Trades and Aides: The Gendering of Vocational Education in Rural Alberta

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This article examines two Canadian high school work experience programs that focus on rural youth. The first encourages students to consider work in skilled trades, while the second encourages them to become qualified as healthcare aides. Both programs were designed to encourage high school students to explore careers in fields where labor market shortages were anticipated. Yet as this study shows, they are likely to perpetuate gender-based inequalities in the economic and social mobility of rural youth. We draw on socio-cultural learning theories to show how socialization and workplace practices serve to reinforce gendered participation patterns in healthcare and trades. We conclude with the recommendation that policy related to youth career exploration and work experience include strategies to disrupt social processes that systematically disadvantage rural women.

Introduction

Youth today face longer and more complex transitions to adulthood, due in part to the greater need for postsecondary credentials for labor market entry (Taylor, 2007). Canada has one of the highest rates of university graduation among Organisation for Economic Co-operation and Development (OECD) countries, but it has lagged in attracting youth to skilled trades (Molgat, Deschenaux, & LeBlanc, 2011). This article examines two vocational education programs for high school youth in Alberta, Canada. Coordinated by a foundation that focuses on workplace learning opportunities for young people, each program was designed to engage youth in high-demand occupational sectors: skilled trades and health sciences.

However, the differences between these sectors form the basis for our discussion. First, the occupational trajectories are very different. Trades-based occupations, promoted through Alberta’s High School Registered Apprenticeship Program (RAP), involve mostly on-the-job training. The most common RAP trades include welder, heavy equipment technician, auto services technician, electrician and welder; the only female-dominated trade is hairdresser. Trades pay well and, as this study illustrates, offer ample possibilities for career mobility. Healthcare occupations tend to require more initial formal education and are characterized by rigid boundaries between specific roles in healthcare facilities. Second, the sectors under scrutiny are highly gendered. Whereas trades tend to attract more males, healthcare professions attract more females. The programs described here appear to reinforce gendered education and training by not challenging gendered norms.

Combining a gender analysis informed by Lave and Wenger’s (1991) theorizing of apprenticeship in “communities of practice” (Paechter, 2003) and Fuller and Unwin’s (2006) analysis of expansive and restrictive workplace training contexts, we examine how early life experiences and workplace affordances intersect to produce gendered career trajectories. The closing section of this article briefly considers policy implications.
Background and Conceptual Influences

Our study occurs in the context of Alberta, a Canadian province with labor market participation patterns that are heavily influenced by the oil and gas sector. Miller (2004) characterizes this sector as “powerfully masculine” in its culture. Below average postsecondary education rates for young men have been attributed in part to the ready availability of high-paying work as laborers in this sector (Alberta Advanced Education, 2005). In contrast, the healthcare sector is dominated by female workers in a hierarchy of occupations ranging from personal care assistant and healthcare aide to physicians, surgeons, and other highly educated professionals (Freidson, 1990). Unstable funding, because of the boom-bust oil economy, and escalating healthcare costs create a workforce characterized both by pressing shortages, particularly in rural areas, and by precarious employment, as workers within the system are constantly subject to cost-cutting measures (Ostry & Speigel, 2004).

The two programs contrasted in this study were both brokered by an industry-driven public-private foundation in Alberta called Transitions.1 Transitions promotes school-based programs for high school students across the province in areas of perceived labor market demand by matching interested youth with work experience placements. One program encourages youth to enroll in the high school Registered Apprenticeship Program (RAP), while the other was a pilot program offering Health Care Aide (HCA) training for senior high school students. Rural youth were the focus of both our case studies, but most students in RAP are male while most students in HCA are female.

Most Canadian provinces support a range of secondary school initiatives intended to facilitate youth transitions. Such programs are seen as valuable because they provide a direction and sense of purpose for youth. This view is especially found in rural communities, where barriers to participation in postsecondary education are more evident, and youths’ “horizons for action” (Hodkinson, 1998) are often more limited. Consequently, many training, postsecondary education, and employment policy initiatives at the federal and provincial levels in Canada have targeted youth living in rural and remote areas (Corbett, 2007; Looker & Lowe, 2001).

Youth Studies

Studies in rural sociology highlight the many ways in which social and economic patterns interact to make rural lifestyles and life chances distinct from those in urban centers. Education and labor market participation are among these distinctions. Rural youth are more likely to experience barriers to work and learning than their urban peers (Looker & Naylor, 2009). These barriers can include lower levels of parental education, lower expectations of academic and occupational achievement, limited access to career counseling and knowledge about education funding, fewer professional role models, and restricted employment opportunities in local communities (Alberta Advanced Education, 2005; Looker & Lowe, 2001; Looker & Thiessen, 2004; Schaefer & Meece, 2009). Greater geographical distances from postsecondary educational institutions, particularly universities, usually mean higher economic and social costs associated with pursuing further education. The effect of these factors is evident in a rural high school dropout rate that is nearly twice as high as the urban rate (Canadian Council on Learning, 2006). In Alberta, rural youth have been more likely than urban youth to participate in one- and two-year college programs (56% vs. 40%) and to obtain a trades certificate (14.5% vs. 12%) (Alberta Advanced Education, 2005).

Looker and Naylor’s (2009) analysis indicates that many rural youth see their choice to stay in their home communities as limiting their education and career options. However, on the positive side, rural youth may be more connected to their communities through assets such as strong intergenerational ties and shared values and attitudes (Schaefer & Meece, 2009). Further, rural youth may be highly successful in their careers because of a strong work ethic, high levels of motivation and career aspiration, and a strong sense of community support. Thus, the overall impact of rural communities on youth pathways depends on the interplay of multiple social factors (Ley, Nelson, & Beltyukova, 1996).

