Nursing and Health Sciences

Also relevant for Nursing Care Management, Nursing Education/teaching degrees at health sector schools, Health Sciences, Social Work/Social Education

Course: Health Sciences, Nursing Science Group of courses: Medicine and Health

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Course objectives:

Students should be taught theoretical basics, empirical findings and methodological concepts of women's and gender studies relevant to nursing and health.

They should become aware of the roles of and the logic behind the different nursing care professions and fields of action in the German health system, taking into account effects of gender and power relations in nursing professions and society in the context of health/disease along the life cycle.

Students become familiar with the significance of gender-specific aspects in professional practice and learn how to analyse and reflect upon them. Furthermore, they are introduced to the professional basics of nursing, diseases, health, care, coping and interaction as central categories of their professional fields. The study course aims at providing students with the ability to reflect upon their professional competences, taking the following aspects and criteria into account: adequate and equitable care, working towards the needs of patients and residents, nursing science and practice, ethics and care, quality development, economics and health promotion.

Teaching content/subject-specific gender studies content:

Gender issues are closely linked to key issues of health, disease, care and nursing and are of relevance in many fields in nursing and health sciences as well as in neighbouring disciplines such as care management and nursing education. An in-depth discussion starts with the question of how the fields of action for women who carry out care work or need assistance, support or care, can be systematically and adequately designed. This is primarily about women's participation and disadvantages. These perspectives are in the focus of nursing- and health-related women's and gender studies.

In the area of theory, studies have been carried out on the following areas:

- The professionalisation of health professions, illustrating the historical development of caring professions as women's professions and reflecting upon the current situation. One aspect are the stable gender stereotypes in career choices and the resulting medium- and long-term consequences for professional careers, work/life balance and income in old age. The gender ratios in health professions indicate traditional structures with women as being primarily responsible for body-related work and only secondarily for technology-related work. Gender-differentiated effects of stress and coping must still be viewed in the light of permanent stress problems with the aim of developing prospective interventions related to the equitable distribution of paid and care work.
- Management tasks in the health sector and in long-term care dealing with gender-inclusive HR policy, task assignments, remuneration and promotion of women. This includes models for balancing paid work, family life and care work (work/life balance, working hours schemes and models for re-entering employment, impacts of shift work) and professional careers of women in health professions (careers 40+, 50+, refresher courses). The interaction of management structures and gender perspective becomes obvious by looking at the growing importance of health professions in the face of personnel shortages and the huge problems in recruiting. Furthermore, nursing and health science findings on the significance of gender-specific case and care management and their implications for domestic nursing and care work are of relevance.

- Communication and interaction processes as well as interventions show how gender-related
 processes of understanding are perceived, initiated and controlled in dealing with health,
 disease, disability and the need for care. The focus is on negotiation processes in intervention
 planning according to gender-sensitive criteria, taking into account gender-specific emotional
 work in the health sector and the problems of women involved in domestic care.
- Nursing- and health-related care research illustrating how research questions and findings should be differentiated in order to understand and interpret research results with regard to gender bias and to be able to counterargue accordingly. The importance of nursing for health policy and a re-evaluation of care work aiming at creating awareness for and reallocation of social responsibilities must be considered.
- An interprofessional perspective on care in relation to patients' lives, systematically analysing
 the gender-specific inequalities in the life span. This establishes women's health-related risks,
 resources and competences in order to adapt care and support services and to apply them in
 respective settings.
- Health promotion and education as well as care consulting, developing new support structures
 for those who need it and concepts for consulting and training for specific target groups
 (women, families, men, children, refugees, migrants). This work also deals with gender-sensitive
 accompaniment and advice concepts for people who have experienced disease- or loss-related
 life events (e.g. mourning, flight) and with care- and health-related promotion of self-help and
 networking.
- Gender-related innovation processes integrating knowledge transfer and sustainability of
 findings. It is particularly important to take learning processes with gender-specific appropriation
 behaviour into account, for example when dealing with new technologies or taking
 responsibilities in leadership positions. This includes exploring myths and correcting errors
 about women's competence development in health and nursing professions.

In times in which knowledge tends to have a rather brief shelf life, the above selection of topics makes no claims to completeness, but is rather a concept that is open to new approaches and subject to change in future academic discourse.

Integration of gender studies content into the curriculum:

Students should become aware that gender structures and their impact in nursing and health professions are often rather random and present as unconsciously habituated behavioural patterns. They should be enabled to counteract these structures by actively contributing to gender-sensitive negotiation and definition processes.

