**Submission Id: 2860** 

## **Title**

It's not just about my gender: The perspectives of underrepresented female in family medicine training.

## **Priority 1 (Research Category)**

Qualitative research

## **Presenters**

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## **Abstract**

Context: The increased enrolment of women and underrepresented in medicine (URM) into medicine has not led to equity and upward mobility in the workplace. Professional identity formation (PIF) is a crucial component of physicians' future professional choices. Data on the PIF of females and URM in family medicine is lacking. A granular examination of the challenges and opportunities experienced by URM female trainees and how they contribute to their PIF may offer a key to effective inclusion of women and URM and is consistent with social accountability.

Objective: 1) Investigate the perceived challenges and opportunities experienced by URM female family medicine trainees. 2) Explore how such experiences may impact their PIF.

Study Design: Qualitative.

Setting: University of Ottawa Department of Family Medicine (FM).

Population studied: FM trainees self-identified as female and URM enrolled in the postgraduate FM program at the University of Ottawa between June and November 2020. Self-identified males were excluded.

Instrument: Semi-structured focus groups. We applied an intersectional analytical framework that considers the complex influence of socio-cultural, racial, ethnic, and other markers of social difference to identify major thematic nodes of data on participants' experiences. We mapped how such experiences may impact their PIF and practice choices.

Outcome: Of the 10 participants we recruited half were Canadian medical graduates, and half international medical graduates. We held three 2-hours focus groups, two of them with three and one with four participants. Participants reported several visible (skin colour, ethnicity, and wearing visible religious symbols) and non-visible markers of difference (language, culture/ethnicity, religion, age, ability, country of education, and sexual orientation).

Results: We identified three major themes of experience: otherness, Hidden Curriculum, and emotional labour. While socializing within the profession, participants experienced additional tension between personal and "normative" physician identity, formal versus hidden curriculum and societal versus institutional expectations.

Conclusions: Female FM trainees from URM face unique challenges in current socio-cultural expectations and limited system-level support for their unique needs. These challenges may have unintended impacts on their career choice and delivery of care to key patient populations and professional leadership possibilities.