In the rural Alberta context, important gender differences also exist in educational participation. While males have higher rates of participation in apprenticeship and trade certificate programs, females are more likely to participate in college certificate and university programs (Alberta Advanced Education, 2005). In particular, rural communities that are heavily reliant on a natural resource base present different challenges for males and females. For young males, resource-based economies fuel masculine identity constructions associated with economic power in the community (Corbett, 2007, p. 244). In contrast, for young women, “prolonged schooling is seen as a practical necessity and a moral imperative” (Corbett, 2007, p. 50). Given fewer career opportunities, higher education may be seen as their “path to the kind of standard of living their brothers and male friends could access” through the local resource industry (Corbett, 2007, p. 184). At the same time, a professional career may require leaving the comfort of a small community.

Socio-Cultural Learning Theories

In addition to literature about youth, our analysis is informed by learning theories. Lave and Wenger’s (1991)
Situated Learning shifted the conception of workplace learning as individual, cognitive acquisition of knowledge and skills to a conception of it as active practice in social contexts. Lave and Wenger see learning as unavoidably contextualized by broader social and cultural practices in the workplace. The community develops and uses a repertoire of shared practices, and newcomers move from the “periphery” to the center of a community of practice as they acquire expertise (Wenger, 1998). Since legitimacy is at least partly dependent on recognition of expertise by others, the idea of “full” vs. “marginalized” membership is important to understanding the exercise of power in the workplace (Davies, 2005; Griffiths, 2005).

A few studies have brought questions of social class and gender to socio-cultural accounts of learning. Paechter (2003) considers how children learn to perform gender from early ages. She argues that the communities of practice (CoP) model may be applied to gender socialization, with boys serving as “apprentice men,” and girls as “apprentice women.” For Paechter, childhood and adolescence may be viewed as a series of rites of passage through which boys and girls “practice” appropriate gender roles and gradually achieve legitimacy. She further argues that part of this “apprenticeship” is the recognition that certain forms of power can be anticipated—that is, young men and women not only learn their roles but also learn how these roles will position them (Connell, 2005).

Colley, James, Diment, and Tedder (2003) combine ideas from socio-cultural learning theories with the critical thinking tools offered by Bourdieu to examine formal vocational training. They draw on the concept of “vocational habitus” to refer to a learner’s aspiration to acquire the “dispositions demanded by the vocational culture” by internalizing expected ways of feeling, looking, and acting as well as the values, attitudes, and beliefs associated with an occupation (p. 488). Habitus “incorporates both the subjective, personal dispositions and the collective, structural pre-dispositions shaped by class, race and gender that are combined in each individual” (p. 477).

Paechter (2003) and Colley et al. (2003) share the perspective that early learning shapes what is “choosable” in terms of later life outcomes, including career choices. Their studies extend the idea of learning as socio-cultural practice into realms outside of the workplace, emphasizing that one’s sense of “self” in a vocation is drawn from experiences outside of as well as within the workplace community of practice.

Critiques and refinements of the CoP model have sought to extend its applicability and analytical value to new contexts and disciplinary fields. For example, Lave and Wenger (1991) did not attend to complex settings in which multiple communities of practice have to be simultaneously navigated (Cox, 2005; Hodkinson & Hodkinson, 2004) or to the experiences of experienced community members (Fuller & Unwin, 2006). In addition, the CoP model has been limited when examining power structures that systematically exclude or disadvantage people based on race, class, gender, and disability (Hodkinson & Hodkinson, 2004).

Fuller and Unwin’s (2006) model of “expansive” vs. “restrictive” learning environments extends evaluation of workplace learning outside of the immediate CoP. Drawing on Lave and Wenger (1991) and Engeström’s (2001) activity theory, Fuller and Unwin propose that the organizational conditions of learning are key. “Expansive” learning in a workplace system, as articulated by Engeström, collectively produces new ways of thinking and doing in the workplace; change is sparked by contradictions within and across activity systems (Sawchuk, Duarte, & Elhammouni, 2006). By highlighting structural differences in the learning affordances of a given workplace or work sector, systemic inequalities may be articulated and hopefully redressed. Feminist scholarship highlights continuing gender-based inequities in the workplace in terms of skills recognition, pay, and opportunities for further learning and advancement (Britton, 2000; Cockburn, 1987; Folbre & Nelson, 2000; Gaskell, 1992; Gherardi & Poggio, 2000; Tanggaard, 2006). For example, in their application of the expansive-restrictive framework to learning opportunities for management in a Swedish firm, Gustavsson and Erickson (2010) conclude that the framework “does not cover the extent to which gender operates as a condition for learning and career development, nor the extent to which the gender order influences the learning environment” (p. 141).

This study draws on the expansive-restrictive framework to highlight gendered workplace learning affordances and their impacts. In the analysis that follows, we show how the learning biographies of rural youth are developed within gendered communities of practice, culminating in gendered patterns of participation in workplace learning. The workplace reinforces the perception that occupational trajectories are “natural.” The occupational sectors considered here—health services and trades—represent well-established organizations of gender-segregated labor, wherein social relations validate gendered norms of workforce participation (Poggio, 2000; Tanggaard, 2006). But vocational programs are also structured differently in terms of the access that they provide to career and social mobility in the longer run. The result is the reproduction of unequal life chances for young men and women.

