

# Women in Medicine: Opportunities and Challenges, Attitudes of Shiraz Female Students About Their Job Satisfaction, 2014

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Received: December 20, 2014; Accepted: June 22, 2015

**Background:** Women comprise more than half of the world's population. In different societies, because of different views and attitudes, women are affected by various factors such as culture, customs, religion, economy and etc.

**Objectives:** The present research attempts to determine why medical students are interested in general medicine and how they seek job satisfaction. In this connection, it is also important to know about the existing problems and barriers and to propose approaches to prevent them.

**Patients and Methods:** This cross-sectional study is comprised of female medical students of whom 100 were randomly selected using random numbers table. Data gathering tool was a researcher-made questionnaire including 20 questions. Validity of the questionnaire was confirmed by the medical education academics and its reliability was checked by a pilot study of 20 medical students which was considered 86% according to Cronbachs' Alpha. The data analysis was done using SPSS version 14.

**Results:** With respect to marital status, 22% and 78% of the participants were married and single 78% were, with their average age being  $26 \pm 0.98$  SD years. Respectively also their job satisfaction mean score was  $4.19 \pm 1.51$  out of 7 which showed no significant association between job satisfaction and marriage and they exhibited positive attitude toward General Medicine ( $P = 0.639, 0.002$ ). There was a significant association between job satisfaction and attitude of women toward their husbands who were practicing physician ( $P = 0.018$ ).

**Conclusions:** According to the results of this study, as the majority of the target population comprised women with family responsibilities, stakeholders and other program designers are recommended to provide special facilities in order to increase job and education opportunities for women.

**Keywords:** Women; Job Satisfaction; Challenges; Opportunities

## 1. Background

Women as half of the entire world population play an important role in the development of culture and their communities. Sustainable development of communities depends on human resource expansion which in turn leads to governments' development. In addition to creating appropriate ground and space required for the growth and prosperity of human talent, the governments should take advantage of and make effective use of the abilities of all economically active sectors regardless of gender. One of the important indicators of human development is the level of women's participation in economic and social activities (1, 2).

In our country, despite the fact that women constitute 49.1% of the total population and recent years have witnessed the emergence of considerable growth in education and employment of women, they take part in only 12% of economic activities. In addition, the share of working women in senior posts such as top managers and physi-

cians is only 4.9%. Currently the number of men in senior occupations in society is 350 times that of women (2).

Although employment is an initial and basic requirement in communities, it's considered to be the fundamental source of providing for the needs of populations. In addition, employment is a source of pride, personality, self-esteem and a main tool for just distribution of outcomes (2). Job satisfaction reflects the level of feeling contentment in a person regarding his or her job. This feeling is mainly based on an individual's perception of satisfaction. Job satisfaction can be influenced by a person's ability to complete required tasks, the level of communication in an organization and the management' treatment of employees (2).

According to the findings of similar studies (1, 2) vast numbers of female medical graduates have diverse responsibilities in terms of their careers and domestic duties and probably many of them face considerable obstacles in their future careers. In other words, they have a lower chance of

finding a desired managerial position or high ranking career compared with their male counterparts. These factors can, in turn, affect the female medical students' conception of their future careers and their job satisfaction. Therefore, the aim of the present study was to determine the degree of future job satisfaction of female medical students and their attitude toward the obstacles which, as they believe, are connected with their future careers.

A study conducted in Stanford University in 2004 revealed that percentage of women medical graduates increased from 38.9% to 46.4% during 1975 - 2000. In addition, the percentage of residents increased from 28% in 1989 to 38% in 2000. Despite this increase, the percentage of women with master degree is still 11%, although the percentage of faculty members at the assistant professor level increased from 21% to 24% between 1995 and 2000. These differences demand understanding the women's needs and creating opportunities to encourage their greater contribution to the development and promotion of medical practice (3-5). The results also show that women have fewer roles as heads of departments, group manager, or assistants in various faculty departments. Again, this will also probably be due to a slower promotion rate or reliance on perspectives about the traditional role of women. Physician in the areas of treatment are less interested in health issues and the reason for this seems to be due to their concerns for creating a balance between their work and family responsibilities (6).

In another study, half of the skilled women working in medical schools express that gender bias in society is as an obstacle to their success and job satisfaction (7).

According to another study, the women physicians acknowledged that in order to achieve the same level of acceptance as their male counterparts they should increase the quality of their work by 50% compared to men (6, 7). In one of the studies, 57% of women were married and had an average of 8.1 children. Among female doctors 51% were married to physicians. In addition, 48% and 32% of females were working full-time and part-time, respectively and 20% were not engaged in the medical practice. In addition, results of this study indicated that 10% of women had to abandon their medical studies due to pregnancy or marriage. Finally, participants concluded that these women could at the same time be a physician and a mother, while they choose a part-time job (8, 9).

The results of these studies (8) emphasize that women have less chance of career promotion than men due to family responsibilities, domestic economic management, the family structure and protective privacy. Therefore, identifying the issues and obstacles that stop and slow the rate of women's promotion are very important and deserve special attention.

