



Research Week 2022

Surgical Residents can be Parents: A Qualitative Analysis of Existing Challenges, Achievements, and Opportunities for Improvement.

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Keywords

Parenthood during surgical residency, challenges faced by surgical residents who become parents during training, professional and personal fulfillment in parent surgical trainees, ways to improve the experience of surgical trainees who are parents.

Abstract

Background:

Parenthood during surgical residency poses great challenges for trainees as they balance two highly demanding roles. Prior studies have suggested that surgical residents who are parents suffer in terms of their professional relationships and board passing rates.

Methods:

We performed semi-structured interviews of OHSU general surgery residents who became parents while enrolled in the program between 2015-2020. Transcripts were coded using in vivo coding methodology.

Results:

Fifteen residents participated in the study (6 men, 9 women). Most parent-trainees had 1-2 children (94%). Seventy-three percent of residents reported that their professional relationships were strengthened after having a child. All participants passed boards on their first attempt or met In-training exam equivalents. All women respondents reported that seeing the success of mentors or co-residents who were parents positively influenced their decision to have a child, whereas only one man (17%) felt the same. Challenges included childcare (67%), difficulty finding adequate lactation facilities (100% of women) and guilt regarding time away from family (100%). Nine residents (60%) advocated flexibility when returning from parental leave. Improvement strategies included developing lactation protocols, minimizing overnight call and increasing flexibility particularly when residents first return from leave. All residents felt that the program fostered a culture of support around starting a family while in training.

Discussion:

Our findings show that general surgery resident-parents at OHSU have a more positive professional and personal experience than suggested in existing literature. The experiences highlight the importance of mentorship for women, a supportive family and institutional culture in starting a family during training. Specific cultural and infrastructural changes, as well as programmatic guidelines, may be suggested based on these findings to improve the success of parent-residents. The qualitative nature of this study reveals the subtle and nuanced perspectives of surgical trainees who are parents otherwise missing in the existing literature.