Paper
Experiences of pregnancy/adoption leave during training

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Trainees and Programme experiences of maternity / adoption leave and return to training

Lara Bennett, Manchester Programme. GTiCP Nov 2018
Or.......“get a puppy instead”
The background

- Anecdotal evidence of more trainees having children during training (and starting training with children)
- Challenges involved in trying to do our best to support trainees alongside developing a part time / bespoke route for completion of training
- Experience of trainees sometimes getting ‘forgotten about’
Literature

- Very little on NHS professional training and experience of pregnancy / adoption / maternity leave / PT working

- But….
  - Finch 2003 medical training USA – physical demands and lack of support most stressful, need for clear policies
  - Bye et.al 2017 – medical training USA – clear policies, support and flexibility
  - Humphries et.al. 2017 – negative attitudes experienced and formal policies need to be clear
Trainee reflective account

- How do clinical psychologist parents reconcile their working & parental identities?
  - Autoethnography approach
  - George 2010 hypervigilance & self criticism for own parenting
  - Gaiotto 2011 CP parents hiding professional identity
  - Stevanovich 2011 & George 2010 Positive benefits – increased sensitivity, tolerance of & ability to manage emotional difficulties at home & enhanced empathy
  - Description of ‘care overload’ & emotional exhaustion Gaiotto 2011 & Bascu 1996
  - Impact of visible pregnancy on therapeutic relationship Fenster, Phillips & Rapoport 1986
What we did…

- Online select survey questionnaire x3
  - Trainees who have experienced maternity / adoption (M/A) leave and return to training
  - Trainees who have experienced someone join or leave their cohort due to M/A leave
  - Programmes experiences of supporting trainees

- Ethical approval

- Information sheet and consent form embedded in the survey link

- GTiCP programme lists used to send out to all UK programmes
Some programmes not able to send out to trainees due to University regulations – poster alternative

Error with age bracket!

6 months time frame – reminder email sent

Focus on maternity / adoption leave so female orientated

In sending out the links – facebook group and reflective account

Thanks to colleagues Clare Duddridge and Wendy MacDonald
Results - programme experiences

- 34 people opened the link
- 9 completed the questionnaire

3/9 programmes have specific policy for trainees to refer to for information about maternity / adoption leave
4/9 programmes have a specific member of staff who oversees M leave and return to training
4/6 programmes offer a part time route following return to training – all bespoke rather than formal PT route
3 programmes stated they had experienced trainees having more than one episode of M leave
Programme comments – challenges

- “challenges making deadlines pro rata and equal for trainees when on bespoke routes through training and using research time in blocks vs spread out” “viva dates”
- “trainees have been behind on return to research and have had to be given more time than others doing the same course, so no equal to other perhaps?”
- “generally been ok - teaching has to be attended and any missed sessions need to be caught up with, bespoke arrangements for deadlines”
- “some challenges in working out sufficient time on placement but generally been ok”
- “placement supervisors amenable, just clinical paperwork not coming in with everyone else is more challenging for the appraiser and possibly trainee”
Trainees who have experienced someone join or leave their cohort

35 people completed the questionnaire with 29 experiencing someone join or leave their year group

27 people felt it had no impact on their training with no one saying it was disruptive

21 treated no differently, 9 more support / preferential treatment, 2 viewed in a negative way

“took a while to adapt to the group dynamics”

“it did have an impact - positive!”

“.The course team didn’t let us know this was happening or welcome her to our year …we were confused who the trainee was”

“.difficult to adjust to a member of the cohort leaving and this wasn’t acknowledged..”
“...it feels like it’s viewed in a negative way”
“my gut feeling is its expected but not welcomed”
“one person was allowed to leave early for teaching to attend a maternity class...felt supportive...but would miss a lot of teaching”
“it can be annoying at times as it does take precedence over other trainees’ preferences”
“some flexibility...placements closer to home... but can be frustrating for others”
“subtle messages from the team ..avoid at all costs”
“trainee was well supported”
“I have a lot of admiration for trainees who have a baby…it’s hard work at the best of times”

“if we view training as a job, why should it be any different to how employers treat employees who have maternity leave?”

“I wonder about the social networks of the trainee going on maternity leave, in terms of establishing those networks in the year below… we are a close knit group…”

“sad moment to say goodbye…”
Trainees who have experienced maternity or adoption leave

- 173 people clicked on the link
- 26 people completed the questionnaire
- 79% 31-35 years old
- All had experienced maternity leave (no adoption)
- Pregnancy had occurred in year 1 or 2
- 88% planned
Factors involved in decision to have a baby

- Felt like the right time due to age
- Felt like the right time in career
- Security of 3 years employment

Other comments –

- “family member had experienced fertility issues and consequently went through IVF. It made me think about my own age, my desire for children and not wanting to leave it too late if I also experienced fertility issues”

- “I had another child already & didn't want a big age gap but I have difficulty conceiving and with miscarriages so I didn't actually feel it was that likely. I wasn't trying but wasn't not trying but didn't want to wait until I got older in case this reduced my chances further”

- “It was the right time in my marriage for my husband and I”
Other experiences

- Miscarriage
- Termination of pregnancy
- Pre / post natal medical complications for mother
- Pre / post natal medical complications for baby
- Fertility issues
- Twin conception with one twin dying in utero
7/12 respondents felt able to share their experiences with someone involved in the programme (including staff and peers) with the remainder not feeling they needed to share.

