

Men's perspectives on reproductive health issues in Slovenia

Perspektive muškaraca o pitanjima reproduktivnog zdravlja u Sloveniji

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Abstract

Introduction: Reproductive health is an important part of men's health and the health of community. It is often unacknowledged, neglected and not acted upon in time when problems appear. Oftentimes, it is also cast in the background when public discussion arises.

Aim: This study aims to explore men's perspectives on their reproductive health, how they protect it, and how they believe the society views it.

Methods: A qualitative research method was used, utilizing semi-structured interviews. Six men from three different age categories were included: two from age up to 20, two from ages 21-30, and two from ages 31-40. The data was analysed using a method of content analysis.

Results: Our findings revealed that men know little about their reproductive health and do not nurture it well despite being aware of the negative consequences. The interviewees identified the most significant risk factors for their reproductive health. We discovered that our participants think women take better care of their reproductive health than men.

Conclusion: Our results provide insights into men's perspectives on their reproductive health and how they perceive society's treatment of this issue. It is crucial to emphasize the importance of future research to deepen the understanding of men's perspectives on their reproductive health. Although men consider reproductive health an important aspect of their overall well-being, they do not take sufficient measures to protect it.

Keywords: reproduction, masculinity, disease, health promotion, public health

Short title: Men's reproductive health

Sažetak

Uvod: Reproductivno je zdravlje važan dio zdravlja muškaraca i zdravlja zajednice. Često se ne priznaje, zanemaruje i ne djeluje na vrijeme kad se pojave problemi. Također se nerijetko zanemaruje u javnoj raspravi o ovoj temi.

Cilj: Cilj je ove studije istražiti perspektive muškaraca o svojem reproduktivnom zdravlju, načinu na koji ga štite i o tome što misle kako na ovo pitanje gleda društvo.

Metode: Primijenjena je kvalitativna istraživačka metoda korištenjem polustrukturiranih intervjua. Uključeno je šest muškaraca iz triju različitih dobnih kategorija: dvojica u dobi do 20 godina, dvojica u dobi od 21 godine do 30 godina i dvojica u dobi od 31 godine do 40 godina. Podaci su analizirani metodom analize sadržaja.

Rezultati: Naša su otkrića pokazala da muškarci malo znaju o svojem reproduktivnom zdravlju i ne njeguju ga dobro iako su svjesni negativnih posljedica. Ispitanici su identificirali najznačajnije čimbenike rizika za svoje reproduktivno zdravlje. Osim toga, otkrili smo da naši sudionici misle da se žene bolje brinu o svojem reproduktivnom zdravlju od muškaraca.

Zaključak: Naši rezultati daju vrijedan uvid u perspektive muškaraca o njihovom reproduktivnom zdravlju i kako vide način na koji društvo tretira ovo pitanje. Ključno je istaknuti važnost budućih istraživanja za produblivanje našeg razumijevanja stajališta muškaraca o njihovom reproduktivnom zdravlju. Iako muškarci svoje reproduktivno zdravlje smatraju važnim aspektom vlastite opće dobrobiti, ne poduzimaju dovoljno mjera da ga zaštite.

Ključne riječi: reprodukcija, muškost, bolest, promoviranje zdravlja, javno zdravstvo

Kratak naslov: Reproductivno zdravlje muškaraca

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Introduction

Male reproductive health is an important part of a man's health. Despite men's active role in promoting their reproductive health, it is often overlooked due to cultural and social considerations. Over time, men themselves adapt a similar attitude towards their health [1].

In recent decades, male reproductive health has been declining, paralleled by an increased incidence of poorer sperm quality, lower serum testosterone levels, and an

increased incidence of testicular cancer in younger men [2]. Since men are not involved in activities related to strengthening and maintaining their reproductive health, the number of problems related to men's reproductive health is increasing and often remains hidden [3].

