

## Striking the Equilibrium: Examining the Career-Family Balance of Female Dentists in India

### Abstract:

**Aims and objective:** India has more than 300 oral health educational institutions with higher ratio of female students. Therefore the issue of female oral healthcare professionals balancing career and family is becoming more precise. A married female has to create equilibrium between the two different spheres of her life-home and work. The Aim of this research was to find out the challenges faced by a female Dentist.

**Material and method:** This study is being conducted by undertaking a national cross-sectional survey of working female dentists. A statistically significant number of female dentists of age 25-60 years were subjected to written consent form. After their consent a survey questionnaire was given to them to record how they balance their family and professional life.

**Result:** Majority of Indian female dentists work full time in their private practice. No emotional distress on losing practice due to discomfort during pregnancy. Balance between professional work and house hold chores is maintained with the assistance of a house-help. They will keep themselves updated by joining professional associations and fore go joining social clubs for business promotion to strike a balance in personal and professional life. Family is priority in need. They feel tired due to work load of home and profession.

**Conclusion:** Most of the time women have to sacrifice their professional life especially during pregnancy & illness of her children/other family member.

**Key-words:** Female Dentists, Consent, Career, Balance, Survey

### Introduction:

Throughout history despite the inherent equality among all human beings, women have been subjected to discrimination due to prevailing customs and religions that have imposed unequal responsibilities on them. Traditionally women were predominantly viewed as objects of beauty within various religious contexts with their primary roles confined to household management, childbearing and family care. Rarely were they recognized as providers or leaders in any profession. However as education advanced and progressive ideologies such as humanism, liberalism and rationalism gained prominence this perception gradually transformed.

Today India holds a major position in south-east-Asia in having more than 300 oral health education institutions[1] where more than 50% of graduates and postgraduates student are women[2]. More than 50% graduate and postgraduate's

women have made inroads in dentistry in other countries as well[3].

Consequently the critical matter of balancing career and family obligations for female dentists is gaining increased focus. Regardless of whether a woman's marriage is based on love or arranged she faces the challenge of establishing a harmonious equilibrium between her professional and personal spheres. In navigating this delicate balance, she seeks cooperation and support from her life partner to address the

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physical, emotional and economic aspects of this juggling act. [3] The journey of pregnancy, childbirth and nurturing a baby often brings forth challenges discomfort and difficulties for women. It demands significant time and attention to fulfill the responsibilities of being a devoted mother while maintaining professional performance. Considering the extensive hours required for skill development and professional practice, a female dental surgeon can achieve success in both her career and personal life if she possesses a clear mind set and receives the encouragement and support of her husband and family.[4] Their backing becomes crucial in enabling her to navigate the demands of her profession while fulfilling her maternal duties. [5]

### **Aim:**

The objective of this study is to investigate the challenges encountered by female dentists in our region when it comes to striking a balance between their dental career and their family responsibilities, including raising children.

### **Method:**

This study was conducted by undertaking a survey throughout India. This cross-sectional study was conducted from July 2009 to August 2010. Married female dentists working full time in academia/private practices were contacted at various conferences, continuing dental education programs and local dental practices to participate in this survey. Participants were given consent forms to read and understand. Researchers were available to answer all the queries of the participants. Once the participants signed the consent forms, questionnaire was given to them.

Participants were assured of safety and privacy of the information which they would share in the survey. A statistically significant number (N=1200) of married female dentist aged between 25 and 60 years were questioned on how they balance their married and professional life. Out of 1200 we received 1089 questionnaire forms back. We considered only 1000 questionnaire which were complete.

All the responses were anonymous and voluntary.

The survey questionnaire was divided into the following segments:

- Demographics like age, gender and marital status
- Dentistry as a career-degree, academic position and experience
- Dentistry as a choice- Family details. Do you have any intention to quit the present job?

- Family pressure and duties
- Job satisfaction and dentistry as a source of livelihood

Last segment was measured across the following five dimensions:

Working conditions

Pay and promotional potential

Use of skills and abilities

Work activities

Sense of hopelessness towards the future

These five dimensions were scored from 'Extremely satisfied' to 'Not at all satisfied' . The fifth component measured the sense of hopelessness towards the future using the Brief-H-Negscale

### **Validation of the questionnaire:**

The job satisfaction and hopelessness scale were checked for validity and reliability among a sample of 30 random dentists (pilot survey) who were invited to participate via e-mail. The content validity was assessed by experts and dentists in the pilot trial and was found to be good (Content validity index [CVI] =0.83). Criterion validity was measured against the one item global job satisfaction question' How are you able to manage your job and family together' on a 5-point scale and was found to be good. The inter-rater reliability was assessed using Cohen's Kappa ( $\kappa$ ) and was found to be 0.74.

