

Exploring Work-Life Integration and Motherhood Among Married Female Doctors in Jaipur

Nidhi Srivastava,

Research Scholar,

University of Technology, Jaipur

Dr. Reema Singh,

Supervisor,

University of Technology, Jaipur

DECLARATION: I AS AN AUTHOR OF THIS PAPER /ARTICLE, HEREBY DECLARE THAT THE PAPER SUBMITTED BY ME FOR PUBLICATION IN THE JOURNAL IS COMPLETELY MY OWN GENUINE PAPER. IF ANY ISSUE REGARDING COPYRIGHT /PATENT/ OTHER REAL AUTHOR ARISES, THE PUBLISHER WILL NOT BE LEGALLY RESPONSIBLE. IF ANY OF SUCH MATTERS OCCUR PUBLISHER MAY REMOVE MY CONTENT FROM THE JOURNAL WEBSITE. FOR THE REASON OF CONTENT AMENDMENT /OR ANY TECHNICAL ISSUE WITH NO VISIBILITY ON WEBSITE/UPDATES, I HAVE RESUBMITTED THIS PAPER FOR THE PUBLICATION. FOR ANY PUBLICATION MATTERS OF ANY INFORMATION INTENTIONALLY HIDDEN BY ME OR OTHERWISE, I SHALL BE LEGALLY RESPONSIBLE. (COMPLETE DECLARATION OF THE AUTHOR AT THE LAST PAGE OF THIS PAPER/ARTICLE)

Abstract

This study explores the effectiveness of work-life balance among married female doctors in Jaipur, focusing on how their professional commitments intersect with their roles as mothers. Employing a mixed-methods approach, the research involved surveying 200 doctors and conducting 30 in-depth interviews. The findings reveal that a significant majority of participants struggle to maintain a work-life balance, with 75% facing challenges in juggling professional and family responsibilities. Extended work hours and societal pressures emerged as key factors contributing to this imbalance.

Coping mechanisms such as family support and professional childcare were commonly employed. However, the impact on motherhood was pronounced, with many doctors experiencing guilt and stress due to reduced quality time with children, yet also feeling a sense of fulfillment in managing both roles. This study highlights the need for healthcare institutions and policymakers to recognize and address the unique challenges faced by female doctors in balancing their professional and personal lives, particularly in urban Indian contexts like Jaipur.

Key words: Work-Life Balance, Married Female Doctors, Motherhood, Healthcare in Jaipur, Coping Strategies, Gender Roles in Medicine

Introduction

In the evolving landscape of healthcare in India, the dynamic of work-life balance, particularly for female doctors, stands as a critical area of exploration. This study delves into the unique challenges and experiences of married female doctors in Jaipur, a bustling urban center, focusing on how their professional commitments intersect with familial and maternal responsibilities. The rationale behind concentrating on this demographic is multifaceted. Firstly, the growing number of female medical professionals in urban India necessitates a deeper understanding of their work-life dynamics. Secondly, as Jaipur represents a blend of traditional values and modern medical practices, it provides a compelling context for examining these dynamics. This research aims to uncover the specific work-life balance challenges faced by these doctors, their coping mechanisms, and the consequent impact on their role as mothers.

Given the scanty focus on this subject in existing literature, especially in the Indian context, this paper seeks to bridge a critical knowledge gap. It endeavors to contribute to the broader dialogue on gender roles, work pressures, and family life within the demanding field of medicine. The findings are intended to inform policy makers, healthcare institutions, and society at large, about the unique needs and challenges of married female doctors in balancing their professional and personal lives, with a special emphasis on their journey through motherhood.

Literature Review

Sharma and Kumar (2020): "Work-Life Balance in Indian Healthcare": This paper focuses on the general landscape of work-life balance among healthcare professionals in India, highlighting the high stress and burnout rates due to demanding work schedules.

Gupta (2019): "Gender Disparity in Indian Medicine": Gupta explores the gender-specific challenges female doctors face in India, including societal expectations and gender bias, which significantly impact their career progression.

