



Parental leave policies in graduate medical education: A systematic review



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ARTICLE INFO

Article history:

Received 10 February 2017

Received in revised form

1 June 2017

Accepted 20 June 2017

Keywords:

GME

Leave of absence

Maternity leave

Paternity leave

Parental leave

ABSTRACT

BACKGROUND: A thorough understanding of attitudes toward and program policies for parenthood in graduate medical education (GME) is essential for establishing fair and achievable parental leave policies and fostering a culture of support for trainees during GME.

METHODS: A systematic review of the literature was completed. Non-cohort studies, studies completed or published outside of the United States, and studies not published in English were excluded. Studies that addressed the existence of parental leave policies in GME were identified and were the focus of this study.

RESULTS: Twenty-eight studies addressed the topic of the existence of formal parental leave policies in GME, which was found to vary across time and ranged between 22 and 90%. Support for such policies persisted across time.

CONCLUSIONS: Attention to formal leave policies in GME has traditionally been lacking, but may be increasing. Negative attitudes towards parenthood in GME persist. Active awareness of the challenges faced by parent-trainees combined with formal parental leave policy implementation is important in supporting parenthood in GME.

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1. Introduction

Parenthood during graduate medical education (GME) has been a topic of interest since the late 1970s. With increasing percentages of women in medicine, this subject has resurfaced recently as part of a broader conversation within government and industry about gender in the American workplace.¹ Women physicians face particular challenges because their training programs, which can span nearly a decade, coincide with traditional childbearing years.

Although these challenges are well known, formal and informal support for parenthood in GME remains variable and poorly defined. The Accreditation Council for Graduate Medical Education (ACGME) does not have a single, defined parental leave policy that all GME programs must follow.² While the ACGME mandates that GME programs must have leave policies in place, the ACGME does not provide specific recommendations or guidelines for their

development. Instead, individual GME programs are left to create their own leave policies that are consistent with applicable laws (Table 1) and that satisfy the relevant certifying board requirements.²

The goal of this study is to provide a systematic review of parental leave policies in graduate medical education. Specifically, we aim to identify the number of studies available in the literature addressing the existence of parental leave policies in GME.

2. Methods

An electronic search of the PubMed, Medline, Scopus, and PsycInfo databases was completed using multiple search terms (Fig. 1), including *internship*, *residency*, *leave* and *pregnancy* (Table 2). Search criteria incorporated relevant articles from January 1, 1960 to December 13, 2015. Studies that pertained to family planning or leave (including pregnancy/childbearing, paternity/maternity/parental leave, breastfeeding and childcare issues) during GME in the United States (including studies addressing these issues in residency, fellowship, or across multiple training time periods) were included in the initial pool of studies reviewed. Non-cohort studies

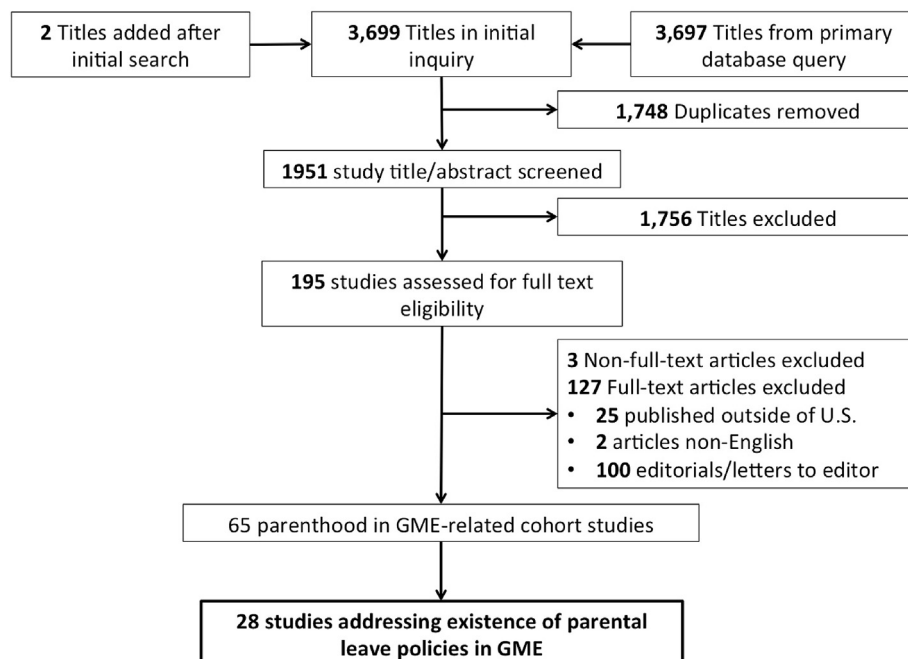
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Table 1

Parental leave policies: United States government laws and Graduate Medical Education regulations.

United States Government Laws	
Civil Rights Act of 1964, Title VII ³	Prohibits employment discrimination based on race, color, religion, sex and national origin.
Pregnancy Discrimination Act (PDA) (1978) ⁴	Amendment to Title VII of Civil Rights Act of 1964. Prohibits discrimination in employment against women affected by pregnancy or related conditions.
Americans with Disabilities Act (ADA) (1990) ⁵	Prohibits discrimination against people with disabilities in employment, public services, public accommodations and in telecommunications. Employers must treat women who are temporarily unable to perform their jobs due to medical condition related to pregnancy or childbirth similar to any other temporarily disabled employee
Family and Medical Leave Act (FMLA) (1993) ⁶	Entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons. 12 workweeks leave in a 12-month period.
Patient Protection and Affordable Care Act (PPACA) (2010) ⁷	Amendment to Section 7 of the Fair Labor Standards Act (FLSA) Employers required to provide “reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child’s birth each time such employee has need to express the milk.” Employers required to provide “a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk”
Graduate Medical Education Regulations	
Accreditation Council for Graduate Medical Education (ACGME) ²	IV.A.3. An applicant invited to interview for a resident/fellow position must be informed in writing or by electronic means of the terms, conditions and benefits of appointment to the ACGME-accredited program, either in effect at the time of the interview or that will be in effect at the time of his or her eventual appointment A) Information that is provided must include: financial support; vacations; parental, sick, and other leaves of absence; and professional liability, hospitalization, health, disability, and other insurance accessible to residents/fellows and their eligible dependents. IV.B.2. The contract/agreement of appointment must directly contain or provide a reference to the following items: h) disability insurance for residents/fellows; i) vacation, parental, sick, and other leave(s) for residents/fellows, compliant with applicable laws j) timely notice of the effect of leaves on the ability of residents/fellows to satisfy requirements for program completion IV.G Vacation and Leaves of Absence IV.G.I. The sponsoring institution must have a policy for vacation and other leaves of absence, consistent with applicable laws. IV. G.2. This policy must ensure that each of its ACGME-accredited programs provides its residents/fellows with accurate information regarding the impact of extended leave of absence upon the criteria for satisfactory completion of the program and upon a resident's/fellows' eligibility to participate in examinations by the relevant certifying board(s).

**Fig. 1.** Article selection process.

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