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## **CHAPTER 1**

# **INTRODUCTION**

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### INTRODUCTION

#### Chapter Overview

This chapter presents an introduction to the research study undertaken to highlight the work life balance concerns and issues currently faced by hospital doctors of Nashik and Mumbai cities. The chapter a) opens the discussion by, describing the background for the study b) gives brief overview of work life balance, the traditional and contemporary view, impact of work life balance on doctors and importance of work life initiatives in hospitals c) discusses current scenario of Indian healthcare sector and d) closes by, emphasizing the need of present research study in current scenario. The introduction chapter is structured to build the logical case for undertaking this research study.

#### 1.1 Background of the Study

This research study titled “Work Life Balance Concerns and Issues of Doctors Working in Hospitals with special reference to Nashik and Mumbai Cities” was a part of PhD study in Management (Human Resource Management). Amidst the multiple challenges concerning Indian healthcare sector, the problems of healthcare professionals have long been ignored. To contribute towards personal growth of doctors, hospitals need to take various initiatives to make doctors’ job more satisfactory and rewarding. To this purpose, the present study aimed at filling a research gap within Indian healthcare settings, by focusing on doctor’s profession and their work life balance concerns and issues.

The study was based on basic assumption that doctors’ professional life has undeniably invaded their personal life; leading to a situation where doctors face tremendous pressure from demands of both the life domains. The prime objective was

to identify factors associated with work life balance issues of Indian doctors and to understand its potential relation with their job satisfaction. The research also inquired into preferences of doctors for various work life balance programs in hospitals. The study further made comparative analysis of doctors’ WLB issues between metropolitan and non-metropolitan cities and between public and private hospitals. Thus participants selected for the study were doctors working in public and private hospitals of Nashik and Mumbai cities.

With globalization and rapid changing technology, people in most professions find themselves struggling between work and non work life commitments; causing a work life imbalance. The profession of doctors is no exception. Although doctors are expected to be committed to their profession, it must be remembered that they also have a personal and family life, like any other individual. Doctors working in hospitals have exceptionally hectic lives and find it most challenging to balance the demands of medical and professional work with that of their personal, family and social lives.

Multiple challenges and shortage of time to handle those leads to lack of control over life. Substantial research suggests that difficulty in balancing these needs has become a major contributor to a doctor’s distress. In a relentless effort of saving million lives, doctors have lost control over their own. To cope up with conflicting issues and achieve a balance, doctors expect advice, cooperation and support not only from their family but also from hospitals. So what can hospitals do to assist their doctors in managing work life balance?

## **1.2 Background of Work Life Balance (WLB)**

### **1.2.1) Shift from Traditional to Contemporary view**

An individual works to earn a better living. Given this actuality, what can be justified more, work invading over an individual’s personal and family life or work leading to better quality of life? The conflict between work and personal life of employees has existed since ages. Traditionally work and non work life were viewed as two

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independent and competing domains. For long organizations had expected employees to prioritize their work life and not to allow their personal life to interfere with work. Employees’ expectation of some support and assistance from organizations was met with indifference and deaf ears.

However, over the past few decades the economy has evolved from a manufacturing economy to a knowledge economy. This traverse from machine age to industrial age to information age has forced in several trends in different spheres of societal life (changing family structure, nuclear families, single parents), business environment (globalization, increased competition, hostile takeovers, downsizing), work nature (occupational shifts, automation, flexibility and multi-skilling, outsourcing) and demographic factors (workforce diversity, global workforce, educated and knowledge workforce). All these in turn, have redefined the employer employee relationship. Due to over mounting pressure generated by the above mentioned driving forces; organizations and human resource professionals were compelled to change their attitude and view employees as ‘whole persons’. Organizations now respect employees’ needs inside and outside work.

Human resource management today recognizes that different employees confront varying degrees of conflicting demands from their work and personal life. It is an accepted fact that employees’ work and personal life are complementary and that these can have either, functional or dysfunctional impact on each other. As work life balance issues of employees keep pervading organizations world over, businesses have started adopting work life programs that enable employees to address these issues. With blurring boundaries between work and non work life, the issue of employees’ work life balance has become crucial for human resource management.

