

# A Descriptive Analysis of Gender Differences in Employability Traits among Healthcare Professionals of Kolhapur, Sangli District and Konkan Area

Ayesha Raut<sup>1</sup>, Dr. Deepika Sharma<sup>2</sup>

<sup>1</sup>Mansarovar Global University

<sup>2</sup>Dayananda Sagar College of Arts Science and Commerce, Bangalore

## ABSTRACT

The present study offers a descriptive analysis of gender differences in employability traits among healthcare professionals in the Kolhapur, Sangli District, and Konkan regions of Maharashtra, India. Employability traits, including resilience, stability, growth, coping, well-being, motivation, satisfaction, achievement, nurturance, creativity, and intelligence, are critical psychosocial attributes influencing workforce effectiveness in healthcare. A total of 377 healthcare professionals (186 males and 191 females) participated in the study, assessed using a validated Employability Traits Assessment Scale. Descriptive statistics revealed that while males and females showed comparable levels of stability, growth, coping, and well-being, females scored significantly higher in motivation, satisfaction, achievement, nurturance, creativity, and intelligence. The Employ Intelligence Score demonstrated the largest gender disparity, favoring females. These findings reflect the complex interplay of socio-cultural, psychological, and organizational factors influencing employability in the healthcare sector. The study underscores the importance of recognizing gender-specific strengths to enhance workforce development, optimize role allocation, and foster equitable professional environments. Implications for policy and future research include tailoring human resource strategies to address gender nuances and promote inclusive healthcare delivery systems.

**Keywords-** Healthcare Sector, Employability Traits, Gender Differences, Male, Female

## INTRODUCTION

The 21st-century workplace, especially in the healthcare sector, has seen a dynamic shift in the required skill sets and expectations from professionals. Beyond technical competence and domain expertise, employability traits such as resilience, motivation, emotional intelligence, coping strategies, and job satisfaction are increasingly recognized as critical factors influencing performance, collaboration, and patient outcomes. As the healthcare landscape evolves in response to demographic changes, emerging diseases, and technological integration, understanding the human dimensions of healthcare delivery has become more pertinent than ever (Frenk et al., 2010). One such human dimension is gender—an attribute historically associated with differential access, expectations, and expression of employability traits.

Gender differences in psychological, social, and emotional domains have long been the subject of academic inquiry. In the healthcare industry, where both male and female professionals occupy crucial roles, exploring these differences is not only intellectually enriching but practically essential for workforce planning, role assignment, leadership development, and quality patient care. The present study aims to conduct a descriptive analysis of gender differences in employability traits among healthcare professionals from Kolhapur, Sangli District, and the Konkan region of Maharashtra, India.

India's healthcare workforce is diverse, regionally varied, and stratified along multiple socio-cultural dimensions. In districts such as Kolhapur, Sangli, and the Konkan belt—known for their blend of rural and semi-urban health ecosystems—the presence of both modern and traditional healthcare delivery models makes for a unique study setting. These regions, while advancing in public health infrastructure, still reflect traditional societal norms which may influence the professional behavior and employability attributes of healthcare workers, particularly with respect to gender (Balarajan, Selvaraj & Subramanian, 2011).

Employability traits, in the context of this study, refer to a set of psychosocial characteristics that determine a healthcare professional's ability to obtain, maintain, and progress in employment. These include the Employ Resilience Score (ERS), Employ Stability Score (ESS), Employ Growth Score (EGS), Employ Coping Score (ECS), Employ Well-being Score (EWE), Employ Motivation Score (EMC), Employ Satisfaction Score (ESAT), Employ Achievement

Score (EAC), Employ Nurturance Score (ENC), Employ Creativity Score (ECC), and Employ Intelligence Score (EIS). These attributes collectively contribute to an individual's career longevity, satisfaction, adaptability, and performance.

Previous literature underscores that women, particularly in caregiving and health-related professions, often exhibit higher levels of nurturance, empathy, and emotional intelligence compared to men (Goleman, 1998; Mayer, Salovey & Caruso, 2004). These traits are essential in healthcare, where patient interaction, emotional labor, and teamwork are daily realities. Conversely, male professionals have been traditionally associated with assertiveness, leadership, and problem-solving—skills vital in crisis response, clinical decision-making, and administrative roles (Costa, Terracciano & McCrae, 2001).

