



# May highly educated women start families?

**The importance of workplace  
structures in hospitals from  
the perspective of young  
female doctors**

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Collaborative Project KarMed „Physicians’ Career  
Paths and Career Interruptions during  
Postgraduate Medical Education”

GEFÖRDERT VOM



# Structure

1. Introduction
2. Data & Methods
3. Results
4. Indications to organizational conditions that supports family formation of women doctors

# 1. Introduction

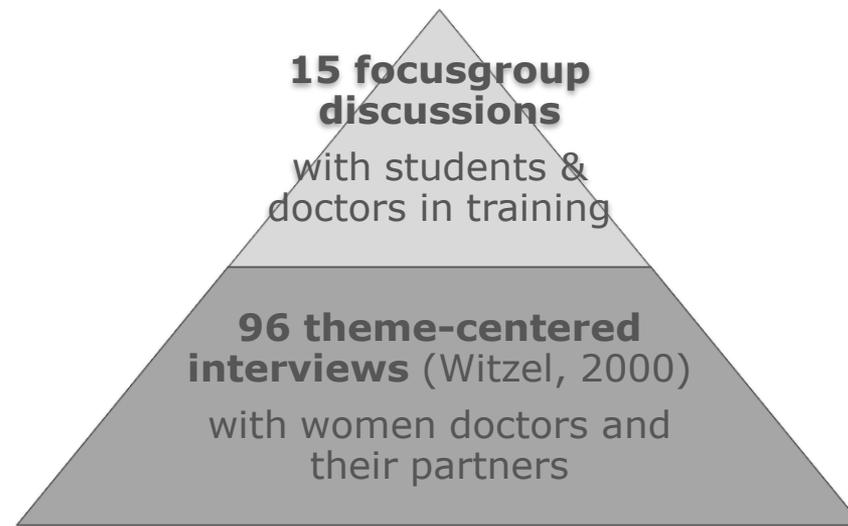
- Question:  
How do structures of the workplace (here: hospitals) promote the postponement of family planning of highly educated women?
- Thesis:  
Gender different value of parenthood by labour structures in hospitals

## 2. Data & Methods

- Project KarMed "Physicians' Career Paths and Career Interruptions during Postgraduate Medical Education" (BMBF, ESF), University of Leipzig/ University Hospital Hamburg-Eppendorf
- Theoretical basis: Doing Gender (West & Zimmerman, 1987)

## 2. Data & Methods

- Sample:

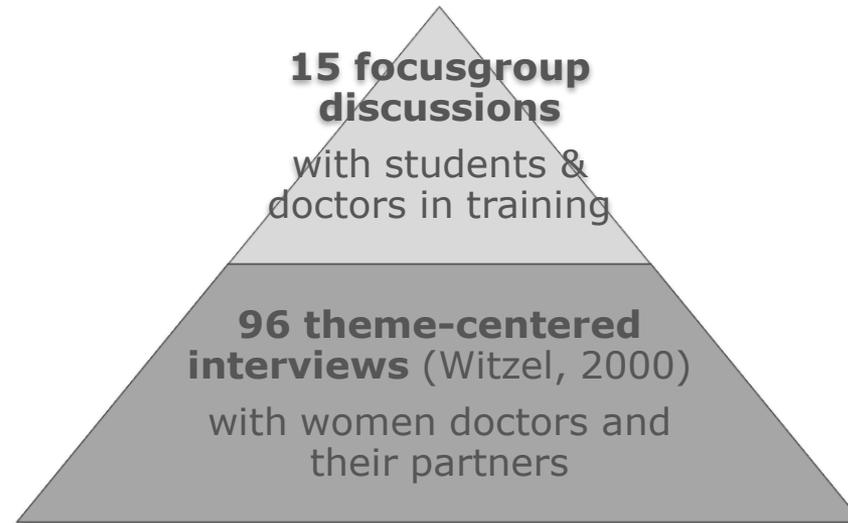


from t0 to t3, 2008-2012

- Analysis: Qualitative Content Analysis (Mayring 2007)

## 2. Data & Methods

- Sample:



from t0 to t3, 2008-2012

- Analysis: Qualitative Content Analysis (Mayring 2007)

### 3. Results

#### Extract 1: Educational and career setback due to the negative evaluation of pregnancy by a superior

*I: Ah and there you have conducted your specialist training*

*Af: Yes I started in A-town and then had been pregnant at the time in A-town and then when I was pregnant, my contract expired and **my former boss** gave me uhm, he never cared about any job from any other uh assistant physician and somehow he felt compelled to talk to me about and then **said**, huh Mrs. A. what do I do with you, well, **just take a look at yourself @ You're just a third-class candidate. No one wants you, pregnant as you are. @** So when I later ask myself what this ass told me there. (PNw DCC I, ZN 84-85)*

### 3. Results

#### Extract 2: Part-time because of childcare acts discriminatory (retarding) via less surgical entitlements

*Af: but I have seen a doctor who was already specialist in the hospital who has worked on a 50%-part-time position, right? She uhm is not as integrated into the team, she finishes at one o clock. I mean, she has a son and must also take care of him and yes and that's okay uhm but but she finishes at one o clock and she has really, relatively so she has relatively so she has pulled that through and has really finished at one o clock uhm and and but as an assistant it's like or as uhm, if you are still in specialist medical training, it's just like if you finish at one a clock, then yes you might not have the claim to this and this surgery. And that's why you cant complete your surgical your surgical plan, then the time will take even longer.*

(PGw2, DCC I, ZN 125)

## 4. Indications to organizational conditions that supports family formation of women doctors

Supporting Hospital Working Structures
▪ creating company nurseries (mainly due to shift work, weekend work and many overtime hours)
▪ no discriminating comments or actions by superiors and colleagues due to pregnancy or parenthood (including support of professional goal orientation)
▪ acceptance of “family formation” as a stage of life and corresponding life phase related personnel management, including acceptance of part-time and enabling part-time career models
▪ family-friendly learning alternatives during training (counteraction of boundless extension of training due to part-time)
▪ contract at least until the end of postgraduate medical education
▪ general reduction of workload during the qualification phase
▪ employing women doctors with child(ren), especially in high positions

Figure 2. Hospital working structures that support the family formation of women doctors

## For more results

Pannewitz, A., Gedrose, B., Alfermann, D.

Women Doctors in Conflict. The Impact of Hospital Working Structures during Postgraduate Medical Education on Female Career Development (submitted)

**Thank you for your attention.**

# Discussion

- Which discriminatory structures referring to gender and family roles overlap with other professional areas?
- What family-political and societal conditions are relevant?