



## Features

### Chroniques

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# Negative health care environment weighing on residents, survey reveals

**Jill Rafuse**

About 20% of recent Canadian medical graduates would consider changing their residency discipline if the opportunity presented itself, and the Canadian Resident Matching Service (CaRMS) says this proves that there should be more flexibility in medicine's postgraduate system.

In releasing its fourth annual postmatch survey recently, CaRMS said the demise of the rotating internship and the move to a minimum of 2 years' prelicensure training have increased pressure on both students and the undergraduate curriculum. Executive director Sandra Banner said the need to make a career choice in the final year, which students perceive as irrevocable, has put incredible pressure on graduating students and may have a detrimental effect on their final year. The survey included responses from more than 1000 students who graduated from Canada's 13 English-language medical schools in 1996.

It indicates that 196 graduates, or about 20% of respondents, either are undecided or would change their residency discipline if they could. The greatest degree of uncertainty surrounds laboratory medicine, where half of the 14 graduates matched to the specialty said they were uncertain about this career path.

But Banner said she was also concerned about the number of students who were not confident about pursuing a career in family medicine. Of the 359 respondents who were matched to a family medicine residency, 96 students, or 26%, said they would change or consider changing programs if they could, and 74% said they would consider future specialty training or re-entry to the residency match in the future. Of those who said they would consider postresidency specialty training, the greatest proportion said they are interested in emergency medicine (47%), anesthesia (16%) or obstetrics-gynecology (9%). In each of the last 4 graduating classes a significant proportion of students matched to family medicine have said they are considering training that would lead to a different career.

"We have a whole class of family physicians who are uncertain about the future and don't want to be locked into a career at this point," Banner said in an interview. "Family medicine has been the focus of a lot of restrictions across the country, and it's not surprising that this group is less stable than we might like."

Banner thinks the data reflect the uncertainty facing the medical profession rather than general unhappiness with the match results. About 88% of students, in fact, were granted their first-choice discipline in the first round of the 1996 CaRMS match. Even though 20% said they might like to consider changing disciplines, they were not clamouring for only 1 or 2 popular fields; the first-choice alternatives were across the specialty-training map.

"What the students lack is confidence," Banner concluded. Many respondents, including those who reported they were happy with their residency match, said they would have liked more information about the medical-political environment on which to base their decisions and were frustrated that few concrete data were available.

"Students are terribly aware of the changing health care environment and the pressures on the medical profession," Banner said, "but the fact is we don't know — no one knows — where medical politics is going. It's unfortunate that the more students need this information the less it is available."

Better access to information from residents, data on job opportunities and trends in medical care, as well as more time to decide, would have helped their decision-making, graduates said. More information on the 1996 survey is available in the Pulse column on page 1248. ?