**Study Design and Methods**

To make the case for gendered opportunity structures in rural communities, we compare data from studies of two different high school vocational education programs in Alberta, Canada. Both programs were initiated by
Transitions to encourage high school students to explore careers in fields where labor market shortages were anticipated. Both programs allowed students to obtain work experience credits toward their high school diplomas while gaining further formal education. Although the requirements of trades people and healthcare aides are not identical, both programs lead to relatively rapid entry into the full-time labor force after high school.

The first study focused on 17 male youth (average age 21) who participated in the Registered Apprentice Program (RAP) in high school. RAP encourages youth to begin apprenticing in a trade by offering them the opportunity to simultaneously earn high school credits and on-the-job apprenticeship hours (usually equivalent to the first year of apprenticeship) by the time they graduate. In keeping with the strong overrepresentation of males in the trades, RAP students are mostly male, except in the hairdressing trade.

For this study, an invitation to complete an online survey was sent to former high school apprentices, with an option to provide their contact information if they were willing to engage in a follow-up interview. Questionnaires asked respondents about their family background, experiences in high school, and training and employment outcomes. Follow-up interviews were more in-depth and lasted an average of 60 minutes. The interviews were conducted in person by one or more of the authors and were fully transcribed. Categories for analysis were developed, coded, and refined using a constant comparative strategy, in which data are inductively coded, and themes are refined and validated by iterative movement between the data and the themes as they are developing (Bogdan & Biklen, 2003).

The second study focused on 31 female youth (average age 17) who were participating in a pilot Health Care Aide (HCA) certification program at the time of our interviews. Of this group, 27 youth were White, two were Aboriginal, and two were Asian. It should be noted that the program overall attracted very few males—less than 5 percent of participants in the HCA program were male. Like the RAP program above, this program offered students high school credits as they simultaneously worked toward a post-compulsory school credential. Students completed theory and labs as part of their high school coursework and completed required clinical hours in paid summer internship positions. Data for these students were gathered through focus groups. Prior to participating, students completed questionnaires that included demographic items, questions about attitudes toward schooling, postsecondary aspirations, and education and occupations of immediate family members. With assistance from Transitions, participants were recruited through their school districts. All were partway through the three-year HCA program at the time of the focus groups.

The data collection process involved visits to ten schools that were participating in the HCA program in two school divisions in Alberta, Canada. Focus groups took approximately 75 minutes each and were fully transcribed. We also conducted individual interviews with four workplace managers for this study, inquiring into working conditions and learning opportunities in the facilities in which the students interned. As in the study of RAP students, all transcripts were thematically analyzed using constant comparative methods (Bogdan & Biklen, 2003). In this study, it was particularly important to review the themes of each study independently before seeking comparisons and contrasts between the two studies. Since the studies were conceived separately, it was important to determine which differences contributed to our analysis, and which were potentially confounding. For example, although study focus areas and methods were similar, the average age gap of four years between the RAP and HCA cohorts needed to be considered in comparing the two groups. But the fact that a significant part of our interviews with the older male group focused on their recollections of their high school RAP experiences created common ground between these youth and the high school females in the HCA study. The two groups have much in common otherwise: All youth were living in rural settings, most were White, and very few came from professional family backgrounds. In each study, students were asked about family backgrounds and early life influences on career interests and career plans. In both studies, the students’ academic trajectories and measures of school engagement were considered, as were questions about how students accessed career advice. In both studies, students were also questioned about their working conditions and their perceptions of gender relations in the workplace.

The data collected for the two studies evaluated the quality of students’ work experiences. However, when we compared the two studies, we observed significant qualitative differences in the opportunities that each occupational sector seemed to afford its young inductees. As the sectors were also gendered—both in these instances and more broadly—we chose to reinterpret the data, focusing on how students formed and performed gender identities through their respective work experience programs. From our inductive coding within this broad thematic framework, we generated two categories for analysis: formative experiences influencing career choice and students’ actual experiences in the workplace. These categories structure the findings presented below.

**Findings and Analysis**

**Formative Gender Practices and Career Interests**

In her chapter in *Country Boys: Masculinity and Rural Life*, Lobao (2006) reviews what might be called the
patriarchal imaginary in rural life—the socio-economic structures that strengthen patriarchy in rural settings, but also the ideal of the “man’s man.” The most visible forms of rural masculinity—rugged and individualistic “cowboys, woodsmen, farmers, hunters” constitute a form of hegemonic masculinity that upholds the “typically highly patriarchal” structure of rural life (Campbell, Bell, & Finney, 2006, p. 5).

For the most part, the young men and women we interviewed upheld patriarchal gender norms when they described formative influences that shaped their interests in their respective career paths. The young women often described kin networks and early caregiving experiences with family members, which translated into their interest in caregiving roles in health services. A young woman described caring for a grandmother who was wheelchair bound and on oxygen because “I just liked how I got to help people.” A student with an ill father similarly said she “liked kind of just helping him.” Another student had spent a great deal of time at hospitals visiting a younger sibling with chronic health issues and was drawn to the caring role through this personal experience. Some female participants gained a comfort level with healthcare facilities and caring roles because they had family members working in health services. “My family is, like, nurses, paramedics,” shared one student, “so I just kind of grew up in hospitals and stuff.”