### **Statistical analysis:**

The data was analyzed using the Statistical Package for the Social Sciences (SPSS) software, V21.Illinois Chicago. The variables other than job satisfaction were analyzed using the Chi-square test for bivariate analysis. Sense of hopelessness was the outcome variable and the scale was divided into hopeful/hopeless based on the median score of 8 for the categorical analysis. Similarly, the questionnaire was dichotomized into satisfied/not satisfied based on the median score for each dimension, and relationship with hopelessness score was assessed using independent t-test, and significance was set at 5%.

### **Result:**

63% marriages are arranged marriage in our survey in comparison to 33% love marriage. No statistical significance difference was observed. Our findings suggest that Indian female dentist has better understanding with their spouse as only 4% of the recorded cases end in divorce. 90% participants reported that they are in private practice while 10% are attached to public sector.[6]

Working hours of female dentists shows that most of them are full time practitioner and rest are working part time[7] frequently co owning a practice with their husbands.

The reason of doing part time practice for female dentists is mostly because mother hood responsibilities[8] also a reliable house help is a necessity to do full time practice as 50% female dentists have reliable house help while 35% don't have and 15% female dentists always looking for a reliable house help. Dependency on house help increased in nuclear family set up which is 45% in our survey while 55% female dentists live in joint family .Typically dentistry demands 8 to 10 hours in 2 divided parts over 5 to 6 days in a weeks of female dentists can manage and balance their family and career beautifully.

Traditionally worldwide whether developed country or developing countries the job of women is to manage household, take care of the children and family but now the things are some what changing and husbands of working women are also giving support in household works and family issues i.e. 86% are helping and 14% are non helping husbands showed in our survey. Most of the husbands of our survey participants i.e. 90% are helping their better half in transportation and only 10% are non cooperative. The difference was statistically significant with p value of  $0.0 > 5$ . 88% of husbands are cooperative in dental clinics while 12% are non cooperative. 37% female dentists were satisfied with working together in same clinic while 16.1 % were not satisfied .One of the reason to balance career and family in our survey is that 58% female dentists married to same professionals while 42% preferred others. No statistical significant difference was observed. 90% husbands provide economic support to their family and always be a support system to their wives whenever they are emotionally weak while dealing with both front work and family. 86% husbands help their spouse to attend CDE programme so that they can be updated with latest technique and new materials in dentistry while 14% are non co-operative in doing so. Balancing career and family during pregnancy is a big challenge but with proper planning, care and time management it is possible to continue work and balance family life too as our survey shows 40% of participants have no emotional fear of loss of job/practice while 33% have emotional fear of loss of job /practice though there is physical discomfort during pregnancy as said by 44% and no physical discomfort felt by 29% participants. No statistical significance difference was observed. Our survey shows that how Indian female dentist balance their career and family by spending 10-20 hrs. with their kids as said by 37% participants and between 10-15 hours with their husbands told

by 36% by not joining any social club. 72% of our participants didn't join social club in comparison of 28% who joined social club. 78% are IDA (Indian dental association) member and 22% are non IDA member this shows how work is equally important to them. 28% participant call someone when kids/husband is sick, 28% give preference to work while 44% miss the work. 49% participants take care of their in-laws/parents whenever they are in need (sick), 14% denied to take care while 37% chose no comment option of questionnaire. 64% female dentists work because of financial need while 36% denied. When we questioned about financial matter management issues in our survey 47% female dentists depend on their husband on the other hand 16% manage their finances themselves while 34% said both of them manages their finances. No statistical significant difference was observed.

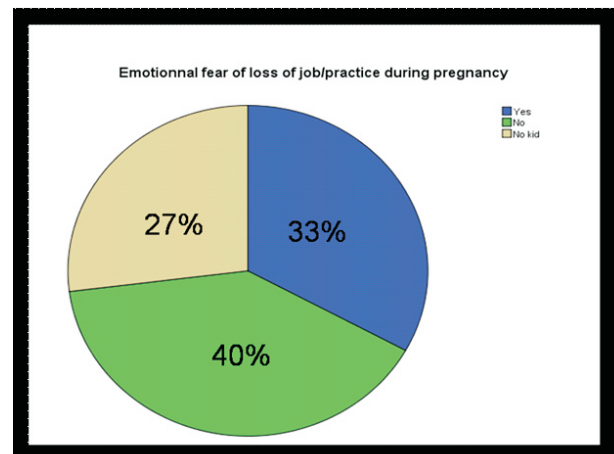
Type of marriage	Cumulative percentage	Type of work	Cumulative percentage	Type of family	Cumulative percentage
Love marriage	33.0	Public	10.0	Nuclear	45.0
Arrange marriage	96.0	Private	100	Joint	55.0

