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Introduction

Message from CFMS Director of Education

The CFMS National Annual Survey Report, created in 2020 and in its first edition, is a publication created by the Canadian Federation of Medical Students (CFMS). It is a student-written resource aimed at summarizing the results of the CFMS National Annual Survey (NAS), an annual survey targeted at general members of the CFMS to collect data and feedback to guide the operations of the organization and its various portfolios.

The concept of this survey was developed following feedback from the general membership of the CFMS, who articulated significant survey fatigue due to the increased frequency of surveys being disseminated by the organization. Thus, the idea to disseminate a survey to capture pertinent data on an annual basis was conceptualized. Firstly, we created a CFMS Survey Policy that will guide the design of surveys to ensure content and question types were conducive to high survey engagement and in turn increased response rates. We further outlined how data was to be collected, stored, and shared.

As the inaugural year of the CFMS NAS, there will be modifications and adjustments made to the current iteration based on lessons learned and feedback from our members. We recognize more work needs to be done to improve the survey, for example ensuring that it captures a greater breadth of demographics data to help guide our work to promote equity, diversity, and inclusivity within our organization and medicine. We hope that portfolios can improve upon the questions submitted this past year using evidence-based methodology. Lastly, we value adaptability, and recognize each year may bring topical issues that require dedicated sections.

It is our hope that through the NAS, the CFMS can gather continual feedback and data to help shape the organization's initiatives so that they accurately reflect the priorities and perspectives of Canadian medical students. Finally, it serves as a reflection tool for the organization and medical education communities on areas for improvement.

We hope you enjoy this report. Feel free to provide any feedback at education@cfms.org.

Sincerely,



Rishi Sharma
CFMS Director of Education 2019-2020



Avrilynn Ding
CFMS Director of Education 2020-2021

Introduction

Addendum from the CFMS National Annual Survey File Lead

As you may have noticed, this version of the National Annual Survey is being published late. Many factors have delayed the publication of this report, however chief among these has been the COVID-19 pandemic, which has placed significant organizational strain on the CFMS. Nonetheless, I am excited to finally be bringing you the results from the inaugural 2020 National Annual Survey. This survey represents a significant investment of vision and effort from my predecessors and has much potential to shape CFMS policy in years to come.

When interpreting the findings within this report, it is important to consider that these results were a reflection of the time during which it was conducted. Findings from this survey will inevitably be biased by the emerging COVID-19 pandemic weighing on the minds of its respondents. Nonetheless, it is my sincere hope that the results of this survey are still helpful, both as a policy guide during the recovery period following the COVID-19 pandemic, and as a reflection of the unique circumstances that medical students found themselves in during the 2019-2020 academic year.

Thank you to those who took the time to respond to the survey and the hard work of the many CFMS members who made this project possible. Finally, thank you for taking the time to read this report and engage with the CFMS.

Sincerely,



Kevin Zhao

CFMS National Annual Survey File Lead 2022-2023

CFMS National Annual Survey Team

Rishi Sharma, CFMS Director of Education 2019-2020 & Ontario Regional Representative/Education Attaché 2018-2019

Avrilynn Ding, Ontario Regional Representative/Education Attaché 2019-2020 & CFMS Director of Education 2020-2021

Lia Huo, CFMS National Officer of Research Sr. 2019-2020

Eagan Peters, CFMS National Officer of Research Jr. 2019-2020

Victoria Turnbull, CFMS Director of Education 2021-2022

Kevin Zhao, CFMS National Annual Survey File Lead 2022-2023

1.0 Background

1.1 About CFMS

The Canadian Federation of Medical Students (CFMS) is a student organization charged with representing over 8,000 medical students from 15 Canadian medical schools. The CFMS represents the values and interests of medical students coast to coast to the federal government, to national organizations, and to international forums.

The CFMS is divided into 6 portfolios, each with distinct mandates. The Global Health portfolio aims to engage in human rights advocacy to liaise with global health bodies. The Government Affairs portfolio aims to engage in political action and health policy discussion with national policymakers. The Education portfolio is charged with collecting data and representing the educational needs of CFMS members to academic institutions. The Student Affairs portfolio is responsible for overseeing wellness initiatives and managing student services aimed at supporting students. The Communication portfolio is charged with disseminating CFMS initiatives, opportunities, and events to the CFMS membership. Finally, the Finance portfolio is responsible for managing the CFMS' finances, conducting audits, and managing internal CFMS human resources.

The National Annual Survey falls under the responsibility of the Education portfolio, but has been designed with the intent of collecting information relevant to all portfolios, subcommittees, and the general membership.

1.2 Methodology

The survey was conceptualized and designed in 2019. The philosophy behind the National Annual Survey was in an effort to minimize survey burden of our members and gather data on an ongoing basis to improve our efforts as a national organization based on member feedback. A formal vote to proceed with the CFMS National Annual Survey was approved by the CFMS Board 2018-2019 at the Summer Board Meeting by unanimous vote in favour.

