# WOMEN IN HEALTH CARE PROFESSION: OPPORTUNITIES AND CHALLENGES 

A Dissertation Submitted to the Faculty of Humanities and Social Sciences, Central Department of Sociology in Partial Fulfillment of the Requirements of the Degree of Master of Arts in Sociology

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## CHAPTER- ONE

## INTRODUCTION

### 1.1 Background of the Study

In contemporary times woman has contributed towards formal household economy. They started working outside household for earning money. This tendency has increased the workload of women. They now have to perform triple role. Nepalese society is basically patriarchal. Society gives more value to men when compared to women. Working women feel difficult to maintain pace with working environment office premise. Most of them had to manage time between household and outside work. Hospitals are service oriented institutions which are coming forward in the Kathmandu valley. The employees of hospital must be very hard working and must run faster in the pace of service oriented organization. Both men and women who are employed in hospitals are very busy. They must be strictly punctual, regular and hard working (Pradhan, 2012).

Women were economically less secured than men partly because their role as wife or daughter-in-law is limited to household activities. The concept of men as breadwinner has been widely accepted in Nepali society. Nepal's main economy is overwhelmingly subsistence agriculture and because women predominate in this sector, their total contribution to the household income remains at 50 percent as compare to only $44 \%$ for males and $6 \%$ for children between the ages of 10 to 14 . More and more Nepalese women are entering into job market today either because of their education qualification, economic necessity to run household and by the policy of government to include women. If one looks into the occupational distribution of families from 2001 to 2011 census, one would find in considerable increase in the proportion of women employed in services, professional and technical and sales services i.e. $10 \%$ in 2001 and 20\% in 2011(CBS, 2012).

Women have status, which is only secondary to that of men. This perspectives has been so internalized that the identity of a women is derived either from that of her father, her husband or her male child. The high ritual and other values attached to sons are against daughter, pronounced emphasis on gender specific socialization and highly gender-segregated access to household productive resources, income and to a
certain extend, household decision-making and schooling, paid economic participation, unequal access to public decision making structure and public facilities, among other, are the manifestation of this disparity (NEASC, 1998).

The urban woman has contributed towards household economy. They started working outside household for earning purpose. This tendency increases workload of women. They are performing triple role in household survival system. Nepalese patriarchal society value men more compare to women. They had access to control women feel difficult to maintain pace with working environment office premise. Most of them had to manage time between household and outside health institutions are very profit making institutions which are coming forward in our economy. The employees of health institutions must be very hard working and must run faster in the pace of profit making business. Both men and women who are employed in health service are busy enough. They must strictly follow rules and regulations about punctuality, regularly and hard working.

### 1.2 Statement of the Problem

Gender is a social variable which differenciate roles, responsibilities and status of men and women. At past with the existing social circumstances men in general were categorized as breadwinner. They took prime responsibility to sustain livelihood of family members.

At present this sinerio is changing. Women have begun to contribute towards households' economy but their contribution is overlooked and not recognized. Mostly women wake up early and sleep late than men but their work is known as no-work. Thus they are over burdened with triple role. Hospital is social institution in which the employee has to devote a lot of time physically and mentally.

Acharya and Bennett stated that in the developing countries like Nepal; women's role in economic activities is unidentified. Men are considered as bread earner and women as care taker of households. Women are the primary supporters of the domestic and subsistence sector. The time allocation studies and the decision making data revealed women's major role in an agriculture production both labors and managers of the production process they also claimed that a host of social and demographic factors
also influence women's role in household decision making both directly or indirectly through their effect on women's economic participation. Thus the cost of living is becoming very high in order to help household economy, source of income earned by women from jobs outside the house has become essential.

Problems that are selected for this study will be as follows:

- How do the women in health care profession cope up with their dual role as homemakers and employed women?
- What changes in terms of their status in the family have occurred due to their earnings?
- What are challenges faced by the women working in health care profession?


### 1.3 Objectives of the Study

The general objective of the study is to understand the status and satisfaction of employed women. The specific objectives of the study are as follows:

- To identify the women in health care profession cope up with their dual role as homemakers and employed women.
- To identify the changes in terms of their status in the family occurred due to their earnings.
- To find out challenges faced by the women working in health care profession.


### 1.4 Rationale of the Study

Undoubtedly, men and women are vital parts of society. Thus absence of one of them will disorder the social system. Sadly but truly, society has created different forms of discrimination between male and female on the basis of their sexes. Numerically women are not in minority, it is obvious that women constitute half of the total population of the world. By limiting women's participation in any development process, society deprives themselves of the full talent of half of their numbers. Women in the rural areas contribute equally in agricultural labour besides their domestic/household burden of rearing and caring. There is a saying that "for men's work ends at setting sun, yet women's work is never done"(Acharya, 1979). No matter, whether women works eleven hours or twenty two hours per day their work is
considered as economic work. The position occupied by women in social structures of her society that includes power, prestige, right and duty is called women status (Acharya, 1979).

Though research on women participation in different occupations had been carried out, status of employed women of different hospitals of Kathmandu have not be adequately researched. In spite of the fact that in the development of the hospital sector women play vital role, their contribution and problems are not highlighted and regarded as worthwhile. Therefore a study in this field seems necessary. The present study will be beneficial to the people, the nation and also to the coming researchers. I hope this study will provide more literature in the status of employed women. I believe it will help the planners, researchers, and INGOs, NGOs and Ministry of Women and Social Welfare that set the program for the enhancement of the status of women.

### 1.5 Organization of the Study

The study has been organized into five chapters. Chapter one includes general background of the study, statement of the problem, objectives of the study and rationale of the study. Chapter two includes the review of literature. This chapter includes theoretical literature review and empirical literature review. Chapter three contains the research methods. This chapter includes site selection \& rationale, research design, unit of the study, universe and sampling, nature and sources of data, tools and techniques of data collection, data processing, analysis and presentation and limitation of the study. The fourth chapter comprises background of respondents, which includes socio-economic characteristics of the respondents, level of satisfaction among women employees of Gangalal hospital of Kathmandu etc. The fourth chapter also comprises data analysis and interpretation and the fifth chapter comprises findings, conclusion and recommendation.

## CHAPTER -TWO <br> LITERATURE REVIEW

### 2.1 Theoretical Literature Review

Status of women is an important factor, which affects the socio-economic, development of a country. It is known that status is not a fixed or rigid concept, it changes with time. So the status of women also changes with time. Status has been defined in different ways. The United Nations has given the definition of women's status as " The conjunction of position a women occupies as a worker, student, wife, mother or the power and prestige attached to these positions and of the right and duties she is expected to exercise" (CBS, 2010). Educational environment, social nature, health, status and many other factors determine the status of women. In Nepal women are treated as second-class citizen, this itself explain how pathetic social position they have. They are born, as daughter became sister, wife and mother. They don't have their self-identity. They are denied property right, political right and power. Women do not have control over their own body. No matter how hard they work for their family and country they are placed into lowest rank. They are restricted to be part of public life.

