



Exploring How Nursing Student Uniform Influence Professional Image

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Abstract: Uniforms play a key role in the description of occupational margins and the formation of professional identity in healthcare. The aim of this research study is to explore student nurses' perceptions of their uniform on their professional image at the College of Health Sciences. The goal is to investigate the findings of this study to recommend a revision of the dress code policy that would intensively support students' professional identity, promote safety, and offer satisfaction. This is a qualitative interpretive research study, which data collection is done through semi-structured qualitative interviews. Three interviews were conducted with the student nurses registered at the College of Health Sciences in the UAE. Thematic analysis was followed to analyze the collected data. The main finding of the study is that uniforms have positive influence on the student nurses' appearance as health care professionals. Interviews raised issues in the area of cultural perspectives. Since this study shows the importance of uniform to students, uniforms need to reflect the professional image and culture as presented in the recommendation section.

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1. Introduction:

Similar to all clothing, uniforms ease communications among individuals; they signify the wearer's role, behavior and social status (Hertz, 2007). Because a nurse's look can influence perceptions during an interaction, the dress codes during the delivery of care in the field should consider this (Thomas et al., 2010) as uniforms offer a symbol of conformity, self-control, and the visual representation of identity (Hertz, 2007). The quality of care provided is reliable on how the health care worker is dressed (Sparrow, 1991; Newton & Chaney, 1996; Spragley & Francis, 2006). The patient is able to evaluate the care giver's professional identity, attitude, mood, and character attribute based on appearance (O'Lynn & Karutscheid, 2011).

The understanding of uniforms by others has been of great concern to behavioral psychologists and sociologists. The white uniforms that nurses wore in the early 1900s have been associated with the nursing profession for decades and will certainly stay a dominant image (Kaser, Bugle & Jackson, 2009). However, there were attempts to relinquish the white uniform in favor of comfortable and colorful outfit. It is well known that the uniformed appearance of the nurses is a powerful symbol of professional distinctiveness (Lehna, Pfoutz & Peterson, 1999; Mangum, Garrison, Lind & Hilton, 1997). Specifically, for nursing students, the uniform is considered the continuity to their view of themselves as

professionals (Fogle & Reams, 2014) and to their performance, confidence, and pride (Shaw & Timmons, 2010). Patients have considered nurses wearing a casual costume as less professional than those dressed in traditional whites (Kaser et al., 2009).

Many people still have no clue that nurses are self-directed professionals with advanced skills. Instead, people continue to believe that nursing is restricted to females, and images have been presented as extremes from a maid to an angel. These images presented in one way or another since the beginning of nursing at the time Florence Nightingale to the modern nursing profession (Hoeve, Jansen & Roodbol, 2013). Today, the multi-media play an important role in developing and supporting these common attitudes. Certainly, research endorses that even audio-visual media, such as television, impact the community's views and attitudes about nurses (Summers, 2010).

The United Arab Emirates (UAE) is experiencing speedy and intense developments in the healthcare sector reinforced by population progress and the changing needs for healthcare services (UAENMC, 2013). The aim of this research study is to explore student nurses' perception of their uniform on their professional image at the College of Health Sciences (CHS). The goal is to use the findings of this study to make the modifications to the dress code policy that would support the students' professional



image, promote safety, and offer satisfaction for the care receivers.

2. Theoretical Framework:

The result of this key topic search includes nursing uniform, learning, self-image, self-concept, symbolization, and non-verbal communication. It is Blumer's symbolic interactionism theory (Blumer, 1969) that is believed to contribute to the purpose of this research study. The following section presents the theory's main concepts, limitations, and application to the current study.

2.1. Symbolic Interactionism

Symbolic interactionism is a communication theory, its perspective reports the mode in which culture is shaped and sustained through direct, recurring, expressive interactions among people (Carter & Fuller, 2016). Social interactionists believe that communications and interactions from reality (Blumer 1969).

