

ORIGINAL RESEARCH ARTICLE

Perceptions of Postpartum Mothers towards the Care Provided by Male Student Midwives at Labour Units in Limpopo Province, South Africa

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Abstract

Student midwives should always provide cultural sensitive care and respect the rights of every woman when choosing health care providers during pregnancy and childbirth. The aim of this study was to describe and explore the perceptions of postpartum mothers towards the care provided by male student midwives during their midwifery practice. A qualitative explorative, descriptive, and contextual research design was used. A non-probability, convenience sampling method was used to sample 42 postpartum mothers who received care from male student midwives at the five district hospitals in Limpopo province, South Africa. Data was collected through in-depth individual interviews until data saturation was reached by repeating data. Open coding approach was used to analyse data. All ethical principles were adhered to. Results revealed that postpartum mothers, preferred care by male students' midwives; they were viewed to be respectful, sympathetic, and caring; however, they discussed their fears of midwifery practice with mothers. It is recommended that midwives should play a pivotal role in informing pregnant women during antenatal visits that male student midwives can conduct deliveries. The community awareness campaign should be strengthened that male student midwives are availability in maternity units. (*Afr J Reprod Health 2018; 22[2]:60-67*).

Keywords: Male student midwives, midwifery practice, perceptions, and postpartum mothers

Résumé

Les élèves sages-femmes devraient toujours assurer des soins sensibles à la culture et respecter les droits de chaque femme lors du choix des fournisseurs de soins de santé pendant la grossesse et l'accouchement. Le but de cette étude était de décrire et d'explorer les perceptions des mères post-partum à l'égard des soins assurés par les élèves sages-femmes pendant leur pratique de sage-femme. Un modèle de recherche exploratoire, descriptif et contextuel qualitatif a été utilisé. Une méthode d'échantillonnage non probabiliste a été utilisée pour échantillonner 42 mères post-partum ayant reçu des soins de sages-femmes dans les cinq hôpitaux de district de la province de Limpopo, en Afrique du Sud. Les données ont été collectées par des entretiens individuels approfondis jusqu'à ce que la saturation des données soit répétée. L'approche de codage ouvert a été utilisée pour analyser les données. Tous les principes éthiques ont été respectés. Les résultats ont révélé que les mères après l'accouchement préféraient les soins donnés par les élèves sages-femmes; ils étaient considérés comme étant respectueux, sympathiques et attentionnés; Cependant, ils ont discuté de leurs craintes de pratique de sage-femme avec les mères. Il est recommandé que les sages-femmes jouent un rôle central en informant les femmes enceintes pendant les visites prénatales que les élèves sages-femmes peuvent effectuer des accouchements. La campagne de sensibilisation communautaire devrait être renforcée pour que les sages-femmes soient disponibles dans les unités de maternité. (*Afr J Reprod Health 2018; 22[2]: 60-67*).

Mots-clés: sages-femmes étudiantes, pratique sage-femme, perceptions et mères post-partum

Introduction

The mother's needs during labour include physical comfort, emotional support, and positive relationship provided by the attending midwife¹. Nurse-patient relationship is vital to gain patient's trust throughout the labour process². It is the

responsibility of midwives to build the relationship and inspire trust in pregnant women and their families during labour for the most positive pregnancy outcome³. Thus, midwives should treat all mothers with respect regardless of their culture, and social status⁴. Adeyemo *et al.*⁵ elicited similar views that all mothers experience labour pains in

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varying degrees irrespective of their educational, ethnic, social, or financial background, thus they should be treated as individuals.

