

Beyond Gender Stereotypes in the Lab



Consider these two profiles and see if you can guess which describes a female and which describes a male:

Professional A is a medical laboratory technologist who graduated with Honours and works at a medical lab in British Columbia. In addition to bench work, Professional A serves as an employee counselor for lab operations staff and says “a lifelong passion for caring for others” was a key factor driving medical laboratory science as a career choice.

Professional B is an MD, and chief of laboratory medicine and medical director of laboratories at one of the largest community hospitals in Canada. Professional B says, “If you are capable and able, the only limitation to achieving a successful career trajectory depends on taking the initiative to develop strong management, communication and leadership skills through lifelong learning.”

Did you figure out that Professional A is male and that Professional B is female? If not, you may have applied outdated categorical thinking about gender stereotypes; categorization that tends to assign leadership and technology skills to males and empathy and caring for others to females.

Professional A is Abdullah Zareh, one of six males in a lab of 19 medical laboratory technologists (MLTs) at LifeLabs’ Burnaby Reference Labs. Zareh recently won the CSMLS Leaders of Tomorrow LABCON2014 Grant. He spends about 40 per cent of his time working on the bench and the rest is allocated to special projects, which include: serving as the employee council delegate for Burnaby lab operations; technical resource lead; and project co-ordinator for

the hematology integration team since the acquisition of BC Biomedical Laboratories and CML Healthcare in 2013.

Professional B is Dr. Dhun Noria. She obtained her medical degree in India and continued her training at the University of Toronto, becoming a Fellow of the Royal College of Physicians in anatomic pathology and then surgical pathologist at Toronto General Hospital and the Princess Margaret Cancer Centre. Now, as a chief executive at The Scarborough Hospital (TSH), she leads a team of more than 105 MLTs across two locations, with 40 technologists at TSH’s Birchmount Campus. Noria was presented with a Lifetime Achievement award at TSH Foundation’s second Scarborough World Gala in May 2014.

Gender stereotypes can be hard to break. Consider Florence Nightingale, for example. We tend to remember her as the founder

of nursing, “the Lady with the Lamp,” who performed nightly rounds caring for wounded soldiers in the Crimean War. We should also remember her as “the first hospital administrator and architect of the modern hospital” for her revolutionary changes to the health care system in the areas of medical records, triage, infection control, epidemiology, hospital financial management and patient-centred care, to name a few, according to a biography posted on the site of the American Hospital Association.¹

You also may have guessed incorrectly because the MLT workforce has traditionally been about 80 per cent women since the Canadian professional society was founded back in 1937. Historically, “lab girls” were



"trained to do the work that doctors preferred not to do" according to a thesis paper² written in 2004 by Moira M. Grant, PhD, FCSMLS (D), former Director of Research at CSMLS. Grant wrote, "Middle-class white women were thought to be most suitable for lab work because they had patience for detailed work, superior personal hygiene, ability to focus on the job at hand, and delivered higher quality work compared to men for the same pay."

Decades ago, few men entered the field. Research finds that they perceived lab work to be "women's work" and that pay was low relative to other occupations. Men who did take up the profession did not think of lab work as a career in itself, but rather as a stopgap measure in tough job market conditions, a stepping stone to better

alternatives. In general, the proportion of women in medical lab jobs remained fairly steady around 80 to 90 per cent over the most recent decades up to 2002.

In the last decade though, more men have been entering many health care fields long dominated by women. The New York Times reported in 2012 that "while women continue to make inroads into prestigious, high-wage professions dominated by men, more men are reaching for the dream in female-dominated occupations their fathers might never have considered." The publication's analysis of census data found "from 2000 to

2010, occupations that were more than 70 per cent female accounted for almost a third of job growth for all men, double the share of the previous decade."³

In the MLT profession in Canada, it appears that an increasing number of men are enrolling in and graduating from diploma programs. For example, this year at the Northern Alberta Institute of Technology (NAIT), there are 14 males enrolled in the program, double the number enrolled in the class of 2004-05 10 years ago and the percentage of males has grown substantially from 14 per cent to 23 per cent. Zareh's graduating class at the British Columbia Institute of Technology (BCIT) in 2010 was 22 per cent male, a significant increase compared to just 8 per cent in the class of 2004. In the current class enrolled September 2014, the percentage of males is even higher at 26 per cent.

Beyond formal education programs, more men are entering the profession as an overt career choice. At TSH, the percentage of male MLTs has risen to 27 per cent. Noria says, "Gender diversity has definitely increased in the lab. I've been director since 1980 and I have seen a significant change. From the early 70s through the 90s, the profession was predominantly female. But today, in my own lab setting at the Birchmount campus, 11 of 40 technologists are male." At BC LifeLabs where Zareh works, the percentage of males is now 35 per cent, driven by an increase at the entry levels over the last few years – a stark change from the previous 30 years when there was only one male on staff.

Why are more men entering the profession? A large factor could be that gender stereotypes are disappearing. Further, success in the profession today demands a host of complementary skills and traits that are not the exclusive domain of either gender. For example, Zareh says, "I've always had a passion for science as I was growing up,

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Abdullah Zareh, MLT



Dr. Dhun Noria, MD, F.R.C.P. (C).
Photo credit: Will Mijer

and caring and serving others that are less fortunate. We work as a team and have daily communication meetings – huddles – to share our issues with the pathologist. I also work on three leadership projects.”

Research shows that encouraging and valuing diversity confers big benefits to organizations. Whether by gender, race, ethnicity, or sexual orientation, diversity makes people more diligent, more creative and harder working. In one study, two business professors, Cristian Dezsö at the University of Maryland and David Ross at Columbia University, looked at the size and gender composition of 1,500 top U.S. firms from 1992 to 2006, and compared gender diversity to financial performance. Firms that had greater female representation in top management teams saw an increase of \$42 million in value and a greater level of ‘innovation intensity’ as measured by the ratio of research and development expenses to assets.^{4,5}


While this research examined increasing female participation in the historically male-dominated business world, it would make sense that the reverse is true too; that increasing the proportion of males in female-dominated professions should also provide gains in information, experience and perspectives that enhance creativity, innovation and hard work. Future research

will be needed to confirm this hypothesis.

Thankfully, the age-worn stereotype of “lab girls” is disappearing fast. Noria says, “Today in the health care sector, I don’t think we should use the term ‘lab girl’. If I think about all the labs in Ontario where females are managers, technical directors, or patient care directors, there are women in positions at every level.”

Advancement opportunities exist for all MLTs, no matter their gender. For the special projects he is working on, Zareh was one of several people, male and female, who applied and interviewed for jobs posted. Noria has pursued lifelong learning and professional development to fuel her career trajectory. She says that it is incumbent on each individual to pursue career progression. “If you want to become a manager, supervisor or director, you have to know what you want and prepare yourself. Talk to your organization about leadership courses and find out what’s available to help you move to the next step.”

As we move beyond gender stereotypes in the lab, perhaps one day the female-male split will become 50-50.

“Medical laboratory science is a noble profession,” says Noria. “We have so much to learn from each other. Men and women should work side by side, shoulder to shoulder, integrating their different strengths and perspectives.” 

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