Gender issues are always implied in scientific discourses on diseases, health and nursing: in historical reviews of the discovery and research of diseases, in the history of medicine and nursing, in the development of nursing theories and models, in the reception of differences in disease and nursing processes, in the (im)possibility of discrimination, in the perception of care work along the life span and its relevance for society, in the (unintended) reproduction of social inequality in health care as well as in the interpretation and application of nursing science research results. Furthermore, nursing science goals and contents in the curriculum relate to many different academic areas. Women's and men's approaches to the above topics often follow different gender-specific patterns related to the individual learning biography, experience and the way they acquire knowledge. The gender aspect should therefore be regarded as a central cross-cutting issue, which must be explicitly addressed in the relevant modules. Alternatively, a subject-specific gender module is expressly recommended at Bachelor's as well as at Master's level.

Degree Stage:

A module element on professionalisation considering the above gender-related aspects as well as sufficient consideration of interactions between academically qualified professionals, persons in need of care and their relatives (professional interaction and relationship skills) should be integral part of the Bachelor's degree course. Furthermore, concepts of self-image and public image in a professional field that is traditionally primarily chosen by women and an in-depth examination of gender-appropriate language should be addressed at Bachelor's level.

The other content listed is significant at both Bachelor's and Master's level. Graduates at Bachelor's level should have acquired basic knowledge of gender as a cross-sectional element in dealing with health and diseases, be able to critically reflect upon existing knowledge and skills and have learned to take initial planning steps for theory-based interventions in nursing situations (personal, learning and methodological competence).

At Master's level, students should study the above elements in greater depth with the aim of reflected scientific professional and research competence. The focus should be on advisory and training/management skills and on analytical and research skills for research-based innovations.

Basic Literature/Recommended Reading:

- Beyer, Sigrid (2008): Frauen im Sterben. Gender und Palliative Care. Lambertus Verlag, Freiburg.
- Flieder, Margret (2002): Was hält Krankenschwestern im Beruf? Eine empirische Untersuchung zur Situation langjährig berufstätiger Frauen in der Krankenpflege. Mabuse Verlag, Frankfurt/ M.
- Gröning, Katharina/ Kunstmann, Anne-Christin/ Rensing, Elisabeth/ Röwekamp, Bianca (2012): Pflegegeschichten. Pflegende Angehörige schildern ihre Erfahrungen. Mabuse Verlag, Frankfurt/ M.
- Jansen, Mechthild (eds.) (2009): Pflegende und sorgende Frauen und Männer. Hessische Landeszentrale für politische Bildung, Wiesbaden.
- Nestmann, Frank/ Schmerl, Christiane (1991): Frauen das hilfreiche Geschlecht. Dienst am Nächsten oder soziales Expertentum. Rowohlt Verlag, Reinbek bei Hamburg.
- Overlander, Gabriele (2000): Die Last des Mitfühlens. 3rd ed., Mabuse Verlag, Frankfurt/M.
- Piechotta, Gudrun (2000): Weiblich oder kompetent. Der Pflegeberuf im Spannungsfeld von Geschlecht, Bildung und gesellschaftlicher Anerkennung. Huber Verlag, Bern, Göttingen, Toronto, Seattle.
- Richter, Martin/ Hurrelmann, Klaus (eds.) (2016): Soziologie von Gesundheit und Krankheit. Springer Verlag, Wiesbaden.
- Rebscher, Herbert (eds.) (2016): Gesundheitsreport 2016: Analyse der Arbeitsunfähigkeitsdaten. Schwerpunkt: Gender und Gesundheit. Beiträge zur Gesundheitsökonomie und Versorgungsforschung (Band 13). https://www.dak.de/dak/download/gesundheitsreport-2016---warum-frauen-und-maenner-anders-krank-sind-2108968.pdf accessed 28.11.2023.
- Scheele, Sebastian (2017): Gender und Sozialraumorientierung in der Pflege. Expertise für den Zweiten Gleichstellungsbericht der Bundesregierung, Berlin.
 https://www.bmfsfj.de/bmfsfj/themen/gleichstellung/gleichstellung-und-teilhabe/strategie-gender-mainstreaming. accessed 18.11.2017.

Journals:

- Dr. med. Mabuse. Zeitschrift für alle Gesundheitsberufe | Website
- Pflege. Die wissenschaftliche Zeitschrift für Pflegeberufe | Website
- Pflegen. Zeitschrift des Evangelischen Fach- und Berufsverbandes für Pflege und Gesundheit (EFAKS) | Website
- Pflege & Gesellschaft. Zeitschrift der Deutschen Gesellschaft für Pflegewissenschaft | Website
- Zeitschrift für Frauenforschung und Geschlechterstudien (until 2008)
- Gender. Zeitschrift für Geschlecht, Kultur und Gesellschaft. | Website