The theory involves three premises: meaning, language and thought. Meaning develops during the course of communication between individuals within the community. Language is the foundation of meaning. Whereas thought is the ability to think instead of instinctively reacting to things (Leyson, 2015). These central values lead to inferences about the formation of a one's self and interaction into a bigger community (Griffin, 1997).

Understanding these symbols is important in understanding human behavior. The symbolic interaction viewpoint is built on how persons create a complicated group of symbols to give meaning to the world. It is through communication that individuals progress an impression of social configurations and also of self-concept. Society and self-concept influence behavior through restrictions by social typical patterns and standards (Leyson, 2015).

2.2. Self - Concept

Alongside with symbols, meaning, and interaction, the self is a vital model in symbolic interactionism. The basic characteristic of self is that it is a reflexive phenomenon. Reflexivity enhances people to perform toward themselves as objects and evaluate themselves. This human feature created by the concept that people can see themselves from others' point of view, a self-concept (Mead, 1934).

Self-concept is shaped by contact and interaction with other individuals in the community. It is developed through the reaction process of other on one's self. When shaped it enhances one's perception of self and provide an essential motive for behavior (Leyson, 2015). Cooley's (1902) asserted that, through the concept of the looking glass self, individuals see and evaluate themselves the

same way others see and evaluate them, including pride or shame feelings.

2.3. Meaning of the Dress

Herbert Blumer contended that meaning is attributed to social interaction. Meanings are developed and modified through the processes of dealing with others. The meaning of the dress gives descriptive features to the wearer, such as trendy, funny, fashionable, serious, professional etc. (Clarke, n.d.). It is important to acknowledge that the perception of the dress is heavily influenced by cultural meanings (Twigg, 2009).

Manis and Meltzer (1978) have criticized Blumer's theory. Their criticism was mainly based on two aspects. One of which the perception of symbols meaning is not consistent among people and can be interpreted and understood differently. Thus, it is not applicable to generalize this subjective nature of interpretation to wide social structures. The other aspect is that Blumer asserted the human's self- concept is originated from social interaction and language but failed to specify if it is of biological or social origin (Manis & Meltzer, 1978).

The reasons for selecting this particular theory to guide current research study are two folds. First, the core of this study is mainly about nursing students' self-concept regarding their dress code policy. This is evident in Blumer's theory through the notion of looking-glass self. The theory depicts clearly the relationship of meaning and the individual self-concept. Second, symbolic interaction theory provides the basis for the development of meaning in respect to dress as a symbol that is created and maintained through the individual social interaction in the community. That is the nurses' dress that is associated with their profession decades ago.

3. Literature Review:

Extensive literature review was carried out on nurses' uniforms to approve their significance and impact on both nurses and individuals involved in the health care system; only limited number of empirical studies researched this phenomenon (Shaw & Timmons, 2010). To adhere to the scope of this study, literature focus on the student nurses' perception of their attire that is influenced by their community is highlighted. On the other hand, the awareness of the role of the uniform as a resource of social role helps shape the working dress for these future nurses. Therefore, it provides a means to define group membership, status, and accomplishment (Carey, 2013). The following sections shed light on the history of the nurses' uniform, and a reflection of literature on the role of the uniform in shaping professional identity and patient's perception of nurses. The last section reflects the role of uniform in infection control practices.



3.1. Historical overview

It is most likely that during the early days of nursing (1850-1900) the nurses' uniforms were derived based on religious orders from nuns who were providing the nursing care to sick and injured people (South University, 2011). Since women were expected to cover their heads, the nuns' veil dictates fashion and promotes hygienic conditions (Bogart, 2012). At that time, uniforms were associated with caps and the clothes were designed to align with the requirements of the times, with the consideration of the cap a part of it. During World War I, it became clear that the previous styles of nurses' uniforms were no longer applicable. As the war carried a large number of injured people, nurses needed to act quickly and efficiently. The huge dress worn by nuns started to diminish and skirts were shortened for better movement. Thereafter, the uniform began to look more professional and it can differentiate between trained and non-trained nurses (South University, 2011).

