

Work Place Issues and Challenges Faced by Women Doctors in Clinical departments

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Abstract:

Background:- No of women doctors' in India are 118,658 among them female work force participation rate is 27%. The women doctors in clinical departments having more responsibilities including night shifts causes work place problems are presumed to be more and complicated than those of other working women. Hence present study is undertaken to study the issue.

Aims and objectives To identify the problems, challenges faced by women doctors at their work place and to assess the influence of professional on personnel life and management of balance between them.

Materials & Methods: A hospital based study with qualitative assessment questionnaire was conducted among 35 women doctors working in clinical departments as assistant professors of same age group in S.V.R.R.G.G.H and GOVT. Maternity Hospital, Tirupati.

Statistical analysis: - The results were analyzed in an MS. Excel sheet and represented in bar diagrams.

Results: - Among 35 women doctors only 34.2% of them were able spend time with family, only 40% of them were able to manage time between professional work and personal life. 62.8% of doctors felt that patients discriminate between male & female doctors. 25% of the doctors have difficulty in implementation of their ideas. 52% opined that there is difference in influencing the people to accept health services like family planning, vasectomy etc

Conclusion: Difficulty in balancing family and profession and facing discrimination by patients are likely to impair professional acumen of women doctors. Alternative strategies to overcome the above problems are needed to improve the medical care of the society.

Key Words:- professional work, glass ceiling, opportunities, work space, life style

I. Introduction

In general women have been forced to occupy a secondary place in relation to men in many ways. The constitution of India provides equal status with men but in reality women is discriminated in all fields of male dominated society. The women by nature has to undergo pregnancy, child birth etc reduces her physical strength to work and made her dependent gradually on men for protection and other requirements

There has been considerable ambiguity in the role of women in the present Indian society. Education, socio-political movements, scientific and technological advancement, globalization have changed the attitude of people towards women to a certain extent. These developments have made women more independent and confident. Of late, people from different backgrounds have been expressing their opinions regarding the position of women in our society. Nevertheless, women are a significant part of not only the population but also in contributing to every sphere of life¹. These developments are mostly at individual levels in spite of social criticism, restrictions, customs and traditions. There is a need to redefine the status of women in getting empowerment with support of family members and society. In the modern society women empowerment has to begin with women's active participation in all fields that are dominated by men. Having such background the present day women have evolved from primitive stage to break up the patriarchal society and occupied almost all the fields except few.

Women have proved themselves in every field. Today women are a part of every profession, including the defense services, astronomy. In spite of such advancements by women, there is still a gender bias in all walks of life, and medical field is not an exceptional one. Women doctors have also been facing problems and challenges at the work places like women in other professions, such as denial of opportunities, lack of encouragement and support, make the women more discouraged and biased on gender issues causing imbalance in maintenance of pleasant environment at work place. In the society the women's contribution and skills...etc were not recognition despite having skills, talent, commitment, dedication and hard work equal to men. Some problems are inherent to the respective professions and certain specific problems are unique to the women doctors².

A considerable demographic shift has been observed in women giving more preference to choose the medical field as their profession (compared to pre-1960s). Challenges faced by women doctors are presumed to be different and complicated in the way of professional responsibilities, night duties, academics and administrative work³. Major challenges faced by women doctors like maintaining the balance between their career development and lifestyle management. Women doctors are facing more strain to deal both as a woman and as well as a doctor⁴.

The purpose of this study is to analyze the experiences and challenges of women doctors in the medical profession and their personal life, which effects on their career, family and life style⁵.

II. Aims And Objectives

1. To know the problems faced by women doctors at their work place.
2. To assess the balance between professional work and personal life.
3. To know how being a lady doctor influence their career and life style.
4. To assess the strategies to overcome the challenges.

III. Method Of Study

Study Design: The study comprised of 35 women doctors from clinical departments in SVRRGH and Government Maternity Hospital, Tirupati. The Qualitative assessment was made by common questionnaire consists of 25 questions. The analysis was made by conducting survey of senior women doctors of age group from 30-40 years.

Study Setting: Women doctors working in clinical departments in SVRRGH and Government Maternity hospital, Tirupati.

Inclusion Criteria

All women doctors working as assistant professors of age group 30-40 years in clinical departments in SVRRGH and Government Maternity Hospital, Tirupati

Exclusion Criteria

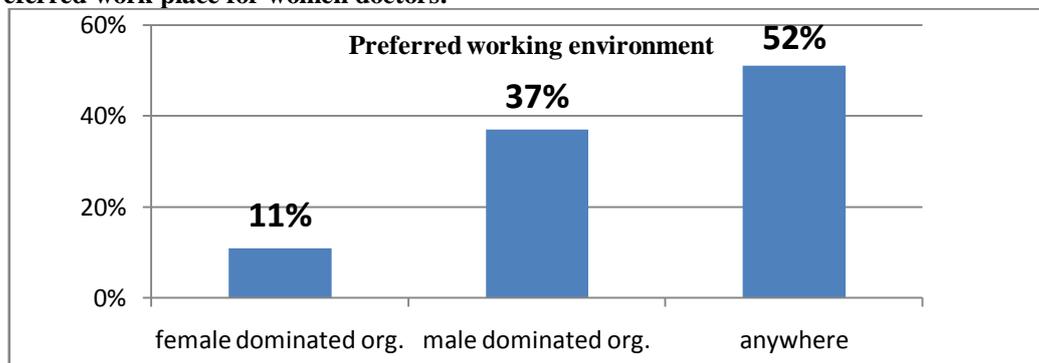
Women doctors working as professors, associate professors and post graduates of clinical departments and women doctors of non-clinical departments.

