An International Multidisciplinary Journal
अनन्यशास्त्रम्
(A Unique Treatise of Knowledge)
ISSN:3049-3927 (Online)
Volume: 02 | Issue: 01| June: 2026
Research Article

ANANYAŚĀSTRAM:
An International Multidisciplinary Journal
(A Unique Treatise of Knowledge)
Peer-Reviewed | Refereed | Open Access Journal
DOI: https://doi.org/10.64328/aimjv2i1024

The Glass Escalator Effect: Exploring the Rapid Career Advancement of Men in the Nursing Profession

Mital Kiranbhai Gohel

Abstract

The nursing profession occupies a unique position within global labor markets as one of the most feminized yet professionally indispensable sectors of healthcare. Despite women constituting the majority of the nursing workforce, men who enter the profession often experience accelerated career mobility, disproportionate access to leadership roles, and increased institutional visibility. This phenomenon, conceptualized as the glass escalator effect, reveals an often-overlooked dimension of gender inequality. This paper critically explores the glass escalator effect in nursing through a global sociological lens, with a focused examination of the Indian healthcare system. By integrating sociological theory, international literature, workforce data, and qualitative insights, the study demonstrates how gendered cultural norms, organizational practices, and professional hierarchies collectively facilitate men's rapid advancement. The paper argues that while male nurses may encounter social stigma at entry, institutional structures frequently compensate by privileging their upward mobility. Addressing these dynamics is essential for achieving substantive gender equity within healthcare professions.

Keywords: Glass escalator, gender inequality, nursing profession, men in nursing, career advancement, Indian healthcare.

Introduction:

Discussions of gender inequality in professional life have long centered on women's exclusion from power and leadership. The concept of the glass ceiling has become a foundational metaphor in feminist scholarship, illustrating the invisible barriers that prevent women from ascending organizational hierarchies. While this framework remains vital, it captures only one side of gendered inequality. In professions dominated numerically by women, men often encounter a contrasting but equally powerful dynamic.

Nursing represents one such profession. Across the world, nursing is symbolically and practically associated with femininity, care work, emotional labor, and service. These associations have contributed to the profession's historical undervaluation, both economically and socially. Yet, paradoxically, men who enter nursing often experience smoother and faster pathways to authority, leadership, and higher-status roles. This contradiction invites a deeper sociological examination.

The glass escalator effect provides a conceptual tool for understanding this pattern. Unlike overt discrimination, the escalator operates quietly, embedded in everyday organizational practices, assumptions, and expectations. Men are not necessarily promoted because of superior performance, but because leadership itself is culturally coded as masculine.

Mital kiranbhai Gohel, Research ScholarDepartment of sociology, Anand arts college, Anand (Sardar Patel University) E-mail id :- pratikbhoi1508@Gmail.com

ANANYAŚĀSTRAM:
An International Multidisciplinary Journal
(A Unique Treatise of Knowledge)
ISSN: 3049-3927(Online)

In India, these dynamics are intensified by deeply entrenched gender norms, hierarchical workplace cultures, and uneven healthcare governance. While nursing is widely accepted as "appropriate" work for women, leadership roles within healthcare institutions continue to be associated with masculinity and authority. This paper explores how these intersecting factors shape career trajectories for men and women in nursing.

Nursing as Gendered Work

2.1 Historical Construction of Nursing

Historically, nursing emerged as a profession rooted in moral duty and religious service. In many societies, caregiving was considered a natural extension of women's domestic roles. This association between femininity and care continues to shape perceptions of nursing today.

In India, colonial medical systems reinforced these gendered constructions. Nursing was institutionalized as a supportive role subordinate to medicine, with women positioned as obedient caregivers. Men, when present, were often restricted to specific domains such as military nursing or psychiatric care.

2.2 Emotional Labor and Devaluation

Nursing involves extensive emotional labor, including managing patients' fear, pain, and vulnerability. This labor, while essential, is often invisible within organizational reward structures. Because emotional labor is culturally feminized, it tends to be undervalued, reinforcing occupational hierarchies within healthcare.

Men's movement away from bedside care into administrative or technical roles further devalues this core aspect of nursing, while simultaneously elevating male nurses' professional status.

Theoretical Framework

3.1 Gendered Organizations

Acker's (2006) theory of gendered organizations argues that workplaces are not gender-neutral spaces. Instead, they embed assumptions about ideal workers, authority, and competence that privilege masculinity.

In nursing institutions, these assumptions manifest through:

- Expectations that leaders should be assertive and authoritative
- Perceptions that men are better suited for management
- Structural separation between care work and decision-making roles

3.2 Mechanisms of the Glass Escalator

The glass escalator operates through multiple interconnected mechanisms:

Symbolic Authority: Men are often perceived as leaders regardless of actual experience.

