

ATTITUDES TOWARD PREGNANCY DURING RESIDENCY

I. FACULTY AND RESIDENTS

1. Residency Program: _____
2. Identification Number: _____
3. Age: _____ Sex: (circle one) M F
4. Marital Status: (check one) a) _____ single c) _____ divorced e) _____ living together
b) _____ married d) _____ separated f) _____ widowed
5. Number of children: (circle one) 0 1 2 3 4 or more
6. Faculty Status: _____ full-time _____ M.D. _____ M.S.W.
_____ Part-time _____ Ph.D. _____ Other
7. Year in residency (circle one) 1st 2nd 3rd 4th 5th other: _____
8. Do you and your spouse plan on children? _____ yes _____ don't know
_____ no _____ not applicable
9. Over the past 5 years, approximately how many residents have become pregnant during their participation in the residency? (circle one)
0 1-3 5-10 10-15
10. Approximately how many spouses of residents have become pregnant over the past 5 years? (circle one)
0 1-5 5-10 10-15 15-20 20-25
11. What kinds of provisions would you like to see in your department for: a) residents who are pregnant, b) residents whose spouses are pregnant? (note a,b, or a&b in the blank space.
a) _____ no special treatment d) _____ financial support
b) _____ flexible scheduling e) _____ special counseling available
c) _____ emotional support and encouragement f) _____ support group
g) _____ other: _____

12. Below are a series of statements describing problems which may be encountered by a pregnant resident. Please rate the degree to which you think these problems would exist for pregnant residents in your program. Rate on a scale of 1 to 5 - 1 = not at all, 2 = slightly, 3 = somewhat, 4 = moderately, 5 = very much.

- a) _____ physical fatigue
- b) _____ negative attitude of other residents
- c) _____ negative attitude of the department
- d) _____ negative attitude of other specialities
- e) _____ negative attitude of other health care personnel (nurses, aides etc.)
- j) _____ other
- f) _____ negative attitude of spouse
- g) _____ negative attitude of patients
- h) _____ too many prior commitments
- i) _____ inadequate childcare in your area

13. Have you had any direct contact with a pregnant resident?

- a) In your program? _____ yes
 _____ no
- b) In another program? _____ yes
 _____ no

14. Does your residency program have an official policy for dealing with pregnancy during residency?

- _____ yes _____ no _____ don't know

If yes, please describe main aspects: _____

15. Regardless of whether a formal policy exists, to the best of your knowledge, what provisions for leave (either paid or unpaid) are made for a) pregnant residents, b) residents whose spouses are pregnant:

- a) _____
- b) _____

16. Do you feel the attitude in your department is favorable to a pregnancy during residency?

- a) for the resident? _____ yes _____ no _____ don't know
- b) for the resident's spouse? _____ yes _____ no _____ don't know

17. Below are a series of statements relevant to the issue of pregnancy during residency. Please rate the extent to which you agree/disagree with each statement. Rate on a scale of 1 to 5. 1=strongly disagree, 2=slightly disagree, 3=agree, 4=moderately agree, 5=strongly agree.

- a) _____ Male physicians tend to be more productive over the span of their careers than do female physicians.
- b) _____ Residency is too pressured to be a good time for a resident to become pregnant.
- c) _____ I spend more time with my patients than with my family.
- d) _____ A woman physician with children is less likely to deliver adequate care to her patients than one without children.
- e) _____ It is especially difficult for male physicians to balance family and career.
- f) _____ Pregnancy during residency can be a positive experience.
- g) _____ A resident with a small child is more likely to cause scheduling problems than one unencumbered by family pressures.
- h) _____ I feel a child of my own would give me a better insight into my patients' families.
- i) _____ Female physicians tend to drop out of the work force more frequently than male physicians.
- j) _____ Family medicine stresses awareness of the patient's family, but does not pay sufficient attention to the resident's family.
- k) _____ Male residents should postpone their families until after completion of their residency.
- l) _____ It is especially difficult for female physicians to balance family and career.
- m) _____ Pregnancy during residency is one way of acknowledging the importance of the physician's family as well as the patient's family.
- n) _____ Other rotations do not look favorably on a pregnant resident from Family Medicine.
- o) _____ I worry about whether it will be possible for me to successfully combine family and career.
- p) _____ Pregnancy and childrearing can provide a necessary complement to professional orientation.
- q) _____ Female residents should postpone their families until after completion of their residency.
- r) _____ Departments of Family Medicine should provide a group experience for residents and their spouses focusing on issues of combining family and career.
- s) _____ I feel a child would interfere with my commitment to my work.
- t) _____ Residency is a good time for a woman physician to become pregnant.
- u) _____ Women residents are less likely to be parents than men residents.