Ethics: Informed consent of all participants taken.

IV. Results And Discussion

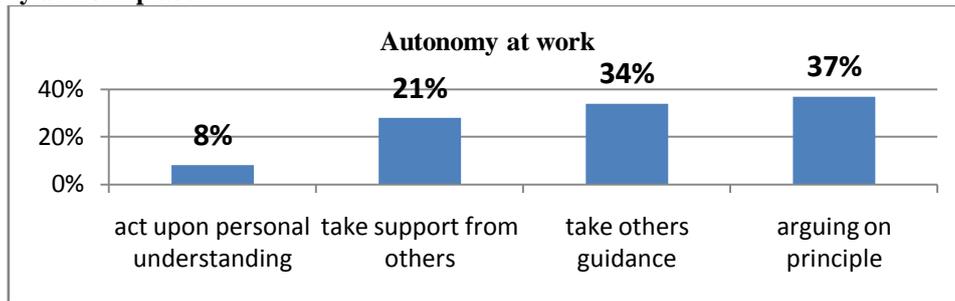
A total of 35 women doctors participated in the study and the results were analyzed in an MS. Excel sheet and represented in bar diagrams. Women doctors participated in this study belong to the age group of 30 to 40 years, working as assistant professors in clinical departments of SVRRGH and Government Maternity Hospital, Tirupati.

1. Preferred work place for women doctors:



Regarding preference of work environment, 52% women doctors preferred to work at any place, 37% preferred male dominated organizations whereas only 11% preferred to work in female dominated organization. The result of the present study correlates with the study on Broken wings: issues faced by female doctors in Pakistan regarding career development except with regard to the female dominated organization⁶. Considerable percent of women were willing to work in male dominated organizations. This shows the changing trend of women preference regarding the work place.

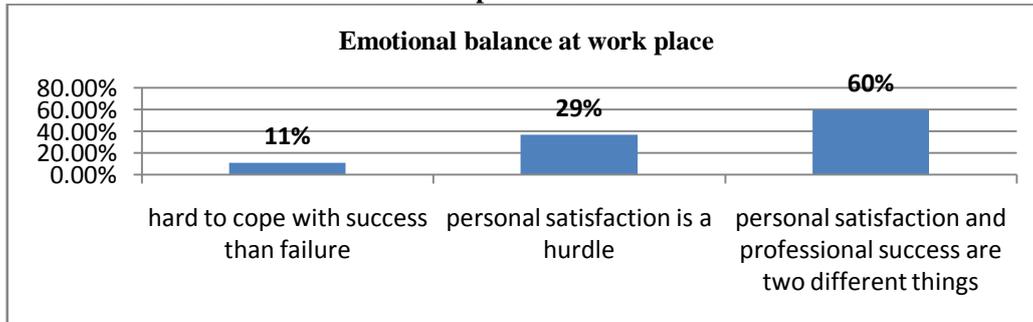
2) Autonomy at work place:



Regarding women’s attitude towards autonomy of work in the present study 37% of them argue on the principle, 34% depends upon others for guidance and only 21% take support from others and only few acts upon personal understanding.

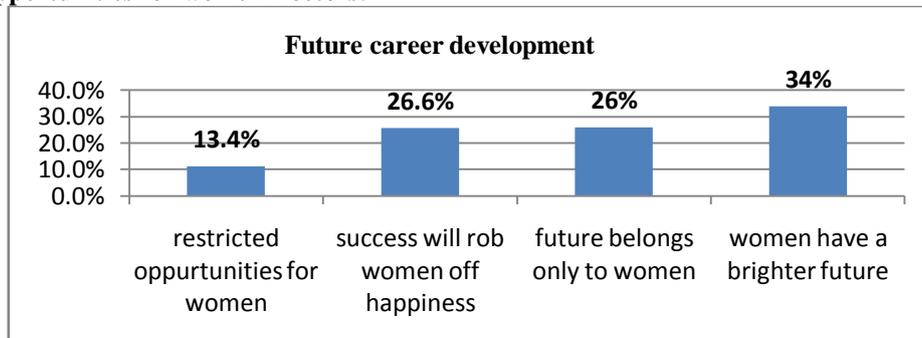
Most of the people were taken support and guidance from others but significant members able to argue for the principles, this differs from the study done by the Seema arif (Broken wings: issues faced by female doctors in Pakistan regarding career development) wherein most of the women doctors act upon personal understanding rather than taking others guidance⁶. There is a need to change women’s attitude towards more independent way rather than dependence on others.

3) Emotional balance of women Doctors in their profession:



Women doctors of about 60% opined that personal satisfaction and professional success are two different things, whereas 29% felt that personal satisfaction is a hurdle and only 11% felt it as hard to come up with success. The results of the present study of women doctor’s correlates with the study conducted by Seema Arif that majority of the doctors are able to successfully catalog between emotional satisfaction and professional success⁶. This shows that women doctors were able to manage the professional and personal life successfully with satisfaction, but several felt personal satisfaction is hurdle because their contentment was exhausted with professional achievement. Only 11% felt that it was hard to get success as they were not able to manage both at a time. So interval gap of time for planning is necessary to manage both successfully.