The present research aims to clarify the reasons for medical students to derive job satisfaction from studying for general medicine and it is also important to identify, resolve, reduce and prevent the existing problems and barriers.

As female physicians bear half of the burden of community health in the future, it would be better to define their current academic status in regard to their family responsibilities and obligations as mothers and wives. This will hopefully resolve problems associated with their medical practice.

## 2. Objectives

The present research aims to clarify the reasons for medical students to derive job satisfaction from studying for general medicine and it is also important to identify, resolve, reduce and prevent the existing problems and barriers.

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## 3. Patients and Methods

This cross-sectional study comprised all students at the level of internship in Shiraz university of medical sciences since 2013 - 2014.

After gathering a list of all female interns from the educational department and having considered the results of similar studies, 100 students were initially selected by the university experts in bio-statistics group. Target population was calculated using Equation 1:

$$(1) \quad N = \frac{\alpha^2 pq}{d^2} = \frac{4 \times 0.50 \times 0.50}{0.01} = \frac{1}{0.01} = 100$$

p: The proportion of elements in the sample that has a particular attribute.

q: The proportion of elements in the sample that does not have a specified attribute. Note that  $q = 1 - p$ .

$\alpha$ : The probability value (usually low).

d: Domain.

The final sample size was then selected randomly using random number table from the sample frame which included all the female interns. The study included female students who have started internship and excluded the interns who were no longer interested in participating in the research. The study was approved by ethics committee of Shiraz University of Medical Sciences and all information of students were kept confidential. All students gave their informed consent to participate in the study and a special questionnaire was used as a tool for the collection of data.

The questionnaire consisted of two main parts including demographic information such as age, marital status, average family income, etc. and 20 questions on job satisfaction comprising female attitudes towards medical profession, future responsibilities, Marital status, gender discrimination, students' attitude towards their future professional activities, selecting probable fields of

their residency and their opinions about the future managerial positions. The answer to the series of questions in the second part of the questionnaire was based on Likert scale. The validity of the questionnaire was determined by experts in medical school. The questionnaire's reliability was decided on by its distribution among 20 persons of target population, according to instruction of consultant statistician, and was calculated as 86% using Cronbach's Alpha. The questionnaires completed by the participants were then properly collected and entered into the software SPSS version 14. The statistical analysis of the data was carried out under the supervision of the statistical consultant, using T-test and ANOVA and P-value < 0.005 was considered significant. Kolmogorov-Smirnov test was performed for P-values greater than 0.05 where normal distribution of data was subjected to parametric tests accordingly. Since Kolmogorov-Smirnov test was not significantly meaningful, (our data was normal in discrimination) we were able to use T-test and ANOVA.

#### 4. Results

The questionnaires were completed by 100 female medical students, of whom 78 (78%) were single and 22 (22%) married.

The first part of our questionnaire included demographic information which consisted of mean average age, marital status and mean number of family members. According to demographic information, mean age of the target population and married women were 26 ± 0.98 and 3.8 ± 1.21 years old, respectively (Table 1).

Mean ± SD of job satisfaction in women was 4.19 ± 1.51

out of 7, which indicated a range between moderate to good in studied population. As shown in Table 1 and based on edited standard by Shateri (10) ranges between 1 to 2.33 was not considered as good and those between 2.34 to 4.66 were regarded as moderate and values from 4.67 to 7 were viewed as good.

The present study shows that the association between marital status and interest rate towards medical practice as a professional career was not statistically significant; in other words, there was no difference between married and single women (P = 0.639).

T-test was used to assess the relationship between job satisfaction and willingness and unwillingness variables towards the same job between partners. As shown in Table 2 there was no significant difference between groups in relation to husbands' profession (P = 0.27).

Other descriptive data about the respondents' answers are shown in Figure 1 and Table 3.

**Table 1.** Characteristics of Studied Medical Students (n = 100)

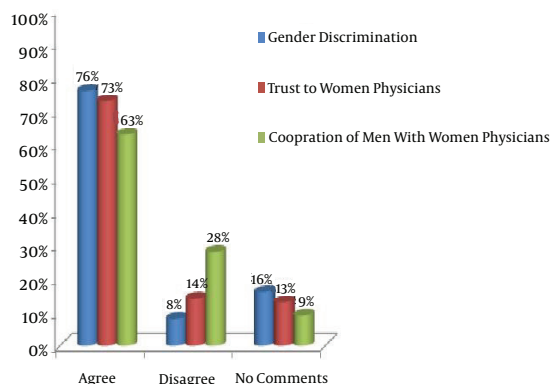
| Characteristics                      | Values <sup>a</sup> |
|--------------------------------------|---------------------|
| Age, y                               | 26 ± 0.98           |
| <b>Marital Status</b>                |                     |
| Married                              | 78 (78)             |
| Single                               | 22 (22)             |
| <b>Mean Number of Family Members</b> | 3.8 ± 1.21          |
| <b>Women's job satisfaction</b>      | 4.19 ± 1.51         |

<sup>a</sup> Data are presented as No. (%) or mean ± SD.