The distribution of power is the most important structural difference between socialist and capitalist societies. Under socialism the party and its government officials decide what wages are paid for each kind of work, which good and services are produced and in what amount and how goods and services are distributed, they should be non economically based social conflict in socialist societies because the state supposedly act in the best interests of everyone. In existing socialist societies, however there is a conflict between the workers the state that tries to control them. Labor power is less likely to be sold as a commodity in socialist countries than it is in capitalist societies (Shrestha, 2002).

Radical Feminists believe that the low status of women in society is due to patriarchy. Patriarchy is a system of society in which men dominate women, children and major social institutions. Men control business and Hospitaling, government, religious organizations, the mass media, school and universities, legal and creational systems, prestigious processions such as law, medicine and science, the military and most of
the nation's wealth, women's power is more likely to be focused on traditionally female concerns such as child care than on male-dominated areas such as economic policy. Women also derive power from their unique position as a minority, for while virtually all other minorities are segregated from those who dominate them, intimate relationship between men and women lie at the heart of the most universal of all social institutions, marriage and the family. Although women are a minority, most women also live in relationship in which they depend on men and men depend on them. Social structure distributes power unequally between women and men in complex ways (Shrestha, 2002).

The contribution of women to economic activities in various fields is no less than that of men. To understand the actual economic condition of women obstacle that continues to make recognition of women's full potential steams from obstinately held narrow concepts regarding women. In a patriarchal society rather envision of a human society of men and women where the other does not dominate the personality of one sex. The mere difference in physical structure does not make it necessary for one sex to lose complete human identity and live in surrender to the other sex in order to bring about true gender equality in the attitudes of the family and society towards women. This can only be brought about when the women themselves-their own ideas and feelings. Such sharing of real feelings among women will bring them into the process of empowerment. Nowadays development workers have started talking a lot about women's participation because they have finally realized how important women's involvement is, in every aspect of daily life (Shrestha, 2002).

### 2.2 Empirical Literature Review

The some relevant empirical study was related to explore the situation of women in different sector is given below.

Chauhan, (2010) in her study "Changing Status of Educated Employed Women in Nepal (A Case Study of Kathmandu)" found that as in other developing countries women in Nepal are mostly engaged in house-hold work and employed in lower and have to bare double burden of house work and office work due to various reasons.

Bhusal (2010) analyzed the contribution of women in different sectors like industrial sector, household sector, rural markets, etc. Women are as men in the unorganized sector, in the poorer as well as in the richer parts as the world. Legislation that grants generous benefits specific to women, such as maternity leave, child care facilities or exception from night work, make it more expensive to hire women in the formal sector, especially when such benefits are financed mainly by the employers. Even in the richer parts of the world, there has been an understandable and persistent trend towards preferring men to women in permanent core jobs of the formal sector; Women generally find employment in peripheral jobs of the larger units as temporary, contract or part time workers. The lack of interest in unionism among women workers does not result from any inherent characteristic of women as such (Bhusal, 2010).

During the Rana regime (1846-1951) Nepalese women were socially, politically, economically and religiously handicapped. But in this period, the women of other countries, especially of western countries; had achieved greater freedom in many fields. In Nepal, however the disparity between men and women in all fields was considerable. The social position of women was regrettable. Politically, they were nowhere. Religiously, their position was like that of a Sudra. (Sudra is the lowest of four Hindu caste, other being Brahman, Kshatriya and Vaisya; Sudra is also treated in Hindu society as untouchable (Bhusal, 2010).

He added that there were many ethnic of religious groups in Nepal; therefore, all women of these groups had no similar social status during the period. But the differences were not so considerable. Socially and religiously, the status of the women of same ethnic or religious groups could be a little better or little worse than the women of other ethnic or religious groups but, politically, economically and legally all women of all the groups were at the same level.

Pandit (2010) mentioned that women's participation at local level, specially village in development activities as well as decision making process has increased, through it is not satisfactory, women participation in the decision making activities has been less effective due to social structure and cultural norms, which assign women only secondary roles. Women are mostly confined to household chores. As a result, they have very less time to spend in social and development activities. Furthermore, women are not getting opportunities to share their views and experiences in important
forums. Women have to be exposed to income generation activities to make them dependent. Education can be one of the successful tools to fight against all sorts of discrimination and injustices. So the future generation needs to the educated and their skills have to be promoted to make them politically conscious and take various important responsibilities (Pandit, 2010).

Parajuli (2010) mentioned that discrimination between males and females starts in the family. Females are not included in the decision making process, and the opportunities and benefits available in the society are monopolized by males. Women's participation in socio-cultural and political activities depends upon the attitudes of their husbands/fathers/parents/male relatives (Parajuli, 2010).

Nepalese society, being patriarchal, people still does not see women politicians as their leaders, no matter how capable they are. They tend to see them through the prism of social roles as sister, wife and daughter-in-law etc.

Community upon the difference between pre and post 1990 years, almost all the women respondents stated that in the post 1990 days, "women have the opportunity to speak and exchange views with their husband, to participate in public forums, institutions and political parties, and also get elected in different tiers of local government bodies, particularly the VDCs, but they also pointed out that women still are not often encouraged to participate in socio-cultural and political activities.

Ghimire (2010) mentioned that women work 16.66 percent extra hours than those of men in domestic and subsistence economy. However, their social and economic status remain bathless recognized and more inferior to their male counterparts. Women are found working for an average 11 hours a day while men folk work for only 8 hours. This too speaks volumes of the fact that women make greater participation, 28.18 percent women are found to have been earning about Rs. 5,000 to 10,000 annually while still continue with their traditional household chores. Likewise 22.56 percent of are found to have been earning Rs. 1,000 to 5,000 annually. Women who only perform the household and domestic works are found to have been 10 percent. Considering the volume of women participation in agriculture, the change in traditional approach to both agriculture process and product is just inevitable. Most of the women are found to have been suffering from gastric problem, several headache
and maternal problems. The village women, in lack of literacy and health awareness, rush to faith healer and witch doctor for remedies. Only 41.81 percent of them are found to have been consulting doctors for remedies (Ghimire, 2010).

Pradhan, (2012), in her study entitled "The Status of Women in Nepal" found that women are economically less secured then men partly because their role as wife or daughter-in- law is limited to household activities. The number of economically active female population was 172,716 in Kathmandu city in 2011. The concept of men as breadwinner has been widely accepted in Nepali society. Nepal's main economy is overwhelmingly subsistence agriculture and because women predominate in this sector, their total contribution to the household income remains at 50 percent as opposed to only $44 \%$ for males and $6 \%$ for children between the ages of 10 to 14 . More and More Nepalese women are entering into job market these days either because of economic necessity or in search of new career. If one looks into the occupational distribution of families from 1971 to 2001 census, one would find in considerable increase in the proportion of women employed in services, professional and technical and sales services.