Male reproductive health is an area that often remains unexamined and neglected due to the preservation of the „macho“ image of men [4]. Men often do not take their re-

productive health as something important, and therefore, problems arising from this remain overlooked. It follows that they seek help for reproductive problems too late because they stoically and mistakenly believe in their invincibility and the ideal of „masculine strength“ [5]. The role of nursing in ensuring male reproductive health becomes visible is to make men aware of the importance of reproductive health and to recognize the biggest pitfalls and risk factors that impair their reproductive health. It is also important to involve and encourage men to take care of their reproductive health since they can do the most for their health [6].

Society treats men differently than women. Compared to women, men are more condemned, discriminated against, and neglected for various reasons [7]. That also applies to maintaining and strengthening reproductive health. In Slovenia, women can participate in the preventive screening programs DORA (national breast cancer screening programme) and ZORA (national cervical cancer screening programme), while men are still awaiting their 1st preventive screening program.

This study aims to identify and examine the factors men think have the greatest impact on their reproductive health. We also wanted to identify the preventive measures men use to maintain reproductive health and the risks they are exposed to.

Materials and methods

A qualitative descriptive research design was used in order to provide a rich and thick description. The purpose of this type research is an in-depth understanding of the chosen problem, not numerical representativeness, which is characteristic of quantitative research [8]. The latter is particularly challenging when studying phenomena heavily influenced by societal taboos and representations of masculinity, as is often the case in discussions surrounding men's reproductive health, where participants find it hard to find and openly discuss these issues.

The purposive sample consisted of 6 men of different ages: 2 men from the age category up to 20 years, 2 men from the age category between 21 and 30 years, and 2 men from the age category between 31 and 40 years. We invited men of different ages to the research through acquaintances and social networks. All the men we approached responded to collaborate in our research. There were still a few candidates on the reserve list in case of cancellation and poor information power or insufficient data derived from the interviews [9]. 5 participants completed secondary education level, and one completed higher education level.

Data was collected using semi-structured interviews. In the introduction, the interviewees provided general demographic data (their age, level of education, and the area in which they live). The interview consisted of the following questions: What does reproductive health mean to you; what do you think of when you think of male reproductive health; how do you think men's reproductive health is perceived by society and how men perceive it; is sexuality or reproduction a taboo subject and it must not be talked

about; what do you think are the biggest factors that threaten reproductive health; what measures you take to maintain your reproductive health; do you think that male infertility is a serious problem nowadays or is it a problem that relates more to women; in your opinion, how serious a problem is a sexually transmitted disease for an individual's health; are you familiar with ways to prevent sexually transmitted diseases; what do you know about testicular cancer, are you familiar with self-examination; if there was a national preventive screening program for, e. g., testicular cancer, would you respond to the invitation, if yes/no, why?

We recorded the interviews with the help of a sound recorder on a mobile phone and later transcribed them verbatim and checked them again with an audio recording after the transcription. The codes with which we coded the interviews were composed of the abbreviations of the first and last name and the age of the interviewee, e.g. DG40.

Obtained data was analyzed using thematic analysis as described by Kiger & Varpio [10]: (1) getting to know the obtained data, (2) generating initial codes, (3) finding themes, (4) reviewing themes, (5) defining and naming themes and (6) creating a report.

To ensure credibility and trustworthiness in this study, we implemented several rigorous measures, as outlined by Noble & Smith [10]. These included identifying and acknowledging potential personal biases that could influence the research process, employing data triangulation to enhance the depth and validity of the findings, and involving multiple researchers in the coding and analysis process to minimize individual bias. Additionally, we conducted member checking by inviting participants to review and comment on the interpretation of the data derived from their interviews. This step ensured that the findings accurately reflected their perspectives, enhanced the clarity of the data, and reduced the risk of misinterpretations. By combining these strategies, we aimed to uphold the integrity and reliability of our study's findings.

Results

Two themes were identified in our research analysis: (1) men's perspective on reproductive health and (2) socio-cultural aspects of men's health (Table 1.).