The Department of Health¹ outlined that it is the duty of the midwife to ensure privacy and always perform intimate procedures behind screens and allow family and friends to provide companionship during labour. There are reports of pregnant women who have expressed their discomfort when male student midwives examine them during labour. These are mostly based on personal, religious, and cultural grounds⁶. El-Sayed and El-Nemer⁷ reported that in Egypt, where most women are Muslims, male student midwives faced rejection and lack of co-operation from pregnant women. In the study conducted by Azebri *et al.*⁸ about the perception of women towards the care given by males in midwifery practice, most Christian women preferred the male midwives to conduct procedures during their labour whereas, Muslim women perceived it is not acceptable to be examined by a male who is not their spouse. The study conducted by Duman⁹ indicated that most women (90%) perceived that nursing was a profession suitable for women, and that male midwives should not work in maternity wards. Study participants stated that they would prefer not to be attended by male student midwives during pregnancy and labour. Similar views elicited by Shavai and Chinamasa¹⁰ revealed that most expecting mothers prefer female midwives and it was evident that there was an association between midwife preference and location. Mothers from rural areas preferred female midwives. Factors contributing to the preferences included age, culture, and religious beliefs. The study findings further indicated that older mothers prefer female midwives while young mothers do not mind being examined by male student midwives. Whereas, Inoue *et al.*¹¹ found that pregnant women refused the care given by male student midwives and sometimes partners did not allow male midwives to participate in the delivery of their spouses.

The perception of women was that male midwives lack birth experience and they will not understand how women feel during labour⁶. Duman⁹ elicited similar views that women in Turkey rejected the care provided by male

midwives during pregnancy and labour. In addition, the women felt that they would be embarrassed if procedures which were regarded as highly intimate like, vaginal examinations, catheterisation and perineal care are conducted by male midwives. Hence, pregnant women prefer to receive care from female midwives than male midwives for these intimate procedures. A study conducted by Armstrong¹² cited an incident where women were shunning using a health centre due to the presence of male midwives. Armstrong¹² reiterates that some mothers in one health centre reacted strongly to the idea of male midwives attending to them in labour; they would rather deliver at home if that was the case. Most women (93, 3%) perceived that male midwives could not work effectively at maternity unit due to societal stereotype that only females can be good midwives who can work in maternity units conducting deliveries⁹.

On the other side, some women preferred the care of male midwives as they found that males can be more caring and sympathetic during labour and delivery. Men haven't actually experienced labour so they may be gentler because they can't even imagine what it feels like, whereas a woman may have been there herself and think, I did it and lived, so this woman will too¹³. This was affirmed by Pilkenton and Schorn¹⁴ who indicated that male midwives working in obstetric units were more sympathetic than the female midwives and lacked preconceived ideas based on their own childbirth experiences. In the study conducted by Duman⁹, some mothers reported that they did not mind being attended to by male midwives if everything went well and others said that if there was a female counterpart by their side, they would not mind male midwives. In a study conducted by Bwalya *et al.*¹⁵ regarding the perceptions of pregnant women towards male midwives, it was indicated that majority of women in Zambia (83%) accepted the care provided by male midwives with the opinion of that both female and male midwives received the same training and hence, they offered the same care. The purpose of this article was to describe and explore the perceptions of postpartum mothers towards the care provided by male student midwives during midwifery clinical placement in the maternity ward of the five training district

hospitals of the Limpopo province, South Africa. The understanding of perceptions can facilitate the formulation of content to promote community awareness campaigns for acceptability of male student midwives who provide childbirth care.

Methods

A qualitative approach was used applying explorative, descriptive, and contextual design to describe the perceptions of postpartum mothers towards care provided by male students during midwifery practice. The study was conducted at the training hospitals of Vhembe, Mopani, and Capricorn District, South Africa namely; Nkhensani, Siloam, Donald Fraser, Elim, and Seshego.

The target population comprised all postpartum mothers in postnatal wards of the training hospitals. The non-probability, and convenience sampling was used to select hospitals and participants. The postpartum mothers, whom the researchers found in the wards on the day of the visit, were sampled. The inclusion criteria comprised of all postpartum mothers who had delivered two or more babies in hospitals designated to be the clinical areas for the student midwives who had enrolled with the South African Nursing Council (SANC) for the programme leading to registration as a nurse (General, Psychiatric, Community) and Midwifery in Limpopo Province. A total of 42 postpartum mothers were sampled, informational needs determined sample size: hence data was collected until data saturation appeared to have been reached by means of repeating themes.