The survey questions were elicited from each portfolio director. Each portfolio director was given the opportunity to discuss with their respective portfolios to draft a list of questions. We recommended that these questions be surrounding CFMS advocacy initiatives, feedback/use of CFMS resources/initiatives and other specific questions relevant to portfolios (i.e. national day of action topics for Government Affairs). Additionally we included 2 additional sections for questions regarding the CARMS match process & AFMC Elective Portal. Each portfolio had 2 months to draft and submit questions. Survey questions were then finalized via a formal

meeting of the board at the winter board meeting of the CFMS Board 2019-2020 to ensure there was no redundancy and that survey length was minimized to avoid survey fatigue.

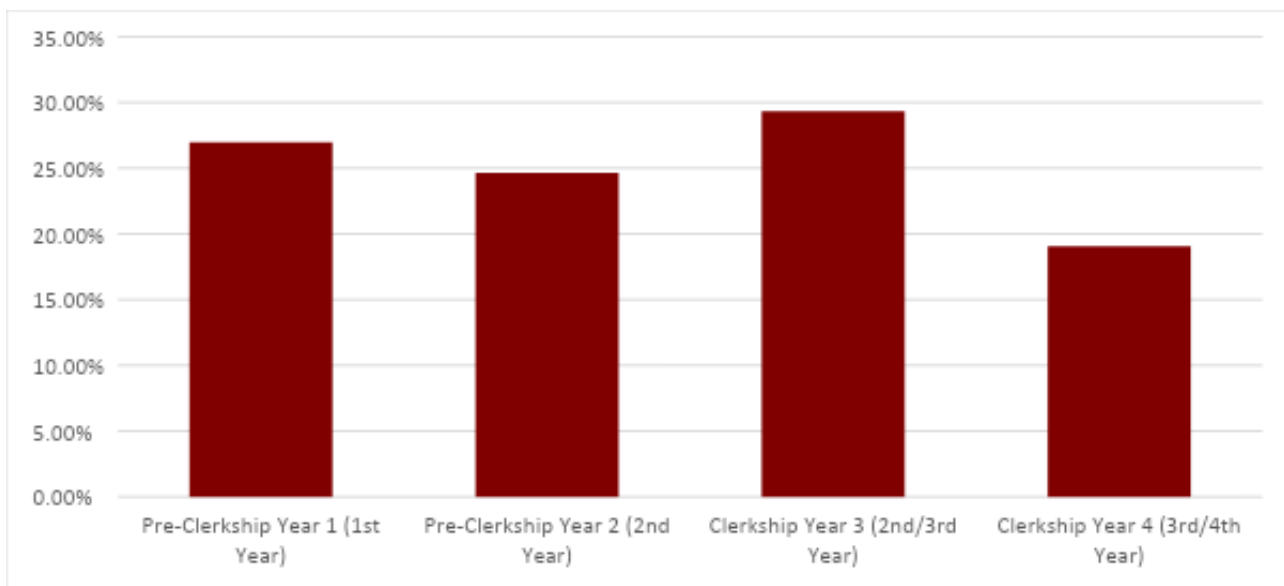
The survey was then transcribed into SurveyMonkey, our formal CFMS survey platform, which is in keeping with CFMS data policy requirements. The survey was disseminated between 17-May 15, 2020. We advertised the survey on all CFMS platforms (website, social media, and newsletter) as well as through local MedSoc communications. We further promoted the survey with weekly prize draws for participants and a prize for the school with the highest respondents per student percentage.

1.3 Respondent Characteristics

A total of 2,131 medical students responded to our survey. A majority of our respondents, 64.1% or 1370 respondents, were self-described females. By contrast, 34.7% of respondents or 740 respondents described themselves as male. 0.75% of respondents preferred not to disclose their gender and 0.23% of respondents identified as non-binary or third gender. Respondents were fairly evenly balanced across all years of medical school, with the smallest proportion of respondents being 4th year medical students, at around 19.1%.