### **1.2.2) What is Work Life Balance?**

Work life concerns and issues refer to those aspects of work and personal life that influences each other. Work life balance is conceptualized as a dual process, where the needs of employees as well as employers must be considered. Work Life Balance should not be understood as an equal balance in each life domain. Rather, it is more

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about prioritizing and managing between the responsibilities of each domain so as to achieve equilibrium with limited time, energy and resources, with the objective of gaining work and life satisfaction.

**For individuals:**

In general, work life balance for an individual means a satisfactory level of involvement in multiple roles of life. WLB is the measure of individual’s capacity to maintain an overall equilibrium in work and personal life domains simultaneously. The best work life balance for an individual will vary with different stages of life and career, as priorities of that individual change over time.

Employees with healthy WLB are better able to manage multiple commitments at home, work and in the community without the feeling of guilt or regret. It fulfills employees’ desire to enjoy life and work along with career progression, quality of life, health and wellbeing. Ultimately, it makes them feel satisfied for being a part of employee friendly culture and organization that values them.

In India, work, family and society all are very important and closely related domains for any individual employee. Hence there are many personal characteristics, family and societal factors that contribute to an employee’s WLB.

**For organizations:**

Work Life Balance means developing a supportive work environment and culture that allows employees to balance between responsibilities of work and personal lives.

Work life Strategies and Programs can prove to be a thoughtful option when organizations aim to become ‘employer of choice’ and attract and retain talent. Provision of various WLB facilities helps create supportive and cooperative culture and thus reinforces employee commitment and loyalty. Organizations have identified benefits like reduced absenteeism and sick leave usage, better recruitment and retention rates and associated cost savings. Motivated and satisfied workforce also

leads to greater productivity and improved customer service; ultimately resulting into enhanced corporate image. Organizations adopting work life initiatives can better align themselves with the changing business demands and environment.

### **1.2.3) Work Life Balance in 21<sup>st</sup> Century: Shift from Work-Family Balance to Work life Balance**

‘Striving to do more with less’ has become a peculiar feature of this knowledge and technology driven, twenty four by seven, work culture. Issues related to work life balance were initially noticed in 1970s when more and more women entered the business world. Thus during that time organizational support largely focused on offering family friendly practices. But with changing demographics and societal trends, the workforce is now a heterogeneous group of different generations of young and senior employees, married and unmarried, parents and dual career couples. Nevertheless, all types of employees demand for work life balance equally. Regardless of type of profession, most employees today find themselves struggling between multiple domains of life. Thus over the period of time, the concept of work life balance has moved beyond ‘family’ to incorporate complete non work life of an individual. Work life balance programs in this twenty-first century are more encompassing, these incorporate needs of almost all levels and types of employees. In today’s work culture the focus is on supporting employees to achieve work life balance, irrespective of age, gender, marital status and parental status.

The phrase ‘work life balance’ is now preferred instead of ‘work family balance’, due to the fact that it encompasses the experiences and needs of all employees alike. Now the term work life balance is generally used as an ‘all-inclusive’ expression to describe policies that extended beyond just ‘family friendly’ policies.

### **1.3 Work Life Balance and Doctors**

It is rightly said that a doctor’s profession is married to their work. Doctor’s profession is a one that uses up all their energy, patience, empathy and attention. By the very nature of their work, doctors often have overwhelming and disturbing

experiences. These distressing experiences can have negative consequences on their overall growth; unless they thoughtfully reflect on these and initiate required behavioral change. But do doctors have time and energy to think and contemplate over their experiences?

Doctors today are struggling to reclaim their personal life amidst their professional world. It has also been reported that compared to other professions, doctors are likely to experience twice more work life balance problems. They are under tremendous pressure and time strains, to meet stresses associated with their professional responsibilities as well as cope with personal and family demands. Difficulty in balancing personal and professional life can be a major contributor to a doctor’s distress. Doctors’ dissatisfaction with their profession, hospitals and work environment reflects in quality of patient care. Since hospital management expects, rather emphasizes, that their doctors provide utmost care and service to patients; can they adopt an indifferent attitude towards issues and problems faced by their doctors? Apparently, hospitals must respond to WLB problems of doctors and implement support programs that would enable doctors to address concerned issues and achieve overall fulfillment.