6
FORM #2

18. Please rate the following items on a scale of 1 - 5. 1=strongly disagree, 2=slightly disagree, 3= agree, 4=moderately agree, 5=strongly agree.

Pregnant Residents . . .

- a) _____ are usually more emotional than non-pregnant residents.
- b) _____ make it more difficult for other residents on the service.
- c) _____ can be more empathetic toward a prenatal patient than a non-pregnant physician.
- d) _____ are no different than non-pregnant residents in terms of their overall professional functioning.
- e) _____ can not adequately do their share of the work.
- f) _____ are usually calmer than non-pregnant residents.

II. RESIDENTS ONLY (please answer the following questions)

1. Have you or your spouse ever been pregnant during your residency?

- _____ no _____ twice
- _____ once _____ more than twice

2. Do you or your spouse plan to become pregnant during your residency?

- _____ yes _____ don't know
- _____ no _____ not applicable

3. If you were pregnant, you would be encouraged by your department to discontinue the residency to take care of your child. (check one)

- _____ not true _____ moderately true _____ very true
- _____ slightly true _____ true _____ not applicable

4. A flexible schedule residency would facilitate the combining of family and career for you. (check one)

- _____ not true _____ moderately true _____ very true
- _____ slightly true _____ true _____ not applicable

RESIDENTS ONLY - Continued

5A. (Women residents only) If I were pregnant, I would prefer this model for dealing with the situation:

- a) _____ Individual negotiation with director of residency program for time off.
- b) _____ Negotiated leave + option for part-time participation in the residency.
- c) _____ months unpaid leave (write #)
- d) _____ month(s) sick leave (write #)
- e) _____ months(s) paid leave (write #)
- f) _____ month(s) educational leave (write #)
- g) _____ month(s) additcnal unpaid leave (write #)
- h) _____ months leave + negotiated time (write #)
- i) _____ other _____

5B. (Men residents only) If my spouse were pregnant I would prefer this model for dealing with the situation:

- a) _____ month(s) leave during spouse's pregnancy
- b) _____ other: _____

6. If you and your spouse have had or would like to have a child during this residency what steps might you take to reorganize your home life (please rank order in terms of importance to you: 1=most important, 8=least important).

- a) _____ daycare
- b) _____ domestic help
- c) _____ babysitter
- d) _____ more time for you with your child
- e) _____ more time for your spouse with your child
- f) _____ spouse primarily responsible for childcare
- g) _____ childcare equally apportioned
- h) _____ other (specify) _____

Ellie

PREGNANCY SCALES

Personal attitude toward pregnancy during residency scale

<u>Positive Items</u>	<u>Negative Items</u>
17 f, m, t	12 a, h
18 c, d, f	17 b, k, q
	18 a, b, e

Environmental attitude toward pregnancy during residency
Departmental (residents & administration)

<u>Positive Items</u>	<u>Negative Items</u>
16 a	12 b, c II 3
Other residents, departments	12 d, e
	17 n
Patients	12 f
Childcare	12 i

Personal attitudes toward women physicians (!! THROW OUT !!) 17 a, i

Attitudes toward balance of family/career during residency

<u>Positive Items</u>	<u>Negative Items</u>
17 f, h, j, p, r	17 c, d, e, g, l, o, s

Policies

<u>Desired</u>	<u>Existing</u>
Flexible scheduling II4, 11b	14
Individual negotiation 5Aa	15 - short answer
Part-time participation 5Ab	
Paid leave 11 d, II5Ac	
Unpaid leave 5c	
Sick/education leave 5Ad, g	
No special treatment 11a	
Emotional support 11c	
Other 11g	
Counseling 11e, f	

2.

Demographic Information (frequencies)

- 1) How many residents
break down by dept.
- 2) How many faculty
break down by sex
- 3) How many administrators

3. Mean age for 3 grps

Sex frequencies for each group

4. Marital status frequencies for each grp
5. Number children frequencies for each grp
6. Faculty status
7. Year in residency
8. Planning children
9. Estimation of pregnant residents (by program?)
13. Contact with pregnant resident

II.

1. been pregnant during residency
2. Planning pregnancy during residency
6. Rank order most/least imp