

# Balancing a Family in Medicine: What is Important to Medical Students when Choosing a Specialty and Residency Program?

Taryn Boucher, MS4, Amanda Kadash, MS4, Emily B. Rosenfeld, DO, Julia Keltz, MD  
Department of Obstetrics-Gynecology, New York Medical College and Westchester Medical Center, Valhalla, NY 10595

## Background

Parenting during medical training has been addressed at the resident and post-graduate level, yet little is known about how medical students think about these issues. Medical students who desire a family may consider several factors when choosing a specialty and residency program.

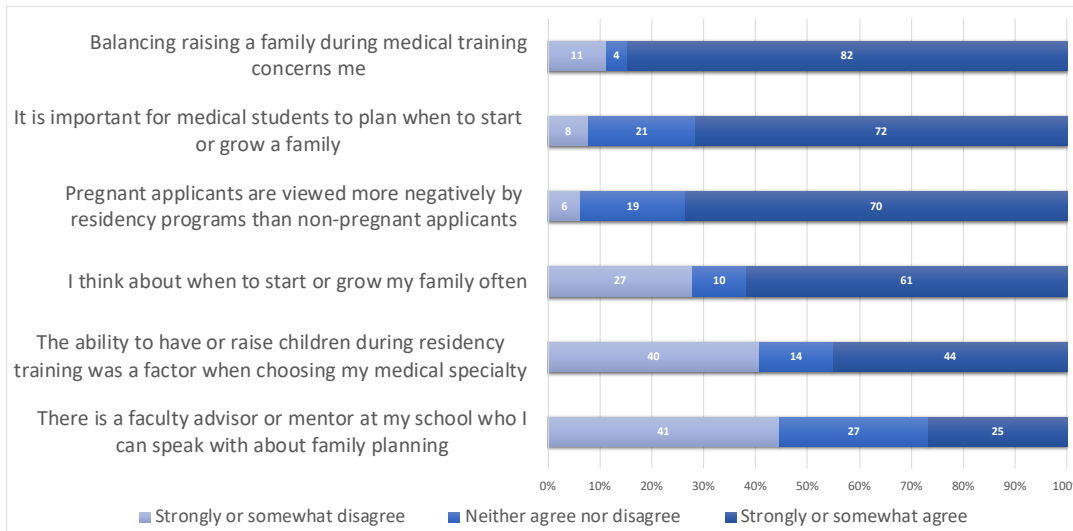
## Methods

Students from 196 US allopathic and osteopathic medical schools who are participating in the 2020-2021 Residency Application cycle were invited to take a novel 24-question online survey. Thoughts about family planning were formatted on a 5-point Likert scale of agreement (1=strongly disagree to 5=strongly agree). Factors of importance when choosing a residency program were formatted on a 5-point Likert scale of importance (1=not at all important to 5=extremely important). Descriptive statistics were used for demographics and Mann-Whitney tests were applied to look at different responses between groups.

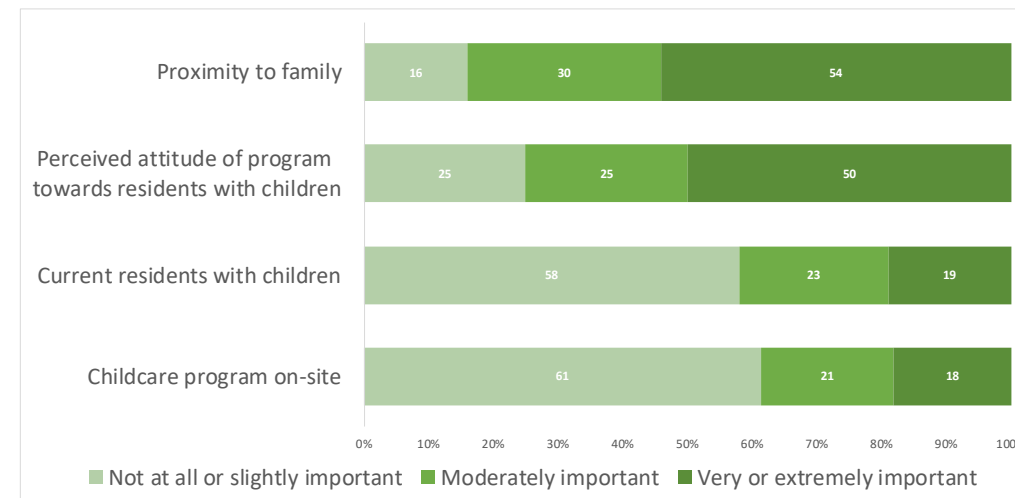
## Results

415 students responded to the survey at the time of analysis. Demographic information is shown in Table 1. Likert scale responses are shown in Figures 1 and 2. **Those pursuing non-surgical specialties ( $p=0.002$ ), plan to carry a child themselves ( $p<0.001$ ), or plan to start a family during residency ( $p<0.001$ ) were more likely to choose a medical specialty based on the ability to have or raise a child during residency.**

**Figure 1. Student Thoughts about Family Planning**



**Figure 2. Desired Residency Program Characteristics**



**Table 1. Demographics**

	n (%) or n (SD, range)
<b>Mean age in years</b>	27 (2.9, 23-40)
<b>Sex</b>	
Female	272 (66.2)
Male	139 (33.8)
<b>Race</b>	
White	269 (65.5)
Asian	91 (22.1)
Other	26 (6.3)
Black or African American	24 (5.8)
Native Hawaiian or Pacific Islander	1 (0.2)
American Indian or Alaska Native	0 (0)
<b>Ethnicity</b>	
Hispanic or Latinx	42 (10.4)
Not Hispanic or Latinx	363 (89.6)
<b>Region of medical school</b>	
Northeast	124 (30.2)
Midwest	87 (21.2)
South	147 (35.9)
West	52 (12.7)
<b>Residency Choice</b>	
Non-surgical	303 (75.8)
Surgical	97 (24.1)
Undecided	3 (0.7)
<b>Planning to have children in future</b>	
Yes	327 (78.8)
<b>Method of childbearing</b>	
Will personally carry child	251 (63.5)
Someone else will carry child	144 (36.5)
<b>Timing of when to start or grow family</b>	
During medical school	7 (1.8)
During residency	199 (50.5)
After residency	112 (28.4)
Unsure	76 (19.3)

## Discussion

Students report the ability to have a family is important when choosing a specialty and residency program. Program administrations should adopt policies to support trainees who desire to start a family during medical training.

### References

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