Khanal, (2012) in her study "Status of Employed Women in Kathmandu" found that despite the dearth of employment opportunities the range and cover, which the woman's in Nepal show even now, is ended quite respectable. From self-employed subsistence level farming to village and urban small time entrepreneurship is a big jump, and professional level, government jobs beginning from the post of peon and non-gazette posts to decision making levels and ambassadorship aboard, teacher to professor, midwifery to medical doctor and consultants, agricultural extension workers to agricultural export in different branch of agriculture and social workers to minister, police constables to police inspector etc. In addition, women are found as coach in sports, trainer in carpet and textile weaving, basketry and pottery, workers in small industrial sectors and non- governmental enterprises. In the urban areas, quite a few women are self-employed in the service sector. In the industrialized world women perform half of all service jobs although the figure falls to 27 percent in the developing countries. Women are on average paid less than men, even in industrialized countries. Generally, women are a large of the clerical, sales and
services labor force but are largely excluded from manufacturing, transport and management.

Thapa, (2012) in his study entitled "Socio-Economic Status of Women in Nepal", found that in Nepal, the civil code (Mulukiyin, 1904 A.D.) guaranteed right to women by abolishing untouchable, caste, sex discriminations, child marriage, polygamy a incompatible, marriage, however gender discrimination still widely persist both within the law and in its customary application. Its amendment in 2006 greatly enhance the cause of equal rights for woman by amending law in governing marriage, divorce, property rights and inheritance. Now the civil code 1994 has eleventh amendment to give an equal property right for daughter with her brothers, but not shows the reality in our societies.

From above literature it was found previous studies were done in different aspect of women like changing status of educated women, status of women in Nepal and socioeconomic status of women. From the study it was found women in self-employed subsistence level farming to village and urban small entrepreneurship is very few in number. In addition, women are found coach in sports, trainer in carpet and textile weaving, basketry and pottery, workers in small industrial sectors and nongovernmental enterprises. In the urban areas, quite a few women are self-employed in the service sector.

Many researchers have researched on women participation of different occupations such as hotels, casinos, carpet factories, banks, garment factories, small industries and big industries etc. Similarly, study on women participation in governmental sector had been done. But the study on the status of employed women of different hospitals of Kathmandu is less conducted from socio-economic perspective. Though women play as vital role as men do in hospitals, economy and society they are not given that much importance as men get. Keeping this in mind researcher has decided to study on women employees of different hospitals of Kathmandu valley in order to find out their actual socio-economic status, their satisfaction level in terms of salary and working environment and to find out their actual daily lives such as their need and difficulties. So, this study will be fruitful to those interested person parties scholars, professor, students, and government for academically as well as policy perspective.

## CHAPTER -THREE

## RESEARCH METHODS

### 3.1 Site Selection and Its Rationale

Women in Health Care Profession: Opportunities and Challenges has been selected purposively. It is more reliable data available for study as well accessible in time, money and access. Very few studies have been carried out about status of employee women in Kathmandu valley on socio-economic status of women using sociological perspective. As, there is limited time and resources for study, this area is selected because at present the researcher is living in Kathmandu district.

### 3.2 Research Design

This research follows a descriptive as well as explorative research design. This research study is focused on accumulating the facts of women in health care profession: opportunities and challenges. A descriptive method give description about the women status and satisfaction level (in terms of salary, working environment and cooperation from co-workers) of women employees of women in Shahid Gangalal National Heart Center in Kathmandu with respect to their age, educational level, marital status, family size, caste, resident, access to property, wage structure, working experience, ...etc.

Explorative research design explores the cause and effect of women employees on socio-economic status in household affairs which are unseen until today.

### 3.3 Unit of the Study

The unit of the study in this research is the women employees of social organizations. Information related to individual workers are collected from all the women workers of Shahid Gangalal National Heart Center in Kathmandu. Kathmandu valley is selected as the universe of the study. One hospital from Kathmandu, has been selected purposively.

### 3.4 Universe and Sampling

The list of the women employees of Shahid Gangalal National Heart Center is made from the office of concerned hospital. Total women employees of Shahid Gangalal National Heart Center are the universe of the study. There are 250 employees working in Shahid Gangalal National Heart Center which is taken as universe of this study. Firstly, the universe is stratified various categories and the sample has been selected accordingly. Universe is classified on the basis of age, educational level, economically as well large, medium and small. This procedure is to include the information of large to small scale social status. Due to limit time, money and for fulfillment the requirement of MA degree from Shahid Gangalal National Heart Center 50 women employees have been purposively selected for making the sample representative.

### 3.5 Nature and Source of Data

There are two types of data: qualitative and quantitative. Qualitative data includes interview transcripts, recordings and notes, observational records and notes, etc which is helpful to examine those factors which can not be quantified easily or practically. Quantitative data is helpful for examining the variables like age, sex, and other socioeconomic demographic variables.

Primary and secondary sources of data are used in this study. The Primary data has been collected directly from the Hospital using interview schedule and some observation, etc. The secondary sources of data are collected from different magazines, newspaper, websites, Ministry of Health, Central Bureau of Statistics publication etc.

### 3.6 Tools and Techniques of Data Collection

In order to carry out any research and draw reliable and meaningful data the methods and techniques of data collection must be precise and accurate. Different techniques such as interview, group discussion, informal interaction and observation are used for the collection of necessary information. An interview schedule mixed questionnaire is used for gathering socio-economic characteristics of data. Interview, group
discussion, informal interactions are the best technique to assess the unseen facts of the employed women easily. These specific techniques will be used as per the convenience of the researcher for collecting different types of data.

### 3.7 Data Processing, Analysis and Presentation

Both the primary and secondary information collected from the field in a descriptive way are edited, coded, tabulated and analyzed properly. On the basis of given procedure, different statistical tools like table, percentage are used in the study depending on the nature of variables. In the presentation section there is much description and elaboration with the use of qualitative information.

### 3.8 Limitation of the Study

As every study has some limitation, this study also has some limitations which can be given as follows:

The study is simply try to explore the situation of employed women of Shahid Gangalal National Heart Center of Kathmandu, so further some more studies need to be conducted in the future. The study has not cover extent area due to limited time and resources. It mainly focused on employed women of Shahid Gangalal National Heart Center of Kathmandu. So it does not cover overall socio-economic status of all Hospitals as well as others

## CHAPTER FOUR

## SOCIO-ECONOMIC CHARACTERISTICS AND CHALLENGES FACED BY RESPONDENTS

This chapter has analyzed the data collected from primary sources. Though our society is patriarchy but the way of viewing women used to get different when she start to do job and earn money. Not only that much her socio-economic status also used to be high when she is employed and contribute for family and society. The following analysis shows the changing pattern of socio-economic status of 50 women employed in Shahid Gangalal National Heart Center of Kathmandu.