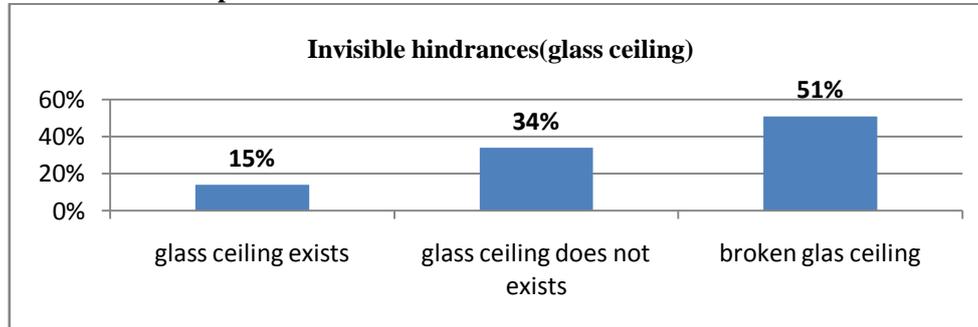
4) Future opportunities for women Doctors:



Among women doctors 34 % opined that women have bright future, 26% opined that future belongs only to women, 26.6% opined that success can rob women off their happiness and only 13.4% opined that there are restricted oppurtunities for women.

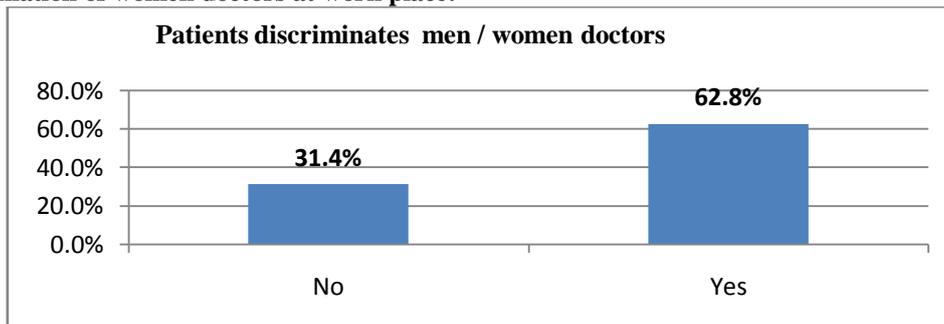
According to a study on Broken wings : issues faced by female doctors in Pakistan regarding career development shows that times are changing and the women doctors have a brighter future ahead ⁶. This shows the changing attitude of the women regarding the future career development.

5) Invisible hurdles at work place:



Women doctors of about 15 % opined that glass ceiling still exists whereas 85 % felt the glass ceiling was broken and does not exist. The study on Broken wings: issues faced by women doctors in Pakistan regarding career development shows that 62% of the women doctors strongly believe that glass ceiling exists and women have to struggle harder to reach the top. ⁶ Whereas the results of the present study shows that 85% of the women doctors believe that glass ceiling do not exist or broken down, this is a significant change that shows women’s progress was not hampered even invisibly.

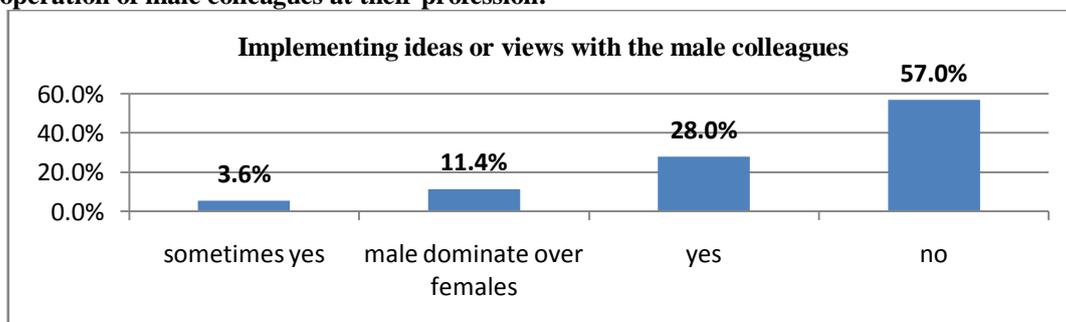
6) Discrimination of women doctors at work place:



Women doctors of 62.8 % opined that the patients shown discrimination in selecting the men and women doctor for consultation, 31.4% opined that no such discrimination was noticed whereas 5.8% of women doctors have not answered the question.

The results are consistent with the study done by Clark and Bickel J, in that 80% of the women doctors felt that patients opined men doctors as superior than the women doctors⁷. This coincides with present study that most of the women doctors felt that they experienced discrimination by the patients; this attitude shows gender bias existing in the society and this need to be changed.