All ethical principles were adhered to; these included permissions to conduct the study which was sought from University of Venda Ethics Committee, ethical clearance no: SHS/14/PDS/03/2110. Approval and permission to access facilities was obtained from Limpopo Provincial Research Committee and the Chief Executive Officers of the five district hospitals. Data collection was done from March - July 2015. The participants were given information leaflets for them to make informed decisions. An informed consent form was completed by all participants, which evidenced that they participated in the study

willingly without being coerced. Emphasis was on confidentiality and anonymity which indicate that only the researcher and the research team during the research process should be aware of the identity of the participants. One central question guided the interview and was "what are your perceptions regarding care provided by male student nurses during midwifery practice"? The probing questions were asked to encourage the participants to give additional information and for researcher to get clarity on certain issues that arose during interview. The interviews were conducted in local languages, Tshivenda, Xitsonga, and Sepedi which lasted for 30 to 45 minutes. A voice recorder was used to ensure that the information that the participant provided were produced accurately. Data was collected to the point at which no new information was obtained and data saturation appeared to have been reached.

The narrative data from the in-depth individual interviews were analysed qualitatively using Tesch's open coding method as postulated by Creswell¹⁶. After the completion of all transcripts, a list of similar topics was compiled. Data were manually compiled and tabulated by the primary researcher into a matrix according to the themes. The transcripts and themes were cross checked independently by another member of the research team where common themes from both researchers were identified and agreed upon. Trustworthiness was ensured through using criteria of credibility, transferability, dependability, confirmability, and authenticity as postulated by Polit and Beck¹⁷. Credibility was ensured by prolonged engagement and persistent observation, to establish rapport and build trust. During the interviews, the researcher spent time with the participants listening and observing them as they were interviewed. The participants were interviewed to the point at which there was data saturation. Member checking was also done formally after data had been fully analysed. Thus, the preliminary findings of the research were discussed with the participants as a group to validate the results. Referential adequacy was achieved by taking notes to record findings that provided a suitable record, and the use of a voice recorder. Dependability was ensured by assigning the independent coder to deal with the raw data

including the field notes to come up with themes independently and an agreement was reached with the researcher for final themes. Transferability was ensured by thick descriptions of research methodology. Confirmability was ensured by having an assistant to transcribe the same data and then checked if it the data reconciled. The recorded interviews were transcribed word by word and the nonverbal cues (for example, silence/sigh, frowns, and lean back) were included in brackets of the transcripts to ensure authenticity.

Results

Characteristics of the participants

A total of 42 postpartum mothers were interviewed. The demographic profile of the postpartum mothers, which was related to age and parity, were noted to correlate their perceptions towards the care provided by male student nurses during midwifery practice.

The findings related to demographic profile from postpartum mothers who participated in the study are as follows:

The age distribution analysis revealed that 9% of the postpartum women were adolescents (10-19 years) this could arouse feelings that might affect their perceptions of the care provided by male student midwives who were also in that age range¹⁸. Most mothers (86%) had delivered 2 - 3 babies in the training hospital; 12% had delivered 4-5 babies and 3% had delivered 6-7 babies. This implies that most of the women would have had an encounter with male student nurses during childbearing in the maternity wards.

The results revealed one theme and three sub-themes as the perceptions of postpartum mothers towards the care given by male student nurses during midwifery practice as presented in Table 2. Each sub-theme is discussed using relevant quotations from the participants. The direct quotations are presented and represent the attitudes of the participants during the midwifery practice of male students. Verbatim transcripts are presented, without any attempt by the researcher to correct the grammatical errors. Table 2 presents findings of interviews conducted from five

Table 1: Age in years and Parity of Postpartum Women (n = 42) in Limpopo Province, South Africa

Criterion	Characteristics	Frequency	Percentage
Age	10 – 19	4	9%
	20 – 29	23	55%
	30 – 39	10	24%
	40 – 49	5	12%
Parity	2 – 3	36	86%
	4 – 5	5	12%
	6 – 7	1	3%
Total	42		100%

Table 2: Theme and Sub-themes reflecting Perceptions of Postpartum Mothers towards Care by Male Student Midwives during Midwifery Practice in Limpopo Province, South Africa

Theme	Sub-themes
Views of postpartum mothers related to care provided by male student midwives during midwifery practice	1.1 Male students' care preferred by pregnant women
	1.2 Male student midwives viewed as respectful, sympathetic, and caring
	1.3 Male student midwives are viewed as scared to practice midwifery

selected district hospitals of the Limpopo Province, amongst 42 postpartum mothers.