Table 1. Type of marriage, family and work

House help	Cumulative percentage	Husband's Cooperation in clinic	Cumulative percentage	Husband's Cooperation In transportation	Cumulative percentage
Yes	50.0	cooperative	88.0	cooperative	90.0
No	35.0	Non cooperative	12.0	Non cooperative	10.0

Table 2. House help, husband's cooperation in clinics and transportation

FIGURE:



### Discussion:

A number of studies reported that female dentists work reduced hours to balance professional work and house hold work [9] in contrast to study done by Murray et al. who reported that half of their survey participants were working full time and those working part time worked regular hours supporting our survey results where 86% participants reported that they are in private practice while 14% are attached to public sector. Working hours of female dentists show that most of them are full time practitioner and rest are working part time. The reason behind the full time work of female dentists in India is the availability of house help, existence of the social setup that promotes the culture of joint families as well as significant contribution of Indian husbands in managing family issues, commute to work, responsibility sharing in clinics, encouragement and accompanying in attending CDE programme as well as providing emotional and economic support.

Our survey findings show that 64% female dentists work because of financial need, supporting another survey report where 43% female dentists were the main income providers in their household [10]. This becomes the reason behind the need for balancing career and family of these working female dentists. 36% female dentist in our survey do not work for just financial need but for their own satisfaction. 49% of respondents in this survey accepted their role as care givers to relatives when in need. This finding differs significantly from the other survey where only 3% female dentists accepted their role as care givers [10]. The reason behind the difference in the results of the two surveys may be cultural, social and due to economic class-differences etc.

Owing to the physical discomfort during pregnancy and feeling tired while balancing their career and family, women in our survey took a career break after the birth of their child. These women also returned to full time work after a period of time as recorded by our survey supporting the study done on female orthodontist [11]. When we speak about Gender equality, we do not discount the biological differences between male and female. Pregnancy and child birth are two main spheres which cannot be changed that females have to bear with. [12] but by developing good childcare programs not limited to daycare centers, extended family help and father's involvement in child care and household chores along with flexible practice time will definitely help female dentists balance their career and family beautifully which also can prevent them from emotional breakdown and also help in achieving financial independence. [13]

### Conclusion:

After conducting this study we have found that Indian female dentists balancing their career & family beautifully. Co-operation of their husband in every sphere of familial and professional life help them to achieve their goal. By majority having a dentist husband and working together in same clinic is better option for female dentist to maintain this balance. For Indian female dentist family and professional work is more important than other social life. Indian female dentists face discomfort in professional work during pregnancy without any fear of loss of job/patients. They balance this situation strongly and have negligible emotional imbalance/depression.

### References:

1. Data base of Dental Council of India. <http://www.dciindia.org>
2. Hyson JM. Women dentists: The origins. *Calf Dent Assoc* 2002;30:444-53
3. Julia CM, Carlos Q. The feminization of Dentistry: Implications for the Profession. *Jcan Dent Assoc* 2012;78:c1.
4. Hoffman, L. Changes in Family Roles, Socialization and Sex Difference. *American Psychologist* 1977;32, 644-657.
5. Adams TL. Feminization of Professions: The Case of Women in dentistry. *Can J Social* 2005;30:71-94
6. de Wet E, Truter M, Lightelm AJ. Working patterns of male and female dentists in South Africa. *J Dent Assoc SAf.* 1997;52:15-7
7. Naidoo S. Women in Dentistry in South Africa- A survey of the experiences and opinions. *Journal of Dent Assoc of South Africa* 2005;60:284-288.
8. Ayers KM, Thomson WM, Rich AM, Newton JT. Difference in dentist's working practices and job satisfaction. *J of Dent* 2008;36:343-50.
9. Pallavi SK, Rajkumar GC. Professional Practice among women dentist. *J Int Soc Prev Community Dent* 2011 Jan-Jun;1(1):14-19.
10. Murray JJ. Better Opportunities for women dentist: A review of the contribution of women dentists to the work force. *British Dent J* 2001;192,191-96
11. Sarah D, Paul WM, Carlos FM, Louann K. Women in orthodontics & work-family balance: Challenges & strategies. *J Can Dent Assoc* 2012;78:c61

12. 10. Nirupama YS, Boppana NK, Vinnakota NR, Thetakala RK, Kallakuri P, Karthik BK. Indian women dentists perspectives towards balancing professional, personal and social responsibilities. Indian Jdent Res.2020 May- J u n ; 3 1 ( 3 ) : 3 5 8 - 362. doi:10.4103/ijdr.IJDR\_299\_18.PMID:32769267
13. 10. Nagda SJ. Harmonizing professional, personal and social responsibilities: Indian women dentists' perspectives. JDentEduc. 2015 May;79(5Suppl):S23-6. PMID:25941237.