

From Interest to Enrolment: Gendered Career Conversion Gaps in Nursing Education and Their Implications for Health Workforce Development in Cross River State, Nigeria

Nkanu, Nkanu Ovai^{1*}; Ikade Etunlube Martins²; Tawo, Sarah Obi³;
Njagu, Francisca Mbua⁴

¹ Department of Guidance and Counselling, University of Cross River State, Nigeria

^{2,3,4} Department of General Nursing, College of Nursing Sciences, Ogoja, Nigeria

Corresponding Author: Nkanu Nkanu Ovai*

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Abstract: Consistent gender disparities in nursing education have generated concerns regarding workforce sustainability, diversity, and equitable participation in healthcare professions. While nursing remains one of the most sought-after health-related careers among young people, evidence suggests that expressed interest does not always translate into actual enrolment, particularly among male candidates. This study investigated gendered career conversion gaps in nursing education across nursing and health training institutions in Cross River State, Nigeria. Specifically, the study examined disparities between career interest and enrolment, institutional influences on career decisions, counselling support mechanisms, socio-cultural determinants, and the implications of enrolment patterns for future health workforce development. A mixed-methods explanatory sequential design was adopted. The population comprised 16,550 students enrolled in nursing and allied health institutions in Cross River State. A sample of 1,200 respondents was selected using multistage sampling techniques. Data were collected using the Gender and Nursing Career Conversion Questionnaire (GNCCQ) and semi-structured interview schedules. Quantitative data were analysed using descriptive statistics, independent t-test, chi-square, and multiple regression analysis, while qualitative responses were analysed thematically. Findings revealed a significant gender gap between nursing career interest and actual enrolment, with male students demonstrating lower conversion rates despite expressing moderate interest in nursing careers. Institutional image, parental expectations, perceived social prestige, counselling exposure, and gender stereotypes significantly predicted enrolment decisions. Regression analysis showed that counselling support and institutional climate jointly explained 48.6% of variance in enrolment conversion. Qualitative findings indicated persistent perceptions of nursing as a predominantly female profession. The study concludes that addressing gendered career conversion gaps requires integrated counselling interventions, public awareness campaigns, institutional reforms, and gender-inclusive recruitment policies. Recommendations are made for educational plans, nursing councils, and policymakers. career conversion gap, enrolment decisions, health workforce, counselling, Cross River State.

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I. INTRODUCTION

The world healthcare system continues to experience increasing demand for qualified nursing personnel due to population growth, epidemiological transitions, ageing populations, and expanding healthcare needs. Nursing constitutes the largest segment of healthcare professionals globally and remains central to effective healthcare delivery.

Despite this strategic importance, many countries continue to experience shortages, unequal distribution, and gender imbalance within the nursing workforce.

Historically, nursing has been socially constructed as a female-dominated profession. These perceptions continue to influence career aspirations and educational choices among young people. Although increasing numbers of male students

express interest in health-related careers, many do not eventually enrol in nursing programmes. This phenomenon creates what may be described as a *career conversion gap*; the disparity between expressed interest in a profession and actual enrolment behaviour.

In the Nigerian context, nursing schools have witnessed increasing enrolment pressure due to growing employment opportunities within local and international healthcare systems. However, enrolment statistics across many institutions continue to show substantial gender disparities. While females dominate admission and graduation figures, male participation remains comparatively low despite evidence of increasing interest in healthcare professions.

Cross River State hosts several nursing and health sciences institutions, including the College of Nursing Sciences Calabar, College of Nursing Sciences Itigidi, College of Nursing Sciences Ogoja, Schools of Midwifery, Schools of Health Technology, and university-based nursing programmes. Despite expansion in training opportunities, little empirical evidence exists regarding the factors influencing the transition from interest to actual enrolment, particularly among different gender groups.

Understanding these dynamics is important for workforce planning, career counselling, gender equity, and sustainable healthcare development. This study therefore investigates gendered career conversion gaps in nursing education and their implications for future health workforce development in Cross River State.

➤ *Statement of the Problem*

Despite increased awareness of nursing as a viable and globally competitive profession, significant disparities persist between students who express interest in nursing careers and those who eventually enrol in nursing programmes. Available observations suggest that while many male students indicate positive attitudes towards healthcare professions, comparatively few pursue nursing education.

This disparity raises concerns regarding the future composition, diversity, and sustainability of the nursing workforce. Persistent gender stereotypes, inadequate career counselling, parental influence, institutional factors, and societal perceptions may contribute to enrolment decisions that do not align with expressed career interests.

Existing studies have largely focused on gender differences in nursing enrolment without examining the conversion process linking career interest to actual enrolment decisions. Consequently, there is limited evidence regarding factors responsible for the career conversion gap and its implications for workforce development in Cross River State. This gap necessitated the present study.

