

Chapter 9

Boys and men are under-represented in health studies and among teachers

Key findings

- In 2015, 22% of girls but only 8% of boys expected to work in the health sector in the future – a gender gap that has widened since 2006 in most OECD countries. In 2015, nearly four times as many women as men studied health and welfare across the OECD.
- On average across the OECD, only 18% of primary school teachers are men, 32% of lower secondary teachers, and 42% of upper secondary teachers. The current expectations of 15-year-olds across the OECD in 2015 give little reason to expect a more gender balanced future – around 8% of girls but only 3% of boys expect to work as teachers.

The statistical data for Israel are supplied by and under the responsibility of the relevant Israeli authorities. The use of such data by the OECD is without prejudice to the status of the Golan Heights, East Jerusalem and Israeli settlements in the West Bank under the terms of international law.

Men are under-represented in health and welfare

Analysis of gender segregation in educational choices and labour market outcomes often focuses on women's under-representation in science, technology, engineering and mathematics (STEM) professions. Sadly, though, skewed gender ratios are also pertinent in the fields of health and education, where it is men who are in a minority. Indeed, the perceived feminisation of the teaching profession may be a factor in teenage boys' low motivation and lack of involvement in school. Some female teachers may also use methods to which they do not relate, encouraging behaviour that girls are socialised to perform and sanctioning attitudes more commonly associated with boys. In all OECD countries, there is a positive relationship between the share of men who teach and the share of boys who graduate from upper-secondary school (OECD, 2016a). The inference is that the presence of male teachers may give boys a more affirmative learning environment and that they can be positive role models.

The under-representation of men in health care is also of concern because the sector is forecast to grow in the future, in contrast to male-dominated fields like manufacturing and construction, which nevertheless command higher wages. Unless men are willing to enter the female-dominated health care profession, it may soon have to contend with unmet demand for workers.

Health care is, in fact, often associated with welfare (social services), a field often referred to as health and welfare. The share of men who study for a degree in social services varies from country to country. In Brazil, Estonia, Finland, Latvia, Lithuania and Slovenia, the share is less than 10%, compared to 40% in Indonesia and Japan. OECD-wide, one in four health and welfare students is male, but the statistic masks wide variations between related subfields and specialisations.

Men are less likely than women to work as teachers

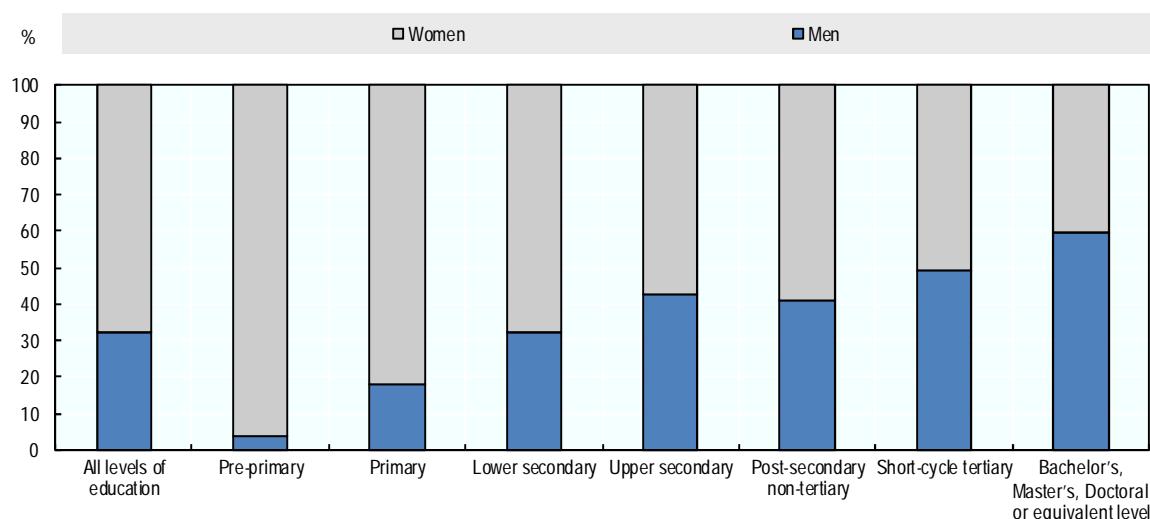
In all OECD and key partner countries with available data, women make up the bulk of primary school teachers. Men account for only 18% on average and, in 11 out of 42 countries with available data, less than 10%. As the level of education rises, so does the proportion of male teachers – 32% and 42% in lower- and upper secondary school, respectively, and 47% of teachers in higher education (Figure 9.1).