Proportion of Respondent by Year of Medical Study

N = 2131

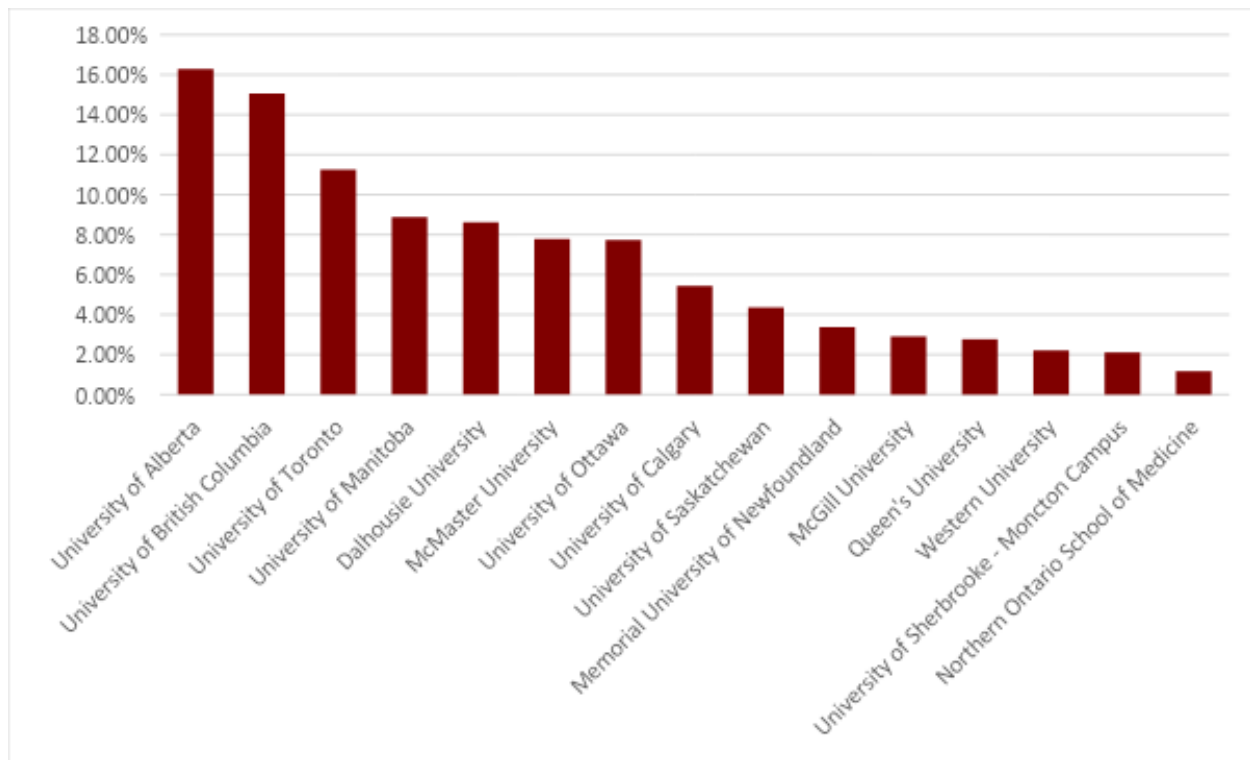


Medical students from all 15 medical schools represented by the CFMS were captured by this survey. The greatest proportions of respondents came from the University of Alberta (16.3%), University of British Columbia (15.1%), and University of Toronto (11.3%). Comparatively few respondents reported attending the University of Saskatchewan (4.4%), Memorial University of

Newfoundland (3.4%), McGill University (2.9%), Queen's University (2.8%), Western University (2.2%), the University of Sherbrooke (2.1%), and the Northern Ontario School of Medicine (1.2%).

Proportion of Respondents by Medical School

N = 2131



1.4 General Conclusions

The 2020 National Annual Survey was widely publicized and garnered a large number of responses from medical students all across Canada. Respondents generally reported moderate satisfaction with their program's academic curriculum, with the exception of the impact of climate change on health. A majority of respondents report having enough time for family and friends, and cite clinical hours as a negative contributor to their wellness and personal days, student-organized social activities, and exercise/yoga as positive contributors to their wellness. A sizeable minority of medical students also report having experienced learner mistreatment, most commonly based on their gender or ethnicity.

Respondents also generally reported moderate satisfaction with the CFMS' general advocacy efforts, ranking residency issues such as the CaRMS application system or unmatched Canadian medical graduates as top advocacy issues. Similarly, students were generally satisfied with the

advocacy efforts of the CFMS' Education portfolio. Students generally report dissatisfaction with the AFMC student portal, but are generally moderately satisfied with the CFMS advocacy efforts in this area. By contrast, students generally report satisfaction with the CFMS website.

Most medical students come from families with above-average household income. However, medical students vary widely in their comfort with their current debt load, amount of expected debt at graduation, and financial literacy.

Respondents generally reported moderate satisfaction with the resources released by the CFMS, however they also reported limited awareness and use of those resources. Students received their information about CFMS initiatives primarily through their CFMS representatives and through CFMS communiques, and reported the highest satisfaction scores for the CFMS communique. Although the CFMS website received moderately high satisfaction scores, a majority of students reported accessing it yearly to never, and most often for discounts.

The 2020 National Annual Survey does suffer from a number of limitations. For example, although anglophone/francophone status was not polled, respondents tended to attend anglophone universities. Additionally, the 2020 National Annual Survey was released at the beginning of the COVID-19 pandemic in Canada and thus captured data at a specific context and time. Nonetheless, results from the 2020 National Annual Survey represent a significant dataset that can guide the CFMS, medical educators, and medical learners alike in their decision-making.

2.0 Undergraduate Medical Curriculum

2.1 Assessment and Feedback

When asked to describe their level of satisfaction with the amount of direct observation in clerkship, the majority of respondents to whom the question was relevant were either satisfied (38.4%) or very satisfied (15.6%). Similarly, when asked about their level of satisfaction with academic feedback mechanisms, most respondents reported being satisfied (51.0%) or very satisfied (15.9%).

