

Will Rural Family Medicine Residency Training Survive?

Background

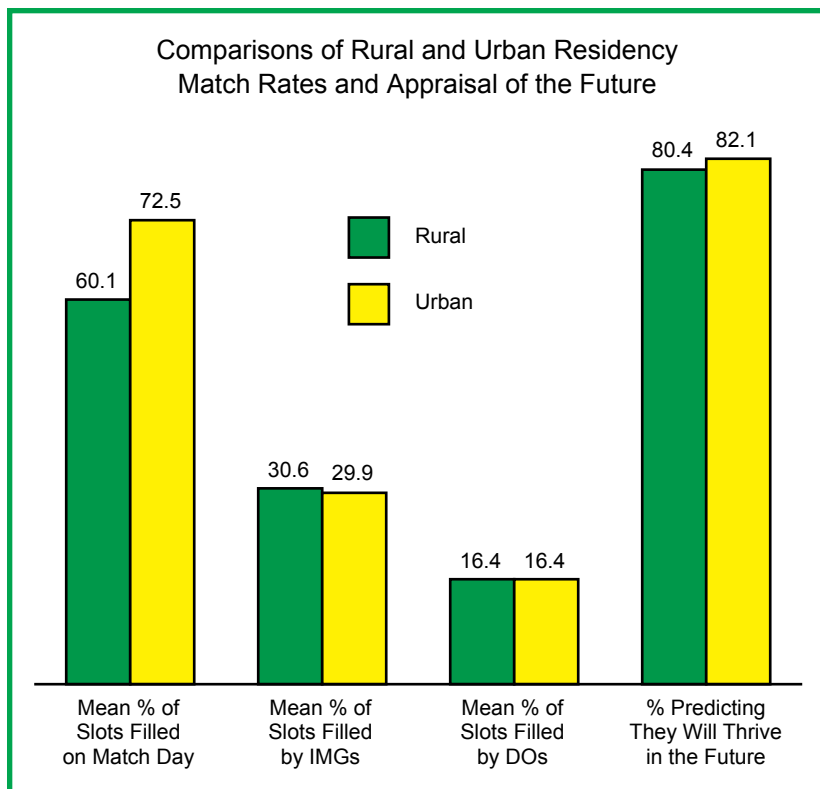
Rural family medicine residencies may be more threatened by declining interest in family medicine than their urban counterparts. This study examines the recent performance of these residencies in the match as an indicator of viability.

Study Design

We surveyed all 30 family medicine residencies located in rural areas of the United States during the summer of 2004 and a geographically matched sample of 31 urban residencies. We gathered information about the resident “matching process” (where medical school graduates match with residency programs) for 2002, 2003, and 2004. The survey response rate was 70.5%.

Major Findings

- Rural residency programs had lower match rates (60.1%) than urban programs (72.5%).
- Rural programs had a similar proportion of international medical graduates (IMGs) and doctors of osteopathy (DOs) who ultimately accepted positions compared with the urban programs.
- Rural programs that were concerned that they might close during the next two years had much lower match rates than programs with an optimistic view of their future.
- The two factors associated with lower match rates, when other variables were taken into account, were the proportion of IMGs in the two previous entering years and whether or not the residency had a stated rural mission.



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Policy Implications: Rural programs appear to be slightly less stable than their urban counterparts, but the differences are minor. The viability of rural family medicine residency programs is probably affected more by the overall attractiveness of family medicine as a discipline than the rural or urban location of the residency. The fate of rural residency programs will probably be determined by the overall status of family medicine as a medical discipline.

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