

Title:	<b>Pregnancy and New Parenthood during Medical School</b>	Number:	<b>044</b>
Approved By:	Undergraduate Medical Education Committee (UGMEC)		
Approval Date:	16 October 2023	Next Review:	16 October 2026
Effective Date:	16 October 2023		
Audience:	Students, Staff and Faculty		
Purpose:	Provides a guide to supports if a medical student becomes a parent by pregnancy or other means during medical school.		
Related Policies and Procedures:	<ol style="list-style-type: none"> <li>1. Leave of Absence (#002)</li> <li>2. Attendance Policy and Absence Procedure (#006)</li> <li>3. Academic Advising: Requested Recommend and Required (#015)</li> </ol>		
Exclusions:	None		
Calendar Statement:	None		
Contact:	Associate Dean, Student Affairs		

## **Preamble**

The UBC MD Undergraduate Program (MDUP) is committed to supporting students who become parents by pregnancy or other means (e.g., surrogacy, adoption) during medical school. The Pregnancy and New Parenthood Policy should be read in the context of both Policy 002 and Policy 006 which apply to all leaves and absences. The policy and procedures below are specific to pregnancy and new parenthood during medical school, and do not apply to other types of requests for leaves of absence.

Given the complex and highly individual nature of pregnancy and new parenthood, this policy cannot cover all the potential contingencies; it is intended to provide a guide to supports should a medical student become a parent by pregnancy or other means during medical school.

## **Definitions**

Academic Plan	An individualized plan that is implemented as part of Required Academic Advising. It is developed by the Student Development and Support Subcommittee (SDSS) in collaboration with a student, to support the student to address performance deficits, missed program requirements or competencies.
Leave of Absence (LOA)	A temporary suspension of all academic, clinical and professional activities for a period of more than four consecutive weeks.
<ul style="list-style-type: none"> <li>▪ Medical LOA</li> </ul>	An LOA for a physical or mental health condition, including cognitive impairment or addiction to alcohol or drugs, that significantly interferes with a student’s ability to pursue the study of medicine, and/or provide safe patient care.



<ul style="list-style-type: none"> <li>▪ Parental LOA</li> </ul>	<p>An LOA for the birth or adoption of a child.</p>
<p>Negotiated Absence:</p>	<p>An absence that is requested for a foreseeable event, and must be pre-approved. The Program notes two types of Foreseen Absences:</p> <ul style="list-style-type: none"> <li>• <b>Negotiated Absence</b> is a type of Foreseen Absence that includes reasons listed in the UBC policy on Academic Concession and some professional and personal events as detailed in the procedure below.</li> <li>• <b>Personal Day</b> is a type of Foreseen Absence that a student may request when the reason for the absence does not meet the criteria for a Negotiated Absence</li> </ul> <p><i>**note: Personal Days are not intended for acute concerns about student health and wellness. If a student requires an absence for acute health-related issues/distress, they should report an Unforeseen Absence.</i></p>
<p>Regional Student Promotions Subcommittee (RSPS)</p>	<p>A Program site-specific subcommittee of the Student Promotion &amp; Review Board that oversees and reviews the academic performance of students at the Program site and confirms assignment of course grades to SPRB according to assessment policies.</p>
<p>Student Development and Support Subcommittee (SDSS)</p>	<p>Ad hoc subcommittees of the Regional Student Promotions Subcommittees that support students experiencing academic difficulties, returning from an LOA, or experiencing other special circumstances.</p>
<p>Unforeseen Absence</p>	<p>An absence that arises due to an urgent, unforeseeable event. Examples include personal or family illness (physical and mental)/distress, injury or emergency and bereavement.</p>



## Policy

---

1. The MDUP is committed to student safety and wellbeing during pregnancy and after the arrival of a child, whether by pregnancy, adoption, surrogacy or other means.
2. The program supports flexibility of scheduling and location for curricular and assessment activities for pregnant students and new parents, where possible, and as determined by the Regional Associate Dean or designate.
3. Support for safety will include procedures for mitigation of risks to pregnant students. Students have the right to refuse academic or clinical work they feel is unsafe and this applies in the context of pregnancy and breast/chestfeeding.
4. Medical students who are pregnant and/or become parents are expected to achieve all MDUP competencies. The type of supports offered to achieve those competencies will depend on the student's academic year and the amount of time the student plans to take away from the program, before or after the arrival of a child or due to safety concerns (see Policy # 015 - Academic Advising - Requested Recommend and Required).
5. All students who expect, or are required, to take more than four (4) consecutive weeks away from the MDUP for parental leave, whether for pregnancy, adoption, surrogacy or other means, must follow the LOA Policy 002 and inform the Associate/Assistant Dean, Student Affairs, in writing about the anticipated Parental LOA.