Theme 1: Views of postpartum mothers related to care provided by male student midwives during midwifery practice

Most postpartum women had positive attitudes towards the care provided by male student midwives during midwifery clinical practice. The acceptance of the students differed based on cultural and religious background. The findings of the study indicated that most postpartum women (95%) felt that male student midwives were caring and sympathetic when providing health care in maternity wards. Postpartum women associated male student midwives caring skills to lack of childbirth experience. The following three sub-themes emerged and were discussed separately:

- Male student midwives' care preferred by pregnant women
- Male student midwives viewed as respectful, sympathetic, and caring

- Male student midwives viewed as scared to practice midwifery

Sub-theme 1.1: Male student midwives care preferred by pregnant women

Some of the postpartum women verbalised that they were comfortable to be attended by male student midwives when admitted in maternity wards because of their caring attitude. It was perceived by postpartum women that male student midwives understood that they were in pains unlike female midwives/students. One participant (mother 3) from hospital K indicated that:

‘‘I felt very comfortable to be examined by male student nurses, as I came across with few male nurses during my previous pregnancies. Nowadays is no longer a challenge to examine by male nurses because you can find them during your ANC visits at the clinic’’

Another participant (mother 8) from hospital E indicated that:

‘‘It was good to be assessed by male student nurses, they are young and understanding. I was free I did not feel embarrassed to examine by them’’

Most postpartum women felt that male student midwives were caring and sympathetic when providing health care in maternity wards.

Sub-theme 1.2: Male student midwives viewed as respectful, sympathetic, and caring

The findings of the study revealed that majority of postpartum women (97%) felt that male student nurses treated them with respect and dignity compared to their female counterparts. One participant (mother 3) from hospital S indicated that:

‘‘I was happy and comfortable to be examined by them during labour because male nurses a vha semani’’ (They don't insult us)’’

Another participant (mother 3) in district hospital E indicated:

‘‘It was good because male nurses are sympathetic to us when we were in labour. Unlike female nurses were harsh and didn't understand other person when you say you are feeling pain. Male student nurses responded quickly when you need help unlike female nurses, when you called them to examine you they responded in a negative attitude. Male nurses are very understanding, and they will examine you in a caring manner [sic] ...’’

During the active phase of labour, the pregnant woman is overwhelmed with pain and anxiety; hence the midwife should treat all women in labour with respect and courtesy. The postpartum women emphasised that male students were able to maintain privacy and confidentiality when they dealt with them, which is the fundamental tenet of basic nursing care and the respect of human dignity. Postpartum women said that when male students were called for help, they responded quickly compared to female students/midwives. It was also revealed that male student nurses understood that women were in pain, unlike female midwives, who ignored or shouted at them when they were called.

Sub-theme 1.3: Male student midwives are viewed as scared to practise midwifery

The findings of the study revealed that postpartum women preferred male student nurses' care because of their caring skills; however, it was observed that male student nurses were scared to perform other procedures during their allocation in maternity wards. One participant (mother 5) from district hospitals E indicated that:

‘‘Though they are experiencing difficulties when allocated in maternity because you could see that they looked scared. Most of the time they listened to heartbeat instead of examining us whether the baby is coming or not’’

Another participant (mother 5) from district hospital K indicated that:

‘Male student nurses are scared and unsure. You will find them not doing anything and separated themselves in their group of male student midwives; they think that the pains you are experiencing are unbearable. They will hold you with hand and you can see that they are anxious’

Postpartum women mentioned that male student midwives were mostly seen checking the foetal heart rate and checking the vital signs.

Discussion

The findings of the study confirmed that the eligibility criteria of postpartum women who had delivered two children and more, was appropriate. It was observed that the frequency, with which the women utilise health services during pregnancy, gradually increased the acceptance of male students by pregnant women during midwifery practice. The majority (95%) of postpartum women in all five district hospitals indicated that they preferred the care provided by male students. However, the postpartum women articulated that it was difficult to be examined by male students in their previous pregnancy, but currently they were comfortable as male students could maintain privacy and confidentiality during examinations. Duman⁹ supported participants' views, indicating that some mothers reported that they did not mind the care provided by male student nurses in maternity wards if everything went well. Similar views elicited by Chimimba¹⁸ indicated that women accepted the health care provided by male midwives because at that time what is important, was to get help, not the gender of health provider. In the same study the researcher reported that the perceptions of women towards male midwives were significantly positive. It was also stated that women preferred the male students' health care because male student midwives were perceived to be soft when they talked with them during contractions. Other reasons for preference of male student midwives included their being perceived to be respectful, sympathetic, and caring. They displayed courtesy, patience and took prompt

