

1 **OHIO STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES**

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3 **Resolution No. 13 – 2024**

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5 **Introduced by:** Medical Student Section

6  
7 **Subject:** Improving Transparency of Parental Leave Policy in Graduate  
8 Medical Education

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10 **Referred to:** Resolutions Committee No. 1

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13  
14 **WHEREAS**, compared to their nonphysician counterparts, physicians  
15 significantly postponed childbearing, potentially putting themselves and their children  
16 at increased risk of age-related adverse pregnancy outcomes<sup>1</sup>; and

17  
18 **WHEREAS**, the mean age for first pregnancy for physicians had been  
19 reported to be 30.4 years compared to 27.0 years amongst the general  
20 population<sup>2</sup>; and

21  
22 **WHEREAS**, paid parental leave is associated with decreased infant mortality,  
23 improved physical and mental wellbeing, increased parental participation in the labor  
24 force, and increased morale for parents<sup>3</sup>; and

25  
26 **WHEREAS**, a study of GME programs affiliated with the top 59 medical schools  
27 (according to the US News & World Report), including several medical schools in Ohio,  
28 revealed that 42% did not provide any paid leave<sup>4</sup>; and

29  
30 **WHEREAS**, a 2017 survey of 347 general surgeons who have had at least  
31 one pregnancy during residency from across the United States, including Ohio, was  
32 conducted; this survey revealed that participants' main concerns included negative  
33 stigma associated with pregnancy during medical training, dissatisfaction with  
34 maternal leave options and work schedules during pregnancy, and ultimately 39% of  
35 these participants seriously considered leaving residency<sup>5</sup>; and

36  
37 **WHEREAS**, over two thirds (67%) of recent medical graduates hold a  
38 stigmatized view of pregnancy during training<sup>6</sup>; and

39  
40 **WHEREAS**, across several surveys of program directors, 61-83% held the  
41 position that becoming a parent during residency negatively affects the performance  
42 of female physicians<sup>7 8</sup>; and

43  
44 **WHEREAS**, residency applicants may not inquire directly about parental leave  
45 policies due to perceived potential consequences; and  
46

47           **WHEREAS**, a 2019 survey of 52 medical residency program directors across  
48 3 sites was conducted; 70% of the 19 program directors responded that information  
49 on parental leave was not provided to candidates with the most common explanation  
50 being that they did not feel the information was relevant<sup>3</sup>; and

51  
52           **WHEREAS**, in July 2022 the American Council for Graduate Medical  
53 Education (ACGME) instated a parental leave policy mandating that sponsoring  
54 institutions must offer a minimum of six paid weeks off for medical, parental, and  
55 caregiver leave at least once and at any time during an ACGME-accredited  
56 program<sup>9</sup>; and

57  
58           **WHEREAS**, only an estimated 36% of medical residency programs in Ohio  
59 are ACGME certified based on a 2021-2022 ACGME Databook report noting that  
60 650 residency programs in Ohio were ACGME-certified out of a separately reported  
61 total of 1,785 residency programs in Ohio<sup>10 11</sup>; and

62  
63           **WHEREAS**, there is currently much inconsistency and ambiguity in terms of  
64 the public reporting of parental leave policies amongst Ohio medical residency  
65 programs; and

66  
67           **WHEREAS**, numerous residency programs in Ohio state that they offer  
68 parental leave but do not publicly disclose any further details, such as the duration or  
69 rate of pay of the leave period<sup>12 13</sup>; and

70  
71           **WHEREAS**, several ACGME-accredited residency programs in Ohio do not  
72 state their full parental leave policies publicly, which may disadvantage applicants  
73 who are not aware of the ACGME's 6 week parental leave policy<sup>13 14</sup>; and

74  
75           **WHEREAS**, some ACGME-accredited and non-ACGME-accredited residency  
76 programs in Ohio that offer paid parental leave do not publicly specify state the rate  
77 of pay<sup>13 14</sup>; and

78  
79           **WHEREAS**, there are residency programs in Ohio that only offer *unpaid*  
80 parental leave to residents despite being ACGME-accredited<sup>15</sup>; and

81  
82           **WHEREAS**, the stated parental leave policy of at least one residency  
83 program in Ohio is less than 6 weeks of paid leave despite being ACGME-  
84 accredited<sup>16</sup>; and

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86           **WHEREAS**, a 2019 survey of 179 medical students revealed that 61% felt that  
87 a residency's parental leave policy impacts their program rankings "somewhat" to  
88 "very much" <sup>3</sup>; and

89  
90           **WHEREAS**, a 2019 survey of 179 medical students revealed that 68% would  
91 feel "extremely" or "somewhat uncomfortable" asking about parental leave  
92 themselves and 92% wanted parental leave information presented formally<sup>3</sup>; and

93 therefore

94

95 **BE IT RESOLVED**, that the Ohio State Medical Association encourages  
96 graduate medical education programs in Ohio to publicly report their parental leave  
97 policies, including duration of leave and rate of pay; and be it further

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99 **RESOLVED**, that the OSMA supports efforts to ensure that parental leave  
100 policies of ACGME-accredited graduate medical education programs in Ohio are in  
101 compliance with current ACGME guidelines; and be it further

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103 **RESOLVED**, that the OSMA-advocates for a minimum of 6 weeks of paid  
104 parental leave for Ohio medical trainee physicians, in accordance with current ACGME  
105 guidelines.

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108 **Fiscal Note:** \$ (Sponsor)  
109 \$ 50,000 (Staff)

110

111 **References:**

112

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    - 165 i. Clause E. Adequate compensation and benefits that provide for resident  
166 well-being and health.
  - 167 d. Women in Organized Medicine H-525.998
  - 168 e. Parental Leave and Planning Resources for Medical Students D-295.308
  - 169 f. Policies for Parental, Family and Medical Necessity Leave H-405.960
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172 OSMA Policy:

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174 **Policy 34 – 2021 – Increasing Transparency of the Resident Physician Application**  
175 **Process**

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177 1. The OSMA and interested stakeholders shall study options for improving  
178 transparency in the resident application process which works towards holistic review of  
179 residency applicants.  
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181 2. The Ohio Delegation to the AMA shall forward this resolution to the AMA.  
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183 **Policy 21 – 2023 – Comprehensive Reproductive Health Care Training**

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185 1. The OSMA supports the protection and delivery of evidence-based, comprehensive  
186 reproductive health care training including training in abortion and family planning for  
187 Ohio medical students, residents, and trainee.  
188

189 2. The OSMA opposes legislation limiting comprehensive reproductive health care  
190 training, which includes abortion and family planning training.  
191