Direct Observation in Clerkship

N=1968

How satisfied are you with the level of direct observation (clerkship) at your home institution?	Count	Percent (%)
Very satisfied	306	15.6
Satisfied	755	38.4
Neutral	210	10.7
Unsatisfied	77	3.9
Very unsatisfied	12	0.6
Not applicable	608	30.9

Academic Feedback Mechanisms

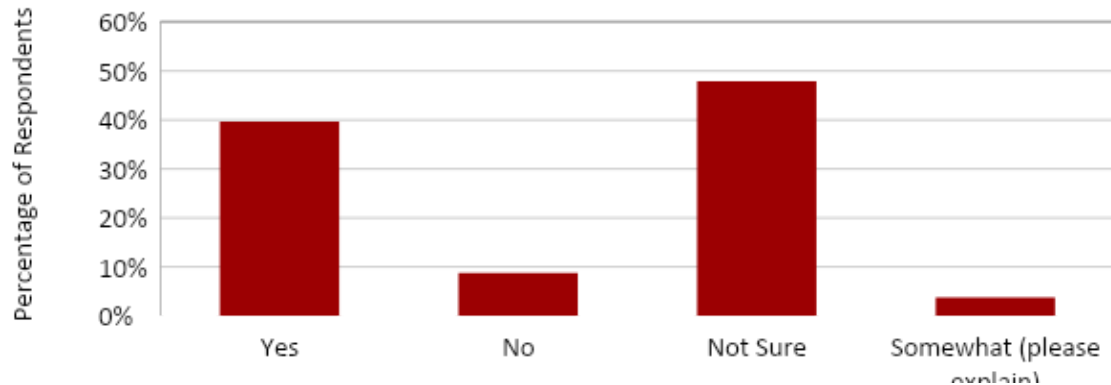
N=1968

How satisfied are you with the academic feedback mechanisms at your home institution?	Count	Percent (%)
Very satisfied	313	15.9
Satisfied	1003	51.0
Neutral	394	20.0
Unsatisfied	201	10.2
Very unsatisfied	42	2.1
Not applicable	608	0.8

2.2 CBME Implementation Status

When medical students were asked if their school was incorporating competency-based medical education (CBME) into their undergraduate curriculum, 39.7% of students responded yes, while 8.7% responded no. A large proportion of respondents (47.9%) were unsure.

CBME Implementation in Undergraduate Curriculum
N=1968



2.3 Global Health Content

When asked to describe their level of satisfaction with the global health curriculum at their school, 35.6% of respondents were satisfied and 19.9% were dissatisfied. A significant number of students (37.5%) remained neutral.

Participating students were also asked about their level of satisfaction with the planetary health and climate change curriculum at their school. In response to this question, 14.1% reported being satisfied, while 35.2% were dissatisfied. Once again, a significant number of respondents remained neutral (35.8%).

Global Health
N=1882

How satisfied are you with the curriculum (i.e. lecture content, clinical skills, opportunities/experiences) regarding global health at your medical school?	Count	Percent (%)
Very satisfied	70	3.7
Satisfied	669	35.6
Neutral	706	37.5
Dissatisfied	374	19.9
Very Dissatisfied	63	3.4

Planetary Health/Climate Change

N=1882

How satisfied are you with the curriculum (i.e. lecture content, clinical skills, opportunities/experiences) regarding planetary health/climate change at your medical school?	Count	Percent (%)
Very satisfied	42	2.2
Satisfied	266	14.1
Neutral	673	35.8
Dissatisfied	662	35.2
Very Dissatisfied	239	12.7

3.0 Advocacy

3.1 Prioritizing CFMS' Advocacy in Medical Education

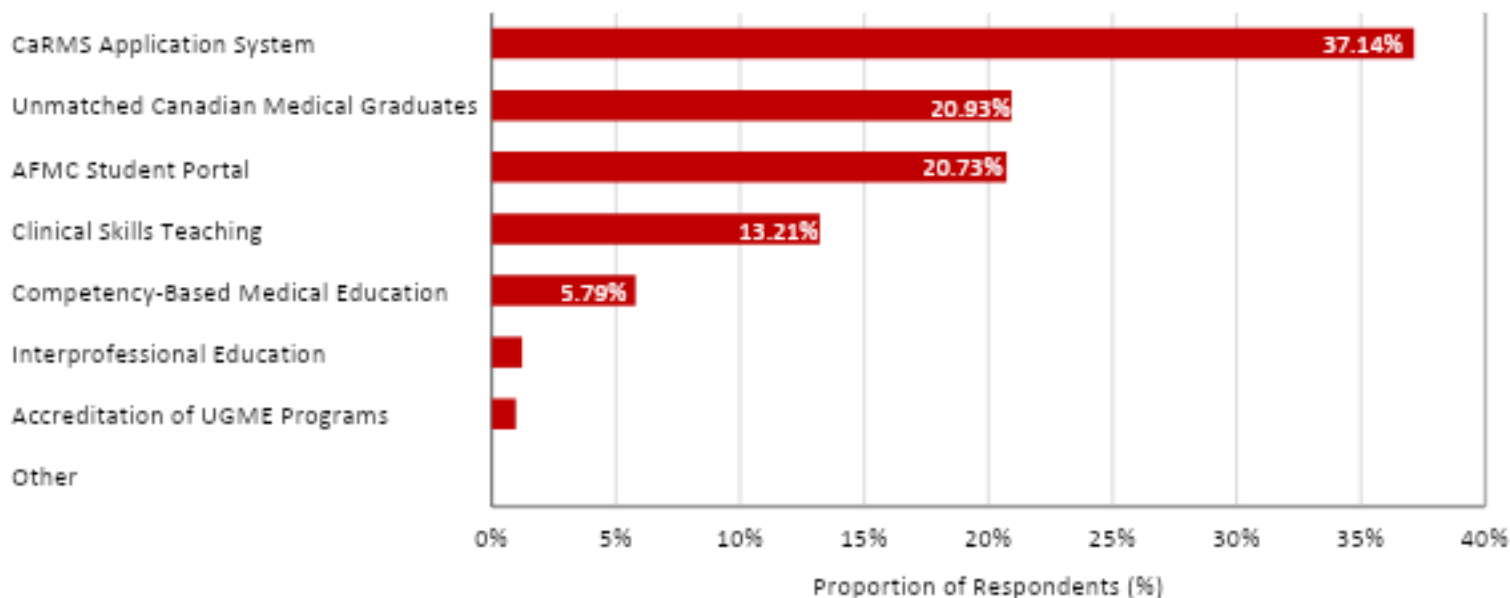
Medical students were asked to rank areas of advocacy in medical education that they would like CFMS to focus its efforts on. Advocacy for the CaRMS application was given top priority by students. It received 731 (37.1%) and 650 (33.0%) first- and second-choice rankings respectively.

