PREFACE

From the time immemorial history provides us with a varied picture of the status and role of women. Early child marriage and pardah system confined them to their homes. In most traditional societies, women generally were at a disadvantage. Their education was limited to learning domestic skills and they had no access to positions of power. Marriage was taken almost a necessity as a means of support or protection.

Sociological studies of women belonging to various cultures, regions and communities in India, have revealed that they have undergone a certain degree of transformation. The process of transformation not only involves changes in the material culture of the society but also in its belief system. The process of transformation changes the society from its backward outlook to a forward looking and progressive and prosperous structural build up.

The achievements in the field of science and technology, the rapid growth of industrialization and urbanization, the development of mass communication, and mass education facilitated the process of transformation. Revolutionary changes were also made in the field of women’s general education and in professional education, which in turn meant equalizing the status of women with men. These changes have touched the women of Kashmir as well.

The Kashmiri society which is traditionally a patriarchal and patrilocal society is undergoing a transitional phase. The family patterns are changing significantly and so are the traditionally defined roles of women. Women of Kashmir had practically no role outside the home in traditionally upper and middle class families. They had no role to play in the economic contribution of the family. The women of lower castes/class however were traditionally been allowed to work outside the home to support themselves and their family. The women of the higher caste/class were discouraged and prevented for searching work for economic gain.
For long time, opportunities for women in fields other than teaching were restricted. The legal and political professions did not open their doors easily to women. But after independence, women have entered in various professions e.g. medical, engineering, banking, journalism, administration, aviation etc. Today we see women in hot professions like computers, Information Technology, Bio-technology and Bio-informatics, Insurance, Private healthcare, Constructions Industry, hotel management, media and entertainment, fashion designing and Armed forces. There have been numerous studies of men and women in medical training and plethora of articles on the differences in income productivity and career constraints. Women are better represented in all places and in all specialties than they had been in the past women medics are encouraged to go into specialties which were earlier male dominated. It is also clear that once in practice, women physicians while highly productive and working continuously, are still rarely represented in the higher circles of the medical establishment as heads of medical schools, hospitals, large research institutions and prestigious clinical departments. It is also clear that some women medics are still having inclination towards traditionally female specialties pediatrics, family Medicine, Gynecology and Obstetrics, and Dermatology.

Thus today in the light of professions thousands of women are coming forward to bear the burden of work along with their fellow men in every walk of life. Thus it shows that women’s entry into medical profession has led to a change in their perception and performance of their domestic roles, besides expectations from others.

Thus the general purpose and objective of women’s education cannot be of course, different from the purpose and objective of men’s education. Women’s education should have a vocational or occupational or professional basis at the secondary and even at the university stage.

The women’s rights movement has made some progress. In more than 90 percent of the nation’s, women can vote and hold public office. Women in mainly nations have gained legal rights and fuller access to education and all professions.
As a consequence of socio-economic and technological changes in the developing societies, the human service professions, of which medicine is one have undergone dramatic changes. Specializations and super specializations have brought in segmentation and internal dissensions within the profession. Further due to divisions of labour, differentiation process has brought in a large battery for semi-professionals and para-professionals striking hard to attain autonomy in their professions.

The large scale changes among the Kashmiri women are reflected in the enhancement of their status and also the change in their role in human service professions particularly medicine. The change in the status and role showed a broad based social change among the Kashmiri women.

Many studies were conducted to know about the men and their role in medical profession. The present study was focused in the direction of knowing about the sociological aspects and problems of women in medicine. The present study attempts to analyse the changes that are taking place in the status and role of women medics in Kashmir. This study seriously intended to know about medical education and career constraints of women medics. The study was carried out through a micro sociological framework and the main focus was to see as to what extent women in medical profession had undergone social change. The study has also to examine the role played by women in medical profession. The change in status and role among the women medics had been studied through the important sociological variables viz. marriage, Age, Residence, Income (economy), Family, occupation, professional education and nature and experience of service in medical profession. There were no comprehensive reviews and studies about “Women in White”, which might give an insight about the social aspects of women in medical profession. The present study was focused in the direction of knowing about the sociological aspects and problems of women in medical profession.

This study of women in Medical Profession is an empirical one. The overall study was divided into six chapters. The first chapter was an introductory part of the study and it focused on the theoretical framework in which this study has been carried out. The second chapter was about methodology. This chapter discussed the purpose of the study,
objectives, hypotheses, methodology, universe of the study, sample of the study, fieldwork, methods and techniques of investigations, data processing and analysis and problems encountered during the data collection. The third chapter portrays the socio-economic profile of the women medics. This chapter presents the economic and educations background of the women medics. The fourth chapter explained findings of the study based on extensive field work in sociological frame work related to medical education, careers in academic medicine, occupational/professional mobility, relationship with colleague community, referrals and reciprocity, women medics and discrimination, women medics and private practice, women medics and impact and women social mobility, women medics and problems. The chapter encapsulated the themes of discussions and provides a sociological analysis of the research findings. The fifth chapter summarizes the study and presents the conclusion that can be drawn and finally the last chapter i.e. sixth chapter highlighted the suggestions of the study.