

HIGHER EDUCATION PRISSIONAL FEMININE DEFICITS IN HEALTH SCIENCES IN NIGERIA

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ABSTRAK

This study was aimed to investigate the learning experiences' facilitators and barriers that is encountered by the physically disabled female students during their higher education. There are important psychological processes involved in career socialization and specialization. Such processes streams line many into specialised profession and areas of study thereby entrenching a gendered structure of specialization in any gendered society. Nigeria is a developing nation and still trying to over come gender limiting norms ,one of which is assigned masculine and feminine attributes to some fields and professions, one of which is the health sector . With such a background, the paper attempted to delve into the ratio of males and

females within the Nigerians University system in the health sciences using the case study model. The paper revealed a paucity of females in the sector and made recommendations for improvement given the critical nature of the sector and the spate of development in the sector in the global village which Nigeria aims to join in development.

ABSTRACT

Penelitian ini bertujuan untuk menyelidiki fasilitator dan hambatan pengalaman belajar yang dihadapi oleh siswi penyandang disabilitas fisik selama pendidikan tinggi mereka. Ada proses psikologis penting yang terlibat dalam sosialisasi dan spesialisasi karir. Proses-proses tersebut mengalir dalam banyak bidang ke dalam profesi-profesi khusus dan bidang studi sehingga memperkuat struktur spesialisasi gender dalam masyarakat gender mana pun. Nigeria merupakan negara berkembang dan masih berupaya untuk mengatasi norma-norma yang membatasi gender, salah satunya adalah pemberian atribut maskulin dan feminin pada beberapa bidang dan profesi, salah satunya adalah bidang kesehatan. Dengan latar belakang seperti itu, makalah ini mencoba menyelidiki rasio laki-laki dan perempuan dalam sistem Universitas Nigeria dalam ilmu kesehatan dengan menggunakan model studi kasus. Makalah ini mengungkapkan kurangnya perempuan di sektor ini dan memberikan rekomendasi perbaikan mengingat sifat kritis dari sektor ini dan ruang lingkup pembangunan di sektor desa global dimana Nigeria ingin ikut serta dalam pembangunan.

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INTRODUCTION

Women are said to tend to primarily rely on good social relationships as the source of determining self-worth, while men may depend on accomplishment. This affects desires, educational goals, aspirations and educational attainments.

Women are believed to want to shy away from professional success because of perceived repercussions within given societies, especially in societies that are still traditional in orientation as regards gender roles for men and women. Males are believed to be more achievement-oriented than females. By the adolescent period, girls are attuned to the negative consequences of academic and occupational attainment. And, therein, lies what has been termed fear of success. The tendency to avoid success is a tendency that inhibits achievement-directed behavior as a result of concerns about the negative consequences of success. Fear of success thus leads to performance inhibition. (Miller 2018, Mowaiye, 1995).

A powerful negative factor, which deepens the already difficult situation, is the decrease in interest of young students in regular physical education, their lack of a stable need for active physical activity and a healthy lifestyle. There are many studies about the deficit of physical education and active transformative motivation (Galizdra, 2004; Maksymchuk et al., 2020a; Maksymchuk et al., 2020b; Mazurchuk & Rebrina, 2012). Most of the foreign ones are of covidic subjects. However, we noticed that it was this topic that revealed new aspects of procrastination, apathy lack of motivation and motor activity. The low neurological and physical condition of students all over Europe only multiplies the number of youth health problems, e.g.

hypodynamia and mental disorders of students due to immersion in social networks. This fact, like lockdown, creates stressful but laboratory-organized closed locations in which the student's condition can be monitored through the Web; compare it with the pre-pandemic, modeling further change (Elmer et al., 2020). Psychological and social problems of long-term distancing and staying online in a specific educational environment are studied by scholars in Poland (Wieczorek et al., 2021). Most importantly, scientists began to pay attention to the demotivational factor of medical status or situation, so a girl's stay in a medical group relies on the development of her subjective inferiority and apathy (Griban et al., 2020).