On the whole, work life balance issue of hospital doctors is a focal subject that is not only relevant for their personal growth and satisfaction, but it also determines their satisfaction level with job and profession; thereby influences their intentions to continue or leave the job. It thus has repercussions on safety and quality of healthcare services provided to patients. In order to enjoy their profession as a rewarding career without sacrificing their personal lives, doctors must experience healthy work life balance.

### **1.3.1) A Review of Work Life Balance Programs Provided by Hospitals**

Work Life Balance Programs are voluntary initiatives by organizations, designed to support their employees in managing WLB. These programs may involve one time change or transformation of organization culture to a more employee friendly workplace.

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Major companies worldwide like IBM, Lloyds TSB, GlaxoSmithKline and others have provided evidence that WLB policies and practices can generate business results. Work life interventions have gained acceptance in hospitals of developed countries. These programs are adopted by the hospitals to express its commitment to overall health, wellness, satisfaction and better quality of life of their healthcare employees. In an effort to promote a healthy balance between work and life responsibilities, a variety of work life programs are offered by hospitals, that fall into the following categories:

1. Control over their time: Basically includes flexible work arrangements
2. Leave arrangements: either paid or unpaid for various personal or family matters
3. Dependent care: Resource and referral services to manage childcare or elder care
4. Personal convenience: Concierge services, lactation rooms, nap rooms, and traveling, vacations, shopping arrangements and planning, on site ATMs
5. Employee Assistance: for employees who need help and solutions to job-related or personal problems
6. Benefits: A wide range of other benefits and assistance (financial and non-financial) provided to support employees

A review of websites of various hospitals in developed countries like USA, UK and Australia, it was observed that certain commonly offered work balance programs by hospitals are:

- **Health and Wellness Programs:**

Examples of these include guidance from health coaches and ergonomic specialists, free health screening, nutrition counseling, stress management, smoking cessation programs.

**Spirituality Health Center:** activities designed to enhance spiritual health, yoga and meditation instructions, and spiritual library

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**Weight Watchers Program:** Weight control management, on site fitness and exercise programs

- **Flexible Work Arrangements:** Flexibility in work scheduling, arrangements like part time employment, flexible hours and flexi time.
- **Employee Assistance Program (EAP):** these programs provide employees and many a times their family members, free and confidential services. Most of these are in the form short term counseling and referral services. Examples include counseling for career development, personal and marital issues, crisis management and so.
- **Paid Time Off (PTO):** Time off or financial assistance is provided for emergency events in life, illness, vacations or personal needs.
- **Child Development Center:** provision of childcare programs either on-site (convenient locations on campus) or nearby, tie ups with agencies providing these care services or financial support (discounts) to help pay for the cost of care. Mostly programs are available for infants and toddlers, early preschool, preschool, and pre-kindergarten.
- **On-site Fitness Center:** generally services at these centers are available throughout the week and are open 24 hours a day, 7 days a week.

#### **Other Work/Life Benefits**

- Financial Planning Seminars, Financial assistances for unforeseen or emergency events, insurance coverage for self and dependents
- Childbirth Education and Parenting Programs
- Adult Day Care Programs, Youth Mentoring Program
- Retirement Program
- Learning and Educational Assistance Program (LEAP)

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#### 1.4) Work Life Balance in India

The driving changes in the workplace and workforce were not confined to only Western societies, as many Asian countries also had experienced similar trends. The need for WLB in India as Arora (2009) explains it, is a post 1995 phenomenon. With opening up of Indian markets; liberalization and globalization resulted in competition and changing dynamics at the workplace.

During this period many Indian organizations consequently adopted work practices from the west (twenty four by seven work culture), where workload increased considerably and the boundary between work and personal lives of employees began to merge. This led to stress-related issues, behavioural problems, absenteeism and much more among employees. Recent surveys in India suggest that difficulty in balancing work life and long inflexible working hours were found to be important reasons of employees quitting their jobs.