Such figures are of concern, as many of the male teachers currently employed in primary and secondary schools will soon reach retirement age. The result will be even larger proportions of female teachers – what some have termed the “feminisation” of the teaching profession. In 25 of the 36 OECD and key partner countries with available data, the share of men among secondary school teachers aged 29 or younger is smaller than among those aged 50 to 59 years old. Only in Italy (51%) and Japan (56%) do men comprise the majority of teachers under 30. In China, Indonesia, Japan, Korea, Luxembourg, the Netherlands, Switzerland and Turkey, most teachers aged between 50 and 59 are men and, in China, Indonesia, Korea and Turkey, the share of male teachers aged 29 or younger is at least 37 percentage points lower than those between 50 and 59. Those proportions reflect an enormous shift in the gender profile of the teaching profession across the generations.

Of all degree-level courses, the greatest gender imbalance was in education studies, where fewer than one in four graduates OECD-wide were men in 2014 (OECD, 2016a) and, in eight countries, less than five. In no country was the gender gap pro-men. Only in India, Indonesia, Luxembourg and Turkey was it less than 2/1 in women's favour. The female-to-male ratio in university-level education studies was highest in Estonia at 12/1.

Figure 9.1. Most teachers are women, but the share of male teachers rises with the level of education

Gender distribution (%) of teachers by level of education, public and private institutions, OECD average, 2013



Source: OECD (2016), *Education at a Glance 2016: OECD Indicators*, OECD Publishing, Paris, <http://www.oecd.org/edu/education-at-a-glance-19991487.htm>.

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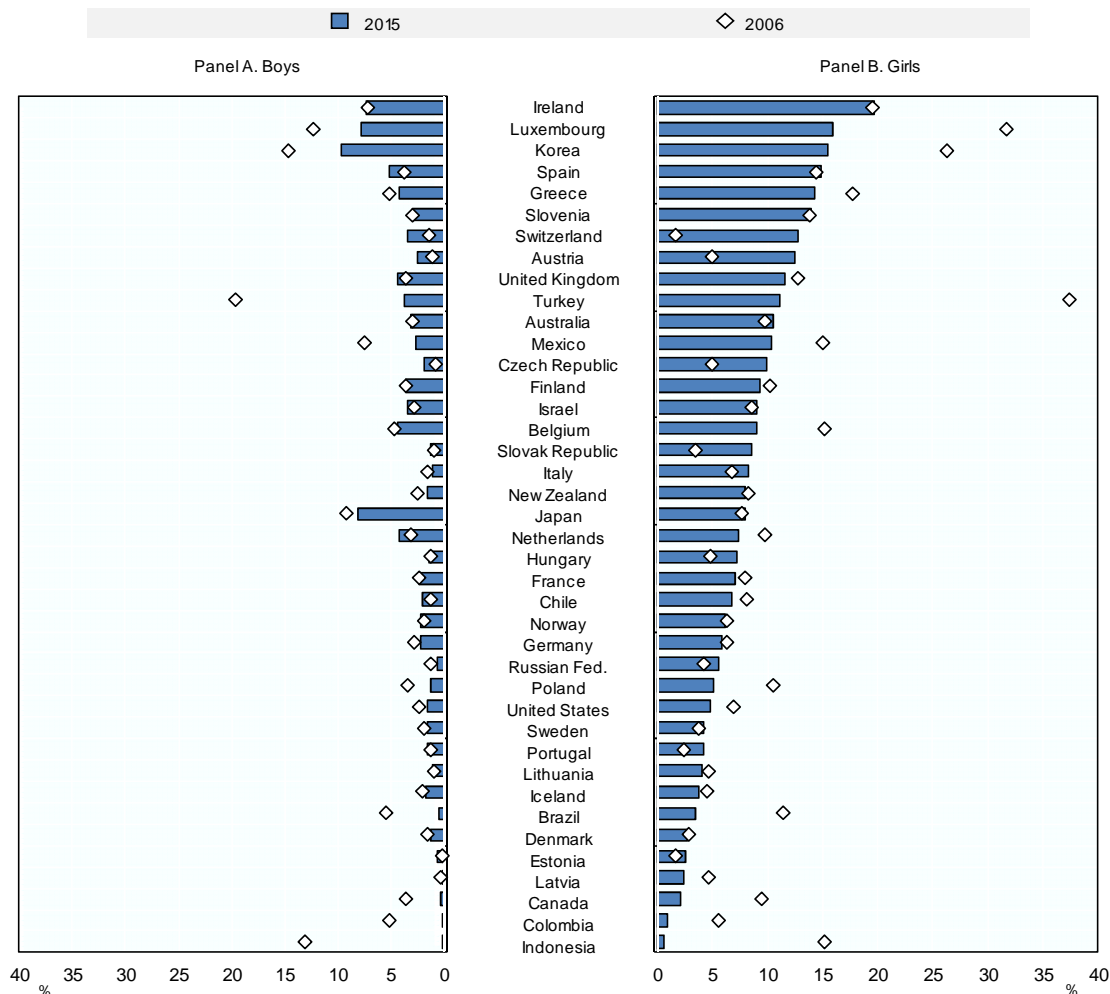
The gender gaps in career plans to work as teachers or health workers emerge in adolescence