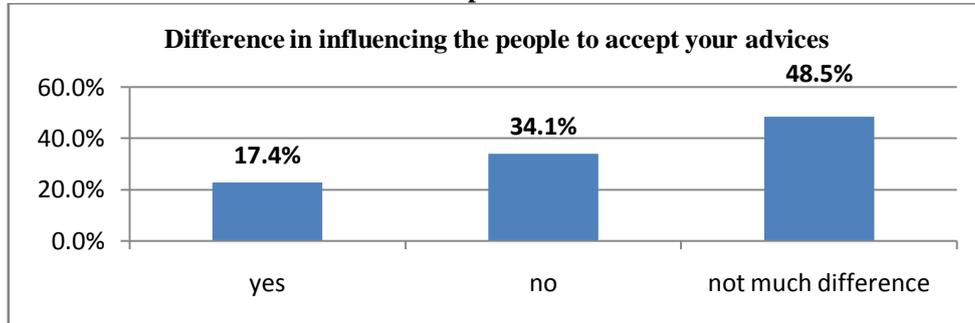
7) Cooperation of male colleagues at their profession:



The results of the present study shows that 57% opined no difficulty to implement or sharing ideas and views with male colleague, 28 % felt difficulty, 11.4 % stated that male doctors dominates over female doctors , and only 3.6% stated that they felt difficulty occasionally.

The results are analogous to the study conducted by Clark V, and Bickel J⁷. Most of the women doctors feel free while dealing with the male colleagues, and this shows that the women were able to express freely their ideas without difficulty in our society when compared to earlier, where women were not able to put across their views in Patriarchal society.

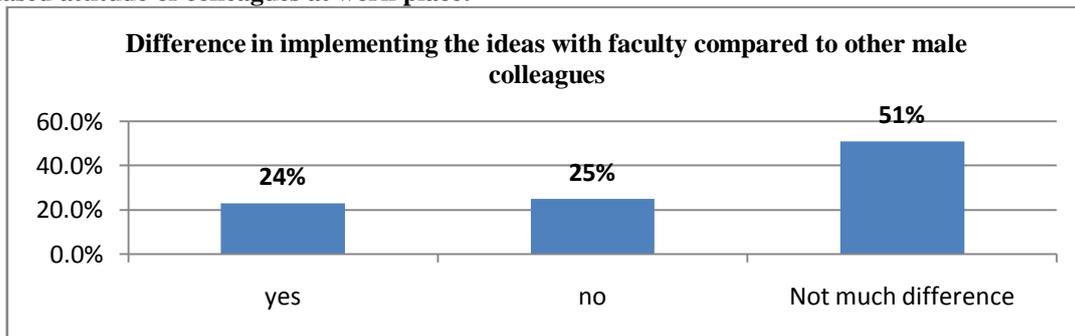
8) Acceptance of views of women doctors at work place:



The results of the present study shows that 82.6% of the women doctors stated that there was no much difference in influencing the people in implementing their views, whereas 17.4 % women’s felt that there was much difficulty in influencing the people.

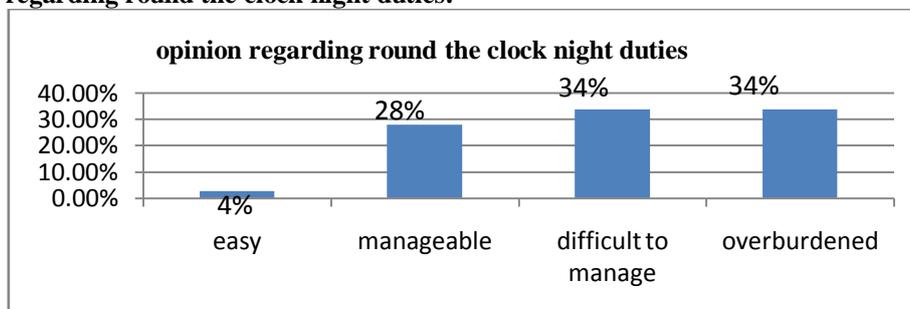
The results of the present study were equivalent to a study by Blau, Ferber study that women doctors were able to influence the patients equally in accepting their medical advices⁸. This indicates that women doctors were able to manage either male or female patients without facing much difficulty on par with male doctors.

9) Biased attitude of colleagues at work place:



In present study shows that 76% did not feel much difference in implementing the ideas compared to other male colleagues, but only 24% opined that there is difference,. The present results are consistent with the study of Bleu, F.D., Ferber, M⁸. Most of the women doctors felt that they were able to implement their ideas in a liberal way as the other male colleagues and without difficulty, but still 24% of women doctors felt difficulty in implementing their ideas might be due to gender discrimination at work places with male colleagues.

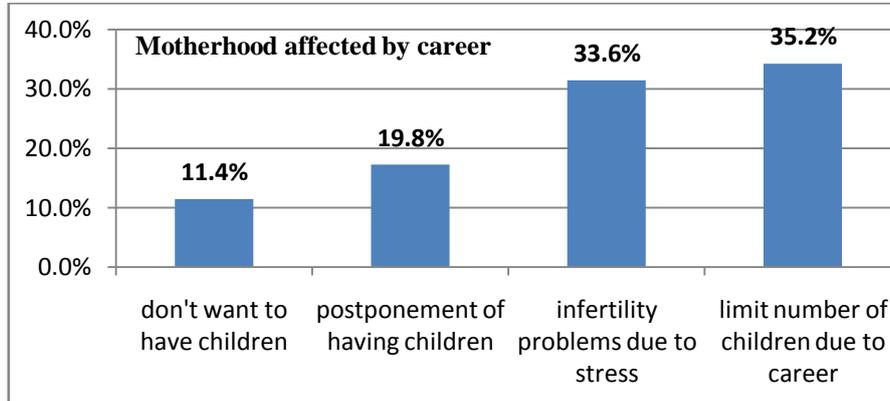
10) Opinion regarding round the clock night duties:



Among the women doctors, 34 % of them said that it is difficult to manage the night duties, 34 % felt that night duties are over-burdened, 28 % stated that night duties are manageable and only 4 % said that night duties are comfortable. As per the results of the present study women still face difficulties in night duties as shown in the study of Borkowski, S.C. and Walsh, A⁹.