As the popularity of the nursing profession developed, uniforms would continue to modify. By the 1950s, there was an increased need for uniforms which could be mass-produced and easily cleaned. Sleeves became shorter. Eventually, uniforms would become even less complex. Open-neck shirts and pants surfaced in the 1960s as more men entered the nursing profession, and by the 1970s, disposable paper caps replaced cotton ones. By the late 1970s, caps started to disappear altogether (South University, 2011) and no more an essential part of the students' uniform (Catalano, 2012). In the 1990s, the traditional nurses' uniform had been replaced with scrubs in most hospitals and healthcare facilities. Scrubs are shirts or tunic-style tops and trouser combinations. The functional, easy-to-care-for clothing provides healthcare professionals with comfort and more mobility (Bates, 2012). Uniform options have also expanded with many colors, shapes, fabrics, and prints to choose from. However, white uniforms were commonly worn by trained nurses.

3.2. Professional Identity

The nurses' uniform has played an important part in the growth of the professional identity of nurses (BCHNS, 2016). Fagermoen (1997) associated professional identity with nurses' self-esteem, defining it as "the values and beliefs held by the nurses that guide their thinking, actions and interactions with the patient" (p. 436). The professional image of nursing has been defined as the perceptions, impressions, beliefs and ideas that people have about nurses and nursing (Ginzel, 1992).

The community view nurses as professional health-care providers by the sight of their uniforms. This has persisted throughout the generations. Professionalism is mainly conveyed by the nurses' appearance, with the uniform being the major factor especially during the first

few moments of the nurse-patient meeting (Porr et al., 2014).

For nurses, the uniform is essential to their view of themselves as professionals and to their performance, self-image, and feelings of achievement (Shaw & Timmons, 2010). Patients have deemed health care professionals wearing non-conventional attire as less professional than those dressed in traditional ways (Kaser et al., 2009). Thus, the uniformed appearance of the nurses remains an influential symbol of professional identity.

3.3. Patients' perceptions

A persistent theme in the literature is the importance of patients being able to easily identify professional roles considering the dress code (Desta, Gebrie & Dachew, 2015). Studies identified that patients' perceptions of healthcare professional's attire showed preferences for different types of health care professional attire (Garvin, Ali, Neradelik & Pottinger, 2012). Detsky (2011) in his study "What Patients Really Want from Health Care" argued that patients want health care providers to appear professional, be identifiable, and demonstrate readiness to work. Mangum et al. (1997) found that patients rate a white uniform with a stethoscope around the neck as significantly more professional than other designed uniforms. The pilot study on patients' perception on nurses' attire of Porr et al. (2014) concluded that patients have expressed difficulty accurately distinguishing nurses from other hospital staff because standardized uniforms are no longer worn by the nurses. However, Litak (2011) referred to colored uniforms being as popular with patients as white is, and a significant cue for communication.

3.4. Infection control

There are very few studies that relate healthcare professionals' attire directly to infection and it is not recommended to carry out such experiments. For this reason, studies are done in non-experimental settings in which data can be used in clinical practice (Spruce, 2016). However, in a recent review of the literature for a European report on nursing attire, Thompson (2010) suggested that wearing a specific uniform should help minimize the risk of infection, meet the health and safety needs of staff who wear them, appear professional, and respect social and cultural standards of staff and their patients.

4. Methodology:

4.1. Research Approach

To explore what nursing students think and how they perceive the dress code policy during their learning process, qualitative interpretive design is believed the most suitable to fulfill the research aims. Qualitative research methods are sought for their prominence on



people's actual life experiences. They are deliberated to be well suited to relate to the importance that people place on the events, processes, and structures of their lives and their perceptions, presuppositions, and assumptions (Miles & Huberman, 1994). Qualitative researchers study people in their natural conditions and attempt to understand the meanings of people's experiences (Denzin & Lincoln, 2000). Quantitative designs were widely used previously in nursing studies. However, the current studies in the field conducted are qualitative in nature (Driessnack, Sousa & Mendes, 2007).