Interestingly, employees have started taking charge of their lives and each generation has set out their own priorities and demands to deal with work life balance issues. Through various reports it is observed that more employees are demanding a five day work week where they can use weekends to attend to personal matters; especially women, middle and senior level employees. While the young group, below thirty years (one third of total Indian workforce population) is demanding for jobs that not only fulfills their career aspirations but also allows them to realize areas of interest in personal life. Career growth and work life balance are the two most important factors considered by this generation while it comes to choosing a job (Ranbhise, 2011).

Indian women are found to attach importance to work life balance greater than in any other country. Indian women have started turning down a job or stopped pursuing it, due its impact on work life balance. However it must be noted that while, women feel that work life balance is the key to career success; Indian men equally feel the same.

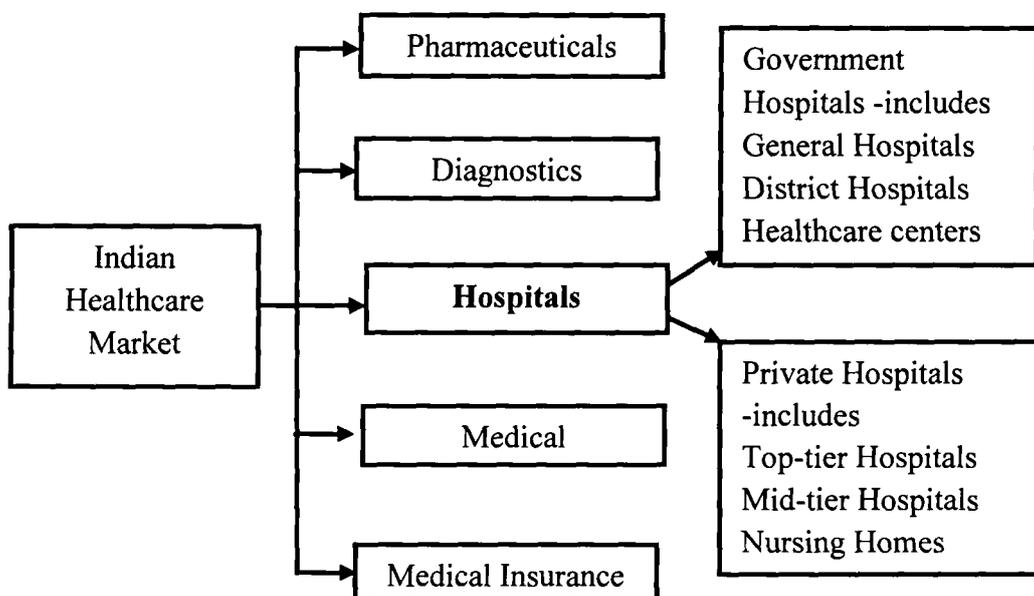
Though Indian organizations have responded to these trends, provisions of work life balance support is largely limited to information technology (IT) industry or multinational companies in metropolitan cities or are merely statutory in nature.

Remarkably in India there is still no government policy addressing work and life issues across different sectors. It needs to be remembered that the booming economy of India, globalization, demographic and societal changes, all make a strong case for work life balance strategies in Indian organizations.

### 1.5 Indian Healthcare System Current Scenario

A developing India has witnessed liberalization and globalization that has had its impact on each sector and segment, either directly or indirectly. Healthcare segment was also not left untouched. Health care sector in India is capable of providing and contributing to economic growth. As per India Brand Equity Foundation’s (IBEF) report on Indian Healthcare industry, the estimated size of the industry was USD 80 billion by 2012 and is projected to grow at 23 per cent per annum to touch USD 150 billion by 2017. Increasing health awareness among Indians, change of attitude towards preventive healthcare, rising income levels and ageing population are all expected to increase demand for healthcare services in future.

