CONCLUSION
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Lack of time is the bane of today's modern society, what with people wanting to have it all. Men and women both want a challenging profession, a fulfilling family life, an emotionally close marital life, societal prestige, power wealth and the leisure time to enjoy it all.

Men and women strive to fulfill their dreams by taking up exacting professions. In our study we shall be focusing, on such couples specifically dual doctor couples.

Overall there has been an increase in the number of dual earner families worldwide. The reasons range from financial necessity, to personal ambition to perhaps altruistic reasons. Whatever they be the question arises is how do they balance their family and career life especially the dual professional couples. When you focus on work, the family suffers and when you focus in family, the work suffers. Also most people feel that they are caught in a time crunch.

Both single and dual earner couples experience this time crunch, but the challenges for dual earners, especially professional couples is the greatest, what with having to juggle the multiple demands of job and family.

So, how do professional couples, specifically, doctor couples achieve the precarious balance between work and family becomes all the more significant.
In our study, we find that our doctor couples have achieved this balance by role segregation.

Gender roles are still extremely strong descriptors of the couples behaviour at home. We had expected the doctor couples to have a more egalitarian attitude towards their family roles and responsibilities, but found that when the question comes up about managing the home front, there was a clear traditional division of men and women’s roles.

Women were primarily responsible for looking after the house, the children and the in-laws.

The women were doing multitasking at home and shouldering the home responsibility, while the men were ensuring stable and adequate financial support for the family. Both the men and women working parents had their children future as their primary focus and hence women doctors were sacrificing their careers temporarily, for the sake of their children while the men doctors were scaling up their practice to financially settle the family.

In their households, we found the cultural script of male dominance in decision making in large money related matters to hold forth. Though both men and women were, overall, making joint decisions, there was an apparent division of decision making with small household expenditures in the wife’s hand decisions involving large money expenditures in the husband’s hand. As the years of married life progressed, we find more joint participation in gender segregated decisions.
Our respondents felt that dual doctor marriages were a boon for them as both doctors were able to understand the demand's of each others job, help each other in their practice, share their on-job concerns and scale up or back their practice without quitting their profession, so as to manage their family life.

Career wise both men and women doctors were following the same path whether it was the number of hours worked or the number of patients seen. The only difference was that whereas male doctors were working in more than one setup (i.e. they were visiting doctors in nursing homes/polyclinics the women doctors were working only in their own setup. None of the couples had any professional rivalry between them as they sought to further each others practice.

In fact, they saw themselves as a team and not as individuals. Hence, even if the wife was making more money, it was not a slight on the male ego.

So, overall, we find that today's dual professional families have achieved the balance between their work and family. Both share a common objective ---- *A Successful Career* and a better financial status. Both help in furthering each others career and see success as a team work. Though, they follow traditional patterns in home roles and responsibilities, yet we find these patterns as slowly opening up to more of a joint participation and thus a gender role expansion for both men and women doctors.
CASE STUDIES
An inter-caste love marriage of 12 years and two sons of the ages of 10 and 8, they present themselves as an energetic and gregarious couple. The wife and the husband have their own practice i.e. she is a pathologist and the husband is an orthopaedic surgeon. Neither of them in their immediate family have any relative in the medical line. Both their mothers are housewives and fathers were white-collared workers.

On asked about how they managed their home front the husband replied that this was not his department. He confessed that he did not know anything about cooking cleaning and the rest of the household chores and was content about his inactive role. His wife looks after this aspect of their household and had accepted his disinclination towards household chores.

Living in a joint family, the wife concedes was a real boon for her as her in-laws managed the house and looked after the kids. Thus, she was able to concentrate on her career. She never as such had to stop working when they were babies.

She has a great relationship with her in-laws, infact her sister-in-law is her best friend.

Her household chores are mostly confined to occasionally cooking and generally maintaining the cleanliness of the house. They have full-time servants to do the rest.
Her father-in-law does the vegetable shopping. She even involves her two sons in helping out at home like keeping their room tidy, serving water to guests, clearing the table after family meals.

About 3 to 4 years ago she set up her own private practice under the same roof as her husbands (away from their residence). Now she spends more time in her practice as her two sons are able to look after themselves.