4.2. Instruments

It was acknowledged that semi-structured interviews are used to discover concerns and queries in nursing practice within a qualitative framework, as well as to create explanations for why these experiences occur (Thorne, Kirkham & O'Flynn-Magee, 2004). Semi-structured interviews are selected as the mode of data collection reinforced by related document analysis, as it was recognized that they have the advantage of being thought-provoking, motivating, not costly, and capable of producing the in-depth and rich data required (Streubert & Carpenter, 2003) in this study about nursing and other health care practices and experiences (Britten, 1999; Gill, Stewart, Treasure & Chawick, 2008).

Semi-structured interview questions were planned in a way that supports the researcher to explore the student nurses' views on their uniform and how it impacts their professional image, and to help to obtain more details and explanation of elicited ideas whenever more contribution from participants is needed. The interview content areas were sourced mainly from the literature, with specific questions added based on the researcher's experience. A primary pilot study was carried to find out whether the aimed theme was appropriate and covered.

4.3. Site, Population, and Sampling

The study took place at the CHS, UAE. The student nurses will demonstrate the intended outcomes of the study rather than students from other departments at the College.

Purposeful sampling technique is considered the most appropriate as it is widely used in qualitative research for it is recognized in the identification and selection of rich information (Patton, 2002). This includes recognizing and choosing individuals or groups that are especially well-informed and experienced with a phenomenon of interest (Cresswell & Plano Clark, 2011). In addition to knowledge and experience, Bernard (2002) note the importance of the participants' availability and willingness to participate, and the ability to communicate experiences and opinions in an articulate, expressive, and reflective manner (Palinkas et al., 2015).

For a qualitative study, an appropriate sample size is one that adequately answers the research question

(Marshall, 1996). Thus, the researcher considered the sample size of seventeen students who showed their interest to be involved in the interview sessions is adequate. Since this sample is considered the rich cases which are able to contribute to the aim and interest of the study. However, all student nurses are invited to participate.

Three interview sessions were held. The interview conducted by the researcher and lasted 30-45 minutes. It was digitally recorded and transcribed verbatim. Ethical issues about the anonymity and confidentiality were also assured.

The data obtained from the interviews are presented in following section in an objective manner without any interference or manipulation by the researcher.

5. Results:

The framework (thematic) analysis method was applicable for data analysis in this study. The framework method is now widely used in health-related research studies (Jones, 2000), and it is appropriate for interview data analysis (Gale, Heath, Cameron, Rashid & Redwood, 2013). The reporting patterns were the identified themes of data analysis (Braun & Clarke, 2006; Miles & Huberman, 1994). The following steps were followed by the researcher to originate themes from the obtained data: familiarization, coding, theme development, charting, and mapping and Interpretation. The themes incorporated all discussion concerns that took place during the interviews.

Five themes were emerged from all combined interview analysis and are discussed in the following section. The quotes presented are representative samples from interview groups.

5.1. Professional Image

This theme is associated with the participants' perceptions of the relation of their uniforms with the professional look, respect, and trust they obtain when wearing their uniforms from people around them. Many participants highlighted that the dress code was important to be able to mirror the knowledge they gain through their learning for people around them.

"when I wear, my uniform I look that I know more about nursing" (participant 1).

"my friends look at me as I am a real professional and I am so close to complete my study and graduation" (participant 2).

"people know that I have a lot of knowledge in the field and they can trust me" (participant 3).

"patients will trust me more as I am taking care of them" (participant 4).



Many participants feel that the uniform creates a unity within the healthcare sectors and professionals and promote equal and effective working environment.

“I look very neat and tidy when wearing my uniform” (participant 3).

“It reflects that I have learned what I supposed to know” (participant 4).

“people in the hospital will easily recognize me” (participant 2).

“I feel that I am like other nurses who are working in the hospital” (participant 5).

