
Men also need bathroom breaks

RAGNHILD ØRSTAVIK

ragnhild.orstavik@tidsskriftet.no

Ragnhild Ørstavik, MD, PhD, assistant editor-in-chief of the Journal of the Norwegian Medical Association and senior researcher at the Norwegian Institute of Public Health.

Everyone needs to take part in the discourse about our well-being in the workplace.



Photo: Einar Nilsen

'What do I do if my pager goes off when I'm on the toilet?' She hadn't said anything up to this point, sitting tucked away in the corner, but now she was asking the question on all of our lips. It was the early 1990s and we were 12 house officers on our first day of work at a medium-sized hospital in Central Norway. We were excited and a little scared – at least I was.

I do not recall the answer we were given. But I hope no one advised us to avoid the problem by not drinking. Because among all the stories this summer about young doctors' well-being at work, perhaps one of the most powerful was the one about the woman who undertook self-imposed dehydration (1). The case is part of the social media campaign #legermåleve (doctors must live) that was initiated following a young colleague's suicide in June.

A year earlier, a specialty registrar advocating for better working conditions received considerable media attention and a record number of readers in the Journal of the Norwegian Medical Association (2), and this winter, the orthopaedists at Akershus University Hospital told of colleagues who would rather be involved in a traffic accident than come to work (3). Now young doctors all over Norway are highlighting the challenging working conditions and asking for recognition that our occupational group should also be able to have a healthy work-life balance.

«Young doctors are asking for recognition that our occupational group should also be able to have a healthy work-life balance»

This situation is not unique to Norway: in the United States, 'physician burnout' has been described as a public health crisis (4). In England, junior doctors held regular strikes throughout the spring, and are warning of further strikes. While their demand is for higher wages, studies show that salary levels are actually low on the list of factors contributing to dissatisfaction: heavy workloads, understaffing and lack of guidance are rated higher (5). Doctors believe that stress levels are the cause of a range of health problems, including panic attacks, migraines and hair loss, and many want to leave the public health service (6, 7).

In Norway, the vast majority of stories so far have come from female doctors, and many were first shared in online forums exclusively aimed at female doctors. The #legermåleve campaign could therefore be said to be reminiscent of the #metoo campaign, where the discourse also started in closed networks of women talking to women before spreading to more open channels and other media. While sexual harassment primarily affects women, most problems related to the working environment are relevant to both men and women. In a closed Facebook group for female doctors in Norway, I myself have long read about despairing colleagues who advocate for a healthy work-life balance, and who have expressed uncertainty, anxiety and regret over their career choices. Some have sought advice from the group – and received it: good advice, as far as I have been able to judge, but notably without the opportunity to receive input from the male doctors that make up nearly 50 % of all doctors in Norway.

«The need for an acceptable work life should not be reduced to a 'woman's problem'»

The need for an acceptable work life should not be reduced to a 'woman's problem'. Data from the United States may indeed indicate that burnout is more common among female doctors, and the gender disparity can perhaps be explained by the fact that the work is not entirely compatible with family life (8). Additionally, in a recent working environment survey of Danish doctors, slightly more women than men (24 % versus 18 %) reported a high or very high level of work-related stress (9). Meanwhile, a Norwegian study of doctors shows that both women and men believe a healthy work-life balance, low levels of job-related stress and strong support from colleagues are crucial for well-being at work (10). Excessive job-related stress is not confined to young doctors either: in the Danish survey, work-related stress was equally prevalent among senior consultants as among specialty registrars (11).

This autumn, a new group of hopeful students will start their medical studies. In six years' time, they will enter the workforce. Their medical studies will afford them a multitude of opportunities, and not all of them need to choose patient-centred work. But many must, if the vision of the Health Personnel Commission is to be realised and the public health service is to survive (12). This is yet another reason why something must be done about doctors' workloads and working environment. The discourse has begun, and it is important going forward that everyone has their say.

REFERENCES

1. Blindheim S, Zerener A, Sørøy A et al. Norske leger jobber seg i hjel: – Jeg har fått kronisk skade på grunn av dette systemet. *Psykologisk.no* 29.6.2023. <https://psykologisk.no/2023/06/norske-leger-jobber-seg-i-hjel-jeg-holdt-pa-a-do> Accessed 28.7.2023.
2. Schei V. En turnusleges bønn om bedre arbeidsvilkår. *Tidsskr Nor Legeforen* 2022; 142. doi: 10.4045/tidsskr.22.02693. [CrossRef]
3. Leger gråter på jobb og håper på omgangssyke for å slippe vakter. *NRK* 21.2.2023. https://www.nrk.no/osloogviken/ahus-leger-jobber-sa-mye-at-de-blir-utslitt_-_-en-lege-haper-pa-bilulykke-for-a-slippe-nattevakt-1.16280131 Accessed 28.7.2023.
4. Paredes AZ, Cochran A. Career Satisfaction and Burnout in Surgery-The Complex Interplay of Self-care, Work Life, and Home Life. *JAMA Surg* 2020; 155: 750–1. [PubMed][CrossRef]
5. 'Harrowing' work pressure giving NHS junior doctors panic attacks, study finds. *The Guardian* 14.3.2023. <https://www.theguardian.com/society/2023/mar/14/harrowing-work-pressure-giving-nhs-junior-doctors-panic-attacks-study-finds> Accessed 28.7.2023.

6. Ali F. Without junior doctors, there is no NHS. *BMJ* 2023; 382: 1536. [PubMed][CrossRef]
7. A perfect storm of poor conditions and pay. British Medical Association 2. 4.2023. <https://www.bma.org.uk/news-and-opinion/a-perfect-storm-of-poor-conditions-and-pay> Accessed 28.7.2023.
8. Yeluru H, Newton HL, Kapoor R. Physician Burnout Through the Female Lens: A Silent Crisis. *Front Public Health* 2022; 10: 880061. [PubMed] [CrossRef]
9. Yngre Læger. Arbejdsmiljøundersøgelse 2023. Arbejdsrelateret stress og travlhed blandt yngre læger.
https://laeger.dk/media/holj5ups/arbejdsmiljoe-yl-2023_stress-travlhed.pdf Accessed 28.7.2023.
10. Mahmood JI, Grotmol KS, Tesli M et al. Life satisfaction in Norwegian medical doctors: a 15-year longitudinal study of work-related predictors. *BMC Health Serv Res* 2019; 19: 729. [PubMed][CrossRef]
11. Schultz H. Ingen må blive syg af at gå på arbejde. *Ugeskr Laeger* 2023; 185: 1009.
12. NOU 2023:4. Tid for handling. Personellet i en bærekraftig helse- og omsorgstjeneste.
<https://www.regjeringen.no/contentassets/337fef958f2148bebd326f0749a1213d/no/pdfs/nou202320230004000dddpdfs.pdf> Accessed 28.7.2023.

Publisert: 14 August 2023. Tidsskr Nor Legeforen. DOI: 10.4045/tidsskr.23.0490
© Tidsskrift for Den norske legeforening 2026. Downloaded from tidsskriftet.no 20 February 2026.