Female HCA trainees also expressed stereotypical beliefs and attitudes about men’s work and women’s work. For example, when asked about the disproportionate number of women in healthcare work, one responded, “Women are more caring. It’s actually been a proven fact.” Another added that “men want to go more into like … the trades, I think. Mechanics, stuff like that. Or like, physical. They want to do work outside, and like … I don’t think many of them want to be in a hospital.” Some of the young women also observed stereotypes perpetuated by their male peers: “They’re macho,” said one, “and that’s it. It’s the macho men that are like ‘Oh my God, the hospital is for women.’”

Male students from the RAP study also followed and expressed traditional, gendered patterns in their career interests and choices. Early experiences of “tinkering” and hands-on work and leisure activities were often shared with male family members. As with the young women described above, they expressed a high degree of comfort with their career choices, and recounted decisions as emerging naturally from formative experiences with family members and friends. Respondents frequently mentioned grandfathers, fathers, brothers, cousins, uncles, and male neighbors in trades, an observation that partly reflects the predominance of this kind of work in many of these rural communities. A number of young men talked about following in the footsteps of men in their families to become heavy duty mechanics, electricians, or millwrights.

Young men also recounted being influenced by male peers. “They’re all in the trades,” said one, “My group of friends were all tinkerers, building something or breaking something or driving something. That’s what we do.” (emphasis added). This excerpt demonstrates not only the influence of male networks but also the strong sense of identity associated with this work and the extent to which trades are therefore perceived as a “natural” choice. The sense that choices were “comfortable” or “natural” was also the result of young men’s experiences on their family farms, as this carpenter described:

I grew up kind of knowing trades because on our farm you always have electricians coming in, plumbers coming in, technicians for computer systems, all that sort of thing. You’re always doing concrete work or construction yourself on the farm, so you’re doing all part of the trades already. So it was easy to choose.

A heavy duty equipment mechanic similarly described, “It’s helped being raised around equipment.” Another heavy duty mechanic described his choice as “natural…. I was always in the garage or at the farm tinkering with my dad.”

In sum, many of the young people who participated in these studies identified career interests on the basis of formative experiences with parents and relatives of the same gender. In the rural context of these studies, these early identifications confirmed and reproduced traditional divisions of labor, wherein women care for and maintain kin networks, while men are preoccupied with breadwinning (Connell, 2005).

**Gendered Patterns of Workplace Apprenticeship**

Overall, both male and female participants described formative family activities and work experiences leading to career interests that were “comfortable” or “natural.” This finding supports Paechter’s (2003) proposition that learning gender practices can be thought of as a form of legitimate peripheral participation in “communities of practice.” These communities of practice teach youth how to be men and women in particular contexts.

Miller (2004), for example, discusses how the dominant masculine culture of Alberta’s oil and gas industry was reinforced by discourses that reference rough and rugged frontier independence. Similarly, the feminine culture of the health sector is reinforced by discourses that construct it as “caring work”—“good nurses are not ‘just in it for the money’” (Folbre & Nelson, 2000). The young men interviewed appeared to have been welcomed into highly masculinized social networks, characterized by father-to-son recruitment patterns in trades (Beck, Fuller, & Unwin, 2006). Several
participants had worked in industry during high school, sometimes even prior to joining the RAP program. They obtained these positions through informal, often kin-based networks. These networks included what Miller (2004), in her study of engineers in the oil industry, describes as a “boys club” sense of camaraderie: “Maybe that’s why I say I get along good with older people,” considered one RAP respondent. “I’ve got lots of buddies my age but older ones at work, sitting down, chatting…. It’s lots of fun at work.” In addition to informal mentoring relationships with older males, participants reinforced work relationships by sharing “masculine” leisure activities including “quadding, fishing, and hunting” with male friends and coworkers (see also Morris, 2008; Ni Laoire & Fielding, 2006).

The young women we interviewed, on the other hand, offered fewer accounts of learning from coworkers or supervisors. In fact, many lacked hands-on guidance in their first practicum placements, and there was much preoccupation with what students were and were not allowed to do according to their training. Overall, the HCA interns and their managers shared much less of the sense of camaraderie described by the young men in trades. Instead, young female interns described hierarchical relations, with HCAs near the bottom. Healthcare aides, they observed, were sometimes “disrespected” by the nurses and were not allowed to work outside of their defined scope of practice.

For HCAs, orientating to a vocational habitus that makes them “right for the job” (Colley et al., 2003, p. 488) means accepting their subordinate positions in the workplace vis-à-vis nurses and other health professionals. In this female-dominated sector, workplace settings are often characterized by rigid boundaries around skills and competencies and protection of clinical turf in the form of vertical and horizontal forms of workplace hostility (Dahle, 2003). Bartholomew (2006) proposes that nurses’ mistreatment of one another is a function of a history of nurses’ work and expertise being silenced under systemic/historical conditions of patriarchy.

These conditions would explain why healthcare veterans were at times brusque with the interns, seemingly disinclined to mentor them. A workplace manager we interviewed explained the subordinate nature of the HCAs with respect to the lower status of practical knowledge relative to the codified knowledge of nurses:

It’s not an easy job. It’s physically demanding. And the women … mostly women who take these positions are women who had no opportunity to go to school, or who did not excel at school. They don’t have … or should never be expected to have any scientific evidence-based processes in their heads. You [have to] prove your own value in terms of if you can carry the bedpan. You get more respect than if you talk about carrying the bedpan.