Most of the women doctors felt complexity in doing the night duties because they have to focus on the domicile activities like child and family care, looking after in-laws along with professional activities. If the night duties were very tedious there will be difficulty in balancing between personal life and professional work which may lead to stress on women. This stress was reflected as health impairment, decreased concentration at work place and difficult in achieving goals etc. To tide over the situation husband and family members should co-operate in sharing the house hold activities so as to reduce the work that strengthens the professional skills of women doctors

11) Role of women doctor as mother

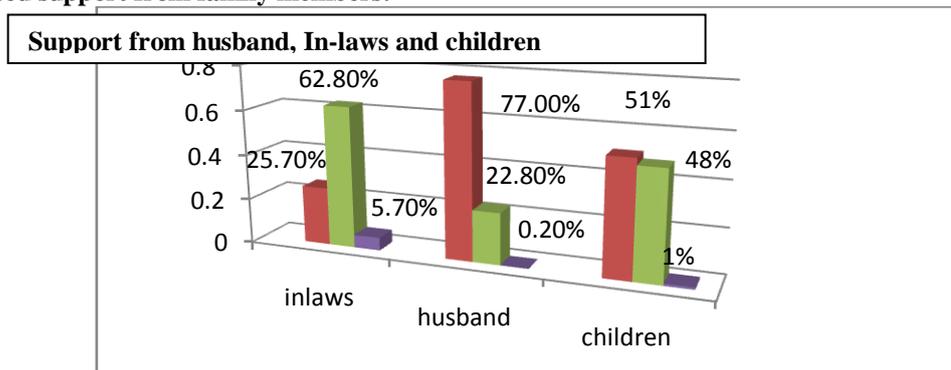


In the present study 35.2 % of women doctors opined that their career affected their motherhood by limiting the number of children, 33.6 % faced the infertility problems, whereas 19.8 % stated that they have postponed to become pregnant and only 11.4 % stated that they don't want children.

As per the Broad bridge, A¹⁰. Study motherhood is seriously affected by the women doctors by the way of limiting the number of children and infertility problems due to stress which they could not cope up. The results of the present study were also identical.

Almost all the lady doctors felt their motherhood was affected in different ways like postponement, limitation of children, infertility, even non willing to become pregnant due to work place stress. Motherhood was unique sense of creating and bringing the new life in to the world that is possible only through women. With the inevitable and stressful working circumstances in the family and society leads to loss of moments of the mother hood in several ways. Stress free environment at work place, support from colleagues, administration, provision of reasonable leaves whenever necessary and support of husband, in-laws and rest at her residence may improve the women's position in choosing the motherhood.

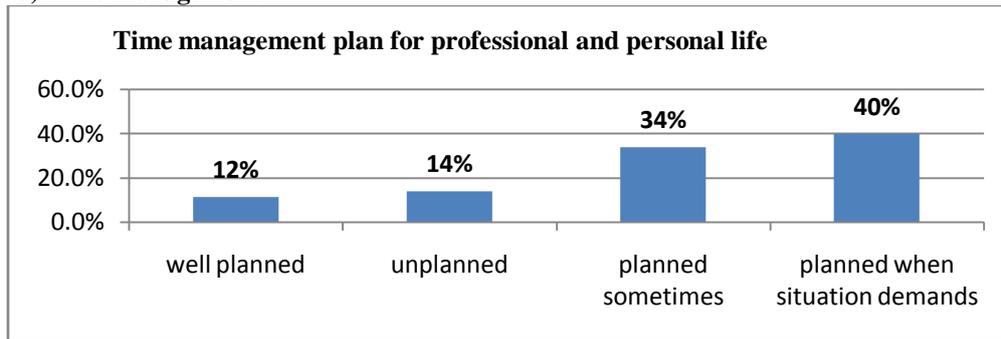
12) Need support from family members:



The results showed that 62.8% -77 % opined that their in-laws and husband support them rarely to achieve their professional goals, 22.8% - 25.7% stated that they always support them, 1% -5.7 % felt that they never supported .51 % said that children always support them in their career, 48 % said that children support them occasionally. These results were correlating with the study conducted by Broadbridge,A¹⁰.

Women's association to the children, husband and in-laws is intense when compared to men, which causes obstacle to achieve their goals. If the women were supported by the husband, in-laws and children, she can achieve her goals successfully.

13) Time management

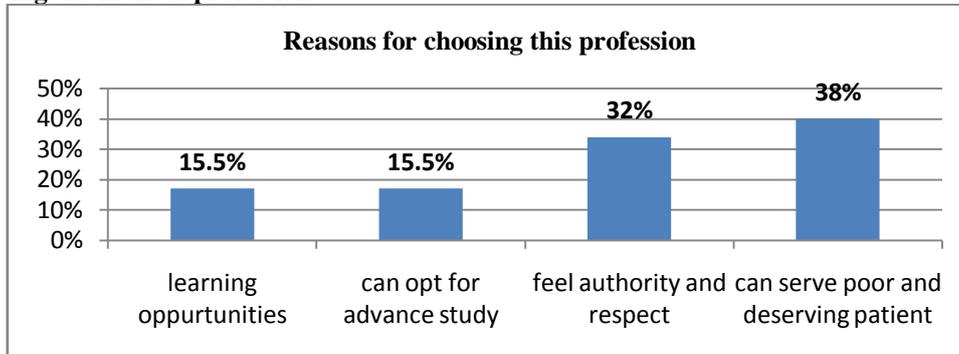


Women doctors were well-planned only in 12% in their professional and personal life, whereas 34-40% planned whenever situation demands and 14% did not feel the need to plan.

