

## A Study on Role Conflict of Women Medical Practitioners in Gulbarga City

*Women are always facing challenges in Indian society. Working women are not exception to the same. Working women are facing the challenges of role conflicts between their family life and work life. The present paper discussed the theoretical concepts of role conflicts and a survey on role conflicts faced by women medical practitioners covering 200 women doctors and 200 female nurses in Gulbarga city was conducted. The authors suggested to the women medical practitioners to get counseling and guidance from experts and also plan their work in their office as well as in their families by discussing with their husbands. **Keywords** : Role Conflict, Women Medical Practitioners, Health Professionals.*

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### **I**ntroduction :

Role is an expected mode of behaviour. An individual occupies many different positions in a variety of organizations and performs multiple roles. Professors may be teachers, researchers, consultants, wives or husbands, community leaders. In organizations, such roles are formally prescribed and others are created by the informal activities of the organization members. There are three types of roles (i) the expected role, (ii) the perceived role and (iii) the actual role. The expected role is what other people expect from an individual. The perceived role is how the individual thinks he or she should behave to fulfil the expected role. The enacted role is the way the person actually behaves in an organization. Thus in the complex stage of modern life, most people play not to one audience but to several, and they act multiple roles simultaneously.

Now more and more women are employed in new avenues of employment and in new occupations. They enjoy more and more opportunities than ever before as individuals, workers, wives and mothers. Their adjustment to social changes is retarded and is generally associated with a high balance between satisfaction and tensions. This is due to the fact that their lives are linked with the existence of the family and the continuation of the race.

It is often found that family organization is a powerful source of resistance to women's work. The contention that women's first responsibility is to her home and hence the course of action women take with respect to her work depends on the adjustments made between the organization of the economy and the prevailing family system.

### **Role Conflict of Working Women :**

Women's occupational status has been closely associated with the home and family. By taking up employment, they have to play a dual role: housewife and career woman. There is a clear conflict between the society-approved status of women as housewives and mother of children on one hand, and their status as more productive workers on the other. Family duties have also imposed restrictions on their role in their employment. For most of them the major role they have to play is that of a wife and mother. The home always revolves around her and she plays the key role in the house. She faces the dilemma of somewhat contradictory role perception. On the other hand she must conform to the traditional ideal person always ready to subjugate her own interest to the happiness of others in the family. She assumes almost a different personality as a member of the personnel in office or factory. Her loyalties, interest and aims differ between one place and the other and it demands two different types of individuals.

Striking changes in the nature of families and the workforce, such as rising numbers of dual career couples and working mothers with young children, have increased the likelihood that both male and female employees have substantial household obligations as well as major work responsibilities (Allen, et al, 2000; Bond, et al, 1998). These fundamental changes have stimulated considerable scholarship related to work and family issues, particularly research on workfamily conflict (Allen et al., 2000; Kinnunen and Mauno, 1998). Workfamily conflict occurs when an individual encounters demands associated with one domain that are incompatible with demands associated with

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the other domain (Greenhaus and Buetell, 1985). Greenhaus and Beutell (1985) proposed that workfamily conflict is intensified when either work or family roles are salient and central to the person's self-concept. They theorized that the more important a role is to an individual, the more time and energy that person will invest in it, which will allow less time and energy for other roles. Workfamily conflict has been associated with a number of dysfunctional outcomes, including burnout (Bacharach, et al, 1991), decreased family and occupational well-being (Kinnunen and Mauno, 1998), psychological costs and physical complaints (Frone, et al, 1992), and job and life dissatisfaction (Netemeyer, et al, 1996). These findings underscore the importance of understanding the conflict and its sources. Marriage and home-making require self negative where as wage necessitates self enhancement for going ahead. The former implies cooperation while the later leads to competition. To assess the role conflict among medical practitioners the present study was made in Gulbarga city.

**Objectives of the Study :**

- (1) To assess the effects of outside work of women on family;
- (2) To explore the satisfaction of women medical practitioners in their work life as well as family life; and
- (3) To look into the causes for the conflict in family due to outside work.

**Scope and Methodology :**

The study is based on field survey based on questionnaire. The researcher surveyed total 400 working women medical practitioners, of whom 200 are practicing women doctors and 200, are nurses working in hospitals in Gulbarga city. Gulbarga city is located in northern part of Karnataka and it is headquarters of Hyderabad-Karnataka region. The collected primary data through questionnaire is analyzed and discussed as under.

**Analysis and Discussion :**

The collected primary data is analyzed and discussed as under.

**(1) Age of the Respondents :**

Age plays a significant role in assessing the knowledge of the medical practitioners. As such, information collected on the age is discussed as under.

**Table No. 1 : Age of the Respondents**

Particulars	Frequency	Percentage
Upto 25 Years	48	12.0
26 to 40 Years	174	43.5
41 to 50 Years	116	29.0
Above 50 Years	62	15.5
<b>Total</b>	<b>400</b>	<b>100</b>

The age of the respondents shows that 174 (43.5%) of the respondents are between 26 to 40 years followed by, 116 (29.0%) are between 41 to 50 years, 62 (15.5%) are of above 50 years and the remaining only 48 (12.0%) are of up to 25 years respectively. It is summarized that majority of the respondents are of middle aged.