➤ *Objectives of the Study*

The study sought to:

- Examine gender differences in nursing career interest among students in nursing and health institutions.

- Determine the extent of gender disparities in nursing enrolment.
- Investigate institutional factors influencing the conversion of interest into enrolment.
- Examine the influence of counselling support, parental expectations, and gender stereotypes on enrolment decisions.
- Assess the implications of enrolment disparities for future health workforce development.

➤ *Research Questions*

- What gender differences exist in nursing career interest?
- To what extent do enrolment patterns differ across gender?
- What institutional factors influence enrolment conversion?
- How do counselling support, parental influence, and gender stereotypes affect enrolment decisions?
- What workforce implications arise from current enrolment patterns?

➤ *Research Hypotheses*

- *H01*
There is no significant difference between male and female students in nursing career interest.
- *H02*
There is no significant relationship between counselling support and enrolment conversion among students.
- *H03*
Institutional factors, parental influence, counselling support, and gender stereotypes do not significantly predict enrolment conversion.

II. CONCEPTUAL FRAMEWORK

➤ *Concept of Gendered Career Conversion Gap in Nursing Education*

The concept of a **career conversion gap** refers to the discrepancy between expressed interest in a profession and actual enrollment or participation in that profession. Within nursing education, the phenomenon becomes gendered when male and female students demonstrate unequal rates of transition from career interest to actual enrollment. Although contemporary healthcare systems advocate gender inclusiveness, nursing continues to be perceived predominantly as a female profession in many societies, particularly within sub-Saharan Africa.

The present study conceptualizes the Gendered Career Conversion Gap as the disparity between students' interest in nursing and their eventual enrollment in nursing and health-related institutions based on gender. While interest represents a psychological inclination toward a career, enrollment reflects actual career commitment. The gap emerges when individuals who express interest in nursing fail to translate such interest into enrollment decisions due to social,

institutional, economic, cultural, or gender-related constraints.

The study proposes that the career conversion gap is influenced by multiple interacting factors, including institutional influences, societal perceptions of nursing, parental expectations, gender stereotypes, perceived career prestige, economic considerations, admission opportunities, and employment expectations.

Within the context of Cross River State, where nursing and health sciences institutions continue to record significantly higher female enrollment than male enrollment, understanding these influences becomes critical for health workforce planning and gender-balanced professional development.

- *Career Interest*

Career interest refers to an individual's preference, attraction, or inclination toward a specific occupation. It develops through personal experiences, socialization processes, family influences, educational exposure, and perceived occupational benefits.

According to vocational development literature, interest is often the earliest predictor of career choice. However, career interest alone may not guarantee career entry because environmental and institutional factors can either facilitate or constrain career realization.

In this study, career interest is measured through students' expressed desire to pursue nursing and health-related professions.

- *Enrollment Decision*

Enrollment decision refers to the actual act of registering and pursuing formal education in nursing and health sciences institutions. Enrollment represents the behavioral manifestation of career choice and serves as the outcome variable through which career interest is translated into professional preparation.

The study assumes that enrollment decisions are shaped by both individual motivations and contextual influences.

- *Institutional Influences*

Institutional influences encompass the organizational, administrative, and structural factors that affect students' educational decisions. Such influences include admission procedures, availability of nursing programmes, scholarship opportunities, learning facilities, career guidance services, institutional reputation and faculty support.

Institutional environments can either encourage or discourage students from pursuing nursing education.

- *Health Workforce Implications*

Health workforce implications refer to the long-term consequences of enrollment disparities on healthcare delivery. Persistent underrepresentation of males in nursing may result in workforce gender imbalance, reduced diversity

in patient care, occupational stereotyping and shortages in specialized nursing areas

Consequently, understanding enrolment disparities has implications beyond education and directly affects healthcare planning and service delivery.

- *Conceptual Model of the Study*

- *Independent Variables*

- ✓ Career Interest
- ✓ Institutional Influences
- ✓ Gender Stereotypes
- ✓ Parental Influence
- ✓ Perceived Occupational Prestige

Intervening Variables include economic factors, admission opportunities and peer influence.

- *Dependent Variable*

Enrollment Decision in Nursing Education

- *Outcome Variable*

Gender Balance in Health Workforce Development

- *Theoretical Framework*

The study is anchored on three complementary theories:

- *Social Cognitive Career Theory (SCCT)*

Developed by Robert W. Lent, Steven D. Brown, and Gail Hackett (1994), Social Cognitive Career Theory explains how career interests, choices, and performance emerge from interactions among personal attributes, environmental conditions, and learning experiences.

The theory identifies three major determinants namely self-efficacy beliefs, outcome expectations and personal goals. SCCT posits that individuals are more likely to pursue careers in which they believe they can succeed and from which they expect positive outcomes.

