



EUROPEAN UNION OF GENERAL PRACTITIONERS/FAMILY PHYSICIANS
UNION EUROPEENNE DES MEDECINS OMNIPRACTICIENS/MEDECINS DE FAMILLE

PRESIDENT: Dr Tiago Villanueva (Portugal)
VICE-PRESIDENT: Dr Hermenegildo Marcos Carrera (Spain)
VICE-PRESIDENT: Dr Dragan Gjorgjievski (North Macedonia)
VICE-PRESIDENT: Dr Branka Lazić (Serbia)
VICE-PRESIDENT: Dr Peter Holden (UK)



Document No	
Object	UEMO Principles to support women working in medicine
Author	UEMO BOARD
Date of transmission	06/06/2026

UEMO Principles to support women working in medicine

Doctors and medical students should work in environments free from discrimination, where their gender does not limit career progression. The medical profession should celebrate diversity, making all doctors and medical students feel valued and included. All doctors and medical students must be given a safe environment to work in, where they are protected by their employers.

- 1. Eliminate sexism from career progression opportunities.**
 - 2. Promote the benefits of gender diversity in medicine and increase the visibility and voices of women.**
 - 3. Actively challenge gender stereotypes in medicine.**
 - 4. Remove the detrimental impact that having children and other caring responsibilities can have**
 - 5. Guarantee safe and supportive environments for pregnant doctors**
 - 6. Support women's health.**
 - 7. Modernise the model of medical training**
-
- 1. Eliminate sexism from career progression opportunities.**
 - Implement success measures and metrics to monitor and drive progress.
 - Examples would include:
 - Transparently report gender balance in organisations
 - Compare gender balance of leadership roles with organisational gender balance
 - Compare gender balance of leadership role short lists with overall organisational gender balance

2. Promote the benefits of gender diversity in medicine and increase the visibility and voices of women.

- Encourage people and organisations to address sexism and reward those who take action to improve gender diversity. For example, through education on the impact of sexism on recruitment, retention, and wellbeing.
- Promote female role models and mentoring.
- Provide leadership training both at postgraduate level and as part of continuing professional development.
- Provide clear pathways to career progression.
- Implement training in practice management and partnership negotiation.
- Ensure women are represented and recognised in decision-making, leadership teams, and events.

3. Actively challenge gender stereotypes in medicine.

- Look at transparency and pay reporting, ensuring that this is done in a systematic and effective way.
- Senior doctors should call out sexism and be responsible and accountable for addressing their own bias.
- End the assumption that certain specialties are more suited to certain doctors based on their gender and the wider stereotype that being a doctor is a male role.
- Education and training of gender equality issues including addressing unconscious bias in medicine and management should be implemented.
- Ensure robust mechanisms for reporting and addressing bullying, harassment and discrimination from both staff and patients in the workplace are fit for purpose.
- Encourage organisations to consider the impact of different patient expectations of female and male clinicians and the subsequent impact on workload

4. Remove the detrimental impact that having children and other caring responsibilities can have

- To create a better gender balance in medicine, family friendly policies are required.
- More flexible options for working should be supported including options for part-time working and job sharing.
- Explore where possible flexible and affordable childcare options on site in line with working hours, especially in large organisations.
- Appropriate lactation facilities and breaks for breastfeeding in line with breast feeding policies
- Support doctors in returning to work after taking career breaks.
- Equal access to development opportunities, career progression and fair working practices for doctors with caring responsibilities and those who work flexibly

5. Guarantee safe and supportive environments for pregnant doctors

- All pregnant and breastfeeding doctors should have access to high-quality risk assessments and be encouraged to prioritise their health and safety at work.
- Allow parents to take their full entitlements of maternity and parental leave.
- Terms of maternity / paternity leave including pay should be fair and not contribute to the existing gender pay gap.
- Consider how to assess and support pregnant women's working patterns to reduce pressure during mid and late pregnancy, especially night working

6. Support women's health.

- Policies should be put in place to ensure that workplaces and medical schools are inclusive of women's health and wellbeing. For example, implementing policies on menstruation, menopause, and domestic violence.

7. Modernise the Model of Medical Training

- Medical training should maintain high standards to ensure high quality patient care.
- The model of medical training is in urgent need of reform and modernisation to meet the requirements of young medical professionals.
- Greater predictability of location of rotations should be established to better support families.
- More flexible training options should be established as well as the possibility of co-locating partners in the same region to support families
- Implementation of more flexible and consistent working hours.
- Improving access to more local fellowship opportunities, so that medical students do not have to choose between these opportunities and family commitments.
- Ensure time made up for maternity or other parental leave is proportional.