PROBLEMS OF FEMALE MEDICAL GRADUATES DURING THEIR CAREER IN A DEVELOPING COUNTRY; PAKISTAN

NOUSHEEN FATIMA, AGHA ALI HAIDER, FARZANA LATIF, SANA RAHEED, AGHA SHABBIR ALI

ABSTRACT

Purpose: Working lady doctors have to face many problems during their career, which affect their efficiency and often they have to quit the profession. Study is conducted to review these problems.

Methodology: Working female graduates and post graduates from house officers to consultant level were included in study and a Proforma based interview done regarding the problems they mostly suffer during their carrier. Total ten issues were mentioned in Proforma.

Results: Results showed that 70% of females have problems regarding prolonged duty hours. 65% has to face the problems from their male colleagues. 37% thinks their family life is affecting the carrier and 58% mentioned that carrier is affecting their family life. 26% complaint of male gender preference. 47% has transport issue. 44% has problems in administrative work. 31% has daycare issue. 48% has financial consideration as one of the reasons to work. 20% has to give break in their career mostly due to family problems. 46% are satisfied with their career life.

Conclusion: Female doctors have to suffer from many problems during career. Mainly the prolonged duty hours, transport and administrative work issues. Both the family life and career mutually affect each other. Workable problems like daycare and transport issues can be solved at institutional level.

Key words: Medical graduates, problems, career, duty hours, gender preference, family life, transport issues, administrative work, daycare, financial consideration, satisfied.

INTRODUCTION

Women contribute to the 49.6% of the world population and playing a significant role in almost every field of life, not only in developed but also in developing countries1. Pakistan is one of those developing countries where the number of working females is increasing tremendously day by day. Regarding the medical profession almost 70% of the graduates are females. But unfortunately many lady doctors leaves the profession due to social and domestic issues, those who are working, are facing lots of problems in continuing their profession.

All over the world female graduates suffers from many issues.² Pakistani female doctors shares many of those but here the problems are more severe mainly because of some cultural issues and believes. Limited resources and facilities made the situation more worse³,

Prolong duty hours has been an issue for all the doctors worldwide ⁵. For females especially those who are taking post graduate training, this is a grave problem that is not only affecting their family and social life but also their performance at work. It is difficult for many females to balance their career and family life, both affects each other in one or the other way. ^{6,7}

Some people believe that females are not good professionals due to which females has to face gender discrimination somewhere in their carries.

Transport is a big issue here for all working females. On one hand there is no reasonable public transport available for females and on other hand going out alone is not widely acceptable due to some cultural and religious believes.

Daycare is a hot issue for every working woman; all over the world⁸. Here in Pakistan the situation is not very satisfactory. Although the assembly has passed a bill that every institute with female professionals should have a day care facility but either there is no day care or if available, its condition is miserable.

This study is aimed to review the gravity of problems for working female medical graduates in our country, so the situation can be improved in future. It will make the working comfortable for those who are in service and facilitate those who left the career.

METHODOLOGY

It was a cross sectional survey that was conducted at Lahore general hospital and post graduate medical institute, Lahore, Pakistan. Working female medical graduates from house officer to consultant level were included in study and those who did not give consent or were having any physical disability or chronic illness were excluded from study. The female medical graduates were divided into five groups based on their working status as following;

- 1. House officers
- 2. Post graduate trainees
- 3. Demonstrators in basic sciences
- 4. Woman medical officers
- 5. Consultants

After taking approval from local ethical committee, and consent from participants, a Questionnaire based Performa was given to be fulfilled. Participants were explained about the questions asked in the Performa that contains following questions

- 1. Issues regarding duty hours
- 2. Problems due to attitude of male colleagues
- 3. Family life affecting career
- 4. Carrier affecting family life
- 5. Gender discrimination
- 6. Transport issues
- 7. Problems in administrative work as being female
- 8. Day care issues
- 9. Break in career
- 10. Financial consideration as one of the reason to work
- 11. Satisfaction with career

The results were analysed statistically by using Spss version 20.

RESULTS

The age range of the participants was 23 to 57 year, mean age was 31.08 year. The experience of the participants was from few months to 26 years, mean was 5.76 years.

1st issue discussed was problems regarding duty hours. 70 % female doctors said they have issues with duty hours, most common issue told was prolong duty hours and post graduate trainees were the most affected group as 97.6% of them reported this issue. The consultants and demonstrators in basic sciences were least affected, 25% and 31% respectively.

While talking about the attitude of male colleagues ,35% of the lady doctors said that the never came across any specific problems from their male colleagues, only 7% said they mostly face this issue , mainly the no cooperation, while 58% thinks it's only an occasional event .

Regarding the balance between work and family 37% female doctors think that their family life is affecting their career, while on the other side 58% reported that their career is affecting their family life.

Gender discrimination, another important issue discussed. 26% lady doctors said that they have to face gender preference somewhere in their career, house officers (40%) and post graduates trainees (32%) were the most affected groups.