Some participants felt that the nurses’ uniforms make them look inferior to doctors.

“patients prefer to ask the doctors rather than nurses” (participant 2).

“my uniform reflected me as a nurse, and patients prefer to talk more to doctors” (participant 6).

The participants’ responses mainly concluded that wearing uniforms influence their preparedness for practice and it helps them to have more insight about their future job. It supports them to resemble nurses who are carrying their jobs in the field. Also, it impacts on their readiness to learn.

“It gives me an idea how I look like when I start my career” (participant 6).

“I will be familiar with future career” (participant 7).

“Helps me learn well” (participant 8).

5.2. Comfort and Safety

Many participants have displayed that wearing their uniforms affect their comfort during their practice and through their studies. They feel safe that they are putting on a protective outfit to avoid any hazards so their underneath clothes will not be spoiled with any accidental spillage.

“to protect me from chemical hazards, and spillage” (participant 6).

“I feel comfortable and easy to move around with trousers” (participant 7).

“I think it is safer to wear my uniform during my lab sessions” (participant 3).

“I expect when I wear my uniform then, I am protected from hazardous substances” (participant 5).

5.3. UAE Culture

In response to the questions on how the students’ families and society perceive their uniform, participants disclosed that there are differences in their families’ opinions regarding wearing trousers and not skirts and they referred this to the UAE culture, tradition and religion. Some participants responded that their families have no objections in regard to their uniform and encourage them to wear them with pride. However, others have associated the trousers as a part of the uniform as not preferred by their families and society as skirts are more appropriate to wear.

“some families prefer skirts over trousers” (participant 10).

“my family has no objections regarding the trousers” (participant 7).

“my family love to see me in my uniform” (participant 9).

“people in our community may look at us as wearing inappropriate clothes because of the trousers” (participant 8).

“the top should be long enough to reflect the decency and along with religious beliefs” (participant 11).

“my family is very encouraging and supportive” (participant 12).

5.4. Relationship with Patient

The majority of the students feel that they have a more positive connection with patients while wearing their uniforms. Some say that they may have more respect for their patient’s due to service provided and to wear their uniforms. Some responded that it impacted their social interaction and made the patients able to acknowledge their roles in respect to that of a doctor.

“the uniform assures my patients that I know what I am doing” (participant 4).

“for the patient to be able to distinguish between nurse and doctors” (participant 5).

“promote social interaction with my patients” (participant 6).

“patients will respect and trust me more while wearing my uniform” (participant 9).

“the patient will recognize me easily” (participant 12).

5.5. Dress Color

A large number of participants preferred the white uniform over other colors. However, some of them discussed having colorful attire to differentiate them according to their area of work. Others highlighted the importance of them distinguished from other health care professionals with more experiences.

“I prefer to be one color without patterns as it is more comfortable for the eye” (participant 3).

“white color uniform is what I prefer” (participant 1).

“I like my uniform to be white or green color” (participant 3).

“white as I can see easily any blood or dirt on it” (participant 4).

“I think I should wear blue and doctors should wear white” (participant 10).

“pink for child care and blue for other specialties” (participant 11).

“I prefer to have a blue uniform” (participant 12).

6. Discussions:

These findings convey to the reader how nursing students at the CHS associate with their dress code. The participants in this study suggested that their uniform is intensively involved in their professional appearance and it supports them in being presentable, knowledgeable and trustworthy. This is consistent with other studies (Clavelle, Goodwin & Tivis, 2013; Leventon, 1989; BCHNS, 2016; Fagermoen, 1997; Porr et al., 2014; Kaser et al., 2009). The interviews reflected that uniforms presented the wearers as skilled and qualified nurses. However, a few considers that the uniform is not related to one’s knowledge and skills abilities. Although, it is recognized that the dress code enhances the nurses’ much needed professional appearance which impacts her relationship with her patients; it should not impede on the delivery of holistic care and the provision of good and caring role models which is the heart of the nursing profession.

