

Residents' Page



Where have all the residents gone?

Part 2: Renewing interest in family medicine (continued from June 2006)

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Various factors have contributed to the recent decline in applications to family medicine residency programs in Canada. The first article in this series¹ described some of the reasons medical students are not choosing family medicine, such as perceived low prestige, heavy workloads, and breadth of knowledge required. It also explored this trend in the context of increasing financial pressures involved in studying medicine.

Perhaps 2006 will be a banner year for family medicine. Newly implemented strategies could well revive enthusiasm for family medicine despite deteriorating student interest in the discipline. The College of Family Physicians of Canada has already taken the initiative by creating scholarships and prizes for medical students showing strong interest in family medicine. The criteria for these awards must be augmented to include Canadians studying medicine abroad. These students number in the hundreds at medical schools in the United States, Europe, and Australia^{2,3}; their repatriation should be encouraged. Furthermore, the awards should be partly contingent on beginning a residency in family medicine; anecdotal evidence suggests that a few award recipients do not actually pursue careers in family medicine. The awareness campaign surrounding Family Doctor Week is another innovative idea that builds on Canadians' considerable trust in their GPs. The Canadian Federation of Medical Students, the College of Family Physicians of Canada, and Health Canada have all helped to raise the profile of family medicine by supporting Family Medicine Interest Groups in our medical schools.

Efforts need to be redirected toward attracting capable, interested students who might otherwise be scared away from family medicine before they even apply. Governments must implement more progressive student loan policies, specifically making loan repayments income sensitive, with long-term amortization. In addition, medical schools should grant student status to residents, to allow deferral of loan repayments until the end of their training; some schools have already implemented this policy.⁴ Furthermore, pressure must be maintained on governments to control tuition so that increases are accountable and justifiable to students; hikes that greatly exceed the rate of inflation are indefensible.

The most important step will be disseminating positive information to prospective students at the secondary

and undergraduate levels. These students, particularly underrepresented groups, need early reassurance that they will not be forever in debt if they pursue careers in family medicine. A rural outreach program run by the Canadian Federation of Medical Students already exists, designed to increase interest in medicine among rural high school students. Family medicine organizations, however, are ideally positioned to take a leading role in formalizing outreach programs that would promote family medicine as an attainable, rewarding, and interesting career. Providing outreach activities, including speaking tours, information days, and individual mentorship for secondary students, could increase the number of applicants to medical school who already hope to practise family medicine. Students' career intentions at entry to medical school are, in fact, strong predictors of specialty choice.⁵

These 2 articles have assessed the current reduced interest in family medicine as a career option for new physicians. Increased tuition and debt loads weigh heavily on medical students, residents, and students contemplating studies in medicine. Family medicine residencies struggle with a declining applicant pool because of perceived lower prestige, lower income, and heavier workloads. As the medical student demographic shifts in response to financial pressure, family medicine residencies might be losing out on potential applicants before they even apply to medical school. Several initiatives are already under way to improve this situation, but more innovative ideas need to be implemented at a grass-roots level to renew enthusiasm for our discipline. 

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