As regard to the couple’s involvement with their children, the onus of the responsibility lies with the wife. Her husband plays with them from time to time and checks their progress at school while the wife daily helps them with their homework, plays with them, watches cartoons with them etc. Both the boys are proud that their mother is a doctor but sometimes wish that their mother too, would dress up and come to their school like their friend’s mother’s do. Both the parents feel that they are not able to spend as much time as they want to with their kids. The wife manages to be more with the kids as compared to the husband by trying to work faster so as to finish early and be with them as she is a pathologist.

They are not able to spend time alone together because of their jobs and children. Whatever time they have, is spent with their children and parents. When they are free they like to go out with their kids. Their values of life being the same was what got them together, though they are temperamentally different. Marriage, they say means that one partner is dominant and both agree that the husband dominates. The husband believes that the mantra of a successful marriage is an amalgamation of a little dominance by the
husband on key issues and a little compromise as and when needed. The wife reiterates that complaining about these things does not lead to a happy marriage but adjustment plays a dominant part. The wife (to which her husband whole heartedly agrees) has made all the adjustments in the marriage. This couple is very traditional and the wife has adjusted well in the family by endearing herself to her in-laws.

The father-in-law looks after the financial aspect of their nursing home, disbursing payment to their employees. He also picks up and drops the kids to school. Paying of bills, grocery shopping etc. are all handled by the father-in-law. Infact, the wife says that next to her husband, her father-in-law provides the emotional support. When both the wife’s parents passed away in an accident, her in-laws were like a bedrock of support to her. Both are very successful in their field. The husband is among the known orthopaedic surgeons of Agra while the wife is a known pathologist. Both are very involved in their work and have a busy practice. Before setting up their own practice, both were working in someone else’s private set-up. As they have a common work place, we find both of them taking decisions on management of staff (the staff of the wife’s pathology lab and the staff of the husband’s nursing home) on each other behalf, whenever one of them is not present. Both also refer patients to each other, however decisions regarding patients bills, discounts etc. are taking separately by them.

Both of them say that discrimination exists in the medical line especially in the early phase of the career. Caste, gender and religion
based discrimination is prevalent. Once you are established, discrimination in the form of referral of patients (i.e. Bania Community refer patients to one another rather than to a non-bania) exists. Also depending on the speciality rural patients prefer to get themselves treated by male doctors rather than female doctors as they feel that male doctors are more adept.

Both feel that being in the medical line is advantageous as both understand each others work problems, besides giving them a better social and financial status. Having, their own practice gives them greater leeway in organising their personal life. The financial aspect of their practice is in the hands of their father.

The husband rues the fact that their profession has lost its respect as it has become more business oriented, but he feels that in the end honesty, sincerity and hard work in this profession will reap dividends in the long run. The couple wants to stay in India as both feel that settling abroad means the loss of family values which they cherish. The husband had attended a conference abroad and this was what he had felt. On the whole, this couple believes that they have made a good balance between their work and family life.
Case Study - B

The husband's credentials are impeccable, he is a pioneer in starting open heart surgery in Agra in 2002 and establishing cardiothoracic and vascular surgery. The wife is a gynaecologist. Both have their own private practice under the same roof that is their nursing home and the husband is a visiting doctor in a number of Medical Research Centres & Nursing Homes while the wife works in a Government hospital.

The husband has a very busy practice. Not only that, he also regularly has papers published and is an active participant in conferences within Agra. Infact if he wasn't a doctor, he said he would have liked to be an academician or a businessman.

The wife also participates in conferences though not to that extent as her husband. She has been in this profession for 11 years now and feels that she is not able to devote much time as she would like to. For her, her 14 and 7 years old daughters are of prime concern. Though living with her in-laws (both retired academicians) there is not much of their involvement with the children.

The wife helps out the children with their homework and basically oversees their studies while the husband does it once in a while whenever he gets the time. The wife feels that she is not devoting enough time to her career and is not that successfull as she had wanted to be, but right now she says her children are her priority. You can always build your career but with children, once you loose control over them and their studies their futures would be
jeopardized as today it’s a very competitive world out there. Both parents stress academics and feel that their jobs have provided the right kind of academic atmosphere for their daughters.

