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#### ORIGINAL

# Medical education in decline: What do 6th year medical students choose for their education in CABA/AMBA?

## La formación médica en decadencia: ¿Que eligen para su formación los estudiantes de 6to año de medicina de CABA/AMBA?

Eugenia Abril Fernandez<sup>1</sup>, Facundo Correa<sup>1</sup>

<sup>1</sup>Universidad Abierta Interamericana, Facultad De Medicina Y Ciencias De La Salud, Carrera De Medicina. Buenos Aires, Argentina.

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## **ABSTRACT**

**Introduction:** in the current context of the Argentine health system, access to medical residencies was an issue of growing concern for medical students. Faced with job insecurity, excessive working hours and low salaries, this study analyzed the perceptions, motivations and professional alternatives considered by students in the last year of their degree, with the aim of understanding what factors influenced their decision to choose —or not— this training path.

**Method:** a cross-sectional study was carried out during the months of August and September 2024. One hundred and one sixth-year students from public and private universities in CABA, who resided in CABA or AMBA, participated. Data collection was carried out by means of an anonymous, self-administered and voluntary survey, distributed by digital means. Variables such as type of university, job preferences, perception of the system and future expectations were included.

**Results:** 36,6 % of those surveyed said they did not wish to undertake a medical residency. The main reasons given were low pay, poor quality of life and the demanding workload. More than 55 % expressed an interest in working abroad or in private practice. The most desired specialties did not always coincide with those offering the most vacancies, reflecting a disconnect between aspirations and reality.

**Conclusions:** The study revealed a generational change in the way medical training is perceived. Future doctors prioritized personal well-being, mental health and better economic conditions over the traditional path of residency.

Keywords: Medical Residency; Job Insecurity; Motivations; Mental Health; Emigration.

## **RESUMEN**

Introducción: en el contexto actual del sistema sanitario argentino, el acceso a las residencias médicas representó un tema de creciente preocupación para los estudiantes de Medicina. Frente a la precarización laboral, la sobrecarga horaria y los bajos salarios, este estudio analizó las percepciones, motivaciones y alternativas profesionales consideradas por los estudiantes del último año de la carrera, con el objetivo de comprender qué factores influyeron en su decisión de optar —o no— por este camino formativo.

**Método:** se realizó un estudio de corte transversal durante los meses de agosto y septiembre de 2024. Participaron 101 estudiantes de 6° año de universidades públicas y privadas de CABA, quienes residían en CABA o AMBA. La recolección de datos se efectuó mediante una encuesta anónima, autoadministrada y voluntaria, distribuida por medios digitales. Se incluyeron variables como tipo de universidad, preferencias laborales, percepción del sistema y expectativas a futuro.

Resultados: el 36,6 % de los encuestados expresó que no deseaba realizar una residencia médica. Las principales causas fueron la baja remuneración, la escasa calidad de vida y la exigente carga horaria. Más

del 55 % manifestó interés en trabajar en el extranjero o ejercer de manera privada. Las especialidades más deseadas no siempre coincidieron con las que ofrecían más vacantes, reflejando una desconexión entre aspiraciones y realidad.

Conclusiones: el estudio evidenció un cambio generacional en la forma de concebir la formación médica. Los futuros médicos priorizaron el bienestar personal, la salud mental y mejores condiciones económicas por encima del tradicional camino de la residencia.

Palabras clave: Residencia Médica; Precarización; Motivaciones; Salud Mental; Emigración.

#### INTRODUCTION

In the current context of the Argentine healthcare system, access to medical residencies has become a topic of growing interest and debate among advanced medical students. Medical residency, understood as a process of professional training in service, is a fundamental pillar for medical specialization, offering an organized structure for learning under supervision and with increasing autonomy. However, working conditions, salaries, and organizational issues in the healthcare system have created a climate of uncertainty in recent years that directly affects the decisions of future professionals regarding their postgraduate training, (1,2,3)

This study arose from the need to understand and analyze sixth-year medical students' perceptions, expectations, and motivations regarding the medical residency system in Argentina. The initiative was developed using a cross-sectional design based on a self-administered, anonymous, and voluntary survey of students who met specific inclusion criteria, including residing in CABA or AMBA and attending public or private universities in the Autonomous City of Buenos Aires. The main objective was to explore opinions about the residency system and the alternatives they consider viable for their professional integration upon completing their studies.