## Procedures

---

1. All students who expect to become parents during medical school are strongly advised to meet with the Associate/Assistant Dean, Student Affairs, as soon as parenthood is anticipated or as pregnancy occurs. Depending on the timing of the Parental LOA or absence, a SDSS may be required to proactively develop an Academic Plan, that will be approved by the RSPS. At this time, the need for accommodations or scheduling changes for curricular and assessment events will be discussed. Accommodations for pregnancy are not considered through the Centre for Accessibility.
2. All students who expect to become parents during medical school are strongly advised to meet with the Student Affairs Financial Advisor to fully understand the financial implications of an LOA.
3. Students who are pregnant should comply with WorkSafe BC regulations and occupational health and safety guidelines with respect to exposures that place the fetus or mother at risk.



It may be necessary to opt out of work in circumstances where existing protections are felt to be inadequate. For example, if:

- 3.1. PPE for protection against infectious diseases, toxic substances, or radiation exposure is deemed insufficient by an occupational health specialist.
- 3.2. Exposure to infectious diseases and the potential related impact of treatment or post-exposure prophylaxis is determined to be unsafe for mother or fetus.
4. UBC Safety & Risk Services advises all students anticipating conception, pregnant or breast/chestfeeding to wear a respirator mask during Gross Anatomy labs. The program will facilitate mask fitting.
5. Students should consider the following recommendations:
  - 5.1. Medical students who are pregnant should avoid physically strenuous work and heavy lifting, especially after 24 weeks of gestation.
  - 5.2. After 24 weeks gestation, medical students who are pregnant will not be required to work more than 12 continuous hours, as prolonged working hours have been associated with increased risk of complications in pregnancy.
  - 5.3. Medical students who are pregnant should avoid continuous prolonged standing for more than four hours at a time and, after 32 weeks gestation, should avoid standing for more than 30 minutes at a time.
  - 5.4. Medical students who are pregnant will be allowed to reduce, alter, or eliminate call at or after 32 weeks gestation, on recommendation of the student's health care provider. If key competencies are not achieved because of this accommodation, it may be necessary to extend training until those competencies are reached, as determined in collaboration with the student at a SDSS and approved by the RSPS.
6. Students who are pregnant and require additional accommodations as recommended by their health care provider in writing, should inform their Assistant Dean, Student Affairs as soon as these accommodations are recommended.
7. Medical students who are pregnant are encouraged to take maternity leave at any time during their pregnancy, guided by their personal experience and the recommendations of their health providers. Many students take maternity leave at approximately 38 weeks.  
Planning for Parental Leave or Absence:
  - 7.1. For Negotiated Absences of less than 4 weeks, please see Attendance Policy and Absence Procedure – 006
  - 7.2. For Parental LOA of four or more weeks, see Leave of Absence Policy – 002
8. Per LOA Policy 002, students returning from parental LOA may require a SDSS prior to returning to studies to develop an Academic Plan to address any necessary accommodations.

9. Students who are lactating or breast/chestfeeding are advised to notify their Assistant Dean, Student Affairs, who will then work with local administrative staff to identify lactation or breast/chestfeeding spaces available at each site, including sites at Health Authorities when on clinical placements.
  - 9.1. Students who are lactating or breast/chestfeeding are entitled to a space that: is private and comfortable; is physically as close as possible to the relevant lecture or clinical space; has a comfortable chair, a table, and an electrical outlet; and has a nearby sink for hand washing and a nearby fridge for milk storage.
  - 9.2. Students who are lactating or breast/chestfeeding are entitled to regular breaks, without formal accommodations.

## Review History

---

Action	Committee	Date	Status
Reviewed	Policy Advisory Subcommittee	19 November 2020	Endorsed
Reviewed	Safety & Risk Services	26 November 2020	Endorsed
Reviewed	Legal Counsel	10/11 December 2020	Endorsed
Reviewed	Undergraduate Education Committee	18 January 2021	Approved
Reviewed	Policy Advisory Subcommittee	17 August 2023	Endorsed
Reviewed	Undergraduate Education Committee	16 October 2023	Approved