Unmatched Canadian medical graduates (uCMG) and the AFMC Student Portal were the next highest priority areas of advocacy. They were top-ranked by 412 (20.9%) and 408 (20.7%) respondents respectively. These two areas were also the highest second-choice rankings after the CaRMS application: the AFMC Student Portal received 368 (18.7%) and uCMG received 457 (23.2%) second-choice selections.

Clinical skills teaching was ranked top priority by 260 (13.2%) students. Competency-based medical education and interprofessional education were ranked highest by 114 (5.8%) and 24 (1.2%) students. The area of advocacy with the fewest top rankings was accreditation of UGME programs, receiving 19 (1.0%) first-choice selections. No students ranked "Other" as a top-choice selection.

Areas of Advocacy Ranked Most Important by Medical Students

N = 1968



3.2 Opportunities for Advocacy in Medical School

Students were asked how satisfied they were with opportunities to advocate within internal administrative structures at their home institutions. 1404 (71.4%) students were satisfied or very satisfied with the opportunities to participate in committees/working groups. 56.9% were unsatisfied or very unsatisfied with these opportunities.

How satisfied are you with the following parameter of medical education at your home institution?

N=1968

Opportunities for participation in committees/working groups	Count	Percent (%)
Very satisfied	423	21.5
Satisfied	981	49.9
Neutral	398	20.2
Unsatisfied	119	6.1
Very unsatisfied	16	0.8
Not applicable	31	1.6

Students were also surveyed about opportunities for community advocacy through their home institutions. 1258 (66.4%) students were satisfied or very satisfied with these opportunities. 114 (6.0%) were dissatisfied or very dissatisfied with these opportunities.

How satisfied are you with the level of advocacy opportunities offered?

N=1896

Opportunities to become involved with community advocacy initiatives through your medical school	Count	Percent (%)
Very satisfied	358	18.9
Satisfied	900	47.5
Neutral	414	21.8
Dissatisfied	97	5.1
Very dissatisfied	17	0.9
Unaware of opportunities	110	5.8

4.0 Medical Student Wellness

4.1 Work/Life Balance and Burnout

The survey results in this section provide insight into medical students' evaluation of their work/life balance in pre-clerkship and clerkship as well as self-rated level of burnout. Most pre-clerks (83.9%) agree that their schedules leave them enough time for their personal and/or family life (41.2% strongly agree; 42.7% somewhat agree), whereas approximately one-third (30.1%) of clerks agree (5.1% strongly agree; 25.0% somewhat agree). Approximately one-third of medical students (30.0%) self-screened as positive for burnout.

Level of Burnout

N=1914

Overall, which of the following statements best represent your level of burnout?	Count	Percent (%)
I enjoy my work. I have no symptoms of burnout	231	12.1
Occasionally I am under stress, and I do not always have as much energy as I once did, but I do not feel burned out	1108	57.9
I am definitely burning out and have one or more symptoms of burnout, such as physical and emotional exhaustion	501	26.2
The symptoms of burnout that I am experiencing will not go away. I am frustrated at work a lot	45	2.3
I feel completely burned out and often wonder if I can go on. I am at the point where I may need some changes or may need to seek some sort of help	29	1.5

Work/Life Balance in Pre-Clerkship

N=1914

My schedule allowed me enough time for my personal/family life	Count	Percent (%)
Strongly agree	789	41.2
Somewhat agree	817	42.7
Neither agree or disagree	81	4.2
Somewhat disagree	182	9.5
Strongly disagree	39	2.0
Not applicable	6	0.3

Work/Life Balance in Clerkship
N=1914

My schedule allowed me enough time for my personal/family life	Count	Percent (%)
Strongly agree	98	5.1
Somewhat agree	479	25.0
Neither agree or disagree	152	7.9
Somewhat disagree	191	10.0
Strongly disagree	58	3.0
Not applicable	936	48.9

4.2 Modifiers of Personal Wellbeing

The largest percentage of students agree that workload expectations (48.5%) negatively impacted their personal wellbeing during medical school, followed by schedule accommodations and/or leave of absence policies (40.2%), duty hours and/or clinical workload (37.7%), preceptor culture regarding work-life balance (34.2%), and UGME culture regarding work-life balance (31.6%).