The work is set in a critical context, where job insecurity, long working hours, and low pay are emerging as determining factors influencing decision-making. Added to this is the growing phenomenon of young doctors leaving the country for better working conditions and salaries. As a result, historically seen as the most traditional path to specialization, residency is losing its appeal in favor of other alternatives such as working abroad, private practice, or even seeking opportunities outside the conventional residency system.

This study aims not only to provide quantitative and qualitative data on students' current positions but also to open a space for reflection on the future of medical training in the country. At a time of transformation of professional values, where the quality of life, personal balance, and mental health are prioritized, it is essential to rethink the residency model and its ability to adapt to the new demands of emerging generations of doctors.

What are the perceptions, motivations, and expectations of sixth-year medical students at universities in CABA regarding the medical residency system in Argentina, and what factors influence their decision to choose—or not—this training path?

Objective: this study analyzes the perceptions, motivations, and professional alternatives considered by sixth-year medical students at public and private universities in Buenos Aires regarding the medical residency system in Argentina in the context of job insecurity and changing professional priorities.

## **METHOD**

A cross-sectional field study involving direct observation was conducted during August and September 2024, six months after the 6th-year students entered the random rotating internship program. The population consisted of students in their 6th year of medical school. The inclusion criteria were belonging to private and public universities in CABA and residing in CABA/AMBA.

A survey was designed to be answered by the students, in conjunction with my tutor, based on the options available at the end of the degree program. The surveys were sent electronically and remotely, to be completed anonymously and self-administered. Participation in the study was voluntary. The leading universities that participated were:

- Inter-American Open University.
- Héctor Barceló Foundation.
- University of Buenos Aires.

The sample size is a total of 101 completed surveys.

Attached here is the questionnaire created in Google Forms for data collection.

 https://docs.google.com/forms/d/e/1FAIpQLSdx7vfHXZPs0bupVvHtZpu82vP6gYz89IoYxNGERKy ih G2mg/viewform

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Inclusion criteria:

- 6th-year medical students.
- Residents of CABA/AMBA.
- Aged between 25 and 45 years old.
- Attending private and public universities.

#### Exclusion criteria:

- Students who have not attended my IAR.
- Students who are completing their second degree in the health field.

## Operational description of variables

The following will be understood as variables:

- Student: those actively enrolled in the 6th year of medicine at universities in CABA.
- Private university: one that requires a tuition fee for admission.
- Public university: admission is entirely free of charge.
- Low remuneration refers to the value compared to the income obtained in Brazil.

The value for 24 hours on call in Argentina is 168 USD, and in Brazil, it is 716 USD.

• Internship refers to medical practice under the supervision of licensed physicians on call during the student years, carried out individually and independently.

#### **RESULTS**

In Argentina, approximately 5000 doctors graduate from different medical schools yearly, and about half gain residency access. However, there is no reliable data on the total number of positions filled in the public and private sectors. Medical residencies are a professional education system for medical graduates, full-time and for a fixed period, to prepare them for the comprehensive practice of a specialty, including scientific, technical, and humanistic aspects. Their objective is to train specialist physicians, and, in most cases, they constitute the professional's first approach to health services. It is an in-service training program under permanent supervision and with progressive autonomy in decision-making.

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Our objective was to evaluate the opinion of future health professionals about this medical residency program by conducting a cross-sectional study. Sixth-year medical students from private universities in the Autonomous City of Buenos Aires were included. Electronic surveys were sent via Google Forms, with voluntary and anonymous participation. The primary method of dissemination was through student groups using the WhatsApp application, where I asked students from the different participating faculties to post the link to the survey in their respective chats. They were free to choose whether or not to participate. This is how I gradually obtained 101 results.

Graphs and statistical tests were carried out based on the results obtained in the surveys.

Table 1. Universities of origin of	101 survey
	TOT Survey
Inter-American Open University	65
Héctor Barceló Foundation	10
University of Buenos Aires	21
Other	5

¿Te gustaría realizar una residencia médica después de recibirte?

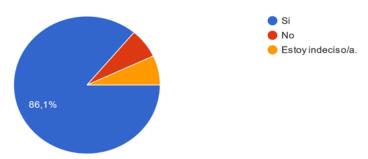


Figure 1. Distribution of students according to interest in medical residency

The first question that should arise is the following, and with a total of 101 responses, with 80 % of the audience being female between the ages of 25 and 35, I obtained this percentage.