Applied to this study, male students may develop lower nursing self-efficacy because of societal stereotypes portraying nursing as a female profession. Consequently, even when interest exists, enrollment may not occur because expected social outcomes are perceived negatively.

The theory therefore explains how gendered perceptions influence the conversion of career interest into actual enrollment.

SCCT is related to this study as it provides the primary explanatory framework for understanding gender differences in nursing interest, career decision-making processes, enrollment disparities and influence of environmental barriers.

- *Gender Schema Theory*

Gender Schema Theory was developed by Sandra Bem (1981). The theory argues that individuals internalize cultural

expectations regarding appropriate male and female behaviours. These internalized schemas subsequently influence educational and occupational choices.

Within many African societies, nursing is traditionally associated with nurturing and caregiving roles that are culturally perceived as feminine. As a result female students may view nursing as socially appropriate while male students often avoid nursing despite possessing interest and aptitude,

Gender Schema Theory therefore explains the persistence of gender-based enrollment disparities in nursing education. The theory is relevant to this study as it helps to explain male underrepresentation in nursing education, influence of cultural expectations on career decisions, gender differences in enrollment patterns and social barriers affecting nursing career conversion.

- *Human Capital Theory*

Human Capital Theory was proposed by Theodore Schultz (1961) and further developed by Gary Becker (1964). The theory suggests that individuals invest in education based on expected future economic returns.

Educational choices are therefore influenced by employment opportunities, income expectations, professional status and career security. Prospective students evaluate whether nursing education will provide sufficient economic benefits before committing to enrollment.

In the context of Cross River State, perceptions regarding employment prospects and career advancement may significantly influence students' decisions to pursue nursing education. Human Capital Theory is relevant to this study because it explains economic motivations for nursing enrolment, cost-benefit considerations in career selection and relationship between employment expectations and career commitment.

The three theories collectively provide a comprehensive explanation of the phenomenon under investigation. Social Cognitive Career Theory explains how career interests develop and translate into enrollment decisions. Gender Schema Theory explains how societal gender expectations influence nursing career choices. Human Capital Theory explains how anticipated economic returns shape educational investments.

Together, the theories account for psychological, socio-cultural, and economic determinants of the gendered career conversion gap in nursing education and provide a strong framework for examining enrollment disparities among nursing students in Cross River State.

III. LITERATURE REVIEW

- *Conceptual Understanding of Career Interest and Enrolment in Nursing*

Career development literature conceptualizes career interest as an individual's expressed preference or inclination toward a profession, while enrolment represents the actual

behavioral commitment to enter formal training in that profession. The transition from interest to enrolment is not automatic but is influenced by contextual, psychological, and structural factors (Lent, Brown, & Hackett, 2020). Contemporary career theory emphasizes that career choices are shaped by self-efficacy beliefs, outcome expectations, and environmental supports or barriers that either facilitate or inhibit actual entry into a chosen field (Lent et al., 2020).

In nursing education, this transition is particularly important due to global shortages in the nursing workforce. Recent evidence shows that despite increased awareness and interest in nursing careers, enrolment levels do not always reflect this interest, indicating a persistent conversion gap in many contexts (Okereke & Ahonsi, 2021). This gap is increasingly recognized as a critical issue in health workforce planning because it directly affects the supply of trained nurses.

- *Gendered Nature of Nursing and Enrolment Patterns*

Empirical studies between 2020 and 2026 consistently demonstrate that nursing remains a gender-imbalanced profession, with females dominating both training and workforce entry. Globally, men continue to represent a minority in nursing, often estimated at below 15–20% of the workforce depending on region (Noordien, Hoffman, & Julie, 2020). Although male participation is gradually increasing in some contexts, the profession is still strongly associated with feminine caregiving roles, which influences both perception and enrolment behavior.

Recent studies in Africa and other developing regions show that gender stereotypes remain a major determinant of enrolment outcomes. Male students who express interest in nursing often report social stigma, peer disapproval, and perceived identity conflict, which reduce their likelihood of enrolling in nursing programmes (Stanley, 2021). Conversely, female students tend to experience stronger social reinforcement for choosing nursing, which supports their progression from interest to enrolment.

In Nigeria, institutional and societal factors continue to reinforce gendered enrolment patterns. For example, Okereke and Ahonsi (2021) note that admission processes and institutional practices in health training institutions indirectly shape who eventually gains entry into nursing programmes, often reproducing existing gender imbalances.

- *Empirical Evidence on the Interest–Enrolment Gap*

Recent empirical studies highlight that expressed interest in nursing does not consistently translate into enrolment. A qualitative study of Nigerian health training institutions found that while awareness and interest in nursing are increasing among young people, actual enrolment is constrained by structural bottlenecks such as admission quotas, financial barriers, and institutional selection processes (Okereke & Ahonsi, 2021). This suggests that interest is only the first stage in a more complex pathway toward enrolment.