### 4.1 Socio-economic Characteristics of the Respondents

This chapter has analyzed the data collected from primary sources. More specifically this chapter presents the socio-economic characteristics and level of satisfaction of the employed women of Shahid Gangalal National Heart Center of Kathmandu.

Socio-economic characteristics of the respondents on the basis of the variables directly related with the women employed in different Shahid Gangalal National Heart Center of Kathmandu from the sampled 50 employed women in this sector is found as follows.

### 4.1.1 Age of the Respondents

There is relationship between age and employed women. It is expected that women with young and middle age group participated in the outside world for working and run their dual role as a housewife and as a worker. Below given table presents the age structure of the employed women of Shahid Gangalal National Heart Center of Kathmandu. On the basis of data collected in Shahid Gangalal National Heart Center of Kathmandu the age group of the respondents has been divided into five major groups that is the age between 20-25, 26-30, 31-35, 36-40 and above 41 years.

Table No. 1: Age of Respondents

| S.N. | Age Group | Number of Respondents | Percentage of Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Between 20-25 | 12 | 24 |
| 2. | Between 26-30 | 21 | 42 |
| 3. | Between 31-35 | 15 | 30 |
| 4. | Between 36-40 | 2 | 4 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

Above distribution of the respondents by age group shows that out of 50 respondents, 24 percent were from 20-25 age group, 42 percent were from 26-30 age groups, 30 percent are from 31-35 age group, 4 percent were from 36-40 age group and there is no respondents belongs to above 41 age group.

This data shows that most of the respondents were in 26-30. This indicates that the women with young and middle age range participated in the outside world for working and run their dual role as a housewife and as a worker. And, the absence of respondents belong to above 41 age indicates that the trends of involving in hospital job is recent and emerging trend. It signifies the changing status of job opportunity then and now.

### 4.1.2 Caste/ Ethnic of the Respondents

The main castes of Kathmandu city are Newar, Brahmin, Chhetri, Tamang, Gurung, Magar and Rai. Among them Newars are more than others because of the local residents of Kathmandu. The caste of the respondents is distributed broadly into four main heading that is Newar, Brahmin, Chhetri and others. 'Others' includes like Gurung and Rai.

The table 2 indicates that out of 50 respondents, 20 respondents were Newar, 13 respondents were Brahmin, 15 respondents were Chhetri and 2 respondents were others (Gurung, Tamang, Magar and Rai) respectively. It indicates that respondents from the Newar community comprises of 40 percentages. The second highest is Chhetri that is 30 percentage, the third is Brahmin that is 26 percentage and the least are from the others group (Gurung and Rai), which is 4 percentage of the total.

Table No. 2: Caste of the Respondents

| S.N. | Caste | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Newar | 20 | 40 |
| 2. | Brahmin | 13 | 26 |
| 3. | Chhteri | 15 | 30 |
| 4. | Others (Gurung and Rai) | 2 | 4 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

From the table 2, it can be concluded that the majority of respondents are from the Newar community, probably because they are the local residents of Kathmandu and have business relation through their parents. But, the absences of dalit respondents indicate that the access of dalits in job opportunity may either still marginal or nil.

### 4.1.3 Religion of the Respondents

Religious is concerning religion. A person or behaviour obeying the rules of a religion very carefully and performing duties very carefully as a matter of conscience. The religion of the respondents is discussed into three main headings. They are Hindu, Buddhist and others. Religion other than mentioned here are included in 'others'.

Table No. 3: Religion of Respondents

| S.N. | Religion | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Hindu | 42 | 84 |
| 2. | Buddhist | 8 | 16 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014
The table 3 shows that out of 50 respondents 42 are Hindu and 8 respondents are Buddhist respectively. It shows that respondents from the Hindu religion comprise of 84 percentage and respondents from Buddhist religion comprises 16 percentages. There is no respondents belongs to others religion found from this study.

The table 2 indicates that the majority of respondents are from the Hindu religion, probably because majority of people in Nepal follow Hindu religious. Most of newars respondents in Kathmandu are Hindu community though there are 20 newars. It indicated that all newars do not follow Buddhist religion. But, the absences of other religion respondents indicate that the access of other religion in health related job opportunity remain little.

### 4.1.4 Education of the Respondents

Education enhances the performance and ability of people. There is positive relationship between education and employment opportunity. Higher the level of education higher will be opportunity to get job. The level of education among the respondents has been divided into 4 major groups i.e. Intermediate, Bachelor, Masters and above Masters level.

Table No. 4: Education of the Respondents

| S.N. | Educational Level | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Intermediate | 28 | 56 |
| 2. | Bachelor | 15 | 30 |
| 3. | Masters | 7 | 14 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014
From the table 4 it shows that out of 50 respondents 28 , 15 and 7 were found Intermediate, Bachelor and Masters respectively. But there is no respondent belong to above Masters Level. This clearly indicates that higher percentage of respondents 56 percentage were found intermediate passed, 30 percentage were Bachelor passed and 14 percentage i.e. 7 numbers were found Masters Level passed. But the respondents with above Masters Level of education were not found. Respondents with intermediate level were very low i.e. only two percent and one in number.

Most of the hospital need intermediate degree holder for the junior post. Therefore intermediate is the required education in order to enter hospital. Therefore study indicated that the women working in the Shahid Gangalal National Heart Center of Kathmandu are intermediate and bachelor level. It indicated that there is increased in women education and their access to job opportunity. It was also found that there
were competitive feelings among co-worker regarding their education level as most of respondents were intermediate and bachelor level passed.

### 4.1.5 Marital Status of the Respondents

Marital status of the respondents has been divided into 3-sub division i.e. married, unmarried and widow group. Distribution of the respondents on the basis of marital status as above shows that 60 percent of the respondents are married and 40 percent of the respondents are unmarried. No respondent found widow respectively. It means that among 50 respondents, 30 respondents are found married and 20 respondents are found to be unmarried.

Table No. 5: Marital Status of the Respondents

| S.N. | Marital Status | Number of <br> Respondents | Percentage of <br> Respondents |
| :--- | :--- | :--- | :--- |
| 1. | Married | 30 | 60 |
| 2. | Unmarried | 20 | 40 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

The table 5 shows that most of the employed women are married. They have to balance life between their housework and office-work. They have work load because they feel financial pressure. It is quite a difficult situation yet the women seem to manage it, because this occupation has been established as a respectable line of work. Among 30 married respondent $80 \%$ had arranged marriage and $20 \%$ had love marriage. Similarly, Among 30 married respondent, $80 \%$ of the respondents had marriage within caste while $20 \%$ had inter-caste marriage.

