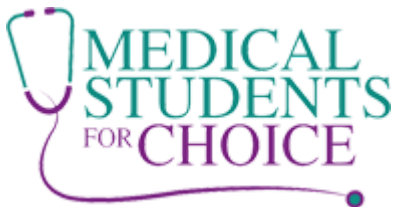




_0

- [About Us](#)
- [Medical Students](#)
- [Residents](#)
- [Conferences](#)
- [Our Blog](#)



- [About Us](#)
- [Medical Students](#)
- [Residents](#)
- [Conferences](#)
- [Our Blog](#)

[DONATE](#)
[Home](#) / [Our Blog](#) / Michigan MSFC Members Demand Abortion Training Opportunities for Residents

Our Blog

May 19, 2017

Michigan MSFC Members Demand Abortion Training Opportunities for Residents

[Tweet](#)
[Share 87](#)
[0 Comments](#)

By Maya Nojehowicz

As an MSFC student organizer, it was inspiring to witness MSFC members from two Michigan universities use their leverage as medical students to advocate for improved access to abortion training in residency programs. While much of MSFC's focus is on providing abortion education in preclinical years, **it is due to the advocacy work of our student members that we see the possibility for real systemic change in the field of abortion training.** I had the pleasure of speaking with a few of our members about their successful appeal in front of the Michigan State Medical Society.

According to current [Accreditation Council for Graduate Medical Education](#) (ACGME) and [American Congress of Obstetricians and Gynecologists](#) (ACOG) guidelines, accredited OB-GYN residency programs must provide

abortion training or the opportunity for abortion training to all residents. Yet medical students in Michigan are well aware that this standard is not being upheld across residency programs in their state. On May 6th, eight MSFC members at Michigan State University College of Human Medicine and Central Michigan University College of Medicine presented a resolution to the Michigan State Medical Society (MSMS) designed to encourage residency programs to incorporate the opportunity for abortion training into their programs, in alignment with ACGME and ACOG guidelines. The [MSMS](#) is an organization of 15,000 physician members in Michigan, whose mission is “To promote a health care environment that supports physicians in caring for and enhancing the health of Michigan citizens through science, quality, and ethics in the practice of medicine.”

Drawing from ACOG data on residency training, and conversations with residents at their schools’ hospital affiliates, these medical students determined that residents seeking adequate abortion training often have to do so on their own time, using their own resources to locate training and cover any expenses. **“If residency programs do not offer training themselves ... they should at least make the opportunity for residents available in a manner that doesn’t negatively impact [residents’] medical education,”** says Elizabeth Scott, an M1 at Central Michigan and one of the students who presented the resolution to the MSMS.

In [the final resolution](#), which passed with a 60-40 vote in the MSMS House of Delegates, the MSMS resolved the following: to support ACOG family planning and contraceptive requirements; to encourage better standardization of these training opportunities in the state; and to ask the Michigan Delegation to the American Medical Association (AMA) to petition the ACGME to better enforce compliance with standardization of ACOG guidelines for abortion training opportunities. According to Anne Drolet, an M2 at Michigan State, “The goal of this resolution is to ensure that no matter where you do your residency in Michigan, you have equal opportunities to get adequate family planning and abortion training. Right now that’s what’s on paper but it’s not the reality.” The resolution does not demand that all residency programs offer training, or that all residents participate in abortion training, but instead asks that all programs in Michigan incorporate the opportunity for abortion training into their programs.

Lauren Smith, an M2 at Michigan State who spearheaded this effort along with her fellow students, says that in presenting the resolution “We pointed out how the ACGME states that residencies are not allowed to block a student’s access to this education, as it is an opt-out system.” **However, despite abortion training requirements, ACOG and ACGME do not specify how residents should get their training.** Many programs create barriers for residents to access training by requiring they seek out training elsewhere on personal time. Although the issue is common at religious institutions, the lack of abortion training permeates throughout non-religious hospitals as well, due to the stigma that surrounds abortion. According to a [national survey](#) from the Bixby Center at UCSF, only 54% of OB-GYN residents from 161 programs noted routine integrated abortion training and 16% reported that elective training was not available.

Acting as advocates for their own future residency training, and for that of all residents in Michigan, both Smith and Scott highlighted that the ultimate goal of their reform efforts is to ensure that the opportunity for abortion training be available for all those that want it. “Whether or not you provide abortions, it’s important for physicians to be aware of the complications, the procedure, and the risks associated with abortion in case they are ever presented with a patient who needs treatment,” remarked Scott. There will always be a need for safe, legal abortion and this demand requires sufficient numbers of adequately trained abortion providers.

Students are hopeful that with this new backing from the MSMS, an organization that typically has not been vocal about supporting abortion training, residency programs will be convinced of the need to incorporate a means for residents to access abortion training in order to remain competitive. **“They need to offer this type of training or make the opportunity for training available if they want to produce effective practitioners,”** says Anne Drolet. With strong support from the MSMS, which changed the resolution language from “encourage better standardization of training” to “enforce better standardization of training,” these MSFC members hope to continue their advocacy efforts by petitioning the AMA and potentially replicating similar advocacy efforts for increased abortion training on a national scale.

0 Comments

Medical Students for Choice

1 Login ▾

 Recommend Tweet Share

Sort by Best ▾










Start the discussion...

LOG IN WITH

OR SIGN UP WITH DISQUS 

Be the first to comment.

 Subscribe  Add Disqus to your site  Add Disqus  Disqus' Privacy Policy  Privacy Policy  Privacy Policy  Privacy Policy

TESTIMONIAL

"This is such a unique opportunity to gain clinical exposure in a classically underrepresented area of medical school curricula, and I am certain that I would not have received such a robust abortion education in medical school without the RHE."

Reproductive Health Externship Participant

"I left the ATI with a strengthened resolve to get abortion training during residency in order to provide them as a PCP, and now am looking ONLY at residency programs that will allow me to get training. Moreover, talking with residents and providers left me with concrete knowledge of how to find training experiences."

Abortion Training Institute Participant

- [Contact](#)
- [Donate Now](#)

Medical Students for Choice
PO Box 40935 Philadelphia, PA 19107
(215) 625-0800

-
-
- [Board Login](#)
- |
- [Sitemap](#)

[English](#)

Copyright © 2019 Medical Students for Choice. All rights reserved.
The Medical Students for Choice logo and name are registered trademarks of Medical Students for Choice®.