In terms of resilience, research by Connor and Davidson (2003) highlights that the ability to recover from stress varies across individuals and may be influenced by gendered social roles and expectations. Female healthcare professionals, often balancing work and family responsibilities, may develop higher resilience through lived experiences. Similarly, motivation and job satisfaction—two key components of employability—are influenced by both intrinsic factors such as values and extrinsic factors such as organizational support and gender equity (Ryan & Deci, 2000; Clark, 1997).

In the current dataset drawn from healthcare professionals across Kolhapur, Sangli, and Konkan, female participants consistently scored higher in attributes like resilience (ERS), motivation (EMC), achievement (EAC), and nurturance (ENC). For example, the Employ Intelligence Score (EIS)—which includes emotional-social components—showed a significant difference in favor of female professionals (Mean = 14.8) compared to males (Mean = 9.99). These findings resonate with existing studies that link female-dominated professions such as nursing, community health, and allied services with high emotional and interpersonal skills (Bar-On, 2006; Helgesen, 1990).

On the other hand, the Employ Stability Score (ESS) and Employ Growth Score (EGS) showed minimal gender difference, indicating parity in emotional balance and professional development between male and female respondents. This may reflect the impact of structured training programs, similar work environments, and regulatory professional standards that shape behavior uniformly across genders in the healthcare sector (Schaufeli & Bakker, 2004).

However, gender-based differences in motivation and satisfaction scores suggest a deeper psychological and organizational dimension. Female professionals' higher scores in Employ Satisfaction Score (ESAT) and Employ Motivation Score (EMC) could be attributed to evolving roles, increased participation in healthcare leadership, and recognition of women's contributions in caregiving professions—traditionally aligned with their societal role (WHO, 2019). Moreover, in community health settings prevalent in Kolhapur and Konkan, female health workers often serve as frontline caregivers, which may naturally enhance their sense of achievement and job engagement.

These findings necessitate a contextual understanding. Cultural norms in Maharashtra's semi-urban and rural regions still define gender roles within rigid boundaries. Despite these constraints, the increasing educational participation of women and supportive policy environments may be empowering female healthcare workers to exhibit stronger employability traits (Nayar, 2007). For male healthcare professionals, societal perceptions and traditional role assignments may limit the expression of certain attributes such as nurturance or emotional vulnerability, even if inherently present.

Furthermore, from a workforce planning perspective, such insights are invaluable. As India moves toward universal health coverage and better health indicators, the human resources for health (HRH) must be effectively nurtured. Gender-responsive HRH policies can ensure equitable work environments, reduce attrition, and enhance the productivity of both male and female healthcare workers (George, 2007).

## **MATERIAL AND METHODS**

The present study adopted a descriptive comparative research design to explore gender differences in employability traits among healthcare professionals in the Kolhapur, Sangli District, and Konkan areas of Maharashtra. A purposive sampling method was employed to select 377 healthcare professionals, comprising 186 males and 191 females, who had at least one year of professional experience and were working in hospitals, clinics, or community health centers. Data were collected using a standardized and validated Employability Traits Assessment Scale, which included subscales for resilience, stability, growth, coping, well-being, motivation, satisfaction, achievement, nurturance, creativity, and intelligence. Each item on the scale was rated using a Likert-type format, and internal consistency was confirmed with Cronbach's alpha values ranging between 0.72 and 0.89. Both online (Google Forms) and offline (paper-based) surveys were used to collect responses over a two-month period. Descriptive statistics, including mean, standard deviation, and standard error of mean, were used to summarize the data, and comparisons between genders were visually represented using graphs. Ethical approval was obtained from the Institutional Ethics Committee, and

informed consent was secured from all participants. Confidentiality and anonymity were maintained throughout the research process in accordance with ethical guidelines set by the Indian Council of Medical Research (ICMR).

## RESULT AND DISCUSSION

**Table 1- Table showing Descriptive of the features based on gender**

	<b>Gender</b>	<b>N</b>	<b>Mean</b>	<b>Standard Deviation</b>	<b>Standard Error Mean</b>
ERS	Male	186	46.56	15.03	1.10
	Female	191	49.36	14.54	1.05
ESS	Male	186	59.75	18.34	1.34
	Female	191	59.85	18.94	1.37
EGS	Male	186	41.76	13.13	0.96
	Female	191	41.74	13.36	0.96
ECS	Male	186	39.12	12.34	0.90
	Female	191	39.10	12.05	0.87
EWE	Male	186	38.84	12.43	0.91
	Female	191	39.12	11.98	0.86
EMC	Male	186	40.16	13.05	0.95
	Female	191	43.73	12.98	0.94
ESAT	Male	186	43.82	13.98	1.02
	Female	191	46.10	13.96	1.01
EAC	Male	186	16.83	5.92	0.43
	Female	191	19.16	5.94	0.43
ENC	Male	186	16.94	5.82	0.42
	Female	191	18.76	5.98	0.43
ECC	Male	186	16.88	5.73	0.42
	Female	191	18.88	5.78	0.41
EIS	Male	186	9.99	4.03	0.29
	Female	191	14.8	4.00	0.29