Learning relationships at work were also hindered by the relentless pace of work in healthcare facilities. As one student described, “That eight hours that you’re on shift you run around…. Bells are going off everywhere, and you’re pretty much running around the unit.” A workplace manager concluded, staff members “were working, right? So there’s no time for real teaching.”

Young male trades workers must also navigate a workplace populated by veteran coworkers. Young workers must simultaneously demonstrate that they are willing to learn from more experienced workers and that they can “pull their weight.” But unlike the young women interviewed, who sometimes encountered cultures of disrespect based on credentials, young men were more likely to encounter negotiable status hierarchies, buffered by a culture of masculine camaraderie. Each occupational sector thus bears distinctly gendered cultural practices through which growing seniority and competence are recognized.

**Expansive and Restrictive Learning**

Although both RAP and the HCA pilot programs are represented as “careers” in high-demand sectors, the opportunities that they afford to new entrants tend to be quite different. We explore these differences by applying a gender lens to Fuller and Unwin’s (2003) expansive-restrictive framework. This framework highlights a number of organizational conditions that foster rewarding growth and learning opportunities on the job. Among others, these include the extent to which the organization supports explicit formal and informal learning opportunities. For example, to what extent do workers have formal and informal encounters with diverse specializations and functions within the organization? Teamwork and projects that afford “boundary crossing” help workers to develop new skills, new knowledge, and new learning interests and fosters horizontal mobility within the organization. Depth and specialization of learning describes the extent to which workers can build upon their skills, talents, and interests through formal and informal learning.

These dimensions culminate in workers’ perceptions of autonomy and opportunity in the workplace. A critical aim of Fuller and Unwin’s (2003) model is to articulate organizational conditions and larger structural features that may serve to empower some workers while disempowering others. Workplace learning is an important resource for economic and social mobility, and organizational conditions can either facilitate or restrict that mobility. Fuller and Unwin’s (2003) research, as well as other critical studies
of workplace learning, show significant differences across workplaces and occupations in the quality of learning environments and the extent of control or autonomy workers feel in the job (Billett, 2001).

Flexible and informal learning. As novices and young adults, the youth interviewed were anxious to have a range of experiences in their workplaces. But opportunities were dependent upon the willingness of coworkers and supervisors to allow students to practice and gain experience. As this young woman described, hospital environments afforded more opportunities than extended care settings:

> When I was at the hospital I was allowed to sit in on baths, and I was allowed to watch it, and learn stuff. Like I wasn’t really allowed to do stuff … but they figured if I felt comfortable doing it, I could. I also got to learn how to change oxygen tanks and like, how, I watched someone do a dressing on a heel that had broken down skin. And I got to see a lot more stuff than [other students] did.

For the young women, access to these opportunities depended on the type of facility in which they were placed. Learning and observation opportunities outside of the immediate scope of the HCA role were few. The young women were most likely to do well if they made themselves useful and did not tax an already busy staff with their questions and learning needs. In comparison, the trades appeared to offer an informal curriculum and learning environment in which the young men felt that asking questions and taking initiative would be rewarded.

Both occupational sectors have safety concerns, and the greater stringency around the activities of the HCA trainees may reflect added safety and liability concerns around patient care in addition to worker safety. Regardless of the cause, however, the young men and women described very different workplace cultures, with young men experiencing more opportunities to learn important skills on the job. As one tradesman recalled, “I figured I’d be sweeping floors, but they threw me right on a lathe my first day. I spent my winter doing that, and you learn so much.” Others similarly described environments in which “if you had an idea, they’d let you run with [it].” While this experience is not always the case for apprentices, the model appeared to place greater value and legitimacy upon experiential learning; youth and mentors perceived the “real” learning to take place on the job.

Credentials. Another key difference between trades and the healthcare sector involves the amount of formal schooling required for occupational mobility. Both groups in our study were strategizing about the role of formal education in their future career plans. For young men in the trades, gaining another trade certification would allow them to expand their knowledge toward the goal of either making themselves more employable or owning their own businesses in the future—options for either horizontal or vertical mobility. They spoke of future plans with confidence and optimism. For example, a young man who began RAP as a welder commented,

> Currently, I’m dual ticketing, meaning I’m apprenticing under another trade as well…. What I’m striving for is pipefitting. Pipefitting, millwright, and welding combined is the ultimate, money wise. If you’re good, you’re invaluable. If an employer sees that on your resume it’ll definitely give you a way better chance at a job, especially in a recession.

A fourth-year heavy duty mechanic also planned to pursue welding, with the goal of owning his own business, just like his father.

In contrast, for the young women in healthcare, credentials beyond the HCA certification were strongly desired, but they were also barriers to be overcome. Healthcare is among the most complex occupational fields when it comes to credentialing (Adams, 2010), and most healthcare professions require at least two years of full-time postsecondary education. Many fields, including nursing, require four or more years of university education. However, youth with such aspirations did not expect their employers to support their movement from HCA to RN since these occupations were seen to involve separate and distinct pathways.

Control over one’s work. Although the educational prerequisites for and length of “in-class” training for HCA and trades were similar, trades work was generally perceived to provide much greater autonomy than aides’ work. Don, a licensed millwright, recounted,

> I trained under the oldest guy in the [sawmill]. He’d been there for 30 years, and then he retired so I filled in his shoes. They said I did really well, I don’t know if I did or not. It was cool just to be able to, they just let you do kind of whatever you wanted. If you wanted to try something different you could do that.

