

Resident physicians should get help to shoulder financial burdens

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One in four medical students graduates with training-related debt that exceeds \$200,000, and half of medical school graduates report debt burdens greater than \$150,000. Those financial burdens are combined with a demanding schedule during graduate medical education and can affect well-being for physician residents and fellows.

“Between financial restraints and 80-hour workweeks, trainees often struggle with having the time and budget for necessities. When residency and fellowship programs provide benefits to assist with these needs, it can significantly improve trainee well-being,” said AMA Trustee Jesse M. Ehrenfeld, MD, MPH.

The AMA House of Delegates acted to support resident physicians, directing the AMA to:

- Work with the Accreditation Council for Graduate Medical Education (ACGME), and other relevant stakeholders to advocate for additional ways to defray costs related to residency and fellowship training, including essential amenities or high-cost specialty-specific equipment required to perform clinical duties.
- Work with relevant stakeholders to define “access to food” for medical trainees to include overnight access to fresh food and healthy meal options within all training hospitals.
- Prominently publish “The Residents and Fellows’ Bill of Rights” on the AMA website and disseminate it to residency and fellowship programs.

Delegates at the June 2021 AMA Special Meeting also amended “The Residents and Fellows’ Bill of Rights” for the AMA to “partner with ACGME and other relevant stakeholders to encourage training programs to reduce financial burdens on residents and fellows by providing employee benefits including, but not limited to, on-call meal allowances, transportation support, relocation stipends and child-care services.”

Help for residents affected by the pandemic

The COVID-19 pandemic has changed the course of training for an entire generation of physicians in training. In some cases, it led to a decrease in clinical volume and potential experiences for resident physicians. In other cases, residents were overworked and under supported—denied resources such as personal protective equipment, hazard pay or mental health support.

With an acknowledgment of the burdens the pandemic has placed on many physicians in training, and recognizing that GME programs have alternative mechanisms to ensure resident physicians' competence, delegates directed the AMA to:

- | Work with relevant stakeholders to advocate for equitable compensation and benefits for residents and fellows who are redeployed to fulfill service needs that may be outside the scope of their specialty training.
- | Urge the ACGME and specialty boards to consider reducing case numbers and clinic visits with revised holistic measures to recognize resident-and-fellow learning, given the drastic educational barriers confronted during the COVID-19 pandemic.

Read about the other highlights from the June 2021 AMA Special Meeting.