**(2) Effects of Outside Work on Family :**

It is noted that outside work of the women always affect on the families of the working women. Majority of such effects plays adverse role on the family life of the working women. As such, many times, these effects may result in family disorganization and divorce of the women. As such, information was collected from the respondents on the effects of outside work on family and tabulated as under.

**Table No. 2 : Effects of Outside Work on Family**

Particulars	Frequency	%
Children Do not get Proper Attention	78	19.5
Peace of Mind gets disturbed	91	22.7
Husband & Other Members not well cared for	63	15.7
Personal Health is affected	42	10.2
Difficult to maintain the Joint Family	80	20.0
Frequent Conflicts at Home	126	6.5
Any Other	15	3.7
<b>Total</b>	<b>400</b>	<b>100</b>

On the effects of outside work on family, it is noted that many of the respondents have mentioned more than one type of effect. Particularly, 78 (19.5%) of the respondents have expressed that their children do not get proper attention, 91 (22.7%) have stated that their peace of mind gets disturbed, 63 (15.7%) have expressed that their husband and other family members are not well cared for, 42 (10.2%) have responded that their personal health is affected, 80 (20.0%) have expressed that it is difficult to maintain the joint family, 126 (31.5%) have stated that there are frequent conflicts at their homes due to outside work and about 15 (3.7%) have also gave other effects due to outside work.

**(3) Satisfaction in Work Life :**

To perform their roles in their offices, the medical practitioners must be satisfied with their work and job. The satisfaction in work includes the satisfaction in working conditions, working hours, remuneration, incentives, interpersonal relations with their colleagues, etc. Hence, information on satisfaction of the respondents on their work life is collected and presented in the following table.

**Table No. 3 : Satisfaction in Work Life**

Particulars	Frequency	Percentage
Fully Satisfied	176	44.0
Satisfied to a Greater extent	145	36.2
Not Satisfied	79	19.7
<b>Total</b>	<b>400</b>	<b>100</b>

It is observed from the above table that considerable majority, that is 176 (44.0%) of the respondents are fully satisfied with their work life, 145 (36.2%) are satisfied to a greater extent and the remaining 79 (19.7%) are not satisfied with their work and job. It is noted that satisfaction in work and job is more in case of medical practitioners.

**(4) Satisfaction in Family Life :**

Like work life of the medical practitioners, satisfaction

in family life is also equally essential. As such, information was collected from the respondents on the satisfaction in their family life and the collected information is tabulated as under.

**Table No. 4 : Satisfaction in Family Life**

Particulars	Frequency	Percentage
Fully Satisfied	132	33.0
Satisfied to a Greater extent	159	39.7
Not Satisfied	109	27.2
<b>Total</b>	<b>400</b>	<b>100</b>

It is surprising to note from the above table that, only 132 (33.0%) of the respondents are fully satisfied with their family life, 159 (39.7%) are satisfied to a greater extent and the remaining 109 (27.2%) are not at all satisfied with their family life. It shows that there is no coordination of the medical practitioners with their husbands, elders or their children and as such, there is lower satisfaction in family life.

**(5) Reasons for Conflicts in Family due to Outside Work :**

As discussed above, there are conflicts in the families of the medical practitioners due to outside work. There may be many reasons for the same. The information on such reasons for conflicts in family as furnished by the respondents are presented in the following table.

**Table No. 5 : Reasons for Conflicts in Family due to Outside Work**

Particulars	Frequency	Percentage
Restriction to Mingle with People at Work Place	87	21.7
Irregular Work Timings/ Night Shift	105	26.2
Lower Economic Benefits with Hard Work	63	15.7
Difficult to Manage Family Affairs	94	23.5
Any Other	31	7.7
No Conflicts	213	53.2
<b>Total</b>	<b>400</b>	<b>100</b>

It is highlighted from the above table that many of the respondents have furnished more than one reason for role conflicts. Specifically, 87 (21.7%) have stated that there is restriction of family members to mingle with people at work place, 105 (26.2%) have stated that are irregular work timings or night shift, 63 (15.7%) have expressed that there are lower economic benefits with hard work at work place, 94 (23.5%) have responded that it is difficult to manage family affairs due to outside work, 31 (7.7%) have expressed other reasons for conflicts between work and family life and for 213 (53.2%) of the respondents, it is not applicable, as they do not have role conflicts.

**Suggestions :**

(1) It is suggested to the medical practitioners to plan for their office work as well as their family work. They have to work according to plan along with time fixed each activity

in their office as well as in their families.

(2) It is suggested to the family members to adjust with the medical practitioners, as the work of medical profession is flexible and are forced to work even for long time and night shifts.

(3) To cope with stress and tension and also to solve the role conflicts, it is essential for the medical practitioners and their family members to get expert counseling and guidance from psychologists and social workers.