The results are comparable to the study conducted by Seema Arif that most of the women doctors plan as the situation demands and very few are well planned⁶.

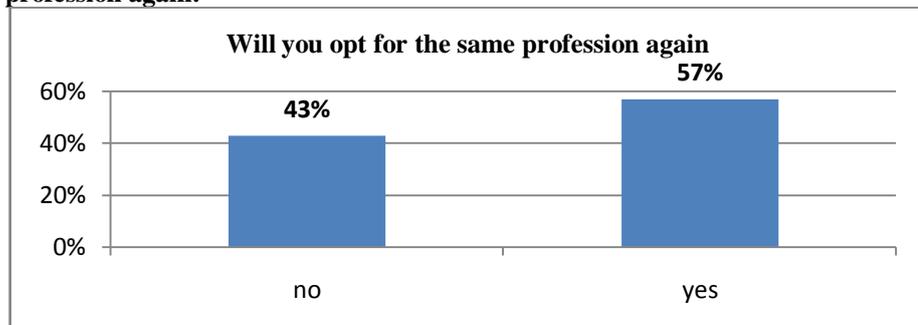
The study shows that 75% of women doctors were able to manage time and balance in their personal and professional life as per situations. Planning and time management shows significant influence in harmonizing the professional and personal life.

14) Choosing the medical profession:



Among women doctors in government sector, 38% choose the medical profession to serve the poor and deserving, 32% feel authority and respect in medical profession and 15% opined for better learning opportunities. The results of the present study are consistent with the study conducted by Seema Arif that most of the women doctors are continuing the government job because they can serve poor and deserving, as well as feel authority and respect in medical profession. The study shows that most of the women doctors have chosen this profession in government sectors to serve the poor and deserving sections because of their sensitive and kind heartedness, so as to uplift the health of community. This may fulfill the objectives of health indicators like Infant Mortality Rate, Perinatal mortality Rate, Maternal Mortality Rate, immunization etc besides to improve the knowledge and awareness among the people. So the study shows that women doctors have significant role in the community.

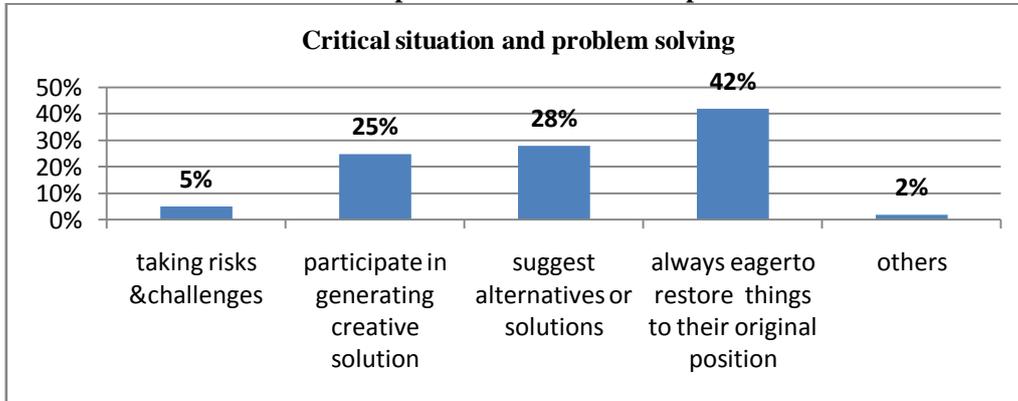
15) Selection of medical profession again:



On selecting the medical profession if opportunity arises, 57% of the women doctors wanted to go for the same profession again, whereas 43% wanted to change the medical profession.

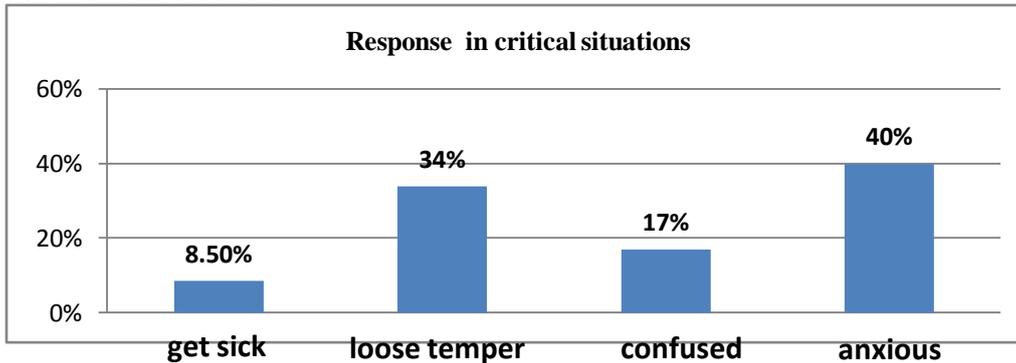
As per the study conducted by Bano,S., Aslam,S.K² most of the women doctors don't want to choose the same profession again. In the present study few of women doctors preferring the same profession again may be because of professional satisfaction.