Transport was an issue for 47% of the doctors. 44% said that the administrative work is an issue for them as being a female. Administrative problems were more for junior doctors on other side only 17% of female consultants were reporting this issue. 31% female doctors were having day-care issues. 48% reported that finances are one of the reasons for them to work. 20% female doctors had the gap in their career.

Female medical graduates were asked are they satisfied with career, 46% were satisfied, while 44 % were only just satisfied.

DISCUSSION

Problems regarding duty hours:

Duty hours, a burning issue for doctors all around the world and when talk about female doctors this become more serious issue. In our study we asked female doctors about their duty hours, 70% of them said that they have issues regarding duty hours , main problem told was prolong duty hours. In other studies it has been concluded that long work hours can lead to physical, mental and emotional stress in doctors.9 In our study , prolong duty hours were more of concern for post graduate trainees (97.6%) and house officers (80%) as compared to consultants and demonstrators in basic sciences . Training years are very difficult for female post graduate trainees that's why many of them do not chose for specialty or try to select those with less duty hours. ¹⁰

Attitude of Male Colleges:

In a developing country, where are lots of social and cultural restrains for females, the professional females has to face many problems from their male counterparts that are not an issue of western world. Lady Doctors were asked in our study that whether they often face problems from their male colleges. To our surprise only 7 % replied yes. 58% of them said that they occasionally face any problem due to bad attitudes of male collogues. It's a good sign that the working environment for females is not very unsuitable here.¹¹

Family and Career:

Family and career are the two ends that are difficult to meet for working women. Most of the time it becomes difficult to maintain balances between these two. If women become more passionate and enthusiastic about their career then their family life suffers and on other

side they have to compromise their career to fulfill the family demands. Other studies also emphasize that it's a very difficult for women doctors to balance the career and family 12. In our study 58% of female doctors said that their career is affecting their family life, majority of them was post graduate trainees, in which 73% of them reported this problem, similarly In 2016 Devorina petek and colleges concluded that the women specialist trainees face intense burden both at work and home and its very difficult for them to maintain balance ¹³, even the 50% of the consultants were also feeling this. Many of them said that their family life is disturbed, they cant give time to family and their kids are neglected. Stewart DE reported high level of stress in women because of multiple roles they have to play. 14 When we explored the other side of the picture 37% said that their family problems are affecting their practice in some or the other way. Main problems were non cooperative family, husband job transfer and unavailability of baby sitter. In other

Gender Discrimination:

Females doctors were asked has they ever not preferred because of being female somewhere in their career. 26 % said yes, majority of them were the junior doctors. Jessica freedman describes in one of her study that most of the female physician than male (53.3% vs. 33.6%) face gender discrimination in one or the other form. ¹⁵.

Transport issue:

Transport is a real hectic and limiting factor for working females in Pakistan. In one of the study done in city sukkur Pakistan, 69% females reported transport problem, they said there is no women friendly transport available in Pakistan . ¹⁶ .47% of female doctors in our study reported that they have problems due to transport. They said that there is a very bad attitude of society towards female drivers, the public transport is in very miserable condition and if family gives them pick and drop then their timings are affected. This problem exist at all levels from house officers (73%) to consultants (42%) .

Administrative work:

Generally the females are not considered the good administrators. When females were asked what problems they face on their side during administration as being a female. They complaint that they are not taken seriously and people don't obey their orders as compared to their male colleges. The junior doctors were more facing this issue as compare to seniors. Stephanie cajigeal and her colleges published a study in

2015 in which showed that 40% of the female physicians face gender bias in administrative role ¹⁷

Daycare issues:

Daycare is hot issue for every working mother all over the world. It is such an important issue for working mothers that it affects their career a lot. 18 Here in Pakistan there is trend of combine family system, so most of the time grandmother or rest of the family take care of the baby in the absence of mother. When we asked about this issue, 31% females were facing this problem here, except in house office group in which almost all of the doctors were unmarried, almost all of the groups of female have this issue here, and even 42% of consultants were facing this. They said either there is no daycare at their institute or if available its condition is very miserable. In one of the study. In Japan similar difficulties regarding daycare issues has been described by working mothers. ¹⁹ International labour organization and govt of Pakistan published a report about the need and concept of crech (daycare) in Pakistan for working women and mentioned how the daycare are playing roles in other countries. 20 but unfortunately no practical implementation seems here.

Break in career:

It has been observed that many female doctors have to give break in their career due to responsibilities at home or other family issues. In our study 20% of our doctors have break in career demonstrators in basic sciences highest rate of gap in career that is 38.5 % .while in a survey conducted by British medical association 58% of female doctors have gap in their career .¹The reason for difference in percentage may be the small sample size in our study.