One thing that the wife regrets and is trying to rectify is that her daughters especially the elder one complains that she has not been demonstrative in her love for them. When the elder daughter was growing up, she was not the priority of the mother, rather it was the job. As a result the kid had internalized the feelings of neglect and is very sensitive about this thing.

The wife very often sways between her professional ambition and her parental role and has mentally tried to come to terms with it. The husband also wants his wife to prioritise the family over the job.

Both believe that achieving a balance between their work and family is a tricky affair as both require full time devotion. The husband says that for a women professional her job becomes an extra load and that is what keeps the women professionals from achieving the same kind of success that men get.

The problems that women professionals face at home according to the wife is that because of their jobs and education they are “slightly less homely and more dominating and mature in thinking. This sort of makes it difficult for them to adjust in their role of a daughter-in-law. She also feels that because of her job she is much more of a strict disciplinarian than other mothers. On the flip side, she feels that both her daughters have imbibed good humanitarian behaviour from her.
Both agree that it is more of an advantage to have a spouse in the same profession. The husband feels that they have a better understanding of each other professionwise and can take over a patients case temporarily when required to. The disadvantage of this job is mainly the “minimal time left for family and their ending up having the same circle of friends” feels the wife. We find more of a traditional set up in this family whether it be decision making or performance of responsibilities. Things related to managing the home are looked after by the wife while all external work and minor repairing (like leaky faucets etc.) is handled by the husband.

The daughters also help out by doing their own beds and keeping their shelves and study room tidy. The parents of the husband help maintain the social relationship with the neighbours. His father is overlooking the construction work of their clinic which is being expanded to accommodate for the increase in the number of patients.

Since the husband has a very hectic schedule most of their fights have been about his odd working hours and lack of time for family. When both are free, they like to chat with each other over tea, discussing their day and their children’s progress at school. Both feel that they have made the bigger adjustment in their marriage. The husband in order to appease his wife has scaled down his work and takes her outbursts regarding time management in his stride.

The wife feels that she has made a bigger career sacrifice for the children than she needed too, and wants more of her husband’s involvement in their children’s life. Also the wife is not happy that
her husband is neglecting his health at the cost of his work. The husband tries to adjust the surgeries so that he can spend some time with his family and also eat his meals on time.

Marriage need not be an equal partnership to be balanced believes the husband. What works for one, may not work for the other. However, if in a marriage, both husband and wife are working than the income of the wife should be less than the husband. The husbands role he feels is to keep the family happy and fulfill their demands. The wife feels that not everyone can be an ideal couple. For a successful marriage, she says, it is important to give space to each other and have a good mutual understanding minus expectations.
Case Study - C

On the husband's side of the family he is the second generation of doctors running the maternity home. Both the husband & wife belong to dual earner families. The husband's mother is successfully running the nursing home after the demise of his father (22 years ago) who was also a gynaecologist. He had joined his mother 3 years back. Prior to that he was a Registrar at Tata Cancer Hospital, Mumbai. His wife is a gold medalist from Gwalior and she is also a gynaecologist like him. The wife's father is a retired doctor and both her sisters are doctors too, while her mother is a retired teacher.

On the husband's side of the family, the younger brother is studying to be a doctor too. Thus, there are doctors on both the husband and wife's side of the family.

Although both husband and wife are gynaecologists they say that there is no professional rivalry. They encourage each other, give each other a second opinion in diagnosis in certain cases.

Infact, both feel it is advantageous for them to be in the same speciality as the work load and responsibilities get shared. The wife feels that one of the disadvantages of both being gynaecologists is that they become too engrossed in their work since both are working in the same nursing home.

Both have guided and promoted their spouse's career in different ways. The husband say that he has encouraged her to attend conferences and workshops. The wife says that she and her
husband discuss and finalize the next line of action jointly. Both also
feel that family responsibility do not clash that much with career
commitments. The husband attributes it to cooperation between the
family members. The wife feels that this kind of problem does not
crop up in their profession. This couple has been married for 2½
years and have a year old son. Looking after their child has not been
much of a problem since their nursing home and residence are side
by side. They have full time and part time servants to do all the
housework i.e. cook, clean, do the dishes and laundry. They have a
permanent nanny to look after the year old baby. The wife mostly
checks in on the baby from time to time. Not only that, every
afternoon, for 2½ hrs, the wife takes a break to spend quality time
with her child while the mother-in-law and husband manage the
work front.