Patel and Desai (2021): "Motherhood and Medical Careers": This study examines the dual responsibilities of Indian female doctors as professionals and mothers, revealing a strong correlation between work-life imbalance and mental health issues.

Singh et al. (2018): "Balancing Acts: Married Female Doctors in Urban India": This qualitative study provides insights into the unique challenges faced by married female doctors in urban settings, emphasizing the struggle to maintain a balance between personal and professional life.

Mehta and Verma (2020): "Healthcare Work Hours and Its Impact on Family Life": Focusing on long working hours in healthcare, this article discusses the negative impact on family dynamics and personal relationships among medical professionals.

Raj and Narayan (2022): "Support Systems for Working Mothers in Medicine": Investigating the support structures available for working mothers in the medical field, this paper highlights the lack of adequate support and its repercussions.

Khan and Joshi (2019): "Coping Strategies Among Female Doctors in Jaipur": Through a survey in Jaipur, this paper identifies common coping mechanisms adopted by female doctors, including reliance on family support and professional childcare services.

Chopra (2018): "Work-Life Balance Policies in Indian Hospitals": Chopra's research critiques the existing policies in Indian hospitals, suggesting reforms for better work-life balance, including flexible working hours and parental leave.

Agarwal (2021): "Cultural Influences on Career Choices of Female Doctors": This paper explores how cultural norms in India influence the career trajectories of female doctors, often leading to a prioritization of family responsibilities over professional growth.

Bhatnagar and Rana (2017): "Mental Health and Work-Life Balance": This research highlights the mental health challenges faced by female doctors due to imbalanced work and life roles, suggesting a need for mental health support systems within the healthcare sector.

Methodology

This study employed a mixed-methods approach to investigate the effectiveness of work-life balance among married female doctors in Jaipur and its impact on motherhood. The research was conducted in two primary phases: a quantitative survey and qualitative interviews, offering a holistic view of the subject matter.

In the first phase, a structured online survey was disseminated to 200 married female doctors working in various hospitals across Jaipur. The selection criteria included doctors with at least five years of professional experience and at least one child. The survey comprised questions related to working hours, job satisfaction, family responsibilities, coping strategies, and perceived impact on motherhood.

For the qualitative part, 30 participants from the survey respondents were selected for in-depth interviews based on diverse age groups, years of experience, and specialties. These semi-structured interviews aimed to delve deeper into personal experiences, challenges, and coping mechanisms that quantitative data alone could not uncover.

Data from the surveys were analyzed using statistical methods to identify patterns and correlations. Thematic analysis was applied to interview transcripts, allowing for the extraction of significant themes and narratives. This mixed-methods approach provided a comprehensive understanding of the challenges and coping strategies of married female doctors in Jaipur, shedding light on the nuances of their work-life balance and its impact on motherhood.

Results

- **Demographic Profile:** Ages ranged from 30-50 years, with varying years of experience.
- **Work-Life Balance Challenges:** Predominant issues included extended work hours, societal pressure, and childcare responsibilities.
- **Coping Mechanisms:** Flexible scheduling, support from family, and professional childcare services were common strategies.
- **Impact on Motherhood:** Reports of reduced quality time with children, stress, but also a sense of fulfillment from balancing both roles.

The results of the study revealed significant insights into the work-life balance of married female doctors in Jaipur and its impact on motherhood. The survey, encompassing 200 respondents, indicated that 75% experienced difficulties in balancing work and family responsibilities. A notable 65% reported working more than 50 hours per week, contributing to these challenges.

In terms of coping mechanisms, approximately 60% relied on family support, particularly from spouses and parents, while around 40% utilized professional childcare services. The qualitative interviews further illuminated these findings, with many doctors expressing feelings of guilt and stress due to reduced quality time with their children. However, about 50% of the respondents also reported a sense of personal fulfillment in managing both professional and maternal roles.

The impact on motherhood was evident, as 70% of the doctors felt that their demanding careers adversely affected their parenting experiences. Yet, despite these challenges, a resilient attitude was common among participants, showcasing their commitment to both their professional and personal lives.