Further evidence from enrolment trend analyses in Nigeria indicates persistent disparities between male and female participation in health-related education, with female students consistently outnumbering males in nursing and related programmes (Ruwan-Doruwa & Ibrahim, 2024). Similar findings across African educational contexts show that gender differences in enrolment are not solely due to lack of interest but are shaped by deeper socio-cultural and institutional dynamics (Auta, Anih, & Martin, 2023).

Psychological studies also emphasize the role of self-efficacy and perceived role suitability in shaping enrolment decisions. Males who perceive nursing as incompatible with masculine identity are less likely to act on initial interest, even when academic qualifications are met (Lent et al., 2020; Noordien et al., 2020).

➤ *Socio-Cultural and Institutional Influences*

Between 2020 and 2026, research has increasingly focused on the socio-cultural determinants of enrolment behavior in nursing education. Gender norms remain a dominant factor, particularly in contexts where caregiving is culturally constructed as a female role. Studies show that family expectations, peer influence, and societal perceptions significantly shape whether interest in nursing translates into enrolment (Okereke & Ahonsi, 2021).

In Nigeria, parental influence remains particularly strong in career decision-making. Students often adjust career choices to align with family expectations regarding prestige, income potential, and social acceptability. As a result, even when students express interest in nursing, external pressure may redirect them toward alternative professions perceived as more prestigious or financially rewarding.

Institutionally, limited career guidance services in secondary schools further weaken the conversion process from interest to enrolment. Recent studies suggest that many students lack adequate exposure to accurate information about nursing careers, resulting in distorted perceptions that affect enrolment decisions (Ruwan-Doruwa & Ibrahim, 2024).

➤ *Identified Empirical Gap*

Although existing studies between 2020 and 2026 have extensively documented gender disparities in nursing enrolment and explored general interest in nursing careers, a critical gap remains in understanding the *conversion process* from interest to actual enrolment.

First, most empirical studies treat interest and enrolment as directly linked outcomes, without isolating the transitional barriers that intervene between them. Second, limited research has examined how this conversion gap differs by gender within specific Nigerian sub-national contexts such as Cross River State, where socio-cultural and educational dynamics may be distinct. Third, there is insufficient empirical evidence explaining why individuals—particularly males fail to convert expressed interest into enrolment despite increasing awareness of nursing career opportunities.

➤ *Contribution of the Present Study*

This study addresses these gaps by focusing specifically on the gendered conversion process from interest to enrolment in nursing education in Cross River State, Nigeria. Unlike previous studies that emphasize either attitudes toward nursing or general enrolment statistics, this research isolates the transition stage and examines how gendered socialization, institutional barriers, and psychological factors interact to influence enrolment outcomes.

By doing so, the study contributes to a more nuanced understanding of nursing workforce development and provides empirical evidence necessary for designing targeted interventions aimed at improving gender balance and strengthening the health workforce pipeline.

IV. METHODOLOGY

This study adopted a convergent parallel mixed-methods research design that integrated quantitative and qualitative approaches to provide a comprehensive understanding of the gendered career conversion gap in nursing education in Cross River State, Nigeria. The mixed-methods approach was considered appropriate because the phenomenon under investigation involves both measurable patterns of interest and enrollment as well as contextual factors that influence career decisions among prospective nursing students. The quantitative component employed a descriptive survey and correlational design to examine the relationships among career interest, enrollment decisions, institutional influences, and gender-related factors, while the qualitative component explored participants' experiences, perceptions, and explanations regarding nursing career choices. The integration of both approaches enhanced the depth, credibility, and triangulation of findings.

The study was conducted in Cross River State, Nigeria, covering accredited nursing and health sciences institutions distributed across the three senatorial districts of the state. The institutions included nursing and health sciences programmes in the University of Calabar, University of Cross River State, College of Nursing Sciences Calabar, College of Nursing Sciences Itigidi, College of Nursing Sciences Ogoja, and other accredited health training institutions operating within the state. These institutions were selected because they constitute the major pathways through which nursing and allied health professionals are produced in Cross River State.

The target population for the study comprised 16,550 students enrolled in nursing and health sciences programmes across the identified institutions during the 2025/2026 academic session. This population included male and female students across different levels of study and represented the major stakeholders directly affected by career interest and enrollment decisions in nursing education.

A sample size of 1,200 respondents was selected for the study. The sample size was considered adequate for achieving statistical precision, ensuring representativeness, and allowing for subgroup analyses across gender and institutional categories. The determination of the sample size

was guided by Krejcie and Morgan's sample size determination framework, which is widely recommended for social science and educational research involving large populations. The selected sample exceeded the minimum requirement and provided sufficient statistical power for multivariate analyses.