Most of our RAP participants appeared to experience a gradual transition to full participation in their community of practice (Fuller & Unwin, 2006). If they were dissatisfied with their training or work, they usually had the option of looking for alternative employment. Don, for example, became self-employed after achieving certification. He then took time off to travel abroad, using the portability of his trade certification to look for work when needed.
Within two days of his return, this young man’s neighbor was “there with a job offer from human resources” at the local pulp mill. Young men like Don are supported in their agentic behavior because of the high demand for trades workers across Alberta, particularly in the northern oil sands projects, and because of their social capital. Most males in trades felt that they were able to have a say in how and when they do their work. Their comments are consistent with survey results from former youth apprentices in two provinces, which indicate that 36 percent of respondents still working in trades felt they had a “great deal” of influence over deciding what tasks to do and another 45 percent felt they had a “fair amount” of influence (Taylor, Lehmann, Raykov & Hamm, 2013). Further, 40 percent felt they had a “great deal” of influence over how to do the task while 47 percent felt they have a “fair amount” of influence. A third-year electrician apprentice spoke of his preference for “doing his own thing” at work and described trades certification as a “ticket” both to greater freedom in the workplace and to further learning. His account echoes Livingstone’s (2001) assertion that increased control over the workplace and to further learning. His account echoes Livingstone’s (2001) assertion that increased control over the workplace and learning opportunities. A third-year electrician apprentice spoke of his preference for “doing his own thing” at work and described trades certification as a “ticket” both to greater freedom in the workplace and to further learning.

The healthcare aide trainees, in contrast, faced more restrictive opportunity structures. Although there is a strong demand for healthcare aides, young women’s desire to stay in their rural communities limited their employment options. Since they did not see the work as providing either the autonomy or occupational status that they desired, several trainees aspired to “do more” than HCA. Education was seen as the “ticket” with nursing and practical nursing offering the opportunity to “pick where you want to go” rather than being told. Yet, as noted earlier, to achieve the kind of employment that would allow them to be independent and command respect in the healthcare field is costly for rural young women—both financially and in terms of the loss of support networks (Corbett, 2007; Looker & Naylor, 2009; Schaefer & Meece, 2009). The push to contemplate such challenging pathways came partly from young women’s awareness of the differences in economic rewards attached to different occupations.

Healthcare opportunities were also restricted by the proximity and nature of the institutions in which the young women could train. Many rural communities lack acute care facilities—hospitals and primary care clinics—that would have provided them with more opportunities to explore different health care professions. Instead, the majority of the placements were in extended care centers where the work is fairly routine, according to mentors and workplace supervisors.

**Workplace supports for career progression.** Training in Canada tends to be concentrated “among younger workers, those with higher education and skills levels, and workers in larger firms” (Goldenberg, 2006, p. ii). Similarly, this study found that employer support for pursuit of further education for youth in trades varied, with generally more support for those working for large corporations (Poggio, 2000). For example, a millwright working for a large oil sector company was considering an engineering program at a local technical college because “if you want to take a course, whether it be a leadership course or any type of technical training, [my company will] pay 75 percent of your tuition.” Another young man working for an oil company said,

> It’s a great company to work for, probably the best company I’ve worked for. They really take care of their people… Safety is huge, there’s no flying by the seat of your pants… They want you to have forethought of where you’re going.

With encouragement from his employer, this young man was in the process of formulating long-term career goals. Another youth had been encouraged by his employer to complete his apprenticeship training and was brought into the business as a partner.

Since participants in HCA training were in the midst of their programs, they were understandably focused on completing their current certification. However, there was no mention of the possibility of employer-supported transition from HCA training to other occupational certification. Instead, coworkers and others often advised young women in HCA training to pursue further education and training on their own if they wanted a wider variety of work. A young woman relayed: “I was following this younger girl around. I think she was like 23. And she’s like “I don’t know … if I had the chance to get out of here I would, like … if I could go on and do more schooling.” Similarly, a youth from another community said:

> My grandma, she’s an LPN [licensed practical nurse]. And she started talking to me about that, and saying they make good money, and you know. And I was like, well what else am I going to do with my life? Like, I started this [HCA program]. So I’ll just finish it, then.3

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2 We should note that there are differences in apprenticeship experiences across provinces because of different economic conditions. For example, an earlier study finds that automotive apprentices in Ontario had generally less expansive training experiences than oil sands-related trades workers in Alberta (Lehmann, Taylor, & Hamm, 2013).

3 While the Health Care Aide program is advertised as a 16-week program, the Licensed Practical Nurse program is a two-year diploma.
The interns intended to follow the advice of pursuing further education; none of the young women we interviewed planned to remain Health Care Aides, but hoped that temporary work in the field over summers and holidays would help them to finance education toward higher credentials. The path from HCA to RN, the goal expressed by the majority of female trainees, would require them to leave their communities to enroll in four-year university degree programs to achieve the kind of control over work, financial rewards, and occupational status that they desired in a career. In contrast, approximately half of the young men interviewed were still working in their original chosen RAP trade and felt that further education in their fields or in related trades would require little or no disruption in their paid work.

Financial rewards. A recent Alberta study (Parkland Institute & Alberta College of Social Workers, 2012) reports that in 2009 wages for Albertan women working full-time, full-year were 68 percent of what men earned—a ratio tied with Newfoundland and Labrador for lowest in Canada. We see a similar wage gap between healthcare aides and trades workers, particularly when we consider trades workers employed in the oil and gas sector. For example, the average wage for a licensed millwright, was reportedly: “Somewhere around $35 or $45 an hour. I think the union … those guys are somewhere around $52 an hour with benefits. Guys that go to a shutdown make $10,000 in two weeks. The money’s there, the hours are there.”