Healthcare workers need to be comfortable on the job (Desta, Gebrie & Dachew, 2015). Nursing uniforms that are too tight will restrict movement and can affect a worker’s ability to move quickly whenever needed. This is consistent with the students’ perceptions in this study that their nurses’ uniforms do promote their comfort. On the other hand, participants assure that their nurses’ attire protects them from chemical substances in the lab and

body fluid during the delivery of patient care. This safety concern was highlighted in Trinkoff et al. (2008) and Thompson’s (2010) reviews on the importance of the health care providers’ safety from workplace hazards they may face while they are carrying out their duties.

Concerns regarding the appropriateness of the dress code by the current UAE society have been relayed through different responses. The students’ views and their families – reported by students themselves – ranged from positive, to modification preferences, to negativity. Some participants regarded their pride and shared the encouraging comments from their families. Others revealed their preference for some modifications such as the preferences for skirts rather than trousers, or the adequate length of the top. This finding is assured by Shahidi et al. (2014) that the sociocultural content could influence nursing students’ perception of their professional nursing identity.

Central to any discussion about the nursing dress code should be the thoughts and views of the client (Mangum et al., 1997). Since the nurses’ outfits are the first aspects to note through the nurse-patient rapport, it does have a significant effect on the therapeutic relationship between them. Participants in this study considered uniforms positively impacted their relationship with their patients. This is evident in other studies (Desta, Gebrie & Dachew, 2015; Litak, 2011; Mangum et al., 1997; Porr et al., 2014; Garvin et al., 2012; Detsky, 2011). Few students have revealed their concerns of being labeled by their uniforms which may lead to a disregard of their knowledge and skills by some patients, as some of the patients may prefer to enquire about their health status directly from the doctor.

Participants’ responses to the uniform color question, varied. The majority preferred the white color uniform, while some opted for blue, green, and pink colors. Students suggest that the uniform color is essential to differentiate nursing staff and their scope of practice. However, other studies (Meyer, 2013) recommended colored tops or any solid color uniform to reflect more skills and knowledge than print scrubs or T-shirt tops. Another study carried out by Cassidy et al. (2013) looked at the uniform color preference among participants, these including patients, students, and nurses who found that the blue or white color is the most preferred; however, red was the least preferred.

7. Limitation of the Study:

There are limitations to the study mainly affected by time and the sample population restrictions. In regard to the time limit, the study was conducted in one of the CHS campuses that were convenient to the researcher. On this campus, the majority is female national students as there are no males currently enrolled at the College. These aspects excluded the expatriates and male students from being involved. They might have different experiences.



While the purpose is to collect an in-depth data, the researcher and the moderator tried to include all the students who enrolled in the nursing program to participate in the study. Another limitation was due to the number of volunteers who chose to participate. They could influence the overall holistic picture of the findings obtained. Moreover, to meet this study criterion and to be able to type verbatim, the focus group interviews are planned to be conducted in English, this may impact on the potential domination of respondents who are more confident to speak in English.

8. Recommendations:

A future focus on the nursing graduates after completing their studies may assist in understanding whether the nursing students' perceptions are constant or may change with time and experiences. Further research on uniforms and their relationship with professional identity, image and culture are needed. Future investigations on patients' perception of the dress code of nursing students in the UAE are also recommended. In addition, there is a need to perhaps conduct a research to highlight the infection control aspect in developing the dress code policy.

9. Conclusion:

In conclusion, uniforms can be considered as nonverbal communicators, they have the capacity to convey many different messages, both constructive and argumentative (Tiffany, 1987). People often make conclusions based on how a person appears (Thomas et al., 2010). The current study sought to explore what student nurses at the College of Health Sciences perceive as the most professional appearance and communication regarding their uniforms. It tries to gather insights on how those involved in health care view their current uniform and whether they believe it hinders or promotes a professional view of nursing. The goal is to use the findings of this study to influence any modification of the dress code policy that would promote students' safety, support their professional image and offer satisfaction for the care receivers.

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