**Conclusion :**

Women in Indian society are always subject to problems and challenges. In case of working women, even though there is economic security, there is challenge of role conflicts between their family and work. As such, it is essential for the medical practitioners to cope with the role conflicts. Otherwise, there will be serious consequences such as family disorganization, divorce, etc and in such cases, the women are affected adversely. Hence, it is essential that the women medical practitioners should maintain a balance between their work life and family life. For this purpose, the medical practitioners should discuss their work place problems with their husbands and also plan for the activities of the family and outside work.

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## Role of Dr.B.R.Ambedkar in Women Empowerment

*Dr.B.R.Ambedkar is the greatest personality in Indian context. Dr. Ambedkar wanted India to be a super power and far sighted to all problems of women. His ideology was based on liberty, equality and fraternity. He played the important role in women empowerment. He started various movements for the women right. Like constitutional right as education, equality, liberty etc. Dr.B.R. Ambedkar prepared and introduced Hindu code Bill and also fundamental right in Indian constitution for equal right of women. Therefore we say that Dr.Ambedkar played an important and constructive role in women empowerment in Indian context. He imposed the fundamental right in constitution. That's why Dr.B.R.Ambedkar played the role of champion in women empowerment.*

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### **I**ntrouction :

Dr.Bhimrao Ramaji Ambedkar was born on 14 April 1891 at Mahu (maha in ex-indore state) He is known as a great constitutionist in Indian context. He was saviour of the Indian Women. Dr.B.R. Ambedkar made sincere efforts in understanding the reality of the status of Indian Women. He formed the Hindu Code Bill and Fundamental Rights Bill in the Parliament for upliftment of women. Through this Bill and constitutional Rights emphasizing the women's rights like equality, he made great efforts.

### **Objective of the Study :**

To know the role of Dr.B.R.Ambedkar in women empowerment.

### **Data Collection Method :**

Secondary data collection method used in present paper. The secondary data collected from Internet, Govt. document, Books etc.

### **Role of Dr.B.R.Ambedkar :**

Dr. B.R. Ambedkar started his movement in 1920. He started the issue of gender, equality and need for education through a journal Mook Nayak. In that period, he got opportunity for post- doctoral research at the university of Bonn in Germany. He went there and completed his study. After coming to India he devoted himself full time for depressed classes with women. His working propaganda was equality, liberty and fraternity. In those days he started his practice as a lawyer at the Mumbai High Court. At that time women movement was strongly active and they actively participated with great confidence to attract the attention of all towards their essential issues.

Many of the movements, and associations of women participated in various activities taking the issues like their rights, equality etc. Also women from hostel, boarding schools participated in satyagrahas. They worked for self development, effective administrative and emerging capacities of women. These activities encouraged by Dr.B.R. Ambedkar.

Since Dr. Ambedkar well knew the status of women, he included women's rights in the constitution of India. Because he was the chairmen of the drafting committee of constitution. Dr.Bhimrao Ambedkar fought for women as the Law Minister of free India. His work for Hindu women appeared in the form of the Hindu code Bill in Parliament. Which invited strong reaction from the Hindus in India. The Hindu code Bill was provided for several right to women. The Hindu code Bill provided to various right through law, those law are-

- (1) The Hindu marriage Act. 1955.
- (2) The Hindu Succession Act. 1956.
- (3) The Hindu minority and guardian ship Act. 1956.
- (4) The Hindu adoption & maintainance Act. 1956.

And also we can see the reflection of Dr.Ambedkar's thoughts on women empowerment in the Indian constitution, Part III i.e. fundamental rights & Part IV directive Principle of state policy of the constitution by which duty is imposed on the state to implement law's particularly to women.

The fundamental rights in Part IV of the constitution which are significant for women empowerment are -

**Article 14 :** Equality before the law & equal protection of the law.

**Article 15 (1) :** Principle of non-discrimination .

**Article 15 (3) :** Special provision for advancement of women.

**Article 16 :** Equality of opportunity to get public employment.

**Article 19 (1) :** Six fundamental freedom.

**Article 20 :** Safeguards to accused person.

**Article 24 :** Right to life and personal liberty.

**Article 22 :** Safeguards against arbitrary arrest and detension.

**Article 23 & 24 :** Protection of exploitation and forced labour.

**Article 25 To 28 :** Right to freedom of religion.

**Article 32 :** Right to remedy.

In Part IV of the Indian constitution valuable rights which are essential for women empowerment are.

**Article 39 (a) :** equal right of men & women to adequate means of livelihood.

**Article 44 :** Uniform Civil Code.

**Article 45 :** Right to education.

**Article 39 (A) :** Protection of working women from sexual harassment, free legal aid to poor, speedy, trial.

#### **Conclusion :**

Dr.B.R.Ambedkar is the greatest personality in Indian context. Dr. Ambedkar wanted India to be a super power and far sighted to all problems of women. His ideology was based on liberty, equality and fraternity. He played the important role in women empowerment. He started various movements for the women right. Like constitutional right as education, equality, liberty etc.

Dr.B.R. Ambedkar prepared and introduced Hindu code Bill and also fundamental right in Indian constitution for equal right of women. Therefore we say that Dr.Ambedkar played an important and constructive role in women empowerment in Indian context. He imposed the fundamental right in constitution. That's why Dr.B.R.Ambedkar played the role of champion in women empowerment.

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