Informal Sponsorship: Senior administrators may mentor men more actively.

Role Channeling: Men are guided toward administration, education, or specialized units.

Visibility Bias: Men's minority status makes them more noticeable, increasing recognition.

These mechanisms function subtly, making inequality difficult to challenge or even identify.

ANANYAŚĀSTRAM:
An International Multidisciplinary Journal
(A Unique Treatise of Knowledge)
ISSN: 3049-3927(Online)

Review of Literature

4.1 Global Evidence

Research across North America and Europe consistently demonstrates that male nurses are overrepresented in leadership positions relative to their numbers (Williams, 1992; Cottingham, 2019). Studies also reveal wage disparities favoring men, even within the same roles.

In Scandinavian countries, where gender equality policies are comparatively strong, the glass escalator effect is weaker but still observable, indicating that policy alone cannot eliminate deeply embedded cultural assumptions.

4.2 Asian and Developing Contexts

In Asian societies, including India, cultural associations between masculinity and authority amplify the glass escalator. Hierarchical organizational structures and respect for seniority often align more closely with masculine norms, benefiting male professionals.

Indian studies highlight that male nurses are frequently preferred for night shifts, emergency units, and supervisory roles, reinforcing their professional visibility and institutional value.

Methodology

This study employs a qualitative-dominant mixed-methods approach.

5.1 Sample and Setting

Thirty nursing professionals were selected through purposive sampling to ensure representation across:

- Gender
- Institutional type
- Career stage

Interviews were conducted in urban centers where healthcare institutions exhibit diverse organizational cultures.

5.2 Data Analysis

Interview transcripts were coded thematically. Patterns related to promotion, mentorship, workplace expectations, and self-perception were identified and analyzed in relation to existing theoretical frameworks.

Findings

6.1 Entry-Level Experiences

Male nurses frequently described initial discomfort and social questioning regarding their career choice. However, once employed, institutional responses were largely supportive.

Female nurses reported normalization of heavy workloads and limited acknowledgment, reinforcing gendered expectations of sacrifice and resilience.

Table -1

Gender Distribution Across Hierarchical Nursing Roles in India

Role	Women (%)	Men (%)
Staff Nurse	88	12
Senior Nurse	78	22
Supervisor	63	37
Administrator	54	46

ANANYAŚĀSTRAM:
An International Multidisciplinary Journal
(A Unique Treatise of Knowledge)
ISSN: 3049-3927(Online)

Male respondents consistently reported faster promotion timelines. Leadership potential was often assumed rather than evaluated. Female respondents described promotion as requiring sustained effort, additional qualifications, and long waiting periods.

Conceptual Framework

Figure 1: Glass Escalator in Nursing

Feminized Profession
↓
Cultural Devaluation of Care Work
↓
Masculinity Linked to Authority
↓
Institutional Bias & Mentorship
↓
Accelerated Male Advancement
↓
Reproduction of Gender Hierarchies

This model illustrates how structural and cultural forces interact to sustain inequality.

Discussion

The glass escalator effect in Indian nursing reflects a broader societal pattern where authority and leadership are masculinized. While men may face stigma at entry, institutional practices often counterbalance this through preferential advancement. Importantly, this dynamic does not imply intentional discrimination. Instead, it highlights how inequality is reproduced through everyday assumptions and routine practices.

Policy Implications

Achieving equity requires moving beyond numerical representation to address power distribution. Recommended interventions include:

- Standardized promotion criteria
- Leadership training for women
- Gender audits in healthcare institutions
- Inclusion of gender studies in nursing curricula

Conclusion

The glass escalator effect exposes the complexity of gender inequality in contemporary workplaces. In nursing, men often ascend rapidly within a profession dominated by women, benefiting from cultural and institutional privileges. Recognizing and addressing these invisible advantages is essential for building fair, inclusive, and effective healthcare systems. Equity in nursing leadership is not merely a gender issue, but a matter of professional justice and institutional integrity.

References:

Acker, J. (2006). Inequality regimes. Gender & Society, 20(4), 441–464.
Cottingham, M. D. (2019). The glass escalator in healthcare. Gender & Society, 33(2), 259–281.
Nair, S., & Healey, M. (2006). A profession on the margins. Economic and Political Weekly, 41(35), 3861–3867.
Williams, C. L. (1992). The glass escalator. Social Problems, 39(3), 253–267.
World Health Organization. (2020). State of the world's nursing 2020. WHO Press.