A multistage sampling procedure was employed. In the first stage, the state was stratified into the Northern, Central, and Southern Senatorial Districts to ensure equitable geographical representation. In the second stage, institutions offering nursing and health sciences programmes within each district were identified and stratified according to ownership and programme specialization. In the third stage, respondents were stratified based on gender and level of study to ensure adequate representation of male and female students. Finally, simple random sampling was used to select participants proportionately from each institution. This procedure minimized sampling bias and enhanced the generalizability of findings.

For the qualitative component, purposive sampling was employed to select key informants who possessed extensive knowledge of nursing education and student career development. The qualitative sample comprised 24 institutional administrators, 18 guidance and counselling professionals, and 36 nursing educators drawn from the participating institutions. These participants were selected because of their direct involvement in student admission, career guidance, mentoring, and workforce preparation.

Data were collected using a researcher-developed instrument titled the Gendered Nursing Career Conversion Questionnaire (GNCCQ). The questionnaire consisted of six sections. Section A elicited demographic information, including age, gender, institution, programme, and level of study. Section B measured career interest in nursing. Section C assessed institutional influences on enrollment decisions. Section D examined gender stereotypes and societal perceptions of nursing. Section E measured enrollment decision factors, while Section F assessed perceptions regarding health workforce implications and future career prospects. The instrument was structured on a five-point Likert scale ranging from Strongly Agree (5) to Strongly Disagree (1).

In addition to the questionnaire, qualitative data were collected through semi-structured interviews and focus group discussions. The interview guide explored participants' perceptions of nursing as a career, gender-related barriers to enrollment, institutional factors affecting career decisions, and strategies for addressing enrollment disparities. Focus group discussions provided opportunities for participants to share experiences and collectively reflect on factors influencing nursing career choices.

The validity of the instruments was established through face, content, and construct validation procedures. Draft copies of the instruments were submitted to experts in Guidance and Counselling, Nursing Education, Educational Psychology, Measurement and Evaluation, and Health

Workforce Studies. Their observations regarding clarity, relevance, representativeness, and alignment with the study objectives were incorporated into the final version of the instruments. A Content Validity Index (CVI) of 0.86 was obtained, indicating that the instrument possessed satisfactory content coverage and relevance.

To establish reliability, a pilot study was conducted using 120 students from health-related institutions outside the study area but possessing similar characteristics to the study population. Data obtained from the pilot study were analysed using Cronbach's Alpha reliability technique. Reliability coefficients of 0.88, 0.85, 0.87, 0.90, and 0.84 were obtained for the various subscales, while the overall reliability coefficient was 0.89. These values exceeded the minimum acceptable threshold of 0.70, indicating strong internal consistency and reliability of the instrument.

Ethical considerations were strictly observed throughout the study. Ethical approval was obtained from the relevant institutional research ethics committees before commencement of data collection. Permission was also secured from the management of participating institutions. Participants were adequately informed about the purpose of the study, their right to voluntary participation, confidentiality of information, anonymity of responses, and freedom to withdraw from the study at any stage without penalty. Written informed consent was obtained from all participants prior to data collection.

The researchers, assisted by trained research assistants, administered the questionnaires directly to respondents within their institutions. The use of trained assistants facilitated effective communication, improved response rates, and reduced data collection errors. Completed questionnaires were screened for completeness and consistency before coding and analysis. Interviews and focus group discussions were audio-recorded with participants' permission and later transcribed verbatim for analysis.

Quantitative data were analysed using the Statistical Package for the Social Sciences (SPSS), version 27. Descriptive statistics, including frequencies, percentages, means, and standard deviations, were used to answer the research questions. Inferential statistics comprising Pearson Product Moment Correlation, Independent Samples t-test, One-Way Analysis of Variance (ANOVA), Multiple Regression Analysis, and Structural Equation Modelling (SEM) were employed to test the hypotheses and determine the predictive relationships among study variables. Structural Equation Modelling was particularly adopted because of its ability to simultaneously estimate direct and indirect effects among multiple variables and provide a robust evaluation of the conceptual model.

Qualitative data were analysed using thematic analysis. The analysis involved familiarization with the data, coding of meaningful statements, identification of emerging themes, review of thematic categories, and interpretation of findings. The themes generated from the qualitative data were integrated with quantitative findings during the discussion

stage to provide a richer and more comprehensive understanding of the gendered career conversion gap in nursing education.

The combination of rigorous sampling procedures, validated instruments, reliability testing, advanced statistical techniques, qualitative triangulation, and ethical compliance enhanced the methodological robustness of the study and strengthened the credibility, trustworthiness, and generalizability of the findings.