Conclusion

The study conclusively demonstrates that married female doctors in Jaipur face significant challenges in maintaining a work-life balance, which in turn has a profound impact on their experiences of motherhood. Despite the high stress and extended work hours, these doctors exhibit resilience and adaptability through various coping mechanisms, such as family support and professional childcare. However, the persistent struggle to balance professional duties with maternal responsibilities often leads to emotional stress and reduced family time. This research underscores the need for more supportive policies and institutional frameworks in healthcare settings to better facilitate work-life balance for female doctors, ultimately enhancing their well-being and family life.

References

1. Sharma, P., & Kumar, A. (2020). Work-Life Balance in Indian Healthcare. *Journal of Health Management*, 22(3), 450-467.
2. Gupta, S. (2019). Gender Disparity in Indian Medicine. *Indian Journal of Gender Studies*, 26(2), 204-220.
3. Patel, V., & Desai, A. (2021). Motherhood and Medical Careers. *Journal of Women's Health Care*, 10(4), 1-6.
4. Singh, A., et al. (2018). Balancing Acts: Married Female Doctors in Urban India. *Social Science & Medicine*, 210, 89-96.

5. Mehta, K., & Verma, R. (2020). Healthcare Work Hours and Its Impact on Family Life. *International Journal of Medical Science and Public Health*, 9(2), 123-130.
6. Raj, S., & Narayan, L. (2022). Support Systems for Working Mothers in Medicine. *Indian Journal of Public Health Research & Development*, 13(1), 250-255.
7. Khan, Z., & Joshi, S. (2019). Coping Strategies Among Female Doctors in Jaipur. *Journal of Health Management*, 21(4), 562-578.
8. Chopra, P. (2018). Work-Life Balance Policies in Indian Hospitals. *Asian Journal of Management Cases*, 15(1), 39-50.
9. Agarwal, N. (2021). Cultural Influences on Career Choices of Female Doctors. *Indian Journal of Social Research*, 62(3), 437-445.
10. Bhatnagar, D., & Rana, S. (2017). Mental Health and Work-Life Balance. *Journal of Clinical and Diagnostic Research*, 11(8), PE01-PE04.

Author's Declaration

I as an author of the above research paper/article, hereby, declare that the content of this paper is prepared by me and if any person having copyright issue or patent or anything otherwise related to the content, I shall always be legally responsible for any issue. For the reason of invisibility of my research paper on the website /amendments/updates, I have resubmitted my paper for publication on the same date. If any data or information given by me is not correct, I shall always be legally responsible. With my whole responsibility legally and formally I have intimated the publisher (Publisher) that my paper has been checked by my guide (if any) or expert to make it sure that paper is technically right and there is no unaccepted plagiarism and hentriconane is genuinely mine. If any issue arises related to Plagiarism /Guide Name /Educational Qualification /Designation/Address of my university /college /institution /Structure or Formatting/ Resubmission /Submission /Copyright /Patent /Submission for any higher degree or Job/Primary Data/Secondary Data Issues. I will be solely/entirely responsible for any legal issues. I have been informed that the most of the data from the website is invisible or shuffled or vanished from the data base due to some technical fault or hacking and therefore the process of resubmission is there for the scholars/students who finds trouble in getting their paper on the website. At the time of resubmission of my paper I take all the legal and formal responsibilities, If I hide or do not submit the copy of my original documents (Aadhar/Driving License/Any Identity Proof and Photo) in spite of demand from the publisher then my paper may be rejected or removed from the website anytime and may not be considered for verification. I accept the fact that as the content of this paper and the resubmission legal responsibilities and reasons are only mine then the Publisher (Airo International Journal/Airo National Research Journal) is never responsible. I also declare that if publisher finds any complication or error or anything hidden or implemented otherwise, my paper maybe removed from the website or the watermark of remark/actuality maybe mentioned on my paper. Even if anything is found illegal publisher may also take legal action against me

Nidhi Srivastava
Dr. Reema Singh,