actions when complications arose. Male students were able to maintain privacy when performing intimate procedure skills. Pregnant mothers asserted that male students were able to maintain confidentiality. Pilkenton and Schorn¹⁴ supported participants' views indicating that male nurses working in obstetric units are more sympathetic and lack preconceived ideas based on their own childbirth experiences than the female midwives.

However, male students were perceived to be scared and uncomfortable when examining the women during labour. They preferred to check vital signs and listen to fetal heart beats. The students need to be supported when examining women in labour ward where most of procedures are highly intimate. The postpartum mothers perceived that if male students would be willing to work in maternity ward the quality of maternal health would be improved. The study conducted by Armstrong¹² supported participants' views revealing that women were in support of male midwives training because men are regarded as helpful and could keep secrets better than female midwives.

However, participants' views were contrary to the study conducted by Duman^{9,19} which indicated that majority of women perceived that nursing was a profession suitable for women and male midwives cannot work at maternity services and they would not wish to be attended by male nurses during pregnancy and labour. El-Sayed and El-Nemer⁷ reported that Muslim women perceived care by male caregivers as not acceptable. In the study by Inoue *et al.*¹¹ findings revealed that one male nurse reported that when performing intimate procedures such as vaginal examinations and perineal care was the only time when he felt that he was a male in the female profession. He knew that providing intimate care was a health requirement for the woman but the thought of touching and seeing the private parts of women during labour could result in sexual implications. Kantrowitz-Gordon *et al.*²⁰ had similar views that male nurses also fear being thought to inappropriately handle female patients during the performance of procedures perceived to be intimate. This resulted in the abandonment of labouring women and a retreat into performing menial tasks.

Other authors have documented negative perceptions on the care provided by male student nurses. In a study by Eswi and El Sayed²¹ and Duman⁹ it was indicated that male students were rejected as male caregivers during pregnancy and the labour period and that they faced lack of cooperation from the patients during their clinical exposure. This was supported by the findings of the study by Tzeng, *et al.*²² that male student nurses faced negative societal stereotypes because of their gender, as women often refused their care. This was attributed to the fact that the nursing staff in maternity wards are predominately females²³.

Conclusion

The results of the study identified variable perceptions because some of postpartum mothers preferred male student midwives over their female counterparts as they were perceived to be caring. Postpartum mothers perceived male student midwives as sympathetic and able to show respect during labour pains. The male students were able to respond quickly and positively towards the needs of women during labour. This was because they were present for continuous fetal monitoring. However, the religious and cultural aspects affected their perceptions as some felt embarrassed to be examined by a young male. This study aims raise awareness and promote acceptability of male students in labour and maternity units, hence more male nurses should be allocated in maternity units at hospitals and clinics so that the women can get acquainted with them.

Recommendations

The study recommends that public awareness should be created about the availability and promote acceptability of male student midwives in maternity unit. The information should be given at the PHC clinics as the first point of entry where the pregnant woman starts her antenatal clinic (ANC). This information will enable the pregnant women and their spouses to adapt to the situation when they find male student midwives in the hospital. The community should be made aware about the presence of male student midwives in maternity wards through the health educators. The community nurses should share information to the

community headmen "*indunas*" and chiefs through their meeting about the availability and acceptability of male student midwives in maternity wards. Emphasis should be put in the media to start broadcasting about the availability of male student midwives in maternity wards. Allocation of the accoucheurs (qualified midwives) in maternity unit should be strengthened so that the pregnant mothers should get familiar to the health care provided by them.

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Authors' Contributions

CSM, the project leader and was involved in conceptualisation, data collection, analysis, and report writing; MSM was a Promoter to the students on conceptualisation, data collection, analysis and report writing, and finalisation of article writing. LBK was a co-Promoter to the students on report writing, drafting of article, and literature search.

Declaration

The authors declare that they have no financial or personal relationship(s) which may have inappropriately influenced them in writing this article.

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