Pregnancy related difficulties included -

- Sickness
- Extreme discomfort
- Mobility problems
- Prenatal MH difficulties
- Fatigue
- Migraines
- Hypertension
- Pre-eclampsia
Programmes response to pregnancy - majority found programme supportive but 7 unsupportive

Cohort’s response – mostly supportive

12/26 knew their programme had a maternity leave policy with the majority finding this useful

Deadlines & exam conditions changed due to pregnancy related difficulties

Placement closer to home, risk assessments / client selection, working from home, different hours

”I didn’t really need any adjustments…other than empathy, kindness and consideration”
“I was still expected to commute an unreasonable distance, my family and friends were horrified by the lack of consideration”

“I had to commute up to 3+ hours per day, no possibilities for adjusting placement location were discussed. I also experienced difficulties with my supervisor… unsupported and discriminated against..”

8/26 respondents felt supported during their maternity leave
Part time working options

For 8 people PT working was an option

Comments –

“I applied twice and was turned down both times, the process was horrific…”

“I’ve been advised this is not an option”

“It wasn’t but I fought for it”

“They made it clear that they do not like it…but I argued a case and finally they have relented”
Adjustments following return to training – on the whole adjustments made, e.g. changes to deadlines, placements closer to home, flexible hours

- “Yes it was needed but not permitted, I was clearly informed having a baby is not 'an extenuating circumstance' so not covered by policy. I wanted more study days to be granted due to the exceptionally high coursework load on the course, but this was denied unless part time (lose pay) and/or extend past graduation which I didn't want to do”

- “It has been difficult at times meeting academic deadlines (e.g. when child has been unwell and I haven't been able to study) but I haven't asked for deadline extensions as I worry about not being granted them repeatedly”

- “I’ve had several deadlines moved but all at my request and not offered, I’ve also missed lectures due to childcare and my child being ill”
Joining a new cohort

- Positives and negatives
- Lack of introductions
- Difficulties integrating into a new year group

- “It’s been very isolating at times, particularly during thesis write up”

- “More relational difficulties and missing my previous cohort and joining a cohort that feels less caring/nurturing and more angry”
Effect of being a parent on training

Themes of:

- Competing demands / resentment
- Impact on career
- More organised / change of priorities
- Difficulties working with child protection issues
- Distance from peers
“much more aware of priorities”

“I think I’m maybe a bit more ‘laid back’ and can see the bigger context of life…I am aware of having much less time now and the struggle to juggle work with family.”

I think it took me by surprise how sensitive I felt about concerning information regarding children…working in child would not be an option professionally…”

“The idea of having to go ‘above & beyond’ is seen to be striving or perfectionism in trainees yet the demands of all aspects of the course seem to require this…”

“.completely shaped my training – changing priorities, giving me focus, stealing my time, making me more organised, causing huge stress, influenced placement and practice…”
“..I also feel quite angry at about the way I have been treated (lack of care & emotional atunement/ adjustments)

“.It made my empathy levels considerably higher…. positive and negative aspects…”

“My training has been a very isolating experience”

“.annoying to hear how ‘tired’ they were and how much sleep they’d had…having a baby / toddler…..completely different category of ‘tiredness’”

“helped me to consider values & be boundaried with my time, less stressed than peers."

“.I have less time to study….I feel I am disadvantaged.. parenting is all consuming especially in the throes of sleep deprivation.”
What else could the programme have done

- “Better coordination between university and trust”
- “peer support network”
- “they were very supportive”
- “very grateful to have an extra year and work part time”
- “..would've liked the opportunity to have a conversation about how I was getting on..adjusting to being a new mum…switching between roles was often exhausting and sometimes overwhelming”
- “return to work wasn’t acknowledged, new cohort not expecting me..”
- “firstly a shift in attitude..acknowledging pregnancy is common, far greater flexibility…”
- “part time options or placements closer to home”
“It feels very cruel to separate a parent from their small child by forcing them to come back to work full time. Not to mention the hypocrisy of the clinical psychology industry on one hand promoting and supporting early years bonding and attachment as a fundamental part of child emotional development but then forcing clinicians to be away from their infants at the one year stage. For many people this means putting a one year old in care from 8am - 6pm everyday which is extremely stressful for them. Not to mention heartbreaking for the parent.”
Other comments

- “I think although exhausting I wouldn't change the decision ....my girl is so wonderfully grounded in the moment & free of stress that she is a great tonic to the stresses of the course”
- “It was the best decision I’ve ever made”
- “negative attitude of prospective employers towards women having children”
- “the amount of inappropriate comments mostly from staff was an awful experience..”
- “we were told in induction week – don’t get pregnant”
- “it was a really painful experience – the more I reflect I feel my treatment was at best unethical and at worst illegal”
Summary

- Mixed experiences
- Some trainees feel very well supported throughout
- Some experience a great deal of stress and anxiety
- Beneficial impact on view of training
- Lack of support and flexibility cited frequently
- Difficulties in joining a new cohort
- Desire for flexible working and opportunities to have placements closer to home
Recommendations / comments

- Having a policy (either Trust or specific programme one)
- Offer support and flexibility during pregnancy especially with placement location / travel considerations
- Programme contact during maternity leave / KIT days
- Preparation and introduction to new cohort
- Part time options and flexibility with deadlines and placements
- Use of social media platforms
- Have a buddy system with another parent
- Learn from each other!