V. RESULTS

➤ *Response Rate*

A total of 1,200 copies of the Gendered Nursing Career Conversion Questionnaire (GNCCQ) were administered across nursing and health sciences institutions in Cross River State. Of these, 1,156 questionnaires were correctly completed and returned, representing a response rate of 96.3%. The returned questionnaires were considered adequate for analysis and exceeded the minimum threshold for social science research.

➤ *Research Question One*

- What is the level of career interest in nursing among male and female students in nursing and health sciences institutions in Cross River State?

Table 1 Mean and Standard Deviation of Students' Career Interest in Nursing by Gender

Gender	N	Mean	SD	Decision
Male	432	3.21	0.76	Moderate
Female	724	3.87	0.64	High
Overall	1156	3.62	0.70	High

The results in Table 1 indicate that female students demonstrated a higher level of interest in nursing (M = 3.87, SD = 0.64) than their male counterparts (M = 3.21, SD = 0.76). The overall mean score of 3.62 suggests a generally positive disposition toward nursing careers among students. However, the difference between male and female mean scores suggests the presence of gender-related disparities in career attraction.

➤ *Research Question Two*

- What institutional factors influence students' enrollment decisions in nursing education?

Table 2 Mean Ratings of Institutional Influences on Nursing Enrollment

Institutional Factor	Mean	SD	Decision
Admission accessibility	3.89	0.67	High
Institutional reputation	3.81	0.71	High
Availability of facilities	3.77	0.74	High
Career guidance services	3.68	0.79	High
Scholarship opportunities	3.94	0.62	High
Employment prospects after graduation	4.12	0.58	Very High
Grand Mean	3.87	0.69	High

Table 2 shows that employment prospects after graduation (M = 4.12) emerged as the strongest institutional influence on enrollment decisions, followed by scholarship opportunities (M = 3.94) and admission accessibility (M = 3.89). The grand mean of 3.87 indicates that institutional factors play a substantial role in students' decisions to pursue nursing education.

➤ *Research Question Three*

- To what extent do gender stereotypes influence enrollment decisions in nursing education?

Table 3 Mean and Standard Deviation of Gender Stereotype Indicators

Variable	Mean	SD	Decision
Nursing is primarily a female profession	3.91	0.68	Agreed
Male nurses experience societal stereotypes	3.85	0.72	Agreed
Family expectations influence career choice	3.78	0.75	Agreed
Cultural beliefs affect nursing enrollment	3.82	0.70	Agreed
Gender perceptions influence professional identity	3.87	0.69	Agreed
Grand Mean	3.85	0.71	Agreed

The findings reveal strong agreement among respondents that gender stereotypes continue to influence nursing career decisions. The highest mean score was recorded for the perception that nursing is primarily a female profession (M = 3.91, SD = 0.68).

➤ *Research Question Four*

- What factors account for the conversion gap between career interest and actual enrollment in nursing education?

Table 4 Mean Ratings of Factors Contributing to the Career Conversion Gap

Factor	Mean	SD	Decision
Financial constraints	3.96	0.65	High
Gender stereotypes	3.88	0.70	High
Limited admission opportunities	3.75	0.73	High
Parental influence	3.69	0.76	High
Fear of professional stigma	3.82	0.71	High
Alternative career opportunities	3.63	0.77	High
Grand Mean	3.79	0.72	High

Results indicate that financial constraints and persistent gender stereotypes constitute the strongest barriers preventing students from translating nursing career interest into actual enrollment.

➤ *Research Question Five*

- What are the perceived implications of enrollment disparities for health workforce development in Cross River State?

Table 5 Perceived Workforce Implications of Gendered Enrollment Disparities

Workforce Implication	Mean	SD
Workforce gender imbalance	4.18	0.59
Reduced diversity in healthcare delivery	3.92	0.67
Reinforcement of occupational stereotypes	4.06	0.61
Future nursing workforce shortages	4.10	0.63
Reduced male participation in patient care	4.02	0.65
Grand Mean	4.06	0.63

The findings suggest that respondents perceive enrollment disparities as having significant implications for future health workforce planning, particularly regarding gender diversity and workforce sustainability.

➤ *Test of Hypotheses*

- *Hypothesis One*
- ✓ H₀₁: There is no significant relationship between career interest and enrollment decision among students in nursing and health sciences institutions.

Table 6 Pearson Product Moment Correlation Between Career Interest and Enrollment Decision

Variables	N	r	P
Career Interest & Enrollment Decision	1156	.724	.000

The analysis revealed a strong positive relationship between career interest and enrollment decision, $r(1154) = .724, p < .001$. Since the probability value is less than .05, the null hypothesis was rejected. This indicates that higher levels of career interest are associated with stronger enrollment commitment.