In fact, a common refrain in interviews was that the return on investment for apprenticeship training (at least in the short term) was significantly higher than for undergraduate degrees. As one participant comments:

I like the [trades] path I took because you’re setting the future for yourself. I’d say you’re better off. If you go to university for five years, you come out over $100,000 in debt. The way I did my training is you work and save enough money to pay for your schooling and by the time you’re done in three years you’re making over $100,000. I wouldn’t have chosen to go to university or stuff like that.

In contrast, HCA trainees were acutely conscious that if they wanted to attain the kind of compensation they desired, they would need to pursue a nursing degree. A nursing job, noted one student, “pays 33 bucks an hour.” Meanwhile, HCAs in their workplaces were paid between $10 and $15 an hour.

Overall, the compensation gap between trades and aides work is significant. As noted above, the reasons for this gap can be traced not only to differences in the kinds of skills required but also to the differences in the historical valuing of the work of male and female workers (Cockburn, 1987; Folbre & Nelson, 2000; Gaskell, 1992). The young HCAs interviewed were, however, resistant to this gendered devaluation of their labor. “The [males] think it’s definitely … nursing is for women,” stated one. “I used to go and like, hang out with the guys after and they would say, ‘What do you do? You just work at the hospital.’ And it’s like, ‘I would really like to see you do half of the stuff that I do.’” Her friend added, “Little do they know it’s hard work. Ask them if they would be able to change a diaper! And attend [to patients].”

Occupational status. In keeping with the conversation just described, the young women we interviewed were visibly struggling with the lack of respect associated with “women’s work.” Although most enjoyed working with patients and entered the program because of their desire to help people, they felt subordinate. As one workplace manager noted, “healthcare aides are not particularly respected by everyone. They are doing the grunt work, the dirty work, they don’t get a big salary. They don’t get a lot of control over what they do…. It’s not an easy job.”

One explanation for attempts to secure the boundaries between female-dominated medical occupations such as RN and HCA is provided by Witz (1990), who argues that the professional project of nurses has involved not only resistance to medical men’s professional strategies but also securing a degree of exclusionary closure in their own profession. Participants in the HCA program were well aware of the hierarchy and sometimes resisted it. Sarah, a Grade 11 student, stated “I wouldn’t be a health care aide forever…. It would lead to something else.” Cara, also in Grade 11, observed that HCAs were kind of like the lower end—they don’t matter. They don’t know what they’re talking about, kind of stuff…. [But the HCAs are] the ones that do all the dirty work…. I don’t know, I think they should be paid more than what they actually are being paid.

When youth speak about “dirty work” and “physical work,” they are talking about the type of tasks that are often overlooked in evaluating “female” jobs, according to Steinberg (1990)—cleaning patients, exposure to disease and human waste, lifting patients. Other overlooked activities include emotional work, protecting confidentiality, and stress from communicating with difficult and angry clients. Therefore, although stamina is required to manage the physical labor and the shift work involved in HCA work (like trades work), there is little recognition of its demanding nature.

The young men generally felt valued in their work. Although the relatively low number of youth entering apprenticeships in Canada has been attributed partly to the low status of trades work compared to professional
and intermediate skilled white-collar occupations (Molgat, Deschenaux, & LeBlanc, 2011), our interviewees’ experiences did not reflect this attitude. Instead, RAP placements had given them an early sense of identity among their peers and respect. For example, when asked if his parents were proud of him, James, a millwright who was the youngest RAP apprentice to earn his trade certification, comments,

I think so. There was a small interview with the [local newspaper] at the awards ceremony with a picture of me and my dad [also a trades person] standing side by side.

In his current work for a transnational oil and gas corporation, Don found that he gets “a lot of respect” in the field. He added that the technical college where he trained is a “world-class millwright training facility” that attracts “people from all over the world.” To date in his career, he has been able to become licensed, work in Australia, move into a management role, and buy a house. The value this youth feels may be due partly to campaigns undertaken by the government and other institutions to raise the status of trades work. Most youth express a high level of satisfaction overall with their career choice.

Respondents’ reflections on their earlier RAP experiences were equally positive. Rick, a fourth-year electrician working in northern Alberta, recalled:

Yeah, I liked it. I thought it was awesome going out and working in the oil sands. It was great…. It was pretty cool because you had so much money. You had all the video games and nice clothes.

Typical of our RAP respondents, Rick had “no regrets at all” about pursuing a trade and was satisfied with the pay, benefits, working hours, and working conditions.

**Mobility, Career, and Family Plans**

Male and female youth reflected on available choices and future plans very differently. Whereas the young men described many opportunities for mobility at work and expressed less concern with the impacts of mobility on family relationships, the young women were more circumspect. They were more likely to consider extended and immediate family in their planning and thus to perceive greater limitations in their career options.

Although some of the young women wished to leave their rural communities permanently, several perceived travel and education as activities to complete before returning to their home communities to have families. Healthcare was seen as one of very few viable career options for young women who wished to settle in their community.

However, unlike earlier decades, young women were also being encouraged by family to be self-reliant. Angela shared that her mom “wants me to go off to university or college, just because she knows that will help me get a better job.” The majority have heard messages from parents or had it “drilled into my head” to be self-sufficient. Reflecting wider trends in university enrollments, young women in HCA training were more likely than males in trades to enjoy high school and to aspire to further formal education. However, the tentativeness with which some young women spoke about their plans (compared to males in trades), is likely due not only to the age gap but also to the challenges facing rural women who risk losing the safety and security of home as they pursue further education.