Consequently, the factors of raising the motivation of a teenager or young man to be healthy, as well as the potential of physical health is determined not by the specifics of the

disease, but by biological and volitional resources; the market consumer environment of freedom and sweets is bad for the health of young people. And most importantly, on the motivation and clear boundary of the norm of health, produces different attitudes of people to the same symptoms.

To this end, we solved a number of partial tasks: a) to review mainly foreign literature of recent years and establish a variety of factors affecting the health of modern non-educational conditions that would encourage female students with poor health to engage in physical activity students and female students; b) to measure, present in tables and briefly interpret the health of girls of student age; c) to formulate on the basis of the analysis of the latest literature, diagnostic data on the health of female students and on the basis of Ukrainian realities and our own experience framework recommendations. The latter will concern educational changes.

Inhibitions limit goals, efforts and attainment, thereby structuring careers and professions in societies that are gender structured. Gender inequality in higher education remains a critical area of study . Even though significant strides were made over the past few decades, gender disparities in access, experience, and outcomes in higher education persist globally.

Epistemologically complements the previous article by the scientific work of wellness researchers R. Paffenbarger and S. Olsen (1999). They calculated and reflected life curves indicating the probability of reaching the age of 90 under different patterns of motor activity, different bad habits, etc. They found that physically active individuals have a higher probability of living longer compared to less active individuals. Researchers noted that the difference between the most and least active study subjects begins to emerge at a young age, and it becomes more pronounced over the years. For example, only 81 percent of the least active individuals can expect to live to age 70, compared with 90 percent of the most active. Consequently, the problem is global in both spatial and resource (time) dimensions. We are talking only about quantitative indicators, and the subjective experience of quality of life should be discussed separately.

In the 21st century, while significant strides have been made in many countries toward gender parity in university enrollment and attainment which invariably affects career choices and professions disparities persist in many nations and fields of study. According to UNESCO (2020), female enrollment in tertiary education globally has increased significantly, with women often outnumbering men in university attendance in

many high-income countries. However, access to higher education remains uneven across different social classes and nations. This is more critically so in Nigeria.

Furthermore, gendered patterns of educational attainment may reflect broader socioeconomic inequalities, with men from wealthier backgrounds still enjoying greater access to higher education (Morley, 2013; Wilkins, 2017). Women are believed to have higher and better academic performance in general. However, these academic achievements do not always translate into professional success, with women often facing barriers in terms of career progression within academia and other professional spheres. Furthermore, societal expectations surrounding femininity and career roles discourage women from pursuing fields that are perceived as male-dominated, thus limiting their career trajectories and earnings potential (Gorman & Gorman 2019; Wilkins, 2017, Benschop & Doorewaard, 2012).

The gender gap in subject choice enables disparities in academic and professional outcomes. Women are underrepresented in the health sciences and generally in STEM (Science, Technology, Engineering, and Mathematics) disciplines. Female students in STEM and the health sciences report higher levels of discrimination and microaggressions, which can undermine their confidence and persistence (Smith & Howell, 2020).

With many nations looking to close the gap in educational attainments by both males and females so as to pull all human resources' to their best use, and maximize potentials with varied steps in this direction, so also have some institutions taken initiatives in this direction. Such include Harvard University, the University of California, and many others have introduced initiatives to promote diversity and inclusion by increasing the representation of women, particularly in STEM fields, and by supporting females through mentorship and career development programs (Ryu & McCauley, 2018). Though institutional responses to gender inequality have been uneven, with many programs lacking sufficient funding, infrastructure, or institutional commitment. (Perkins, 2016; Krebs et al., 2016), it cannot be said that steps and initiatives are undertaken by some institutions. Scholars like Morley (2013) argue that gender equality policies often fail to address the deep-rooted cultural and structural factors that enable gender inequalities within societies. This argument succinctly describes the continual gender gap disparities in Nigeria and its institutions at all levels. This is a major cause of concern. With many nations making exploits in varied scientific fields in the twenty first century and with women as major participants in these endeavours in other parts of the globe, no

nation can afford to be an on looker. Exploring what is the recent trends in institutional outputs is imperative more so in a trending field like health sciences ,to get a grap of what is available and how far the nation has gone in bridging gender gaps and what exploits are probables.