As early as the age of 15, boys are already less likely than girls to expect to work in health and welfare or teaching. In 2015, around 8% of girls but only 3% of boys OECD-wide said that they expected to work as teachers. In Ireland, Korea and Luxembourg, more than 15% of girls expected to work as teachers, while in Japan and Korea, over 8% of boys so reported (Figure 9.2). Girls were more likely than boys to think of teaching as a career in all countries and economies except for Japan.

In some of the countries with data for both 2006 and 2015, the proportion of students expecting a teaching career changed significantly. In Austria, the Slovak Republic and Switzerland, for example, the percentage of girls who reported that they expected to work as teachers grew by more than 5 percentage points over the ten-year period. By contrast, the would-be teachers among girls in Belgium, Brazil, Canada, Indonesia, Korea, Luxembourg, Poland and Turkey, fell by over 5 percentage points. As for the percentage of boys who said that they were expecting teaching careers, it rose by 2 percentage points in Switzerland, but dropped by the same amount or more in Brazil, Canada, Colombia, Indonesia, Korea, Luxembourg, Mexico, Poland and Turkey.

Figure 9.2. More girls than boys expect to work as teachers

Proportion (%) of 15-year-olds who expect to work as teachers by the age of 30, by gender, 2006 and 2015



Note: Countries are sorted from top to bottom in descending order according to the proportion of 15-year-old girls who expected to work as teachers by the age of 30 in 2015. PISA 2015 asked students what occupation they expected to be working in by the time they were 30 years old. Students could enter any job title or description. The occupations that they gave in their answers were later classified in the 2008 International Standard Classification of Occupations (ISCO-08). Since the same question was asked of students in 2006, it is possible to assess changes between 2006 and 2015 in the percentage of boys and girls who expected to work as teachers.

Source: OECD Secretariat calculations based on *OECD PISA 2015 Database*, <http://www.oecd.org/pisa/data/>.