The wife says her mother-in-law is very supportive and
understanding. The mother-in-law is successfully running the
maternity home built as it is on years of goodwill. Being one of the
known gynaecologists in Agra, this maternity home has a steady
clientele of both Hindu and Muslim patients. To meet the increasing
number of patients, the maternity home is being expanded both
infrastructure wise and service wise.

Gynaecology is predominantly a female specialization but in
Agra, many of the well known gynae specialists are male doctors.
The husband took to this specialization because it became a sort of
family profession for him with both parents being gynaecologists.
He feels that he is fortunate that he has inherited the nursing home
set-up from his parents otherwise it is difficult for doctors to establish themselves in this line, if they do not have an infrastructural backup. In another ten years time he wants to specialize in IVF and Laparoscopy. The wife would like to go abroad for superspecialisation.

Both put in 10-12 hrs. of work everyday. Emergencies are the things that the wife does not like about the job but has accepted them as part of her professional life. With regards to discrimination, the husband says that majorly it is on the part of female patients preferring female gynaecologists. Also discrimination on caste basis is prevalent in this profession as people have this false sense of security and belief that these people would help them better.

The wife also believes that people have this mentality that they patronize men surgeons, women obstetricians, gynaecologists and paediatricians. She says that she has experienced discrimination when one goes out of one's own setup to learn new things from others.

Both feel that men and women have similar chances of making it big in this profession. However, according to the wife if somehow women do lag behind then the reason is because of the family responsibility that they have to bear. Also both believe that women are disadvantaged as they are not physically strong as men. The husband feels that women have an affinity for certain specializations as that suits their mental strength and temperament.
In the decision making areas of the household we find that there is a traditional division of responsibilities and decisions. The physical aspect of housework is taken care of by the servants. The management of the servants and the running of the house falls in the wife's domain.

Their being an arranged marriage, initially, the wife concedes there was that usual period of adjustment, which two unknown people undergo. She feels that the husband should try to understand the emotional and psychological adjustment that a wife makes. She understands that a man cannot take a woman as a wife in one day.

The wife wants her husband to understand that she equally wants to give importance to her personal life and not let her professional life dominate. Right now she says her priority is her son and she is interested in completing her family within the next two to three years so that she then can focus on her career.

The wife is more open about the fact that they have had many fights because of poor understanding of each other. Certain issues which both feel that they don't agree on are with regards to time and activities to be done during their spare time. The wife wishes that she could change her husband's short temper and outlook toward's life. She is thankful that he is not the dominating type. Both are striving to achieve a balance between their personal and professional life. The husband believes that the basis of a successful marriage is cooperation. There is no room for words like duties to each other. The wife believes that one should strive to be a good wife, daughter-in-law and mother and similarly it is the duty of the husband to be understanding to his wife and be a good son and father. She firmly believes that a good understanding of each other translates into a successful marriage.
Case Study - D

This couple lives with the husband’s father and mother along with the elder brother’s wife and children. The elder brother is a chartered accountant and because of his work is living away from his family. The father is a retired Indian Air Force Officer while the mother is a housewife. The sister-in-law is also a housewife. The husband and wife work at a doctor’s nursing home under the same roof. The wife is a gynaecologist while the husband is a physician. Theirs was a love marriage with the objection coming mainly from the woman’s side of the family. They have been married for six years and have a two year old daughter. The wife was a topper throughout school and a university gold medalist. Her father is a businessman and her mother is a housewife. There is no medical professional in the immediate families of both husband and wife. She feels that women usually specialize as gynaecologists as there is less competition with males for that specialization. Also she looks back and realizes that even in her family when someone was not well, her elders would prefer to call on a male ENT or paediatrician. Society in general prefers those specialities to be manned by males as they feel that men are better at it then women. Female body diagnosis and female doctors go hand in hand.