**Summary and Policy Implications**

Our findings suggest that the “choice” that a young adult makes to enter a highly gendered occupational sector has deep roots. Consistent with Paechter’s (2003, 2006) proposal that we learn gender in early life “communities of practice,” the youth we interviewed recounted early experiences with family members, extended kin networks, and peers that made the choice of a “caring” occupation for a woman or a “hands-on” occupation for a man “natural.”
Gender is thus cultivated in early communities of practice, reinforced through gendered norms and workplace practices. Our use of Fuller and Unwin’s (2003) expansive-restrictive framework also highlights how the particularities of rural occupational structures perpetuate gendered workplace relations. Young men in trades generally experienced socialization into their occupation as part of becoming an adult with increasing control over one’s work and opportunities for both horizontal (e.g., dual ticket) and vertical mobility (e.g., becoming a manager or business owner). The expected lifestyle included “chasing the dollar” to live the good life. In particular, apprentices working in the oil sands of northern Alberta were rewarded handsomely for their willingness and ability to be flexible, mobile workers.

In contrast, young women training as HCAIs found it more challenging to participate in expansive learning contexts. Instead, vertical mobility required further training in related occupations such as licensed practical nurse, registered nurse, or nurse practitioner. Thus, the professional project of nursing appears to have resulted in more respect for nurses vis-à-vis medical professionals but perhaps at the expense of other female-dominated health occupations (Witz, 1990). The expected lifestyle for young HCA trainees in rural communities was consistent with the caring role they were taking on, which created a dilemma for those who aspired to more. Thus, our findings suggest that the “work” of relationships and family and the “work” of paid labor come together in very different ways for young men and women in rural communities, ultimately to the advantage of the males.

Given such gender disparities in occupational trajectories, what is to be done? Our analysis indicates that questions of social mobility—in which education and work play central roles—are fundamentally questions of structure and agency. In the face of post-Fordist “employability” rhetoric that constantly emphasizes individual initiative and agency in work and learning trajectories (Brown, Lauder, & Ashton, 2010), it is imperative to “push back” with empirical research and theorizing that highlights the structural dimensions of inequality of opportunity, as well as illustrations of how structure and agency interact. Our findings highlight two important and well-documented sources of structural inequality: gender and rural geography.

Connell (2005) argues that transformation of inequitable gender relations depends on recognition of the gendered nature of the capitalist accumulation process, the importance of shifting economic and institutional structures, and the construction of masculinity and femininity in everyday life. In keeping with Connell’s argument, our findings suggest that vocational education programs such as those brokered through Transitions are unlikely to disrupt the gendered inequalities of opportunity observed in our two cases if they fail to consider the formative gender networks through which youth “choose” career possibilities, the occupational structures that contribute to expansive or restrictive workplace learning opportunities, and the ways in which gender relations in the workplace are intertwined with gender relations in the home.

Similarly, studies of the Modern Apprenticeship (MA) program in the United Kingdom found that programs were highly gendered (Beck, Fuller, & Unwin, 2006), and that entrants to female-dominated sectors such as child care were disadvantaged in comparison with male-dominated sectors such as engineering because their training was shorter, and they were more likely to be paid a training allowance than a wage (Fuller, Beck, & Unwin, 2005). Further, as in our context, none of the training partners (employers, schools, or intermediary bodies) took responsibility for encouraging and supporting “non-traditional” training decisions. Acknowledging the “depth of challenges” associated with bringing about change in gender relations (p. 306), Fuller, Beck, and Unwin (2005) call for partners to do more to redress gender imbalances.

Similarly, we propose that young people need to be provided with opportunities early on that disrupt their taken-for-granted ideas about what is possible for men and women. Although gendered socialization plays a strong role, youth are also interested in exploring different possible futures, and vocational education programs can help open new horizons for action. However, these horizons must be coupled with knowledge about possible pathways to achieve their goals.

Canadian sources point to the centrality of school-business partnerships to create effective work experience and career exploration programs for youth (Bell & Bezanson, 2006; Canadian Council on Learning, 2009; Taylor, 2007), but at least two significant hindrances are evident. First, as the programs sponsored by Transitions illustrate, passive recruitment strategies are likely only to reproduce existing structural inequalities, particularly when they come up against the larger issue of inflexible postsecondary pathways (Taylor, 2007). In our study, for example, trades offered opportunities for horizontal and vertical mobility, while Health Care Aide was seen as a dead-end job. Career exploration and work experience ought, then, be accompanied by continuing efforts to create flexible pathways between education and work, and between education seen as vocational (e.g., healthcare aide) and professional (e.g., nurse).

The second problem with reliance upon local partnerships between schools and industry is that these initiatives remain under-resourced. Critics have noted that career education in schools is a low priority (Bell & Bezanson, 2006; OECD, 2004) and that the largely instrumental aims of industry (Canadian Council on Learning, 2009) mean that career exploration and the pedagogical nature of work experience...
are marginalized. Bell and Bezanson (2006) advocate for increased focus on training career professionals; legislated career guidance in public schools; and, generally, pan-Canadian and provincial policy frameworks that “move career development from a frill to a central priority” (p. 28). This study contributes to such policy efforts with the reminder that persistent inequities in labor markets in the broader context must also be redressed.
References