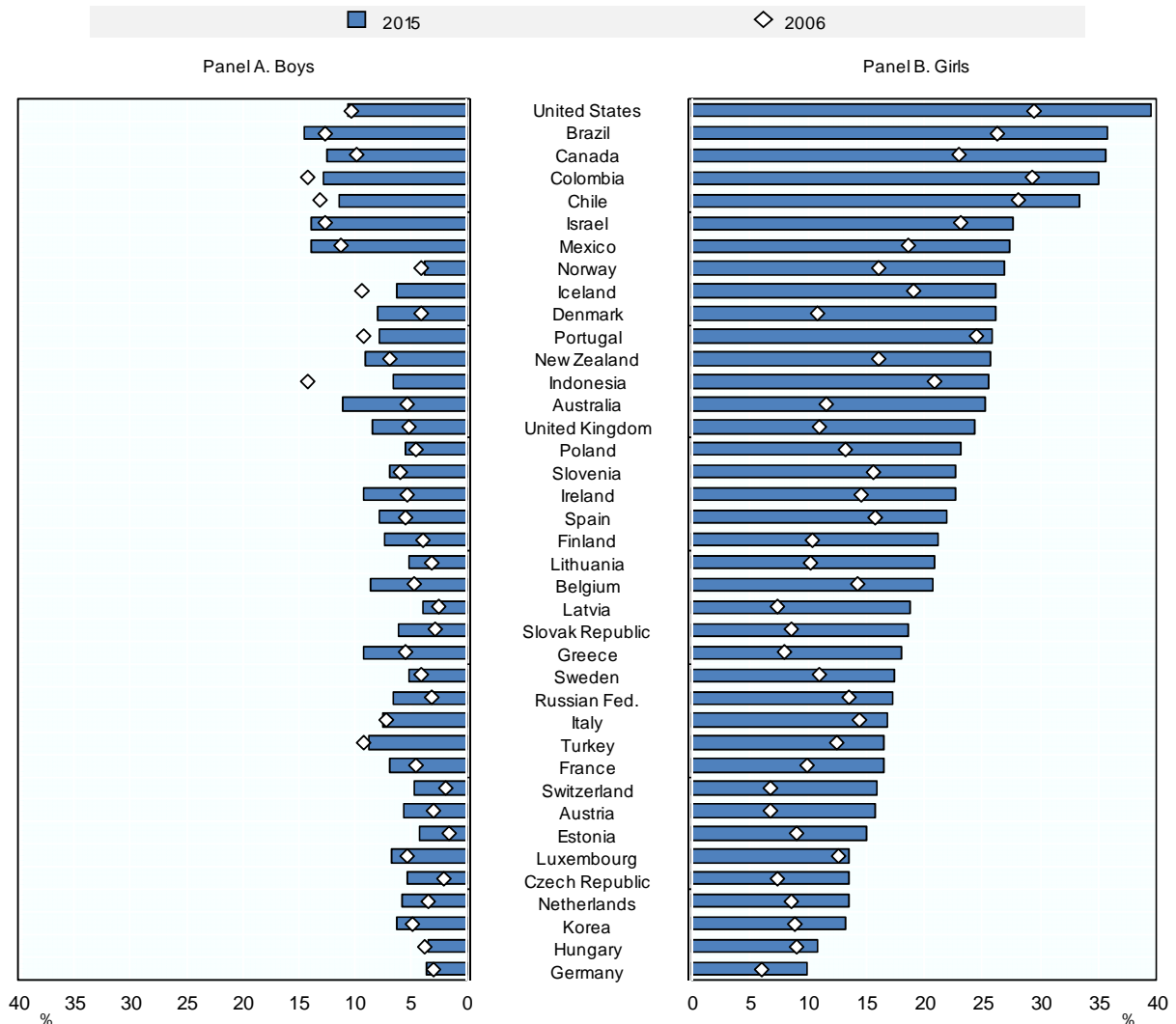
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Boys and young men are unlikely to pursue health-related studies

OECD PISA suggests that 15-year-old girls are two to three times more likely to pursue health-related studies than boys. Furthermore, while the expectations of 15-year-old boys were relatively stable between 2006 and 2015, the percentage of girls who stated that they expected to work in the health care sector grew significantly in most countries (Figure 9.3). As a result, the gender gap in the percentage of students expecting to work in the health care sector grew in most countries. In Canada, the United Kingdom, Iceland, Norway, Denmark and Indonesia the gap widened by at least 10 percentage points.