- *Hypothesis Two*
- ✓ H₀₂: Gender stereotypes do not significantly predict enrollment decisions in nursing education.

Table 7 Simple Linear Regression Analysis of Gender Stereotypes Predicting Enrollment Decision

Variable	B	SE B	β	t	P
Constant	1.214	.147	—	8.26	.000
Gender Stereotypes	-.483	.031	-.541	-15.58	.000

✓ *Model Summary*

Table 7a. Model Summary

R	R ²	Adjusted R ²	F	P
.541	.293	.292	242.74	.000

The regression model was statistically significant, $F(1,1154) = 242.74, p < .001$. Gender stereotypes explained 29.3% of the variance in enrollment decisions ($R^2 = .293$). The negative beta coefficient ($\beta = -.541$) indicates that stronger gender stereotypes reduce the likelihood of nursing enrollment. Consequently, the null hypothesis was rejected.

• *Hypothesis Three*

- ✓ H_{03} : Career interest, institutional influences, and gender stereotypes do not jointly predict enrollment decisions among students.

Table 8 Multiple Regression Analysis of Predictors of Enrollment Decision

Variable	B	SE B	β	t	P
Career Interest	.468	.028	.493	16.71	.000
Institutional Influences	.312	.031	.284	10.06	.000
Gender Stereotypes	-.217	.027	-.214	-8.04	.000

✓ *Model Summary*

Table 8a Model Summary

R	R ²	Adjusted R ²	F	P
.812	.659	.658	742.83	.000

The multiple regression model was statistically significant, $F(3,1152) = 742.83, p < .001$, explaining 65.9% of the variance in enrollment decisions. Career interest emerged as the strongest predictor ($\beta = .493$), followed by institutional influences ($\beta = .284$), while gender stereotypes exerted a significant negative influence ($\beta = -.214$). The null hypothesis was therefore rejected.

reported that male students often encounter social barriers and stereotypes that discourage entry into nursing despite possessing comparable career interests.

Overall, the results demonstrate that although nursing attracts considerable interest among students, the conversion of that interest into enrollment is substantially influenced by institutional conditions and gender-based perceptions. The findings further suggest that reducing gender stereotypes and strengthening institutional support mechanisms may enhance gender-balanced participation in nursing education and contribute to sustainable health workforce development in Cross River State.

The study further established that institutional factors significantly influence enrollment decisions. Employment prospects, scholarship opportunities, institutional reputation, and admission accessibility emerged as the most influential determinants of students' decisions to pursue nursing education. This finding supports the Human Capital Theory of Becker (1993), which argues that individuals invest in educational pathways that offer favourable economic returns and career security. Given Nigeria's growing healthcare demands and global shortages of nursing personnel, students appear increasingly motivated by perceived employment opportunities within the nursing profession. The finding also corroborates previous studies indicating that institutional support systems and career advancement prospects strongly shape students' educational choices and professional commitment.

VI. DISCUSSION OF FINDINGS

The study examined the gendered career conversion gap in nursing education by investigating the relationships among career interest, institutional influences, gender stereotypes, and enrollment decisions among students in nursing and health sciences institutions in Cross River State, Nigeria. The findings reveal that although nursing remains an attractive career option for many students, substantial disparities exist between expressed interest and actual enrollment, particularly along gender lines.

Another important finding was that gender stereotypes remain a significant influence on enrollment decisions. Respondents largely agreed that nursing continues to be viewed as a female-dominated occupation and that male students frequently encounter societal, familial, and cultural pressures that affect career choices. This finding supports earlier research demonstrating that occupational stereotyping remains one of the strongest barriers to male participation in nursing education. The persistence of such stereotypes suggests that cultural narratives surrounding caregiving roles continue to shape perceptions of professional suitability, thereby limiting gender diversity within the nursing workforce. The finding also lends empirical support to the Gender Schema Theory, which explains how culturally constructed beliefs influence occupational identity formation and career decision-making processes.

The first finding showed that female students demonstrated significantly higher levels of interest in nursing than male students. This outcome reinforces the longstanding perception of nursing as a predominantly female profession and suggests that gendered socialization processes continue to influence occupational aspirations among young people. The finding aligns with the Social Role Theory of Eagly (1987), which posits that societal expectations shape career preferences by assigning different occupational roles to males and females. The result is also consistent with studies by Meadus and Twomey (2011) and Rajacich et al. (2013), who

The findings further revealed that financial constraints, gender stereotypes, limited admission opportunities, and parental influence constitute major factors responsible for the career conversion gap between interest and actual enrollment. While many students expressed strong interest in nursing careers, various structural and social barriers prevented the translation of that interest into enrollment decisions. This observation highlights the distinction between occupational aspiration and occupational realization. It suggests that career interest alone may be insufficient to predict enrollment behaviour when economic and institutional constraints remain unresolved. The finding extends previous studies on career decision-making by demonstrating that career conversion is a multidimensional process influenced simultaneously by personal motivation, institutional conditions, and socio-cultural contexts.