Men's Perspective on Reproductive Health

For the participants in the research, reproductive health is important, but despite that, men say that they do not know much about it.

„For me, reproductive health is tied to reproduction and procreation.“ (BB38)

The participants were aware of the vulnerability of their own reproductive health and were familiar with diseases that affect their reproductive system, of which testicular cancer, prostate cancer, erectile dysfunction, and infertility were most frequently mentioned.

„When I think of male reproductive health, I think of male reproductive diseases, e.g. testicular cancer. I think it's a very serious disease.“ (JG23)

FIGURE 1. Identified themes, sub-themes and representative codes

Themes	Sub-themes	Representative codes
Men's perspective on reproductive health	Reproductive health awareness	awareness of the importance of reproductive health, care for reproductive health, awareness of the negative consequences of neglecting reproductive health
	Men's attitude towards reproductive health	the impact of cultural norms on men's health, changing attitude through the life cycle, men's behaviours related to reproductive health
Socio-cultural aspects of men's health	Promotion of reproductive health	men's health promotion in health institutions, insufficient health promotion during adolescence, awareness of the importance of primary socialisation
	Social aspects of men's health	society's attitude towards male reproductive health, male reproductive health in the future
	Gender differences in health men	gender differences in reproductive health care, women's perspectives on male reproductive health

Since the interviewees were aware of how important reproductive health is to them, they also identified potential harmful factors to their reproductive health.

„The risk factors that most threaten men's reproductive health are lifestyle, workplace (carcinogenic factors), diet, little recreation, a sedentary lifestyle, consumption of prohibited substances and smoking.“ (RH22)

Interviewees highlighted the fact that men often despise and neglect their reproductive health, and they hardly care about it.

„Men have a dismissive attitude towards their reproductive health. We neglect it, because we think that nothing can happen to us.“ [...] „We don't want to be interested in our reproductive health.“ (RH22)

Many participants named several ways to preserve and strengthen their reproductive health.

„I think that strengthening reproductive health is mainly about lifestyle changes, i.e. eating healthier, exercising more, drinking less alcohol and not smoking.“ (RH22)

On the other hand, some participants said that they do not implement a single measure for strengthening their own reproductive health.

„I honestly don't take any measures to preserve my reproductive health.“ (JG23)

When asked about the risk factors for men's reproductive health, interviewees showed considerable knowledge about the harms that affect their reproductive health. They often mentioned unhealthy lifestyle, unhealthy diet, smoking, excessive alcohol consumption, abuse of prohibited substances, and exposure to carcinogens. While some men listed several factors that they believed threatened men's reproductive health, some focused on just one that was most important to them.

„The most important factor that threatens men's reproductive health is undoubtedly smoking.“ (MŽ19)

A sexually transmitted disease is a major concern for a man's health. All men recognized sexually transmitted disease as a potentially very harmful and negative factor affecting male reproductive health.

„Sexually transmitted disease is a serious problem, as it affects mental and physical health.“ (RH22)

The majority of men highlighted condom use as the only way to prevent sexually transmitted diseases.

„I know ways to prevent sexually transmitted diseases. These are: a condom and one sexual partner.“ (JG23)

When asked about testicular cancer and self-examination, all six interviewees answered that they did not know much about this disease. Also, almost none of them performed self-examination or performed it regularly despite having heard of it at some point in their lives.

„I know nothing about testicular cancer. I'm familiar with self-examination, but I don't do it.“ (DG40)

It is an encouraging fact that almost all men responded positively to participating in a possible government preventive screening program for testicular cancer and were ready to participate in it.

„I would respond to an invitation to a preventive screening program to detect testicular cancer.“ (BB38)

Socio-cultural Aspects of Men's Health

Education and society have a great influence on men's view of their reproductive health, which was evident in the answers given by the interviewees. They pointed out that they behave differently when they talk about reproductive health and that they are reluctant to talk about their problems.