Figure 9.3. Girls are increasingly more likely than boys to expect to work in the health care field

Proportion (%) of 15-year-olds who expect to work in the health care sector by the age of 30, by gender, 2006 and 2015



Note: Countries are sorted from top to bottom in descending order according to the proportion of 15-year-old girls who expected to work in the health care sector by the age of 30 in 2015. PISA 2015 asked students what occupation they expected to be working in by the time they were 30 years old. Students could enter any job title or description. The occupations that they gave in their answers were later classified in the 2008 International Standard Classification of Occupations (ISCO-08). Since the same question was asked of students in 2006, it is possible to assess changes between 2006 and 2015 in the percentages of boys and girls who expected to work as health professionals.

Source: OECD Secretariat calculations based on *OECD PISA 2015 Database*, <http://www.oecd.org/pisa/data/>.

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The preferences of 15-year old students suggest it is no surprise that, in OECD countries, nearly four times as many women as men study health and welfare and, in Estonia and Latvia, at least seven times as many. Indeed, the disparity in the proportions of men and women beginning their studies in health and welfare indicate that the gender gap is not about to close. Some 75% of new freshmen in health and welfare degree courses are women, while in no OECD or partner country are men a majority. The smallest share of women – 65% – among new entrants is in Japan (OECD, 2016a).

Addressing gender imbalances in the teaching profession

Policy makers in many countries have expressed concern that so few men go into teaching (OECD, 2005; UNESCO, 2012). The profession's low social status is one factor. So are its pay levels. They are lower than in other occupations which require similar levels and lengths of training. To determine whether low pay and social status explain cross-national differences in the teacher gender gap, empirical research has explored variations in proportions both of male teachers and of male students who expect to be teachers (Park and Byun, 2015; Han et al. 2017, forthcoming). Interestingly, research on “occupational feminisation” finds that the movement of women into certain professions over time has led to lower pay in those occupations as a result of employers devaluing women's work (Levanon, et al 2009).

Findings suggest that better salaries and higher social status do draw more men to teaching but cannot in themselves close the gender gap. Indeed, although public discussion has also singled out low pay as one reason why men shun careers in teaching (and in health and welfare, for that matter), other factors come into play. Gendered perceptions of certain occupations is one.

Policy makers across the OECD have long been aware of gender stereotyping at school, how it affects education and career choices, and how the perceived femininity or masculinity of certain occupations may prevent boys and girls from expressing their talent and abilities. Teachers are predominantly women and the gender gap in the profession has become more visible in recent years, as older cohorts of teachers retire. It is particularly pronounced in primary school, when children internalise stereotypes and “sex-type” perceptions of occupations. As a result, fewer and fewer young people will be exposed to male teachers, particularly in early childhood, thereby strengthening stereotypes.

Countries that have endorsed the 2013 OECD Gender Recommendation have taken action to combat gender stereotypes and segregation in the labour market (OECD 2013). Such action must seek to make men feel able to enter fields currently dominated by women. And public campaigns should encourage both boys and girls to consider a career in teaching, school environments to value diversity and families to see the benefits of teacher diversity.

Most occupations in the education and health and welfare sectors require special qualifications, which men do not seek to obtain – in part because of their stereotypical views of some professions being for women. Another reason, though, is that they consider that teacher training has a high opportunity cost and that other professions yield greater financial returns for the same investment. Attracting men to fields like teaching and health and welfare requires not only making salaries competitive, but providing those who undergo training in these fields with financial support.

Key messages

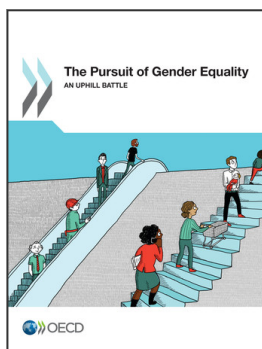
- Gender imbalances in the teaching profession are particularly pronounced at primary-school level, at a time when children internalise stereotypes. Public campaigns should seek to encourage both boys and girls to consider a career in teaching and school environments to value diversity. They should also educate families on the benefits of teacher diversity.
- Salary levels, particularly those of (pre-)primary school teachers, are widely considered low. Governments should strengthen financial incentive to enter the teaching profession – especially in primary education.

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