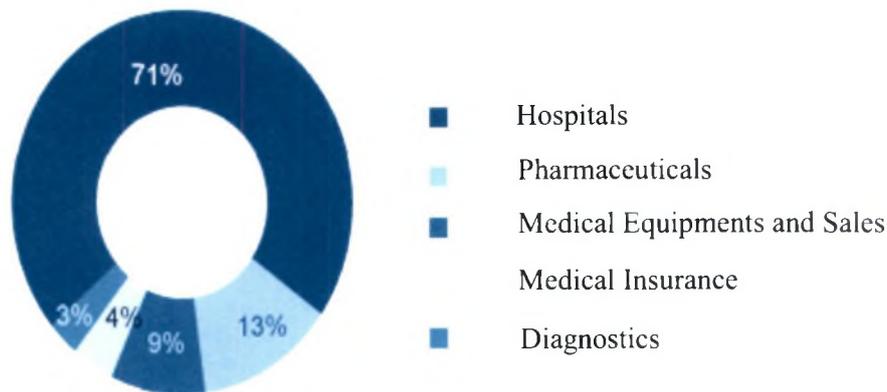
The healthcare market in India functions through five segments, hospitals, pharmaceuticals, diagnostics, medical equipments and supplies and medical insurance. The hospitals include government and private hospitals.



Source: Hospital Market India by Research on India

Figure 1.1: Segments of Indian Healthcare Market

Hospitals in India account for almost 71 % of the total healthcare revenues.



Source: Hospital Market India by Research on India

**Figure 1.2: Indian Healthcare Market Breakups by Revenues**

In India, healthcare services are delivered by both the public and private sectors and also by few charitable trusts. The private sector is developing fast compared to public sector. It consists of 75 percent of all hospitals and 40 percent of hospital beds in our country and provides for 60 percent of all out-patient care and 40 percent of in-patient care. The share of private expenditure in total expenditure on healthcare in India has grown to 80 percent which will further increase in future (IBEF’s Health Report).

### 1.5.1 Doctors’ Workforce Statistics in India

Although Indian health care sector provides employment to millions, the current position of healthcare employees in hospitals is something to worry about. According to World Health Statistics & Health Report (2011) by World Health Organisation’s (WHO) the doctor patient ratio in India is 0.6:1000 against the highest of 2.56:1000 in USA. In urban areas of India, there are six doctors for 10000 people or an approximate one doctor for 1700 people. Considering the present scenario, it is estimated that there is shortage of around nine to ten lakh doctors. The realization of India’s goal to achieve universal health coverage by 2020 remains challenged by the current shortage of trained and motivated healthcare professionals <sup>[42]</sup>.

**Statistics in Maharashtra:**

In India, with regards to population and geographical area, Maharashtra is the second largest state. As per 2011 Census, its population is around 11 crore; which is 9.3 percent of total population. The number of doctors in Maharashtra (possessing recognized medical qualification) registered with state medical councils or medical council of India from the year 2001 to 2011 is shown in table 1.1 below.

**Table 1.1: Doctors’ Workforce Statistics in Maharashtra state**

State & UTs	Total in India	In Maharashtra	% of total
Up to yr 2001	587170	103073	17.55
2002	21687	3772	17.39
2003	22425	3841	17.13
2004	21741	3897	17.92
2005	22352	4231	18.93
2006	25324	3915	15.46
2007	30740	4260	13.86
2008	29990	3988	13.3
2009	32276	3882	12.03
2010	52767	23444	44.43
2011	75705	53139	70.19
Total up to yr 2011	922177	211442	22.93

*Source: Medical Council of India*

**1.5.2) Increasing Problems of Doctors within Indian Healthcare**

Hospitals in India have been taking leading steps to render homely care to patients and satisfy increasing patient demands. In this chase to achieve competitive sustainability; predominantly the focus has been patient centric; whereas the needs of healthcare professionals have been ignored for long.

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An Indian doctor spends six years as medical student and one year as resident before actually starting professional work. And if one aims at further specialisation, another five years could be added before starting own practice. By the time a doctor reaches the age of forty to fifty, the job already has consumed most of their physical, mental and emotional energy.

