

Study finds insidious and persistent discrimination among physician mothers

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A US study in the Christmas issue of *The BMJ* today finds "insidious, persistent, and sometimes blatant" manifestations of discrimination experienced by physicians based specifically on their status as mothers.

While some of the experiences are consistent with those reported by women across professions, there are unique aspects of medical training and the [medical profession](#) that exacerbate maternal [discrimination](#), say the researchers.

They call for structural changes that address pregnancy, parental leave, and childcare to mitigate the impacts of maternal discrimination in medicine.

The majority of medical student entrants are women, and recent studies suggest that women physicians may have better patient outcomes than their male counterparts. Yet there is compelling evidence of gender inequity in medicine.

Women physicians (around 80% of whom are or will become mothers) also report experiencing "maternal discrimination" based specifically on their role as a mother. Yet very little is known about this type of discrimination or its impact.

So a team of US researchers led by Eleni Linos at the University of California San Francisco, set out to identify ways in which women doctors experience this maternal discrimination.

They surveyed an online community of women who identified as medical mothers.

Mean age was 39 years (range 24-62), median number of children was 2, 74% were White, 12% were Asian, 8% were Hispanic or Latina, and 5% were Black. Most worked more than 40 hours per week.

They included questions about demographics, physical and reproductive health, perceived discrimination, potential workplace changes, and burnout.

Responses were reviewed and combined into themes which were used to create a conceptual model to illustrate the extent and nature of maternal discrimination in the medical workplace.

Emerging themes included varying expectations of performance (both higher and lower), fewer opportunities for career development, financial differences, lack of support before and after birth, and difficulties achieving life-work balance.

For example, participants described being denied earned salary increases or bonuses due to [maternity leave](#) (despite reaching or exceeding productivity goals), being passed over for leadership roles in favor of colleagues perceived as less qualified, or having their contracts grossly modified or terminated in response to announcing a pregnancy or when returning from maternity leave.

Participants also described ways in which the culture and structure of the medical workplace perpetuated maternal discrimination. These included policies and procedures that limit maternity leave, the lack of coverage and flexibility in physician schedules, the lack of physical space and time to breastfeed or pump milk, and the long (and often overnight) [work hours](#) generally required of physicians.

Reported effects of maternal discrimination included extreme stress due to work and family demands and financial instability, forcing some women to give up full-time work or leave the profession altogether.

The researchers point to some limitations that could have influenced their results, and say the findings "should be viewed as preliminary."

But they conclude: "As we strive to build more equitable workplaces, our findings suggest that challenging norms around motherhood in the medical workplace, as well as structural changes that address pregnancy, [parental leave](#), and childcare, are needed in order to mitigate the impacts of maternal discrimination in medicine."

In a linked editorial, Kate Lovett, Dean at the Royal College of Psychiatrists in London, says further work to understand this complex area of human behaviour is needed.

However, she points out that, as long as parenthood is seen as a women's issue rather than an issue for us all, "maternal discrimination will remain unresolved."

As both men and [women](#) "lean in" on the domestic and work front, "we need to understand how we can support each other in equal relationships both inside and outside of [work](#)," she concludes.

More information: Physician mothers' experience of workplace discrimination: a qualitative analysis, www.bmj.com/content/363/bmj.k4926

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