Financial consideration:

Finances are one of the reasons for the females to work. As it is said that the doctor wives are the trophy wives. They are supposed to earn and share the economic burden. This could be a norm in west but here in our culture it's very odd but now the trends are changed. In our study 48% females said that finances is one of the reason for them to work. Mamta Gautam concluded in one of his study that managing finances is one of the reasons of stress for female physicians. ²¹

Satisfaction with career:

As the career women have to face lots of difficulties both at home and job place so the question is how much they are satisfied. In our study 46% were satisfied with their profession while 44% were just satisfied and 10% were unsatisfied. A study conducted in Russia in 2009

about the job satisfaction of physician in which they concluded that male doctors are more satisfied then female doctors. While the female doctors are satisfied in their relation with patients and colleagues.²²

REFERENCES

- Elson, D. (2000) Progress of the world's women 2000: UNIFEM biennial report. New York: United Nations Development Fund for Women. http://www.unwomen.org/en/digitallibrary/publications/2000/1/progress-of-the-worlds-women-2000
- Julia E McMurray, Mark Linzer, Thomas R Konrad, Jeffrey Douglas, Richard Shugerman, Kathleen Nelson. The Work Lives of Women Physicians, Results from the Physician Work Life Study. J Gen Intern Med. 2000 Jun; 15(6): 372–380.
- 3. Dima Jamali."Constraints and opportunities facing women entrepreneurs in developing countries: A relational perspective". Gender in Management: An International Journal. 2009; 24(4): 232-251.
- 4. Seema arif. Broken wings: issues faced by female doctors in Pakistan regarding carrier development. International Journal of Academic Research in Business and Social Sciences. August 2011; vol 1, special issue ISSN: 2222-6990.
- Juma AA, Hosein S. Resident duty hours: globally accepted standards and the situation in Pakistan. J Pak Med Assoc. 2011 Dec;61(12):1253.
- Gabbe SG¹, Morgan MA, Power ML, Schulkin J, Williams SB. Duty hours and pregnancy outcome among residents in obstetrics and gynecology. Obstet Gynecol. 2003 Nov;102(5 Pt 1):948-51.
- Ambreen Afridi, Romana Ayub, Hayat Muhammad Khan, Umar Ayub, Rubina Gul. FREQUENCY OF STRESS LEVEL AMONG FEMALE DOCTORS IN A PUBLIC SECTOR HOSPITAL OF PESHAWAR. JKCD. June 2016; 6(2):32-35.
- 8. Catton, Peter. 1991. "Child-Care Problems: An Obstacle to Work," Monthly Labor Review, 114:3-
- 9. SKevin R Imrie, Jason R Frank ,Christopher S Parshuram. Resident duty hours across borders: an international perspective. BMC Medical EducationVOLUME 14 SUPPLEMENT 1.

- Lockley SW, Landrigan CP, Barger LK, Czeisler CA. Harvard Work Hours Health and Safety Group. When policy meets physiology: the challenge of reducing resident work hours. Clin Orthop Relat Res. 2006; 449: 116-27.
- 11. Carr PL, Ash AS, Friedman RH, et al. Faculty perceptions of gender discrimination and sexual harassment in academic medicine. Ann Intern Med. 2000;132:889-896.
- 12. Gjerberg E. Women doctors in Norway: the challenging balance between career and family life. Soc Sci Med. 2003:57:1327–41.
- 13. Davorina Petek, Tadeja Gajsek, and Marija Petek Ster. Work-family balance by women GP specialist trainees in Slovenia: a qualitative study. BMC Med Educ. 2016; 16: 31.
- 14. Sophia Mobilos, Melissa Chan. Women in medicine, The challenge of finding balance. Can Fam Physician. 2008 Sep; 54(9): 1285–6.
- 15. Jessica Freedman. Women in Medicine: Are We "There" Yet? Medscape Nov 16, 2010. http://www.medscape.com/viewarticle/732197
- Muhammad Abdullah Avais , Aijaz Ali Wassan , Saeedah Shah. A Case Study on Problems of Working Women in City Sukkur. Academic Research International. March 2014; 5(2): 323-33.
- 17. Stephanie Cajigal; Greg Weiss; Nelson Silva . Women as Physician Leaders September 17, 2015. http://www.medscape.com/features/slideshow/public/femaleleadershipreport2015
- 18. Patricia M. Anderson Phillip B. Levine. CHILD CARE AND MOTHERS' EMPLOYMENT DECISIONS. Working Paper 7058 http://www.nber.org/papers/w7058
- 19. Yamazaki Y, Kozono Y, Mori R, Marui E. Difficulties facing physician mothers in Japan. Tohoku J Exp Med 2011;225:203–209.
- 20. Saqib A. Need Assessment Report Crèche (Day Care Centers) for Children of Working Women. ILO Country Office for Pak. 2008;74. https://books.google.com.pk/books/about/Need_Assessment_Report_Cr%C3%A8che_Day_Care.html?id=9x4LrgEACAAJ&redir_esc=y
- 21. Mamta Gautam. Women in medicine: stresses and solutions. West J Med. 2001 Jan; 174(1): 37–41.
- 22. McMurray JE, Linzer M, Konrad TR, Douglas J, Shugerman R, Nelson K. The work lives of women physicians results from the physician work life study. The SGIM Career Satisfaction Study Group. J Gen Intern Med. 2000 Jun;15(6):372-80.