Like many other countries, against increasing patient population India too faces increasing shortage of doctors and nurses. Less number of doctors means too many patients per doctor. This results in lack of support from colleagues, overload and long working hours for the existing doctors. Overworked doctors are prone to fatigue, burnout, sleep deprivation and much more physical and mental health related problems. Apart from pursuing a challenging profession, hospital doctors have to endure and work within exigent conditions characterized by grief, pain and suffering.

Indian healthcare segment is characterized by growing population, increasing health problems, heavy patient load and expectations of specialized quality healthcare services round the clock. Despite various efforts, shortage of doctors remains high and un-tackled in India; thus it becomes imperative to analyze every measure to attract and retain doctors.

## **1.6 Rationale for the Study**

### **Why Assessing Hospital Doctors' Work Life Balance is Imperative?**

#### **1) Doctors working under tremendous pressure need supportive work culture**

Doctors have responsibility towards patients, hospitals, family and community. The pressure to perform effectively in each domain can have dysfunctional impact. Doctors are finding it even more difficult to balance between the demands of their professional and personal life. Although every employee faces similar challenges, repetitive exposure to these is a matter of concern for healthcare employees. If these warning signals are ignored; it could have severe consequences for the healthcare employees as well for the hospitals.

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**2) Doctors' work life balance can enhance their job satisfaction which is linked to patient satisfaction**

The difference between having doctors simply putting in hours of work, compared to doctors who are engaged in delivering quality healthcare services would be very much apparent in hospitals. Earlier research findings in healthcare sector have indicated significant impact of WLB on healthcare professionals' performance, turnover intentions, job satisfaction and personal and family satisfaction. Doctors' dissatisfaction with profession and hospital work environment reflects in quality of patient care. Given this potential for serious consequences, there is a growing research interest in this area.

**3) Investigative research is required before any change can be implemented**

Important hidden costs that are often overlooked, are those associated with employee's affective and behavioral reaction to changes in job factors. Thus any process of changing and implementing HR related strategies and programs can be costly to service oriented healthcare segment. Similarly, adopting any work life balance programs without assessing its fit with the organization's culture and employees' need, could add to hospital's cost. Hence, before planning for any work life balance programs within Indian hospitals; it would be worthwhile to conduct studies on doctors' work life balance experiences and their needs and attitude towards work life balance programs.