Statement of the problem.

Population explosion in Nigeria and with higher literacy levels has seen more females attaining university degrees and going into areas hitherto regarded as male domains.

RESEARCH METHODS

A federal University in central Nigeria was purposively chosen because of its strategic location, as a middle state between the north and the south of Nigeria, population, and being a federal university that attracts students from all over the country for its low fees. The University data was gathered for analysis purposes.

RESULTS AND DISCUSSION

Data analysis is presented in summary table form on tables 1 & 2.

Table 1. Academic Staff For 2012 - 2013 Academic Session

Faculty	Male	Female
Health Sciences	210	36
Science	304	82
Social Sciences	214	30
Engineering And Technology.	209	16
Communication And Information	102	34

Table 2 . First Degree/Diploma For 2021-2022 Academic Session

Faculty	Male	Female
Health Sciences	129	62
Science	126	36
Social Sciences	768	361
Engineering And Technology.	287	30
Communication And Information	284	106

As the tables revealed the gender distribution skewed towards the males who following the stereotypes had higher ratio than the females. In every faculty listed, there were more males than females. The male population significantly exceeds the female population.

A faculty that had such a high disproportional level of differences both for the post graduate students and academic staff members was the health sciences. The faculty had such low level of female academic staff with just thirty six female academic staff where there were over two hundred males. The number of female graduands was relatively better in ratio to the males when compared to the academic staff. The low number of female academic staff members in health science's was the same for virtually all the faculties except the science faculty that had a high number of females as compared to other faculties, even though the number was incomparable to the males in that faculty.

The gender disparity was particularly pronounced in faculties like engineering and technology, where the number of males far exceeds the number of females both for the academic staff and the post graduate students. The gender disparity was more pronounced for the engineering and technology faculty, a faculty which traditionally have higher male enrollment and graduation, and tables 1 and 2 simply followed this stereotype.

Social Sciences faculty had the highest number of males (768) and a significant number of females (361), but the disparity was still notable for the post graduate students. And the ratio of its academic staff was disheartening. Social Sciences had almost half of its graduates being females (F/361; M/768).

At the communication and information science faculty, the number of males (284) was more than double that of females (106) for the post graduate students and it was a dismal performance for the female academic staff with just thirty four of them with over one hundred males. It must however be noted that communication and information faculty had a substantial number of female graduates who constituted almost half of the faculty graduates at (F/106; M//284).

The observations indicate a consistent trend of male dominance in the student populations of these faculties, with particular stark disparities in fields traditionally seen as male-dominated, even to such a field as communication and information and social sciences.

In the 2012 / 2013 and 2021/2022 academic sessions, the career stereotype seems to be the trend with the number of graduates in all faculties and same trend followed what was obtainable for the academic staff members with the ratio of females to males. Female participation in the sciences is still very poor. It is worse for the health sciences and the engineering and technology facilities.

Communication and Information seems to be an area where females are yet to delve into compared to other areas of study. This is worth noting for stakeholders. The role of the Communication and Information area cannot be under-estimated in development. Especially in a digital age of artificial intelligence and its usage in every field including the health sector .

CONCLUSION

The health faculty is an important and sensitive faculty that churns out the nation's health professionals. There are still some areas of Nigeria where even in public, women are segregated from the males. And in such areas and groups, they frown on male doctors and nurses attending to, touching and examining the females folks. Unavailability of female health officers squally means limited access to health care for the females among such groups . The health care sector is an important sector in any nation and the need to have many women in such a sector cannot but be emphasized . The disparities in gender gap in this sector therefore must be brought to fore. Efforts must be made to bridge the gap. Women constitute a high percentage of Nigeria's population. Their potentials and skills must be pulled . Greater initiative drives must be put in place towards this end.

And it cannot be that more females cannot be found with flare for this course, which begs the question of why there are so few of them there. Efforts must be made to not leave out the female manpower in this important sector. This is essential for national development, and the health sector cannot be glossed over in the task of fast tracking development.

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