The largest percentage of students agree that exercise and/or yoga (78.4%) positively impacted their personal wellbeing during medical school, followed by personal days (66.2%), social activities coordinated by medical councils/student groups (65.1%), counselling (42.6%), meditation and mindfulness (40.4%), peer support groups (39.4%), and wellness activities included in the curriculum (37.6%).

Duty Hours/Clinical Workload
N=1914

Duty hours/clinical workload negatively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	190	9.9
Somewhat agree	533	27.8
Neither agree or disagree	244	12.8
Somewhat disagree	299	15.6
Strongly disagree	103	5.4
Not applicable	545	28.5

Workload Expectations
N=1914

Workload expectations negatively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	198	10.3
Somewhat agree	731	38.2
Neither agree or disagree	413	21.6
Somewhat disagree	397	20.7
Strongly disagree	126	6.6
Not applicable	49	2.6

Preceptor/Instructor Culture
N=1914

Preceptor/instructor culture regarding work-life balance negatively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	165	8.6
Somewhat agree	491	25.6
Neither agree or disagree	460	24.0
Somewhat disagree	480	25.1
Strongly disagree	186	9.7
Not applicable	132	6.9

UGME Culture
N=1914

UGME culture regarding work-life balance negatively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	160	8.4
Somewhat agree	445	23.2
Neither agree or disagree	499	26.1
Somewhat disagree	534	27.9
Strongly disagree	202	10.6
Not applicable	74	3.9

Schedule Accommodations and Leave of Absence Policies

N=1914

Schedule accommodations and leave of absence requests/policies negatively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	284	14.8
Somewhat agree	486	25.4
Neither agree or disagree	384	20.1
Somewhat disagree	419	21.9
Strongly disagree	211	11.0
Not applicable	130	6.8

Personal Days

N=1914

Personal days positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	851	44.5
Somewhat agree	416	21.7
Neither agree or disagree	212	11.1
Somewhat disagree	55	2.9
Strongly disagree	32	1.7
Not applicable	348	18.2

Wellness Activities in Curriculum

N=1914

Wellness activities included in curriculum positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	188	9.8
Somewhat agree	533	27.8
Neither agree or disagree	490	25.6
Somewhat disagree	414	21.6
Strongly disagree	215	11.2

Not applicable	74	9
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Social Activities Coordinated by Medical Councils/Student Organizations
N=1914

Social activities coordinated by medical councils/student organizations positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	477	24.9
Somewhat agree	769	40.2
Neither agree or disagree	389	20.3
Somewhat disagree	180	9.4
Strongly disagree	52	2.7
Not applicable	47	2.5

Peer Support Groups
N=1914

Peer support groups positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	245	12.8
Somewhat agree	509	26.6
Neither agree or disagree	573	29.9
Somewhat disagree	172	9.0
Strongly disagree	50	2.6
Not applicable	365	19.1

Counselling
N=1914

Counselling positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	356	18.6
Somewhat agree	460	24.0
Neither agree or disagree	395	20.6
Somewhat disagree	104	5.4
Strongly disagree	36	1.9

Not applicable	563	28.4
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Meditation and Mindfulness

N=1914

Meditation and mindfulness positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	254	13.3
Somewhat agree	518	27.1
Neither agree or disagree	475	24.8
Somewhat disagree	229	12.0
Strongly disagree	103	5.4
Not applicable	335	17.5

Exercise and/or Yoga

N=1914

Exercise and/or yoga positively impacted your personal wellbeing during medical school	Count	Percent (%)
Strongly agree	968	50.6
Somewhat agree	533	27.8
Neither agree or disagree	222	11.6
Somewhat disagree	66	3.4
Strongly disagree	30	1.6
Not applicable	95	5.0

4.3 Learner Mistreatment

Just over one-fourth of respondents (26.8%) experienced student/learner mistreatment as a medical student. The most common form of harassment or intimidation experienced was inappropriate verbal comments (70.6%), followed by public humiliation (44.2%), sexist remarks and/or different training opportunities due to gender (36.6%), privileges and/or opportunities taken away (7.4%), work as punishment (7.1%), inappropriate or unwanted physical contact (7.1%), and other (12.5%).

Staff physicians were identified as the most common source of harassment or intimidation, as reported by 69.1% of medical students. Other sources of harassment or intimidation cited include patients/family members (24.2%), residents (18.6%), allied health professionals (11.1%), medical students (12.7%), medical school faculty/administration (9.8%), and other (6.2%).

The most commonly cited basis of harassment or intimidation was gender (48.7%), followed by other bases identified as other (41.2%). Race and/or ethnicity (22.7%), language (6.8%), and sexual orientation (5.0%) were also identified.

When asked how supported students felt when reporting and resolving student mistreatment, one-fifth (20.1%) reported feeling supported (5.4% fully supported; 14.7% somewhat supported) whereas 10.9% felt limited support and 3.3% felt no support.