Almost 90 % of responses are positive when compared to notes made in 2023, which stated: "Young professionals are leaving and some specialties are entering a critical spiral. Average income is falling further and further down a salary pyramid that is quite flattened and unstimulated by production," lists Marcelo García Diéguez, co-author of a study on multiple employment published last February.

> Cuales son las especialidades Medicas en las que te gustaría realizar tu residencia? 100 respuestas

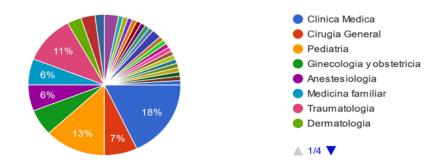


Figure 2. Distribution of students according to preferred specialty

In this small cross-sectional study, the primary specialty chosen for practice, Clinical Medicine, has the lowest number of active residents today. With almost 100 % of hospitals offering residency programs in Clinical Medicine having at least one vacancy, this leads me to believe that desire does not always coincide with reality. A note details this excellently: "Concern about vacancies that have remained unfilled in pediatric, neonatology, and pediatric intensive care residencies throughout the country. This is an emerging, complex, and multi-causal situation, where the impoverishment of the profession, the need for multiple jobs, and different training contexts condition the decisions of recent graduates, which is detrimental to their training and pediatric care in general."

In the following questions, out of the 101 surveys conducted, 37 people (36,63 %) responded that they did not wish to pursue a medical residency. Among the main reasons, they highlighted that the salaries offered are very low, which negatively influences their decision. In recent years, the salary situation of doctors in Argentina has generated significant concern and unrest within the sector. During 2023 and 2024, several protests and strikes were carried out by residents, interns, and other health professionals, demanding a salary restructuring that reflects the effort and responsibility of their work.

An article by Infobae exposes the situation and discontent of the residents and the main protests:

"One of the main complaints has been low pay. In Buenos Aires, for example, medical residents reported that their monthly salaries were around 140 000 to 160 000 pesos, a figure considered insufficient in an inflationary context and with high labor demand. The protests included strikes and demonstrations, demanding an increase to a minimum of 200 000 pesos per month, which is still a modest figure for the level of responsibility involved in their work."

These difficulties have prompted several medical associations to fight for more dignified fees, establishing a minimum ethical value of 6000 pesos per consultation to guarantee adequate care and fair compensation'

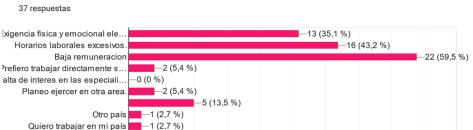


Figure 3. Reasons why students are not interested in the Medical Residency

Quiero hacerlo

Incompatibilidad laboral

-1(2.7%)

**─**1 (2,7 %) 

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In the following two questions, the students responded that the majority (55,4 %) prefer to train abroad under a different residency program or pursue another type of medical practice.

Still, their ultimate goal is always to work outside Argentina. The exodus of medical professionals abroad also reflects the salary crisis. In cities such as Rosario and Mendoza, many doctors have emigrated to countries such as Spain, Brazil, and Chile, where salaries are significantly higher. In Argentina, a doctor's appointment can cost up to 8000 pesos, but payments can take between 60 and 90 days, affecting the economic stability of professionals (infobae).

Participants were also asked about their vision for the future, with the vast majority agreeing that they want to become specialists, although the path to that end varies. Here are some of the personal opinions:



Figure 4. Distribution of students according to the possibility of doing a medical residency abroad

Based on the analysis of the responses collected, some recurring themes emerged regarding the main demands and concerns of future doctors and residents regarding medical residency. The most frequently mentioned points include:

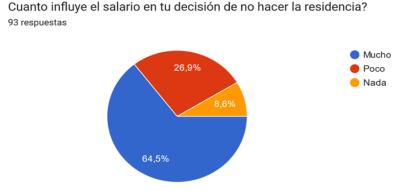


Figure 5. Influence of salary on the decision not to take up residency training

Better pay: most respondents agreed that current salaries are insufficient for the effort and responsibilities involved in medical work. Several mentioned that wages should be adjusted to reflect the job demands in terms of hours and difficulty.