16) Role of women Doctors in critical and problematic situations in profession



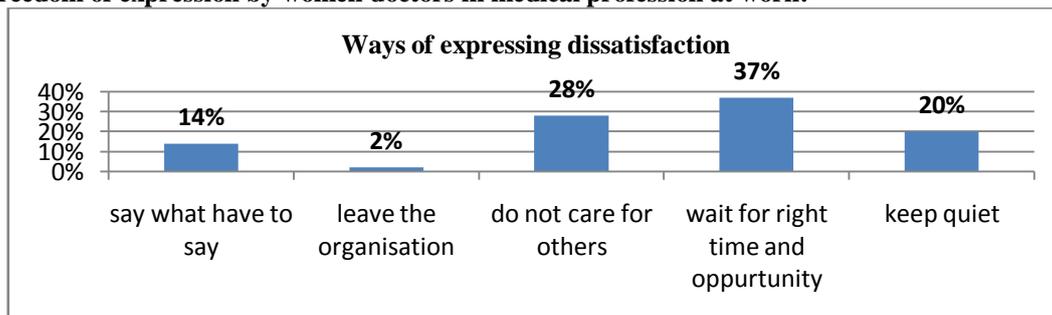
In critical and problematic situations, 42% of women doctors are always eager to restore the things to its original position, 28 % of them try to suggest alternatives or solutions, 25 % participate in generating creative solutions and only 5 % takes risks and challenges. Most of the women doctors shown positive attitude in critical situations and problematic conditions. Majority of them have suggested either generating creative and alternative solutions or restoring things to original position where as few doctors taking risks as challenges solve the problems effectively.

17) Reaction in critical situations:



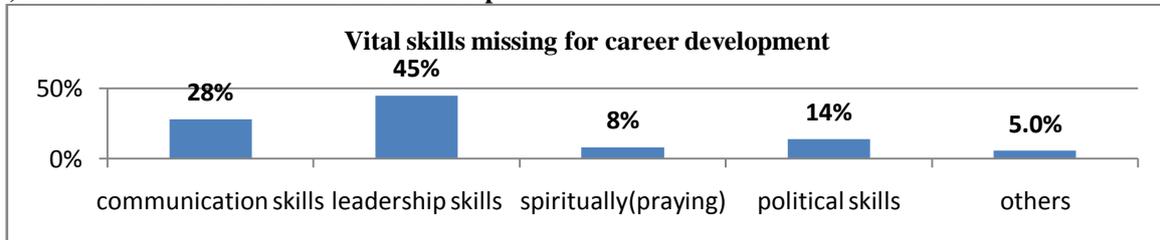
Women doctors of 40% respond personally to critical situations by becoming more anxious, 34 % loose temper, 17 % get confused and feel helpless to act, 8 % of them get sick in critical situations. Most of the women doctors were not stable in critical situations, they respond anxiously, confused, and loose temper and become sick. To overcome critical situations women need stable and strong psychological behavior by adapting situation directed skills, stress management techniques like yoga, meditation, proper prior planning, time management and skill development trainings, personality development skills etc.

18) Freedom of expression by women doctors in medical profession at work:



Present study shows that 37 % of women doctors wait for the right time and opportunity to express their dissatisfaction, 28 % do not care for others, 20 % keep quiet, 14 % undecided and 2 % have stated to leave the organization. Majority of women doctors wait for right time to express their feelings, even some were not care for others, but a small number of women keep quiet and very few wanted to leave the organization. In medical profession Women doctors have to express their dissatisfaction without any hesitation with freedom of speech and expression.

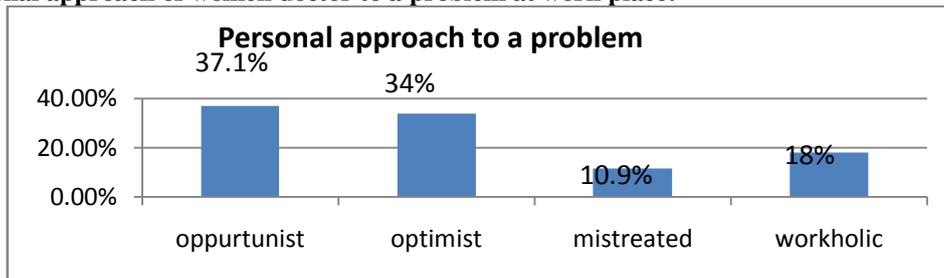
19) Skills of women doctors in career development:



In the present study, 45% of women doctors agreed that leadership qualities are essential for successful career which are missing in most of the women doctors, 28 % feel that communication skills are required , 14 % felt political skills are also essential and 8 % opined of having spirituality is also important for career development.

Most of the women require leadership, communication, political skills at work place, then only the women doctors can take lead in their medical profession to reach higher positions and compete with men in Patriarchal society.