### 4.1.6 Family Types of the Respondents

Family is any group of people related by blood or marriage, especially a group of two parents and their children. Family has been divided into 3 -sub division i.e. joint family, nuclear family and extended. Table given below presents the distribution of respondents according to family types of the married as well as unmarried respondents in Shahid Gangalal National Heart Center of Kathmandu.

Table No. 6: Distribution of the Respondents by Family Types

| S.N. | Marital <br> Status | Joint Family |  | Nuclear Family |  | Total |  |
| :---: | :--- | :---: | :---: | :---: | :---: | :---: | :--- |
|  |  | Number | Percent | Number | Percent | Number | Percent |
| 1. | Married <br> women | 21 | 70 | 9 | 30 | 30 | 60 |
| 2. | Unmarried | 8 | 40 | 12 | 60 | 20 | 40 |
| Total |  | 29 | 58 | 21 | 42 | 50 | 100 |

Source: Field Survey, 2014
The table 6 shows that out of 30 married respondents, 9 respondents had nuclear family and 21 respondents had joint family respectively. It indicated that 70\%-married respondents had joint family and only $30 \%$ married respondents had nuclear Family. From the above table it can be said that married employed women prefer to live in joint family than the nuclear family may be because employed women have to look after their family and outside work at the same time, which sometimes can not be possible. So living in joint family can be helpful in such situation.

Above given table also presents the distribution of respondents according to family types of the unmarried respondents in Shahid Gangalal National Heart Center of Kathmandu.

Above table presents the distribution of the unmarried respondents, which were 20 respondents. Out of 20 unmarried respondents 8 respondents live in joint family and 12 respondents live in nuclear family respectively. This finding indicated that out of 20 unmarried respondents, $60 \%$ respondents live in nuclear family and $40 \%$ respondents live in joint family. It seems that living in nuclear family is increasing now a days. Most of the respondents used to live with husband and father and mother in-law in their family.

### 4.1.7 Respondents on the Basis of Hours Spent on their Household Chores

Below given table presents the distribution of the respondents according to how many hours they spent on their household chores. Hours divided into 4 main groups i.e. not at all, 1-3 hours, 4-5 hours and above 6 hours. Below table shows that out of 30
married respondents, 3 respondents respond that they do not work at home, 6 respondents work 1 to 3 hours 15 respondents spent on their household chores 4 to 5 hours and 6 respondents spend more than 6 hours working on household chores. This means $50 \%$ respondents spent 4 to 5 hours, 20\% respondents work more than 6 hours on their household chores, 20\% respondents work 1 to 3 hours and $10 \%$ respondents do not work at their home. Thus it can be concluded that married respondents who were working in Shahid Gangalal National Heart Center have not so much burden of household chores because they have helpers to help them.

Table No. 7: Distribution of the Respondents on the Basis of Hours Spent on their Household Chores

| S.N. | Hours | Married <br> Respondents |  | Unmarried <br> Respondents | Total |  |  |
| :---: | :--- | :---: | :---: | :---: | :---: | :---: | :--- |
|  | Number | Percent | Number | Percent | Number | Percent |  |
| 1. | Not at all | 3 | 10 | 5 | 25 | 8 | 16 |
| 2. | $1-3$ hours | 6 | 20 | 2 | 10 | 8 | 16 |
| 3. | $4-5$ hours | 15 | 50 | 8 | 40 | 23 | 46 |
| 4. | Above 6 <br> hours | 6 | 20 | 5 | 25 | 11 | 22 |
| Total |  |  |  |  |  |  |  |

Source: Field Survey, 2014
The table 7 also shows that out of 20 unmarried respondents, 5 respondents do not work at home, 2 respondents spent 1 to 3 hours on her household chores, 8 respondents spent 4 to 5 hours and 5 respondents spent more than 6 hours respectively. It means respondents who spent 4 to 5 hours on their household chores are $46 \%, 16 \%$ respondents do not work at their home, $22 \%$ respondents spent more than 6 hours and only $16 \%$ respondents spent 1 to 3 hours on their household chores. This finding indicates that unmarried respondents do not have very load of household chores because most of the respondents have helpers to help them.

Thus we can say that in one hand these respondents have to work more than 6 hours at home and on the other hand if they do not want to work at home they can do so, which means there is no heavy pressure for them to look after both household chores and the office work. They often have to wash dishes, cloth and prepare food
themselves in their home. Some of the respondents used to hire helper for household support.

### 4.1.8 Decision Making Power of the Respondents at Home

The below given table unfolds that the married respondents have also got the decision making position at their home. Decision level divides into 4 headings that means high, medium, low and not at all. Here, the women with high position in making decision are those who play vital role to make decisions in economical and other family matters in comparison to their male partners. Likewise the medium positional women are those who are asked to present their view on the economical and other family matters. The low positional women are those who are very rarely can present their view on the economical and other family matters.

Table No. 8: Distribution of the Respondents on the Basis of Decision Making Power

| S.N. | Position | Married <br> Respondents |  | Unmarried <br> Respondents | Total |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :--- |
|  | Number | Percent | Number | Percent | Number | Percent |  |
| 1. | High <br> position | 12 | 40 | 3 | 15 | 15 | 30 |
| 2. | Medium <br> Position | 15 | 50 | 15 | 75 | 30 | 60 |
| 3. | Low <br> position | 3 | 10 | 2 | 10 | 5 | 10 |
| Total |  |  |  |  |  |  |  |

Source: Field Survey, 2014
The table 8 shows that out of 30 married respondents, 12 respondents have high position in decision-making, 15 respondents have medium position and 3 respondents have low position in decision-making but there is no respondent found having almost insignificant position in making decision. It indicates that $50 \%$ respondents have medium position, $40 \%$ respondents have high position and $10 \%$ respondents have low position but there is no respondent found having almost insignificant position in making decision.

The table 8 also shows that out of 20 unmarried respondents, 3 respondents have high position, 15 respondents have medium position, 2 respondents have medium position, 2 respondents have low position but no respondent found having almost insignificant
position in making decision. It indicates that $75 \%$ respondents have medium position, $15 \%$ respondents have high position, and $10 \%$ respondents have low position but no one have insignificant position in making decision. It indicates that unmarried respondents are also taken seriously on their decision. Most of the respondents have medium position in decision making. It is because of their higher economic status which can influence other family members. Regarding the enter into job they came with advice of family members. Family member agree with their decision at home before and after job.

### 4.2 Access of Property, Sexuality, Decision Making and Participation on Social Activities

### 4.2.1 Decision Making Power in the Office

Decision making power relies on the basis of their designation. Below given table presents the distribution of the respondents on the basis of their designation. It is divided into six main groups such as trainee, assistance, officer, senior officer, and chief.