„Men behave differently when it comes to reproductive health“ [...] „We often talk about problems too late when they arise, and as a result, many diseases, including reproductive ones, remain untreated.“ (RH22)

Male reproductive health has always been considered one of the taboo topics and is not discussed openly. Hence, almost all the interviewees were unanimous: male reproductive health is a topic that is not easy to talk about, but as time goes on, it is easier to talk about it because it's a topic that is becoming more important. Despite that, they think society tends to neglect men's reproductive health.

“Men perceive their reproductive health as not so important; we are aware of it, but we don’t take it so seriously. Sexuality and reproduction are certainly a taboo subject. It’s okay to talk about it, but it’s better not to.” (DG40)

According to mainly younger interviewees, nowadays, younger men can talk much more openly about topics such as sexuality, reproduction and reproductive health compared to their older counterparts.

„I think that sexuality is not exactly a taboo topic, at least among younger people, because we talk about it more openly, maybe it’s a problem with older generations.“ (MŽ19)

Few men pointed out that women take better care of their reproductive health.

„I think that women care more about their reproductive health, especially when they want to plan a family.“ (RH22)

Some interviewees admitted that they do not know much about reproductive health. In their opinion, school in early childhood and upbringing, as well as parents’ attitudes towards the subject of reproductive health, have a great influence on this.

„I myself remember a few lessons of sex education in elementary school, but then it ended. From a young age, people should be made aware of the importance of sexual health and its preservation.“ (RH22)

Discussion

The study aimed to determine how much men know about their reproductive health, how they perceive it, and how they think society perceives their reproductive health.

The results obtained in the study reveal how men perceive their reproductive health, how they take care of it, and how society views it. Solidarity from society and its assistance to men when they encounter reproductive issues, rather than condemnation and exclusion, is important in forming a positive perspective on men’s reproductive health [11]. The answers given by the interviewees indicate that men generally perceive their reproductive health as important, but still do not take good care of it. That aligns with findings by Díaz-Rojas et al. [12] a critical reading was conducted on recent research about men, sexual health and reproductive health in Latin America, based on a literature review. Were analyzed 55 studies. Despite some changes seen in the transit to new masculinities, mainly linked to paternity, it was found that hegemonic masculinity is still present in the sexual and reproductive experiences of Latin American men. Since adolescence, there are practices, ideas and construction of values interrelated with a male sexuality distant from caring for oneself and others. Studies on sexually transmitted infections (STIs), who argue that men often neglect reproductive self-care due to entrenched societal norms of hegemonic masculinity, which discourage vulnerability and seeking healthcare assistance.

Participants in the study highlighted at least one or more issues affecting the male reproductive system during the interviews: prostate cancer, testicular cancer, erectile dysfunction, sexually transmitted diseases, and infertility.

Men were able to list risk factors negatively impacting their reproductive health, such as those cited by Reš-Muravec [13]: risky sexual behavior, chemical factors, obesity and overweight, use of illegal substances, smoking, and excessive alcohol consumption. Díaz-Rojas et al. [12] further emphasize the role of health systems in perpetuating gender inequalities by being poorly adapted to the needs of men, which often discourages male engagement in preventive health services. One of the negative findings of the study is that, despite men being aware of the risks to their reproductive health, only a few take measures to maintain and enhance their reproductive health.

The study results showed that men know very little about testicular cancer and self-examination and rarely, if ever, perform self-examinations. Despite testicular cancer being the most common disease of the male reproductive system in the age category to which all interviewees belong, i.e., 15–40 years [14], the fact that almost none of the interviewees perform self-examinations is concerning. As Nicholas et al. [15] highlight in their study on vasectomy and masculinity, traditional notions of masculinity often deter men from adopting preventive health measures, as these are seen as incongruent with masculine ideals of strength and self-reliance.