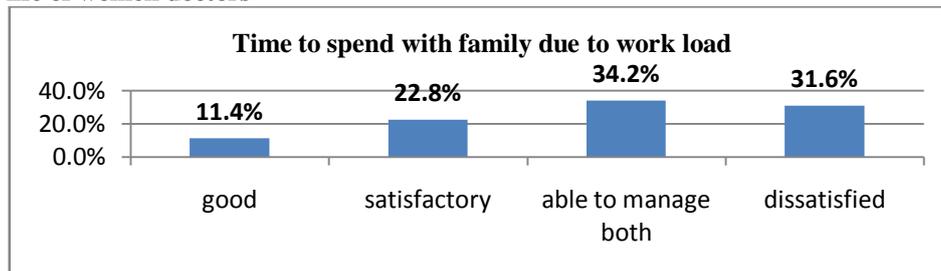
20) Personal approach of women doctor to a problem at work place:



Women doctors of 37.1 % opined that they are opportunists in problematic situation, 34 % stated that they are optimists, 18 % are workaholics and 10.9% were mistreated.

Majority of women doctors were take the problem as opportunist, treat it optimistically and work as workaholic like women in other professions.

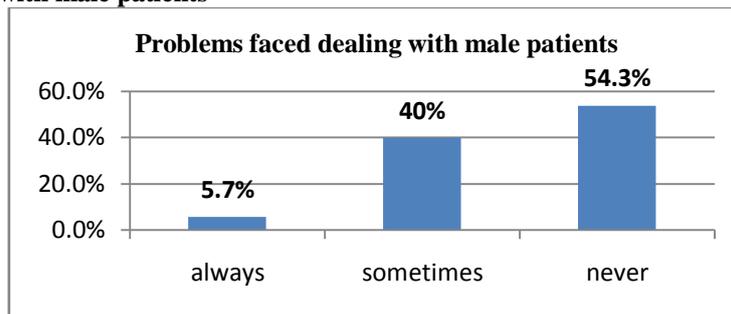
21) Family life of women doctors



Regarding time spent with family members in their profession, 34.2% women doctors able to manage both, 22.8% felt satisfactory, 11.4% felt good and 31.6% dissatisfied.

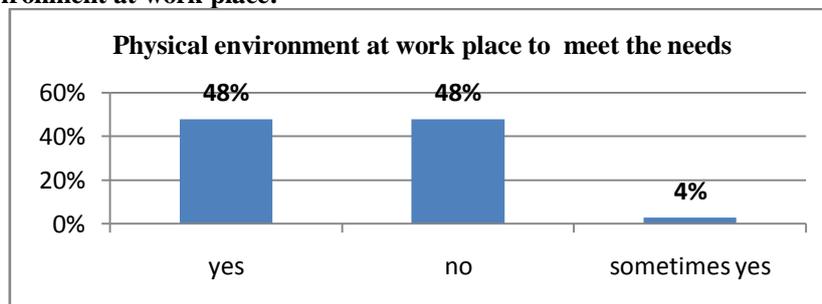
Mainly the women were able to manage both professional life and family life with satisfaction. Only small group of women felt good while managing both. Significant women doctors expressed dissatisfaction because they were not able to spend much time with the family owing to busy professional work. Women have to plan their personal and professional life by giving equal importance to both in a well-organized way.

22) Problems faced with male patients



In present study, 54.3 % of women doctors felt that they never felt any difficulty in dealing with male patients, 40 % opined that sometimes there is difficulty in dealing with them, whereas 5.7 % stated that always it is difficult to deal with them. Majority of women doctors does not faced problems in dealing with male patient the same as the male doctors.

23) Physical environment at work place:



Physical environment at work place meet their needs in 48 %, and the same number expressed dissatisfaction to meet their needs. 4 % said that only sometimes it met the needs. The physical environment at Work place differs with the facilities provided by a particular organization. Providing satisfactory facilities, safe environment to women is necessary at work place to enhance the interest to work, which leads to enriching quality and productivity.

V. Conclusion

In present study most of the women doctors have chosen this profession in government sectors to serve the poor and deserving sections because of their sensitive and kind heartedness to uplift the health of community. Women preferred to work in any place including male dominated organizations, our male colleagues for making our working environment much better, and cooperative. Women doctors were able to manage either male or female patients on par with male but existence of discrimination by the patients to women doctors was present. Policies have to be framed accordingly to avoid gender bias at work place.

Women were waiting for right time to express their feelings freely and implement their ideas in a liberal way as the other male colleagues in Patriarchal society Women doctors take the problem as opportunist, treat it optimistically and work as workaholic with positive attitude in critical situations either generating creative and alternative solutions or restoring things to original position even taking risks as challenges solve the problems effectively.

Significant women doctors were dissatisfied due to less time with the family owing to busy professional work and over burdened night duties, less extent gender bias at work place, even willing to leave the place. To overcome, prior planning, time management, interval gap between working hours, better facilities , and managing the night duties at the hospitals shows significant influence in harmonizing the professional and personnel life Stress free environment at work place, support from colleagues, administration, provision of reasonable leaves whenever necessary and support of husband, in-laws and rest at her residence may improve the women's position in choosing the motherhood.

Women need stable and strong psychological behavior by adapting situation directed skills, stress management techniques like yoga, meditation, proper prior planning, and skill development trainings, personality development skills etc. to overcome the stressful situations. Women require leadership, communication, political skills at work place, and then only the women doctors can survive in their medical profession to reach higher positions and compete with men in Patriarchal society

Glass ceiling does not exist or broken down, women's progress was not hampered even invisibly. In the present study few of women doctors preferring the same profession again may be because of professional satisfaction.

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