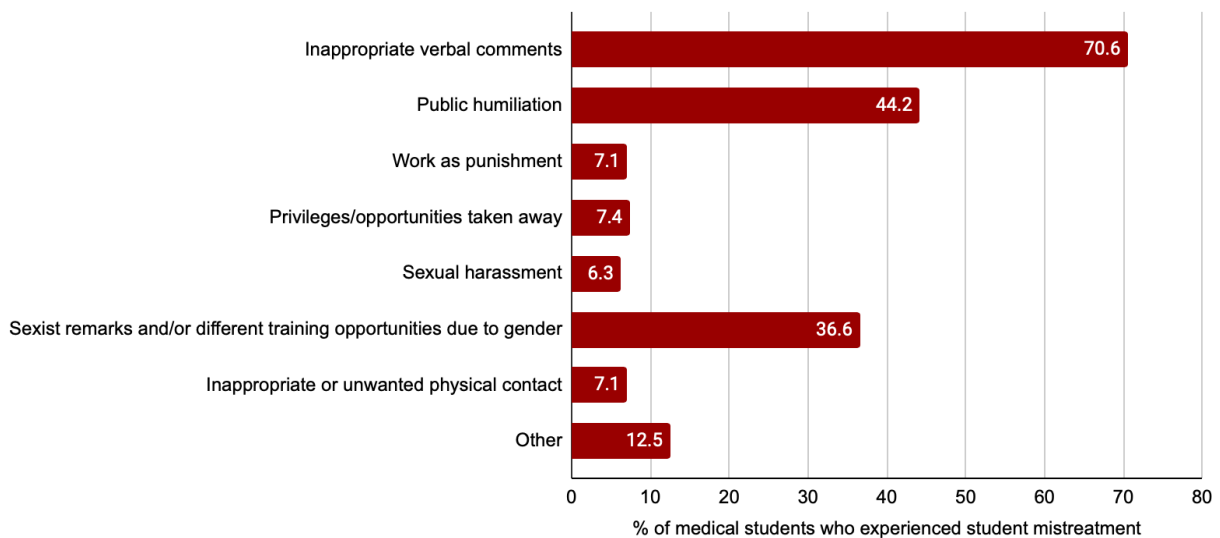
Experiencing Learner Mistreatment as a Medical Student

N=1914

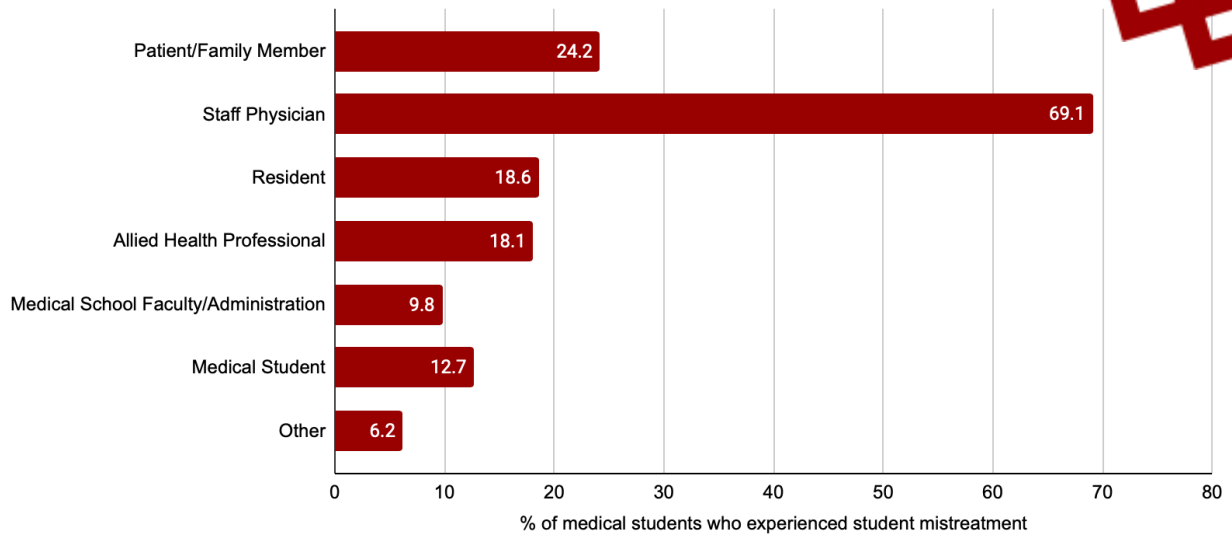
Have you experienced student/learner mistreatment as a medical student?	Count	Percent (%)
Yes	514	26.8
No	1400	73.2