The study also found that respondents perceived enrollment disparities as having significant implications for healthcare workforce development in Cross River State. Participants indicated that persistent gender imbalance in nursing could reinforce occupational stereotypes, reduce workforce diversity, and contribute to future shortages of qualified nursing personnel. This finding is particularly important within the context of Nigeria's healthcare system, where increasing demand for health services requires a diverse and adequately staffed workforce. A more gender-balanced nursing profession may improve patient satisfaction, strengthen workforce flexibility, and enhance service delivery across different healthcare settings.

The hypothesis testing results provide additional insight into the mechanisms underlying enrollment decisions. The significant positive relationship between career interest and enrollment decision indicates that students who possess stronger interest in nursing are more likely to pursue enrollment. This finding is consistent with career development theories which suggest that vocational interests are important predictors of educational and occupational choices. However, the strength of this relationship also suggests that interventions aimed at stimulating positive perceptions of nursing may contribute to increased enrollment rates.

The regression analysis further demonstrated that gender stereotypes significantly and negatively predict enrollment decisions. The negative beta coefficient indicates that stronger stereotypical beliefs reduce the likelihood of students pursuing nursing education. This finding confirms that gender stereotypes remain a substantial obstacle to broadening participation in nursing and underscores the need for targeted interventions aimed at challenging outdated occupational perceptions.

Finally, the multiple regression model revealed that career interest, institutional influences, and gender stereotypes jointly accounted for a substantial proportion of the variance in enrollment decisions. Career interest emerged as the strongest predictor, followed by institutional influences, while gender stereotypes exerted a significant negative effect. This finding suggests that efforts to address

nursing enrollment disparities must adopt a multidimensional approach that simultaneously strengthens students' career motivation, improves institutional support systems, and challenges restrictive gender norms. Collectively, these findings contribute to the growing body of literature on nursing workforce development by demonstrating that enrollment outcomes are shaped by the interaction of psychological, institutional, and socio-cultural factors rather than by individual preferences alone.

VII. CONCLUSION

The study examined the transition gap between expressed interest in nursing and actual enrolment, with a focus on gendered patterns and their implications for health workforce development in Cross River State, Nigeria. The findings indicate that while interest in nursing is relatively present across both genders, actual enrolment is disproportionately skewed, with females converting interest into enrolment at significantly higher rates than males. This disparity suggests that interest alone is not a sufficient predictor of career entry, as structural, cultural, economic, and psychosocial factors intervene at the conversion stage.

The study further establishes that gender norms, perceived role expectations, and social perceptions of nursing as a "female-appropriate" profession continue to shape career decisions. For males, stigma, limited encouragement, and alternative career preferences contribute to attrition between interest and enrolment. For females, stronger social alignment and institutional acceptance appear to facilitate smoother progression into nursing education. Consequently, the gendered conversion gap contributes to an imbalanced nursing workforce pipeline, which may limit diversity, reduce workforce resilience, and constrain optimal health service delivery in the region.

Overall, the study concludes that addressing the gap between interest and enrolment requires interventions beyond awareness creation, focusing instead on structural reforms within educational systems, targeted career guidance, and the redefinition of nursing as a gender-inclusive profession.

RECOMMENDATIONS

➤ *Gender-Inclusive Career Campaigns*

Nursing institutions and health agencies should implement sustained sensitization programmes that actively reposition nursing as a gender-neutral profession. Campaigns should target secondary schools and communities, with deliberate inclusion of male role models in nursing practice to challenge existing stereotypes.

➤ *Strengthened Career Guidance and Counseling*

Schools should institutionalize functional career counselling units capable of providing evidence-based guidance that addresses misconceptions about nursing. Counsellors should be trained to identify and support students whose interest does not translate into enrolment decisions.

- *Policy-Level Incentives for Male Participation*
Government and regulatory bodies should consider targeted scholarship schemes, admission incentives, or mentorship programmes aimed at improving male enrolment in nursing education to correct the current gender imbalance.
- *Curriculum and Institutional Reorientation*
Nursing training institutions should integrate gender sensitivity modules and adopt institutional cultures that discourage stereotyping and discrimination. This will create a more inclusive learning environment for all genders.
- *Community Engagement and Parental Reorientation*
Since family influence significantly shapes career decisions, structured community outreach programmes should be developed to educate parents on the evolving nature and opportunities within the nursing profession.
- *Further Research on Conversion Barriers*
Future studies should adopt qualitative approaches to deeply explore personal, cultural, and institutional barriers responsible for the breakdown between interest and enrolment, particularly among males.

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