menstrual attitudes. They should be investigated using quantitative and qualitative research methods and with different samples.

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