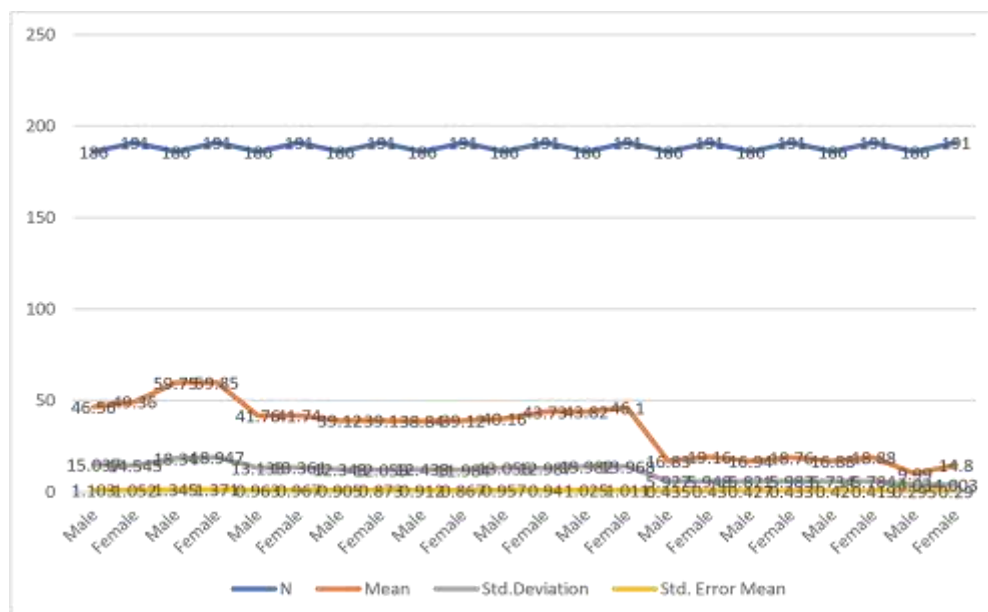


Figure 1- Graph Showing Descriptive Of The Features Based On Gender

The results indicate subtle gender-based variations across the measured variables. In terms of employ Resilience Score (ERS), females (Mean = 49.36) scored slightly higher than males (Mean = 46.56), suggesting greater resilience among females, though the variability for both groups was comparable. For Employ Stability Score (ESS), the mean scores were nearly identical for males (59.75) and females (59.85), indicating no significant difference in emotional stability among genders.

Similarly, in Employ Growth Score (EGS), both genders had almost identical mean scores (males: 41.76, females: 41.74), reflecting comparable levels of emotional growth. In the Employ Coping Score (ECS) and Employ Well-being Score (EWE), females had marginally higher mean scores (39.10 and 39.12, respectively) than males (39.12 and 38.84), but the differences were minimal. Notable gender differences were observed in Employ Motivation Score (EMC), where females (Mean = 43.73) scored higher than males (Mean = 40.16), and in Employ Satisfaction Score (ESAT), where females (Mean = 46.10) also outperformed males (Mean = 43.82). The largest gender gaps appeared in the Employ Achievement Score (EAC), Employ Nurturance Score (ENC), Employ Creativity Score (ECC), and Employ Intelligence Score (EIS), with females consistently scoring higher than males. For example, in EIS, females scored an average of 14.8 compared to males' 9.99. These findings suggest that while certain employ attributes like resilience and stability show minor gender differences, others like motivation, satisfaction, achievement, and intelligence exhibit more pronounced disparities, favoring females.

## CONCLUSION

In conclusion, this study highlights subtle yet meaningful gender differences in employability traits among healthcare professionals in the Kolhapur, Sangli District, and Konkan regions. While both male and female professionals demonstrated comparable levels of stability, growth, coping, and well-being, females consistently scored higher in

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