Table No. 9: Distribution of the Respondents on the Basis of Decision Making Power

| S.N. | Designation | Number of <br> Respondents | Percent |
| :---: | :---: | :---: | :---: |
| 1. | Assistance | 27 | 54 |
| 2. | Officer | 2 | 4 |
| 3. | Senior Officer | 3 | 6 |
| 4. | Supervisor | 6 | 12 |
| 5. | Chief | 12 | 24 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

The table 9 shows that out of 50 respondents, 27 respondents are assistance i.e. $54 \%$, 2 are Officers i.e. $4 \%, 3$ are Senior Officer i.e. $6 \%, 6$ supervisors i.e. $12 \%, 12$ are Chiefs i.e. $24 \%$.

The finding shows that out of 50 respondents, 17 respondents i.e. $34 \%$ holds officer's position and 33 respondents hold non-officer position i.e. $66 \%$. The finding indicates women in officer position are less compare to non-officer position. The ratio of officer to non- officer for women is lesser than men. Thus it affects the women's decision making power. Other staffs also support their decision in the office.

### 4.2.2 Respondents on the Basis of Their Salary

Below given table presents the distribution of the respondents on the basis of their salary. Salary has been divided into six main groups.

Table No. 10: Distribution of the Respondents on the Basis of their Salary

| S.N. | Income (monthly) | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Rs. 20000 to Rs. 25000 | 25 | 50 |
| 2. | Rs. 25000 to Rs. 35000 | 15 | 30 |
| 3. | Above Rs. 35000 | 10 | 20 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

From table 10 it shows that out of 50 respondents, 25 respondents (50\%) earn between Rs. 20,000 to $25,000,15$ respondents that is $30 \%$ earn between Rs. 25,000 to Rs. 35,000, and 10 respondents ( $20 \%$ ) earn above Rs. 35,000 per month. Finding indicated that respondents who earn between Rs. 20,000 to Rs. 25,000 are more, respondents who earn Rs. 25,000 to 35,000 is second higher, and respondents who earn more above Rs. 35,000 is third higher which means salary wise women working in Shahid Gangalal National Heart Center is economically secure. From the study it was found that there is no difference in salary for men and women of the same level. They are satisfied with their job

### 4.2.2.1 Respondents on the Basis of Satisfaction Level with Salary

Table given below presents the distribution of the respondents on the basis of satisfaction level with salary. Satisfaction level with salary is divided into three main groups such as fully, partially and not at all.

Table No. 11: Distribution of the Respondents on the Basis of Satisfaction Level with Salary

| S.N. | Level of <br> Satisfaction | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :--- | :---: | :---: |
| 1. | Fully | 7 | 14 |
| 2. | Partially | 37 | 74 |
| 3. | No at all | 6 | 12 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

The table 11 shows that out of 50 respondents, 7 respondents are fully satisfied with the salary they get in Hospital, 37 respondents are partially satisfied and 6 respondents are not at all satisfied with their salary. This finding indicates that $74 \%$ respondents are partially satisfied with their salary, $14 \%$ respondents are fully satisfied and $12 \%$ respondents are not at all satisfied with their salary. From this finding we can claim that most of the respondents are not happy with the salary they get. These respondents say that in comparison to their hard work their salary is not satisfying.

Table 11, while being compared $30 \%$ respondents were fully satisfied with their job while $14 \%$ respondents were fully satisfied with their salary, it indicates that women who are satisfied with their job not only give preference to the salary but they were also looking at good environment where they can work easily.

### 4.2.3 Respondents on the Basis of Assets Owned

From the study researcher found that all the assets were bought from their salary. Few of the respondents also told that salary had bought land on own name and few of them also had motorbike. It implied that their economic status is high as compare to other women working in other sectors. They have some property in their name. Most of the respondents join this job before marriage and husband support them. Most of the respondents join this job for 6 months.

Table No. 12: Distribution of the Respondents on the Basis of Assets Owned

| S.N. | Assets | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :--- | :---: | :---: |
| 1. | T.V. | 50 | 100 |
| 2. | Computer | 27 | 54 |
| 3. | Washing Machine | 21 | 42 |
| 4. | Vacuum Cleaner | 25 | 50 |
| 5. | Telephone | 50 | 100 |
| 6. | Freeze | 50 | 100 |
| 7. | Music System | 50 | 100 |

Source: Field Survey, 2014

The table 12 shows that, all the respondents had T.V., 27 of them i.e. $54 \%$ are using computer, 21 of them i.e. $42 \%$ are using washing machine, 25 of them i.e. $50 \%$ have vacuum cleaner, 50 of them i.e. $100 \%$ are using refrigerator, 50 of them i.e. $100 \%$ are using telephone and 50 of them i.e. $100 \%$ are using music system.

This finding shows that these respondents have those equipments with which it became easy to do household chores. Similarly, it also shows that they get chance to get entertainment from equipment like T.V. and music system. Having above equipments on their home means employed women don't have to waste too much of their time on washing clothes and cooking. Having these assets is also one indicator of their economic status, which shows their economic status, is high.

### 4.2.3.1 Respondents on the Basis of Property Owned

From the study respondents were asked whether they get any property from their parents. Nobody told yes. It was found that all the assets were bought from their salary. Some respondents got property from parents. Respondents were again asked whether they have any property in their name. The responses were given in following table 13.

Table No. 13: Distribution of the Respondents on the Basis of Property in their Name

| S.N. | Property | Number of <br> Respondents | Percentage of <br> Respondents |
| :---: | :--- | :---: | :---: |
| 1. | House | 20 | 40 |
| 2. | Land | 10 | 20 |
| 3. | Business | 16 | 32 |
| 4. | Vehicle | 4 | 8 |
| 5. | Total | 50 | 100 |

Source: Field Survey, 2014

The table 13 shows that, 20 i.e. $40 \%$ respondents had house, 10 of them i.e. $20 \%$ had land, 16 of them i.e. $32 \%$ had business and 4 of them i.e. $8 \%$ had vehicle. This finding shows that majority of respondents have land, business and house in their name. Similarly, it also shows that fifty percent respondents have different property in their name. Having these properties is also one indicator of their economic status, which shows their economic status is high. From the study respondents were asked whether they get any property from their husband. Nobody told yes. Again respondents were asked whether they have their property from working in the hospital. All respondents told yes. They were asked whether they use hospital account without the permission of their family member. All respondents told that they use hospital account without the permission of their family member.

### 4.2.4 Level of Satisfaction Among Women Employees of Shahid Gangalal National Heart Center of Kathmandu

### 4.2.4.1 Respondents on the Basis of J ob Satisfaction Level

Job satisfaction means the women with high position in decision making, cooperation from co-workers, good economic status and good working environment which play vital role to make decisions in economic and other family matter in comparison to their male partners. Table given below presents the distribution of the respondents on the basis of job satisfaction level. Job satisfaction level is divided into three main groups such as fully, partially and not at all.

