

Find new ways to help medical students, residents get child care

The AMA House of Delegates has adopted policy aimed at addressing the cost of child care for cash-strapped and busy medical students, residents and fellows. Child care is a major household expense for most American families. Medical students, residents and fellows with young children are no exception.

The U.S. Department of Health and Human Services considers child care affordable if it costs families no more than 7% of their income. The average salary for a first-year resident physician in 2021 was \$58,650, while center-based child care ranged from \$5,700 to \$16,000 annually.

That math puts significant pressure on medical students, residents and fellows to solve a complex problem with limited resources, and the results can extend beyond financial stressors.

“There is a nationwide lack of options for affordable, accessible, quality child care for the U.S. public in general, but in particular for individuals of lower income and with work schedules that are non-traditional, varied or inflexible,” says an AMA Council on Medical Education report whose recommendations were adopted by the House of Delegates at the 2022 AMA Annual Meeting in Chicago.

“Medical students and residents who are parents face child care challenges that include low or even non-existent income, rigid academic schedules, and training and service requirements that extend the workday well beyond what can be easily accommodated by most child care providers,”

Citing data that indicates that the struggle of juggling child care and medical education can further increase stress for individuals who are in an environment that has been documented to increase levels of depression and burnout, the delegates adopted policy to address what is a heavy burden for students and physicians across the spectrum of training.

“Many physicians-in-training may become parents during their medical training, a time when their pay is low or non-existent and they’re working highly unconventional hours,” said AMA President-elect Jesse M. Ehrenfeld, MD, MPH. “We believe providing on-site or subsidized child care to medical students and residents during their training will help alleviate some of the financial burden they face and offer the best possible solution to their family’s child care needs.”

With the new policy, the AMA will:

- Recognize the unique child care challenges faced by medical students, residents and fellows, which result from a combination of limited negotiating ability (given the matching process into residency), nontraditional work hours, extended or unpredictable shifts, and minimal autonomy in selecting their work schedules.
- Recognize the fiscal challenges faced by medical schools and graduate medical education institutions in providing onsite or subsidized child care to students and employees, including residents and fellows.
- Encourage provision of on-site or subsidized child care for medical students, residents and fellows.

Delegates also directed the AMA to “work with the Accreditation Council for Graduate Medical Education, Association of American Medical Colleges, and American Association of Colleges of Osteopathic Medicine to identify barriers to child care for medical trainees and innovative methods and best practices for instituting on-site or subsidized child care that meets the unique needs of medical students, residents, and fellows.”

Parental leave for medical students

In a separate action, delegates moved to address family-planning resources and parental leave options for medical students.

Roughly one in 10 medical students will be parents by the time they earn a medical degree, according to research cited in a resolution from the Illinois delegation.

Despite that, resources offering clear information to medical students about navigating the process of having or rearing a child while progressing through medical school are often lacking, creating an additional stressor during a chaotic period in the lives of these new caregivers and future doctors.

“It is essential that medical students are able to take parental leave during their medical training without fear of penalty or punishment. We urge all medical schools to offer at least six weeks of parental leave to their students,” said AMA Trustee Drayton Charles Harvey.

To remedy the issue, delegates adopted new policy to:

- Encourage medical schools to create comprehensive informative resources that promote a culture that is supportive of their students who are parents, including information and policies on parental leave and relevant make up work, options to preserve fertility, breastfeeding, accommodations during pregnancy, and resources for child care that span the institution and

the surrounding area.

- Encourage medical schools to give students a minimum of six weeks of parental leave without academic or disciplinary penalties that would delay anticipated graduation based on time of matriculation.
- Work with key stakeholders to advocate that parties involved in medical training—including, but not limited to, residency programs, administration, fellowships, away rotations, physician evaluators and research opportunities—do not discriminate against students who take family or parental leave.

Delegates also directed the AMA to “advocate for medical schools to make resources and policies regarding family leave and parenthood transparent and openly accessible to prospective and current students.”

Read about the other highlights from the 2022 AMA Annual Meeting.