



Revelstoke

Medicine & Motherhood

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Rural Medicine
for 38 years

Mother for 41
years

Best of both
worlds

disclosures

Changing Demographics

- ▣ >50% medical students women
- ▣ 1/3 Drs are in physician couples
- ▣ Female medical students, residents and young Drs are at reproductive age

Why

- ▣ Joys of Motherhood
- ▣ Urge to reproduce
Intelligent capable women change society and medicine
Society needs these women to have the children of our future

FUN

Children,
grandchildren
keep you
engaged with
the
community
and society
and keep you
young

Worth it??

- ▣ Your life time achievement is your children and your happiness your grandchildren.

Best of Both worlds

The Women Have children

- ▣ Valued resource of society
 - ▣ Our strength
 - ▣ Enhances the practice of medicine
 - ▣ Crucial part of a community
-
- ▣ Key issue in human resource planning

Teaches

- ▣ Both refine flexibility, compassion, communication
- ▣ Commitment
- ▣ Competence
- ▣ Continuous learning curve

PUTTING
ANOTHER'S
NEEDS
ABOVE
YOUR OWN

Times are a- changing

- ▣ Children later in life
- ▣ 1-2 only
- ▣ Students older
- ▣ Increased training requirements =
- ▣ women older when 'practice ready'
- ▣ Work place less family friendly, personal
- ▣ No scheduled time for eating, sleeping, family
- ▣ Less respect for your time or education

Changing climate
for having
children

Less family and
friends around

Less household
help

More driving

More organized
activities

Less childcare
learned at home

More Women

- ▣ Having children during medical training
 - Increases demand for longer leaves
 - Greater training flexibility
 - Childcare opportunities

Changes are necessary

in training

in practice

Greater Emphasis on the importance for care of one's own self & family as a physician

Demographic med changes

- ▣ Aging patients
- ▣ Multiple comorbidities
- ▣ Easier access to INFO
- ▣ Shortage Drs.
- ▣ Shrinkage of public resources

- ▣ FEMINIZATION of Medicine
- ▣ 70% FP women <10yrs
- ▣ Paeds; OB; Gyne; psych

Balanced lifestyle

- ▣ Today's students want balanced lifestyle
- ▣ Combining medical responsibility with
- ▣ Protected family time
- ▣ & pursuits of other interests

Then // Now

- ▣ Less women in Med
- ▣ More household & Community help
- ▣ More at home, entertainment, garden, play, friends
- ▣ Earlier age childbirth, -more energy, less expectations
- ▣ More active
- ▣ More women in Med
- ▣ More appliances and prepared food
- ▣ Easier access INFO
- ▣ Easier to stay in touch
- ▣ More Mobile
- ▣ Less active
- ▣ More Screen time

Challenges

**WHEN TO
HAVE
YOUR
CHILD**

*Your
priorities*

Barriers

&

Options

Myths in Medicine

Culture of
Medicine has its
unique values

- ▣ Assumed but
not discussed

- ▣ Clear legal & policy
framework protecting
occupational health of
pregnant workers

- ▣ Unclear how it
applies to Drs

Value professional achievement

- ▣ Control of personal, family and relational needs
- ▣ Push yourself to succeed
- ▣ Pay your dues

Drs must be perfect; they never make mistakes

- ▣ Lack of resilience to personal error
- ▣ ? Every female Dr.
?Planned their pregnancy
- ▣ Blamed if inconvenient for colleagues
- ▣ Pregnancy can be unplanned & uncontrollable complications

Avoid uncertainty & complexity

My BAD

- ▣ Drs try to have the Right answer???
- ▣ NO right solution for pregnant physician or working Mom
- ▣ Working TOO much or little
- ▣ All or nothing temporary solutions

Outcome more important than process

- ▣ Feel problems disappear when baby born
- ▣ But child's care just beginning

- ▣ Conflicts and stress not forgotten
- ▣ Erode job satisfaction
- ▣ Lead to burnout
- ▣ Chase Drs out rural med

Medicine's a priority

- ❑ Higher calling; their own needs as a sign of weakness
- ❑ Postpone discussion or accommodation
- ❑ physicians can recommend modified work for pregnant patients in physically demanding jobs;
- ❑ fail to do so for fellow physicians

Meshing Motherhood

& Medicine??

Must Change

- ▣ 1. maternal & fetal health
- ▣ 2. mother & child well-being during pregnancy and PP
- ▣ 3. Dr Mom's career choices, practice & progression
- ▣ 4. Family Friendly Medical Culture

As for all pregnant patients

- ▣ Complications of pregnancy demand compromises
- ▣ Pre-existing mat conditions
- ▣ Problems of pregnancy
 - Back & pelvic pain
 - Sleep
 - Preterm labour
 - BP, diabetes

Post Partum PP

- ▣ Breast-feeding
- ▣ Bonding
- ▣ Securing safe child care
- ▣ Maternal sleep
- ▣ Fatigue
- ▣ PP depression
- ▣ Less functioning
- ▣ Complications of birth
- ▣ Caesareans
- ▣ PP bleeding
- ▣ Low birth weight
- ▣ Premature
- ▣ Role overload
- ▣ Balance personal, family, work and community needs

Physical demands

- ▣ SHOULD
- ▣ Not exceed 8 hrs.
- ▣ >>20 wks. NO call
- ▣ No night shifts ??
For pregnancy or
PP
- ▣ Schedules
- ▣ Standing
- ▣ noise
- ▣ Heavy lifting
- ▣ Shift work
- ▣ SMALL FOR
GESTATIONAL
AGE

Harmful exposure

- ▣ Violence
- ▣ Toxins
- ▣ Radiation
- ▣ Biological & chemical agents
- ▣ Infections
- ▣ Organic solvents
- ▣ Anaesthetics

Cause & consequences

onerous work
demands

Frequency call

Fatigue

Long hours

Emotional strain

Too little time with
partner

- ▣ Denial
- ▣ Resentment
- ▣ Hostility

- ▣ Quit medicine
- ▣ Limit options
 - suicide

OMG

Human Rights

- ▣ Pregnancy is a short period of time in a medical career
- ▣ But critical
- ▣ Dysfunctional practice patterns
- ▣ Lower rates of retention
- ▣ All individuals should have the opportunity equal with other individuals to make for themselves the lives that they are able and want to have

CHANGES

When necessary

- ▣ Reduction in work hours
- ▣ ..decreased call responsibilities
- ▣ Lack of guidance
- ▣ No ongoing & open discussion
- ▣ Drs working past exhaustion & leave practice

- ▣ Residence

- ▣ BC

- ▣ Ab

- ▣ Sask

- ▣ Quebec

- ▣

- ▣ WE must act NOW to prevent suffering, conflict and lost productivity

What if???

- ▣ Improve family friendly healthcare facilities
- ▣ Family friendly policies
- ▣ Open discussion starting in Med School
- ▣ Enhance the roles of Motherhood & Medicine in Rural healthcare
- ▣ Childcare facilities in healthcare facilities for all professionals so Moms & Dads are close to their children yet available.
- ▣ Enforce call limits and work hours for pregnancy and PP
- ▣ Prevent excessive demands and burnout

Support

Mentorship

SURVEY?

Help
us

? Your
ideas?

**BEING A MOM MAKES ME A
BETTER DR**

**Being a Dr makes me
a better Mom**