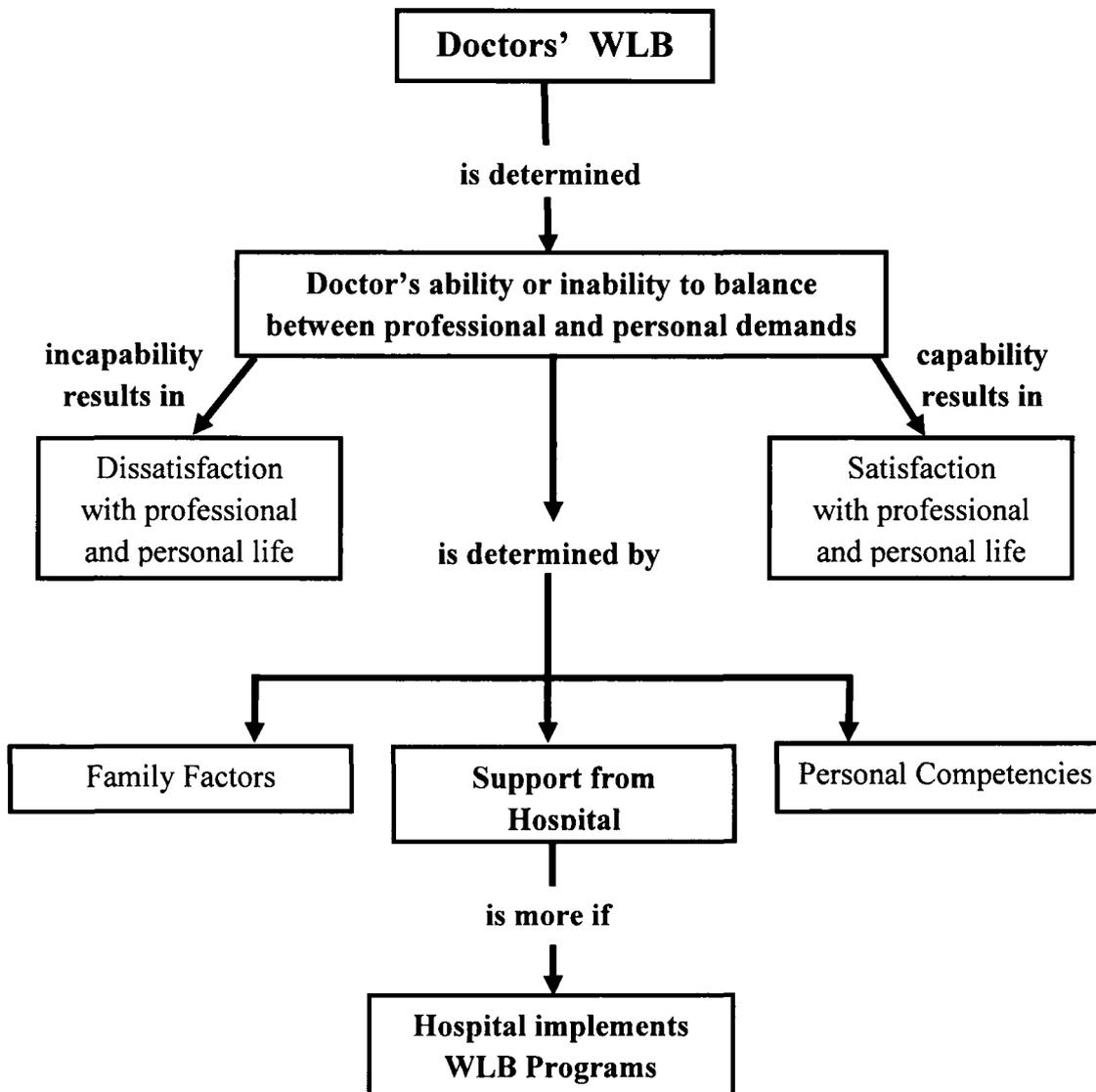
**4) To fill in the research gap for WLB research studies within Indian context**

Most of WLB research work on physicians, surgeons, medical students, nurses and paramedics has been done outside India. WLB studies in India have so far remained confined to specific industrial sectors and to particular groups of employees. Considering substantial evidence that work life issues of healthcare professionals have become a growing concern; there is a need to study and understand Indian specific attributes of this concept for the healthcare segment.

Considering the huge shortage of doctors country wide; every measure must be taken to retain them. However this is not possible unless sufficient studies are carried out to understand their problems related to their work. Keeping in view all the above mentioned factual and potential factors, a detailed study of WLB issues of hospital doctors in India deserved a strong rationalization.

**1.6.1) Concept Mapping of Doctor’s Work Life Balance**

To further defend the rationale for this research study, the concept of Doctors’ Work Life Balance has been mapped in figure 1.3 below.



**Figure 1.3: Concept Mapping of Doctor’s Work Life Balance**

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Although doctors' WLB is dependent on multiple factors; this study asserts that support from hospitals is one of the most decisive elements; as doctors spend maximum of their time on job.

### **1.7 Conclusion**

Under current pathetic working conditions of doctors; there is an urgent need for Indian hospitals to address various issues of their doctors before it goes from concern to crisis.

In the western part of the globe, there is an increasing realization that medical profession must adapt more to work life balance concerns of healthcare employees. Hospitals in India also need to create a work culture that promotes professional and personal wellbeing of healthcare professionals and reduce competitive demands between the two domains of life. This requires a change in attitude and the capacity to suspend old paradigms.

Although hospitals and government on the whole are not entirely responsible for doctors' work life balance, health and wellbeing; still considering the fact that doctors spend more than half of their time in hospitals, these agencies need to acknowledge that some initiatives can be taken to improve their work life balance. As work life conflict and dissatisfaction among doctors' increases around the world, this research looks at what Indian hospitals can do about this problem.