Table No. 14: Distribution of the Respondents on the Basis of job Satisfaction

| S.N. | Level of Satisfaction | Numbers of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Fully | 10 | 20 |
| 2. | Partially | 34 | 68 |
| 3. | Not at all | 6 | 12 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

Here, the women with fully satisfaction mean satisfied with all satisfaction factor, partially mean satisfied with some satisfaction factor and not at all mean do not satisfied with the entire satisfaction factor. From the above table we can say that out of 50 respondents, 34 respondents are partially satisfied with the job, 10 respondents are fully satisfied and 6 respondents are not at all satisfied with their job. In percentage wise distribution $68 \%$ respondents are partially satisfied, $20 \%$ respondents are fully satisfied and $12 \%$ respondents are not at all satisfied with job. This findings show that though working in hospitals is considered as most preferable job to the women but the number of respondents who are partially satisfied with the job is more in this finding. Respondents who are partially satisfied and not at all satisfied have problem with time schedule, salary and non- cooperation of the coworkers. Though time schedule is not always tough and also sometimes respondents do not get full cooperation from their coworkers and other staff members. They have positive feeling about the behaviour of their family member before and after getting this job. After being involving on job, their life has become better.

### 4.2.4.2 Sexual Discrimination in the Office

Sexual discrimination means prejudice against women on the grounds of sex. Table given below presents the distribution of the respondents on the basis of response on any discrimination made in designation between male and female workers with same qualification.

Table No. 15: Sexual Discrimination in the Office

| S.N. | Responses | Numbers of <br> Respondents <br> on the basis <br> Designation | Percent | Numbers of <br> Respondents on <br> the basis of <br> Salary | Percent |
| :---: | :--- | :---: | :---: | :---: | :---: |
| 1. | Discrimination | 0 | 0 | 0 | 0 |
| 2. | No Discrimination | 50 | 100 | 50 | 100 |
|  | Total | 50 | 100 | 50 | 100 |

Source: Field Survey, 2014

The table 15 shows that out of 50 respondents, no respondents think there is discrimination in designation between male and female workers with the same qualification and 50 respondents think there is no discrimination made on the designation between male and female workers with the same qualification. This finding indicates zero percent respondents think there is discrimination made on the designation between male and female but $100 \%$ respondents do not think so. This means no discrimination between male and female regarding designation exists in Shahid Gangalal National Heart Center of Kathmandu. Otherwise there is no such discrimination regarding designation.

The table 15 also shows that out of 50 respondents, no respondents i.e. $0 \%$ think that there is discrimination on salary between male and female with same qualification. But 50 respondents i.e. $100 \%$ respondents do not believe that there is discrimination between male and female on the basis of salary. This finding indicates that there is no discrimination between male and female coworkers with same qualification on their salary. This finding encourage female to join Shahid Gangalal National Heart Center of Kathmandu.

### 4.2.4.3 Married Respondents on the Basis of Family Cooperation

Unless the family members cooperation the women working outside their home, it is quite difficult for the women to run the job outside.

Table No. 16: Distribution of the Married Respondents on the Basis of Family Cooperation

| S.N. | Degree of <br> Cooperation | Numbers of <br> Married <br> Respondents | Percent | Numbers of <br> Unmarried <br> Respondents | Percent |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 1. | Full <br> cooperation | 18 | 60 | 20 | 100 |
| 2. | Partial <br> cooperation | 12 | 40 | - | - |
|  | Total | 50 | 100 | 20 | 100 |

Source: Field Survey, 2014

The table 16 show that out of 30 married respondents, 18 respondents have get full cooperation from their family, 12 respondents get partial cooperation and no respondent has experience of not having cooperation from their family. This indicates $60 \%$ respondents get full support and $40 \%$ respondents get partial support from their families. They found no change in attitude before and after joined job from husband.

From the finding it can be said that families are becoming broad minded who are ready to send their daughter-in-laws out of their houses to work.

The table 16 depicts that, out of 20 unmarried respondents all of them get full cooperation from their families. It shows that Nepali family now slowly understanding the value of women working outside from their home and earning selfidentity and money by themselves.

### 4.2.5 Cooperation Received by the Women in Office

Table 17 given below presents the distribution of the respondents on the basic from whom they get cooperation.

Table No. 17: Distribution of Respondents by Cooperation Received by the Women in Office

| S.N. | Male Staff Members | Numbers of <br> Respondents | Percentage of <br> Respondents |
| :---: | :--- | :---: | :---: |
| 1. | Boss | 1 | 2 |
| 2. | Male Staff of the same rank | 4 | 8 |
| 3. | Male Staff of the lower rank | 5 | 10 |
| 4. | All | 37 | 74 |
| 5. | None | 1 | 2 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

The table 17 unfolds that respondents out of 50, 37 respondents ( $74 \%$ ) are cooperated by all members of the office, 5 respondents $(10 \%)$ are cooperated by male staff of the lower rank, 4 respondents ( $8 \%$ ) are cooperated by male staff of the same rank, 1 respondent ( $2 \%$ ) get cooperation from boss and 1 respondent ( $2 \%$ ) did not get cooperation from anyone. This finding shows that women are getting cooperation from the male staff, especially upper level staff i.e. supervisor, Chief and co-workers.

### 4.2.6 Management of Respondents to Dual Role as a Housewife and Employee

Table 18 given below presents the distribution of the respondents on the basis of dual role as a housewife and a employed woman. Below table shows that out of 30 married respondents, 26 respondents easily manage their dual role i.e. after office they used to look after their children and work as a housewife and during office time they used to work office task, 4 respondents negatively manage their dual role. It indicates that $86.67 \%$ respondents positively manage their duel role and only $13.33 \%$ respondents hardly manage their duel role i.e. taken negatively. They get support from their servants, family members and staff members of their offices to manage their dual role as housewife and employed women. They used to work early in the morning and used to sleep late in the night. This indeed, is a very good sign for employed women.

Table No. 18: Management of Respondents to Dual Role as a Housewife and Health worker

| S.N. | Responses | Numbers of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Positive | 26 | 86.67 |
| 2. | Negative | 4 | 13.33 |
|  | Total | 30 | 100 |

Source: Field Survey, 2014

### 4.2.7 Feeling of Night Duties

Table 19 presents the distribution of the respondents on the basis of feel night duties. Out of 50 respondents, $30(60 \%)$ respondents positively taken as night duties and 20 ( $40 \%$ ) respondents negatively taken as night duties. The positive feeling respondents told that they can managed their household work in day time after completing the night duties and negative feeling respondents feel insecurity in their house at night duties period.