She also says that women do not prefer to specialize in anaesthesia and radiology as these require a good public relation (PR) network. One cannot work alone but needs to talk to male doctors and paramedics and ask them to send their patients and this kind of networking isn’t possible for women to perform. Besides
husband doctors don't prefer their doctor wives to undertake this kind of liaising.

In surgery, patients are more comfortable in having a male surgeon operate on them. Moving onto the topic of discrimination she said that male doctors have a tendency to magnify female doctors failings. A female doctors aberration is not only magnified she says but they are called a coward (darpok) because of their gender. She has experienced this kind of behaviour in her training and practice.

The husband feels that there is no gender discrimination on the part of the patients but in the medical profession this discrimination exists to a certain extent. Caste and social background discrimination exists a lot in this profession. Personally he has experienced institute discrimination as he feels that he would have been at an advantage had he studied at some well known medical college.

Both plan to have their own nursing home in another ten years time and right now are working hard to make money.

Once a week, the husband goes out of Agra to work in a rural set-up. Also he is on visits to another nursing home. The wife because of their child, works in one place. In Agra the wife has a better practice, than her husband. Both agree that being in the same profession is an advantage. The husband feels that he can have somebody of the same intellect as his life partner. The wife feels that her husband has furthered her career as one needs to have a steady
flow of patients to run the practice. Here her husband steps in. Though both agree that they do have ego clashes but since their speciality is different, this problem is allayed to a large extent. Being under the same roof the wife says that she is able to monitor her husband apart from being able to work along with him. The wife admits that she has this habit of microscopically examining every situation and a tendency to tell her husband what to do and how to behave, that results in a lot of fights. She does not like her husbands habit of drinking and chewing pan masala and has been trying to get him rid this habit. She also does not like his habit of using foul language and the company he is keeping which eventually leads to late nights and drinking. Socially the husband doctor presents a very poised and refined personality, infact his wit and charm had attracted her in the first place. She remembers how male doctors would scope out female gynaecologists and court them as they had their mind set on opening their own private practice and thus women gynaecologists were the most sought after at Medical College. The husband says that he has a different style of working, infact he attributes it to different personalities. Anyhow both believe that being caring and cooperative is the bedrock of a successful marriage.

The husband has an interest in politics and would like to, sometimes in the future be more involved in it as it would help him in having a certain position in society. Both of them would for a short period of time like to work up abroad as they feel that this would help them in setting up their practice. Also the wife has retained her maiden name as her husband says that this would help
her get patients of that caste as there are only two other doctors in Agra of that same caste. Talking of intergenerational change the wife says that at her mother’s present age, her mother has equal powers as her father but when she was her age (32 years) she did not have that much of a say (the mother is a housewife). She feels that she has more independence than her mother and also better communication with her life partner.

The husband says that he doesn’t like to do anything around the house—all he prefers to do is to plan the menu. They have both full time and part time servants that do the housework. The wife supervises the servants. As regards to grocery shopping – this is handled by his parents. The paying of utility bills is also done by his father.

The husband says that looking after the child is the woman’s job, he just plays with his daughter from time to time. The wife has her mother-in-law and sister-in-law pitching in to look after their daughter while she is at work. When she is at home she spend’s time with her daughter playing with her and looking after her needs. As regards to housework, they have servants for everything, including cooking meals. Occasionally, the wife would prepare something if the servant is on leave otherwise her mother-in-law and sister-in-law handle the kitchen.

In the decision making domain, between the couple, the husband takes all the decisions on big item purchasing while the wife looks after small household expenses. The husband has a tendency to single mindedly take decisions and implement them.
much to his wife’s chagrin. Recently he went ahead and bought an expensive car, even though his wife and his parents had advised him against it. Both of them pool their money for expenses and this was out of their jointly saved money. The husband acknowledges the fact that he is more dominating, to which his wife agrees as he always has the last say on everything. Their disagreements are mostly on money, family and leisure time utilization. The husband says that he has always handled disagreements tactfully, “one needs to be understanding and cooperative”. The wife feels that she has made a lot of adjustments in the marriage. She rues the fact that she can’t unburden her woes to her parents as her parents had objected to the marriage in the first place. She further adds that the choice & decision of marriage was hers as she didn’t believe in arranged marriages.