*Work-life balance*: many advocated reducing working hours, particularly long 24-hour shifts, and calling for 12-hour shifts. There were also calls for more flexible schedules that would allow for a better work-life balance.

Better infrastructure: hospitals' lack of resources and working conditions were also mentioned. Doctors emphasize the importance of improving hospital infrastructure, as they spend many hours there, and the quality of supplies and equipment is key to performing their work efficiently.

Adequate training and humane treatment: some comments suggest the need to improve the training system during residency, highlighting that, in addition to salary, it is essential that the work environment be more humane and that senior doctors have a more teaching-oriented attitude. Better organization of schedules: several respondents mentioned the importance of better organization of work schedules and shifts, asking for regularity in post-shift breaks, as well as greater equity in the distribution of tasks among residents.

In summary, residents and doctors in training seek significant salary increases, better working conditions, including reduced working hours, better hospital infrastructure, and a more collaborative and humane work environment.

#### DISCUSSION

This allowed me to highlight the change in mindset and priorities of new and future doctors compared to those who came before them. Speaking from personal experience, my father, a specialist in obstetrics, gynecology, and fertility with 35 years of experience plus five years of internship, finds it unreasonable that residents do not work on Saturdays or that they prioritize their personal lives over their professional lives. Neither opinion is wrong, but at that time, medicine was seen as a priesthood; one lived for and through one's work. Doctors were seen as unquestionable authority figures, committed to total service, personal sacrifice, and absolute dedication to their patients. This view implies that doctors must always be available with an altruistic attitude, putting the well-being of their patients above their personal or financial lives. Today, individual wellbeing is completely above everything else. Mental health also plays a vital role.

This leads me to reflect that medical training no longer depends solely on whether a residency program is excellent but also on the physician's ability to accept and face the changes and challenges presented by the system with perseverance and discipline. Those who manage to complete a residency best adapt to these demands. (4,5,6,7,8)

## **CONCLUSIONS**

The conclusion I have reached after compiling the data and opinions of each student who participated is that an old and well-known problem remains in the Argentine healthcare system: low pay, long hours, and the overwhelming stress that doctors experience in a system that demands a lot and offers little. That is why job offers abroad provide much more attractive working conditions, and this is why our future professionals choose to flee Argentina or start their medical training abroad, independently of a residency program. They prioritize how much they will earn at the end of the month and maintain a standard of living commensurate with their daily efforts.

One of the questions I asked was, "What kind of job opportunities do you prefer instead of residency?" Work abroad: Most respondents expressed interest in working outside Argentina, highlighting this option as an attractive alternative to the local healthcare system. They are looking for better salaries and job opportunities in other countries.

Employment in clinics or hospitals without the need for residency: Several respondents consider working in clinics or hospitals without completing a residency, prioritizing starting to practice medicine without going through the rigorous residency process.

Private practice: Many opt for private practice, seeking autonomy and higher income through independent medical practice. Research: Some respondents see research as a viable option, focusing on medical innovation and scientific advancement, setting aside the need for a clinical residency. Public health: Few choose to work in public health, although some consider it a stable career option.

In conclusion, the main alternatives to residency are working abroad, private practice, and clinic employment without going through the residency system. The responses' search for better working conditions and salaries is a recurring theme.

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None.

## **CONFLICT OF INTEREST**

Authors declare that there is no conflict of interest.

## **AUTHORSHIP CONTRIBUTION**

Conceptualization: Eugenia Abril Fernandez, Facundo Correa.

Data curation: Eugenia Abril Fernandez, Facundo Correa.

Formal analysis: Eugenia Abril Fernandez, Facundo Correa.

Research: Eugenia Abril Fernandez, Facundo Correa.

Methodology: Eugenia Abril Fernandez, Facundo Correa.

Project administration: Eugenia Abril Fernandez, Facundo Correa.

Resources: Eugenia Abril Fernandez, Facundo Correa. Software: Eugenia Abril Fernandez, Facundo Correa. Supervision: Eugenia Abril Fernandez, Facundo Correa. Validation: Eugenia Abril Fernandez, Facundo Correa. Visualization: Eugenia Abril Fernandez, Facundo Correa.

Writing - original draft: Eugenia Abril Fernandez, Facundo Correa.

Writing - proofreading and editing: Eugenia Abril Fernandez, Facundo Correa.