Chapter 5 Stereotype, Attitudes, and Identity: Gendered Expectations and Behaviors

ABSTRACT

This chapter aims to: look at gendered expectations and stereotypes; identify what is viewed as gender appropriate behaviour that contributes to the barriers women face in terms of their careers; consider how an individual's gender role attitude can influence career choice; discuss the dominant theory in the area, social role theory, and how this is an important theory when looking at women's roles within the workplace especially women working in gender incongruent occupations and industries, as the theory is concerned with gender stereotypes and gender role expectations; and discuss the role identity plays in career development and choice.

INTRODUCTION

Leading on from the previous chapter that looked at the self, we now will consider how the environment can influence the individual. Gendered expectations and stereotypes of what is viewed appropriate gendered behavior (gender congruent) are important contributing factors to the many barriers women face in the workplace and occupations in regards to both choices and constraints. Barriers are not necessarily restricted to women working in male dominated occupations

or industries, but the fact the working environment is male dominated suggests a potentially hostile working environment. Why there are these expectations and their impact is the aim of this chapter. Early judgments about work gained through societal expectations have been found to be predictive of the types of jobs attained later in life (Johnson and Monserud, 2010). From the literature on gendered occupational segregation and the situation and experiences of women working in male dominated occupations that section one considered, it is apparent that societal and cultural

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expectations, as well as gendered stereotypes and gendered expectations are important issues. We use stereotypes in order to simplify our social world, reducing our mental processing. However, stereotypes can lead to prejudice attitudes of 'them' and 'us' mentality. Stereotyping enables individuals to infer that another person has a whole range of characteristics and abilities; we assume all members of that group have. Although there may be some positive stereotypes, such as nuns being trustworthy, many stereotypes are negative.

A contributing factor to gender segregated occupations and the glass ceiling is undoubtedly the effect of gender stereotyping. Gender stereotyping is a set of expectations of the typical characteristics and behaviors of men and women. Women may face this invisible barrier when being hired or promoted into managerial and senior positions. This is because the perception of what it is to be a manager or what 'management' is about is often socially constructed in masculine terms, and a successful manager is often perceived as male rather than female (Willemson, 2002). Management is often based on masculine management ideals. Women have to not only be seen as a competent manager, but also adhere to gender expectations. Deal and Stevenson (1998) reported that male participants in their study had more negative views of female managers and rated them more often as 'bitter, deceitful or frivolous'. Whereas male managers, attributed with masculine and feminine characteristics were rated positively. Rudeman and Glick (1999) argue therefore that stereotyping provides a basis for sex discrimination, even in feminized managerial positions. It is not only the stereotypical views held on the characteristics of managers, but also the stereotypical views held of the characteristics of people in different jobs, at all levels that determine the status, and value attributed to a profession. Perceptions of the characteristics of what a 'good job' is are shaped by attitudes to the job itself. If a job is perceived as predominantly female, it is viewed as being a feminine job, requiring feminine characteristics and often not rated as highly.

If it is a job predominantly undertaken by men, it is perceived as masculine, requiring masculine characteristics and valued more highly. For example, in Russia, where doctors are predominantly female, the profession is neither prestigious nor well paid. Whereas in the UK, where it has traditionally been male dominated, the medical profession is highly valued and financial rewards are high (Wilson, 2002). The UK Medical Schools Council convened a working group in late 2005 to examine issues affecting the recruitment and retention of women in clinical academia. Data collected for the 2005/06 academic year show that the number of women working in clinical academia decreases at each grade of the academic career ladder, with only 11% of professorial staff in medicine female compared to 36% at clinical lecturer level (Margerison and Morley, 2007). In a questionnaire distributed to all professorial level female clinical academic staff, working in the UK medical and dental schools. Women were asked to provide information on their career progression to date and on any barriers in their careers. They were also asked to nominate a male colleague of similar age and same specialty to complete the questionnaire. Results of this survey revealed that women reported having more structural (51% vs. 44%) and 'people' (45% vs. 29%) obstacles in their career. In regards to gender specific obstacles, women reported being passed over for promotion, male colleagues being given more interesting research projects, and children as a perceived barrier to promotion, particularly in male dominated specialties such as surgery. Women were more likely to report problems with senior colleagues who were hostile towards women academics with children others reported obstacles being placed in their way by those who thought they would not be 'tough enough' for an

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