Table No. 19: Feeling of Night duties for Health worker

| S.N. | Responses | Numbers of <br> Respondents | Percentage of <br> Respondents |
| :---: | :---: | :---: | :---: |
| 1. | Positive | 30 | 60.0 |
| 2. | Negative | 20 | 40.0 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

### 4.2.8 The Work and Status in Society

Service sector is one of the main sectors in labor market and it is given much importance in the urban area. This occupation has been established as a respectable line of work. Due to this fact, the employed women in Shahid Gangalal National Heart Center of Kathmandu have greatly contributed to enabling other women to participate actively in Shahid Gangalal National Heart Center of Kathmandu. Table 20 presents the distribution of the respondents by their feeling whether their status has changed/enhanced among their peer-group, family member and the neighbours.

Table No. 20: Respondents' Feeling about the Changed/Enhanced Status From Family

| S.N. | Responses | Numbers of <br> Respondents | Percent |
| :---: | :---: | :---: | :---: |
| 1. | It is good | 48 | 96 |
| 2. | It is not good | 2 | 4 |
|  | Total | 50 | 100 |

Source: Field Survey, 2014

The table 20 shows that out of 50 respondents, 48 ( $96 \%$ ) respondents respond 'changed ' i.e. enhanced status among their peer group and only 2 (4\%) respondents said 'No changed' to the feeling whether their status have changed/enhanced among their peer group and among the neighbors. The change in their status also indicates their satisfaction level. They have not taken loan from the Shahid Gangalal National Heart Center of Kathmandu for family purpose. They have to work overtime. They return home lately through office vehicle. They used their salary for personal matter. They and their husband used to come to office every day by scooter and public vehicle. They generally used to wear shirt and pant during office. They used to go to Mall and department store for shopping before and after job.

From this finding, it can be argued that the employment has enhanced the status of employed women in Shahid Gangalal National Heart Center of Kathmandu.

## CHAPTER FIVE SUMMARY AND CONCLUSION

### 5.1 Summary

In contemporary times woman has contributed towards formal household economy. They started working outside household for earning money. This tendency has increased the workload of women. They now have to perform triple role. Nepalese society is basically patriarchal. Society gives more value to men when compared to women. Working women feel difficult to maintain pace with working environment office premise. Most of them had to manage time between household and outside work. Hospitals are service oriented institutions which are coming forward in the Kathmandu valley. The employees of hospital must be very hard working and must run faster in the pace of service oriented organization. Both men and women who are employed in hospitals are very busy. They must be strictly punctual, regular and hard working. The general objective of the study is to understand the status and satisfaction of employed women. The specific objectives of the study are; to identify the women in health care profession cope up with their dual role as homemakers and employed women, to identify the changes in terms of their status in the family occurred due to their earnings and to find out challenges faced by the women working in health care profession.

This research follows a descriptive as well as explorative research design. Primary and secondary sources of data are used in this study. The Primary data has been collected directly from the Hospital using interview schedule and some observation, etc. The secondary sources of data are collected from different magazines, newspaper, websites, Ministry of Health, Central Bureau of Statistics publication etc. There are 250 employees working in Shahid Gangalal National Heart Center which is taken as universe of this study. 50 women employees have been purposively selected for making the sample representative.

In today's the cost of living is very high, so the added source of income earn by women from jobs outside the house is very helpful indeed. Once the women start earning, their socio-economic status will also improve and this will help them to maintain decent standard of living. For this reasons women have started to take up
jobs outside while continuing to perform their traditional household chores as a homemaker. The changing socio-economic conditions of women are taking place. In the modern developing society a man does not perform a dual role. But the modern society has created such a situation for women that she has to play dual role of employed women and a homemaker

From literature it was found that previous studies were done in different aspect of women like changing status of educated women, status of women in Nepal and socioeconomic status of women. From the study it was found women in self-employed subsistence level farming to village and urban small entrepreneurship is very few in number. In addition, women are found coach in sports, trainer in carpet and textile weaving, basketry and pottery, workers in small industrial sectors and nongovernmental enterprises. In the urban areas, quite a few women are self-employed in the service sector.

A large number of the respondents were from Hindu religion as because Nepal is a Hindu Kingdom. About educational level of the respondents fifty six percent of them are graduate and only two percent were undergraduate. Majority of the respondents were married. Among married respondent eighty percent had marriage within caste and twenty percent had inter-caste marriage.

Majority of married respondents had lived in joint family and majority of unmarried respondents lived in nuclear family. Out of married respondents majority of the respondents had servants. Among married respondents fifty percent of them had medium level of decision-making position. Out of respondents, thirty six percent respondents were gazetted officers where as sixty four percent of the respondents were non-gazatted officers. Majority of the respondents were earning between rupees. five thousand to ten thousand per month. All respondents were using T.V., music system, using Freeze and telephone. Majority respondents were using computer, vacuum cleaner and washing machine.

This finding shows that most of the respondents were partially satisfied with their job and salary. Majority of the respondents did not agree that there is discrimination between male and female on designation with same qualification. Majority of the respondents think their status have changed/enhanced among their peer-group and the
neighbors. They respond that working in Hospital boast up their career, confidence level and economic independency.

Majority of the respondents got cooperation from boss, and male staff of the same rank, which means from all male staffs. This is indeed a positive sign who want to hospital. Similarly, majority of the respondents got full cooperation from their male coworkers at their office. The finding indicated that working in hospital was a tough and challenging task as it deals with money matter. Sometimes time schedule turn out to be very tight which is difficult to cope for them. Respondents have to work overtime. They return home lately through office vehicle. They used their salary for personal matter. They and their husband used to come to office every day by scooter and public vehicle. They used to go to Mall and department store for shopping before and after job.

### 5.2 Conclusion

Socio-economic status of the employed women of Shahid Gangalal National Heart Center of Kathmandu is getting better day-by-day. Majority of the respondents are cooperated by family, male coworkers and all the male staff members. Married respondents live in joint family probably because it is easy to get help from family members. But unmarried respondents live in nuclear family. Majority of the respondents have helper to help at their house.

There is no significant discrimination in salary and designation between male and female with same qualification. Majority of the respondents earned monthly between Rs. 20,000 to Rs. 25,000 and has necessary assets with them. Respondents are partially satisfied with job and salary, while comparing satisfaction level of salary and job it was cleared that women not only give importance to the salary but for them working environment is also an important part. Employed women have played dual role as a housewife and a employed woman easily. We must understand that in a patriarchal Hindu society like our beside office work they have done their household chores daily and they have also been able to effectively combine their various role as a wife, mother and employee etc.

From the study it can be concluded majority of respondents have medium level of decision-making. Respondents have a feeling that because of their employment, their status have enhanced. On the basis of major finding, it can be concluded that though many women employees were not in high decision making post. The management treats equally with regard to promoting, training, foreign visit etc. between male and female on the basis of qualification and job experiences.

Regarding distribution of the respondents on the basis of dual role as a housewife and an employed woman, the study concluded that out of 30 married respondents, 17 respondents easily manage their dual role i.e. after office they used to look after their children and work as a housewife and during office time they used to work office task, 4 respondents hardly manage their dual role and 9 respondents anyhow manage their dual role.

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