It is no secret that men are a demographic that visits doctors less frequently and participates less often in the national preventive screening program for early detection of colorectal cancer (SVIT). That is confirmed by the study of Hergula [16], which states that male participation in the SVIT program is 10% lower compared to women. The annual attendance of women in the ZORA and DORA programs is around 70%, while the percentage for the SVIT program, which includes men, drops to 62%. That is emphasized in findings by Sharma et al. [17], who note that sociocultural norms and low health literacy levels among men often result in reduced participation in health initiatives, further complicating efforts to engage them in reproductive health programs. Our interviewees were asked if they would be willing to participate in a potential national preventive screening program for early detection of testicular cancer, to which 5/6 or 83% of interviewees responded affirmatively. On the other hand, the question arises whether male responsiveness would be as high in practice or if the attendance rate would drop to a more likely 50-60%, as we see with the SVIT program.

Men’s perception of their reproductive health and their care for it are strongly influenced by upbringing and primary socialization. Psaki et al. [18] state that primary education can have a positive effect on the care of one’s reproductive health in the future. Educating adolescents about reproductive health is an effective tool that limits the practice of behaviors harmful to reproductive health and positively influences their perception of reproductive health in the future, state Ene-Bongili et al. [19]. Díaz-Rojas et al. [12] support this by highlighting the transformative potential of health education programs that integrate masculinity perspectives, which can effectively challenge harmful gender norms and promote self-care.

Participants believed that more health promotion by health institutions is needed. That would greatly contribute to reducing morbidity from male reproductive diseases and their early detection, as men are a demographic group proven to seek help from health professionals less frequently when needed [20]. The study results showed that men and women take care of their reproductive health differently. From this, we can assume that gender is one of the significant risk factors for human health, which is also the opinion of Regitz-Zagrosek [1].

Male reproductive health is a taboo topic: this is agreed upon especially by interviewees in the 30-40 age category, while their younger colleagues do not entirely agree with this statement. That indicates that the stigma of sexuality and reproductive health was experienced primarily by older generations and that younger generations are now more openly discussing these topics. Nicholas et al. [15] observe a similar generational shift in attitudes, with younger men being more open to discussing reproductive health and engaging in shared responsibilities for contraception and family planning. Past ways of perceiving reproductive health in older generations can influence the current perception of reproductive health in younger generations. Flajs [21] notes that this phenomenon is normal and has been repeated throughout history. Therefore, it is not surprising that younger interviewees in our study find it easier to talk about sexuality and their reproductive health.

While these findings provide valuable insights, this qualitative study has some limitations. Unlike quantitative research, where generalizability is often a key criterion, the goal of qualitative research is typically to offer a rich, contextualized understanding of specific human experiences rather than to generalize findings to a broader population [22]. In this study, the small sample size and its focus on a Slovenian context mean that the insights may not directly apply to men's reproductive health perceptions in other countries. However, qualitative research emphasizes transferability, where detailed contextual information allows

readers to assess the applicability of findings to other settings. Díaz-Rojas et al. [12] emphasize the importance of tailoring interventions to specific cultural contexts, which could be particularly relevant for adapting findings across diverse populations. Future research should consider including participants from other European countries to facilitate cross-cultural comparisons and broaden the scope of insights. Expanding the sample size in subsequent studies would also allow for a wider range of perspectives and more diverse responses to the research questions. Additionally, conducting complementary quantitative studies in this area could provide further evidence and enrich understanding through mixed-methods approaches. Based on the results and insights obtained, future research could help inform the development of targeted recommendations and programs aimed at encouraging men to maintain and enhance their reproductive health.

Conclusion

Male reproductive health is one of the pillars of men's health and social health. The results of our research indicate that men are aware of their reproductive health but do not take good care of it. Despite knowing what the risk factors are, some do not take measures to preserve their reproductive health. When we look at male reproductive health from a societal perspective, we find that male reproductive health is neglected, overlooked, and undervalued in society. The solidarity of society and understanding of the importance of men's reproductive health are fundamental. Only in this way, we can move in the right direction in this area. That way, we will have a much stronger and healthier society that will nourish a positive outlook on male reproductive health.

Authors declare no conflict of interest.

Nema sukoba interesa.

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