**Table 2.** The Relationship Between Job Satisfaction and Partners' Profession

| Job Satisfaction                            | N  | Values <sup>a</sup> | T-test | P Value |
|---|----|---------------------|--------|---------|
| <b>Profession of partners</b>               |    |                     |        |         |
| <b>Inclination towards husband's job</b>    | 60 | 3.04 ± 0.55         | -1.112 | 0.002   |
| <b>Indifference to husband's profession</b> | 40 | 3.18 ± 0.55         |        |         |

<sup>a</sup> Data are presented as mean ± SD.



**Figure 1.** Frequency Distribution of Respondents' Attitudes Towards cultural Aspects of Women's Physician.

**Table 3.** Frequency Distribution of Respondents' Answers About Stereotyped Beliefs Items According to the Questionnaire<sup>a</sup>

| Items  | Agree   | Disagree | No Comments | Total     |
|--|---------|----------|-------------|-----------|
| <b>Delayed marriage due to medical careers</b>             | 64 (64) | 31 (31)  | 5 (5)       | 100 (100) |
| <b>Job interference with life responsibilities</b>         | 75 (75) | 9 (9)    | 6 (6)       | 100 (100) |
| <b>Job interference with children problems</b>             | 67 (67) | 22 (22)  | 11 (11)     | 100 (100) |
| <b>Job interference with children training</b>             | 58 (58) | 36 (36)  | 6 (6)       | 100 (100) |
| <b>Women's reduced ability to get managerial positions</b> | 21 (21) | 65 (65)  | 14 (14)     | 100 (100) |

<sup>a</sup> The values are presented as No. (%).

## 5. Discussion

Women's employment is increasing worldwide including in Iran, but it is still facing many problems including low employment rate, job inequality and discrimination. Additional concerns of female medical students are career problems and obstacles to promotion in medical professions (11, 12).

According to the results, it seems that women physicians face problems in regard to employment and career promotion. These include the format and cultural perspectives about the employment of women based on previous studies. Occupational issues of women physicians are usually negatively affected by stereotyped beliefs, such as family responsibilities, child bearing and rearing and also some negative cultural aspects, such as gender discrimination and lack of patients' trust. In addition, general factors such as age, marital status and number of children affect women's successful employment and career promotion. This study also examines the degree of job satisfaction of women and its relationship to demographic variables (13, 14).

The results revealed that the extent of job satisfaction of women has a mean score of  $4.19 \pm 1.51$  and is located in the upper-middle range. It seems that despite an increase in education and job opportunities for women in today's society, there are still barriers to their career advancement and job satisfaction due to some forms of cultural beliefs in the community. As previously mentioned, perhaps this is largely due to expecting more of women's work. The job satisfaction of respondents in this study depends on several factors such as attitudes towards women's employment, marital status, age and etc.

Heilman's (15) study showed no relationship between age and job satisfaction of women, but significant relationship between marital status and job satisfaction, a finding contrary to the results of this study (16).

Therefore, it can be inferred that women are satisfied, but they could not yet internalize the issue of coping with problems related to women's employment in the medical profession. This situation which originates from cultural stereotypes of women's employment in the medical profession places women in a lower position than men. Sarookhani (17) also in his study concluded that some marginal cultural and stereotyped beliefs towards women hindered their job promotion (16).

For example, in this study, 56% of women believed that there is no possibility of getting job promotion and managerial positions, while 21% held opposite view and maintained that such a possibility is available to them, regardless of gender. In other words, appropriate viewpoint, as proposed by women, could bring major changes in the employment of women. In addition, it seems that successful employment of women depends on their work places which draw the attention of administrators, an issue pointed out in the study of Kelly and Marin (18).

It is obvious that no society can be fully developed with-

out full participation of all classes of people and taking advantage of their talents and abilities, issues that should be seriously considered in relation to their employment and career promotion (19).

Therefore, it is suggested that authorities concerned pay attention to the rightful application of services provided by female physicians in the community alongside considering their gender and obligations to domestic commitments, such as child bearing and rearing and equal opportunity in education and social activities.

In general, to improve the employment status of women physicians and improve the quality of their working condition and better presence in the community, it is recommended that:

A. Appropriate job opportunities should be provided by considering the environment and the fair rights, in a way that they can easily work and have the chance of comprehensive achievements in different areas of their work.

B. Many negative frameworks and cultural beliefs about the duties and dignities of women in society that are not in harmony with certain realities of life should be excluded by authorities and be replaced with a healthy cultural environment.

C. Many obsolete laws, traditions and beliefs about the female physicians and their methods of work that are not compatible with today's knowledge and logic, should be discarded or gradually eliminated to facilitate employing women and using their potentials in different occupational capacities.

## Acknowledgements

Authors would like to thank all who have helped us with this research.

## Authors' Contributions

Parisa Nabieie: study designer. Shirin Ghanavati: Translator. Yasamin Dianat, Mitra Amini: developed the original idea. Mohammad Jafari: data analysis.

## Funding/Support

Research department of Shiraz University of Medical Sciences. The sponsor afforded all expenses related to different sections of the study.

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