A novel, four-week parenting rotation designed for pediatric residents has dramatically increased the amount of time resident parents can spend at home with their babies, according to a study by researchers at the University of Colorado Anschutz Medical Campus.

The elective, created in 2010 by physicians at the University of Colorado School of Medicine, was set up to address the lack of maternity leave for doctors in residency programs, a time when many get pregnant.

The new study, published this week in the journal *Academic Pediatrics*, is the first to examine the results of the program.

"When we first created this elective, our residents had to take vacation days, about four weeks, if they wanted time off with their newborns," said the study's first author Dr. Melanie Cree-Green, MD, Ph.D., a pediatric endocrinologist and assistant professor at the CU School of Medicine. "Some took unpaid Family and Medical Leave combined with vacation time. For some, this meant not being able to pay back student loans. Others faced career setbacks."

Working with her father, Jonathan Cree, MD, MA, a family medicine residency program director, and fellow physicians at CU Anschutz, including Adam Rosenberg, MD, CU pediatric residency program director, Cree-Green created an at-home, non-core elective that turned the experience of parenting into a structured training experience for residents.

"When Melanie approached me about this, it seemed the right thing to do," said Rosenberg. "It was a win-win situation. Now our goal is to expand our efforts to insure all of our trainees 12 weeks of paid leave."

Cree-Green, who also works at the Center for Women's Health Research at CU Anschutz, said her aim was to increase paid time at home for new parents, "while capitalizing on the experience of parenting as a unique educational opportunity for residents."

The elective, approved by the pediatric residency curriculum committee, included the following: 1) reading five articles on neonatal subjects including rashes, circumcision, maternal depression and lactation. 2) Preparing a presentation for other pediatric residents on some aspect of pediatrics they learned as a parent. 3) Reviewing a popular parenting book. 4) Attending a well-child check, a breastfeeding consultation visit. 5) Writing an essay from the perspective of a parent on how such visits might change their approach as a physician.

All residents (mothers and partners) who had a new child, either biologic or adopted, could take the elective.

"We found that implementation of a parenting elective providing up to four weeks of paid time at home, significantly improved income and academic outcomes in pediatric residents, while markedly
increasing resident time devoted to parenting," the study reported. "In mothers, the minimum time away from the hospital tripled and nearly all resident mothers had more than seven weeks at home."

Before the elective, none of the fathers or partners took more than a week at home and some took no leave at all. Afterward, 100% took leave with a mean time of four weeks. The extra time at home benefited the doctors in many ways including allowing for the establishment and maintenance of breastfeeding, important to fetal health. Shorter leave is associated with failing to establish and early cessation of breastfeeding.

Cree-Green said the program has been a clear success at a time when more and more women are entering medicine and the needs of their families are becoming more apparent. For years, she said, women physicians have lagged behind in maternal leave, salary equity and other areas.

"Physicians are trained to put the patient first," she said. "Physician wellness has always taken a back seat to that. It has never been a priority, but there is a growing consensus that it must be."

She has been asked by numerous other medical institutions to share the details of the elective. Pediatrics, she said, is just the beginning.

"I would like to see this elective expanded to other specialties like Ob/Gyn, psychiatry and family medicine," Cree-Green said. "In fact, I believe it should be explored in all types of residency to improve personal, financial and professional outcomes in medical trainees."


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