She and her husband want their daughter to become a doctor or an IAS and if by chance her daughter wanted to be an actress, or a model, than she feels that her husband wouldn’t allow it although she will be willing. Anyhow that is in the distant future and she hopes that perhaps her husband’s mindset will change.
Case Study - E

Having done their specialization in Lucknow and having worked there for near about 8 years, this couple decided to shift there base to Agra a year ago. The geographical relocation was the husbands idea. Both the husband and wife belong to Agra. The wife is a gynaecologist and she was having a successful private practice in Lucknow. The husband wasn't able to establish himself as an Anaesthesist and thought that he would be able to set up his practice in his home town. The husband and wife both believe that precedence should be given to the man’s career rather than be based on an individual’s ability. Besides, the wife says, she was confident of her ability to restart her practice. Right now she is working in a government set-up and having a reduced workload as she wants to take care of her 4 years old daughter. The husband’s widowed aunt (bua) stays with them and looks after the child when they go out to work. In Lucknow, the wife recollects, she used to till her daughter was a year old, bring her along to the clinic which was a stone’s throw away from her house as she could not get any trust worthy, reliable nanny. Her daughter would be placed in a crib in one corner of the room which was partitioned into two parts. Thus she would keep her eye on her daughter and work on her job. Of course her staff took care of the baby too. Fortunately, when her daughter was a year and a half old, they found a good long-term nanny who looked after the baby like her own child. The kid still remember’s her nanny very fondly and cajoles her parents to bring her to stay with them here. With her daughter in good hands, the mother was able to focus on her practice. The doctor wife is very particular and protective about her baby daughter as it was after great difficulty that she had managed to conceive.
It's a difficult life for me, she says as she loves her profession and she wants to be with her daughter. In Agra, they couldn't find a reliable nanny and as to her in-laws well she says she doesn't have a close relationship with them. Her side of the family is also not able to help out either as they are busy with their own grand children. Her husband's widowed bua is living with them but she is too old to look after an active, energetic four-year old. Working in a government set-up helps her to schedule her work hours to an extent so that either her husband or she is there with the daughter, though it is mostly the wife. The husband is busy working as a visiting doctor in three private clinics. They have purchased their own apartment here and are trying to save money for their own clinic. As the daughter gets a little bit older, the wife feels that she can devote more time to her profession.

What irritates her about her job is the interference of people—especially RMP's (Registered Medical Practitioner's). A doctor can only practice his profession if he/she is able to get patients. There is a lot of competition between RMP's and professionals and those with good liasing skills are able to get the patients. Her husband says that there are many doctors who pay intermediaries a certain amount of commission so that they can get patients from rural areas.

At home again we find a traditional set-up with the husband’s role as a breadwinner and the wife’s role as a homemaker. They employ servants to do all the housework right up to cooking food. The wife stresses the fact that she loves looking after her home and family and gives equal importance to both job and family. She loves teaching her daughter and is very particular about it. Her husband tries to spend time with his daughter and when he does, it’s always playing with her. They try to take time out twice or thrice a month to go on outings with their kid. The couple usually manage to spend an
hour or two together and prefer watching TV. The wife loves reading magazines too in her spare time.

The husband is talkative and gregarious, while the wife is reserved by nature. The wife feels that they are like two extreme poles with few similarities and a great many dissimilarities. They have been married for 8 years, theirs being an arranged marriage. There are many things that they don't agree on whether it be money, sex, in-laws, free-time utilization. As a result they have many discussions and many makeups. Actually she says after she and her husband moved to Agra, there have been quite a few arguments between them.

The husband and wife both feel that they have made a greater adjustment than the other in their married life. However, the wife maintains that its not easy trying to maintain a family life and be settled professionally.

In Agra profession-wise and monetary wise the husband is doing better professionally than the wife. The wife is happy about the fact that her husband has been able to settle down. She wishes her husband would learn to control his temper and listen more, instead of talking more and be less gullible. Quite a few people have misled him as he readily believes what he is told by his co-called well-wishers. Otherwise, she says she is happy to be in Agra.

What keeps their marriage ticking is their faith in one another. They've seen a lot of ups & downs professionally and in a few years time hope to settle down to a flourishing practice.