Forms of Harassment/Intimidation Experienced by Medical Students

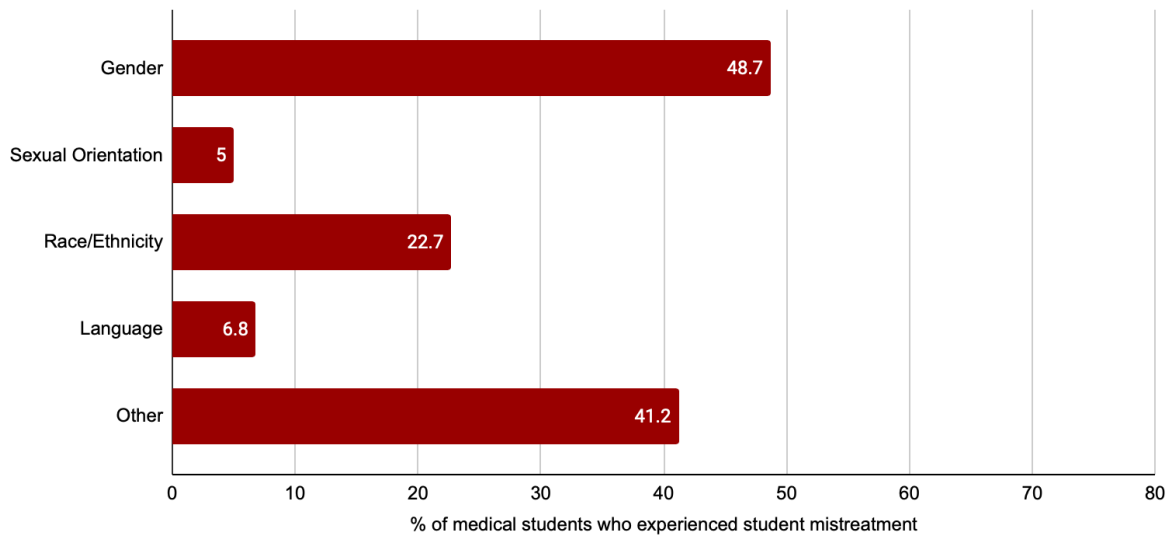
N=552



Source of Harassment/Intimidation Experienced by Medical Students N=553



Basis of Harassment/Intimidation Experienced by Medical Students N=503



Support in Reporting or Resolving Mistreatment

N=844

If you have experienced mistreatment, how supported did you feel in reporting and resolving it?	Count	Percentage
Fully supported	46	5.4
Somewhat supported	124	14.7
Limited support	92	10.9
No support	28	3.3
Did not report	244	28.9
Not applicable	310	36.7

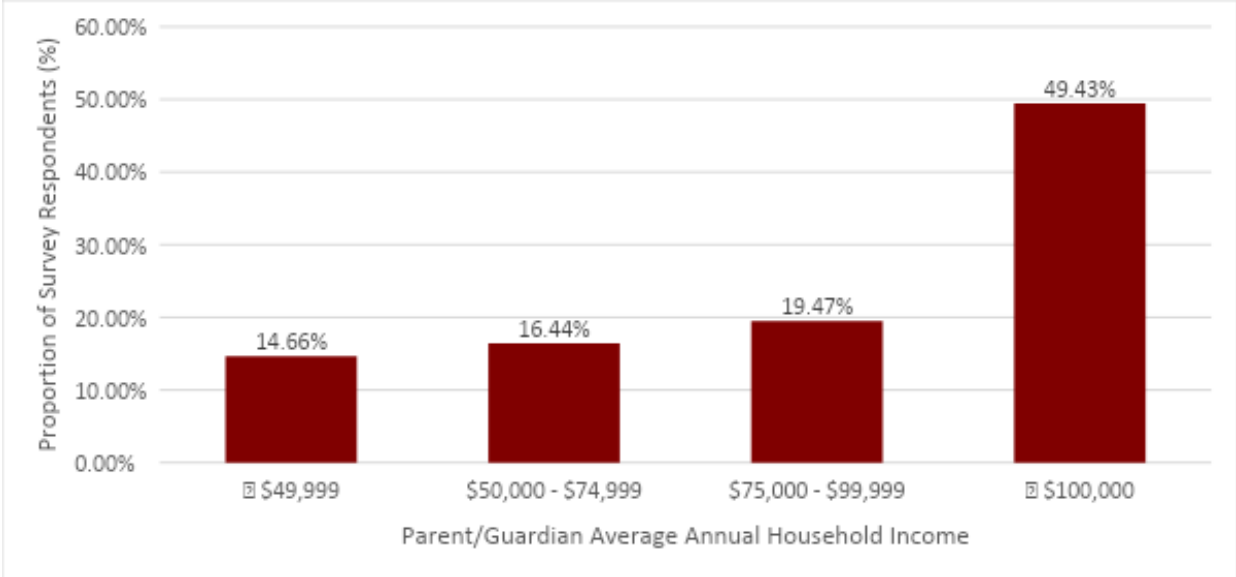
5.0 Financial Management

5.1 Household Income

Survey respondents were asked about their average, pre-tax, annual household income over the past five years. Generally, the proportion of respondents tracks with the amount of household income, with the most respondents (49.4%) reporting a household income of equal or greater than \$100,000. The next most popular household income group (19.5%) was the next highest, \$75,000-\$99,999. 16.4% of respondents report an average household income of \$50,000-\$74,999, and only 14.7% of respondents reported an average household income of less than \$49,999. The median responder fell into the \$75,000-\$99,999 bin.

Parent/guardian’s average annual household income (before taxes and other deductions) over the past five years (CAD)

N = 1849



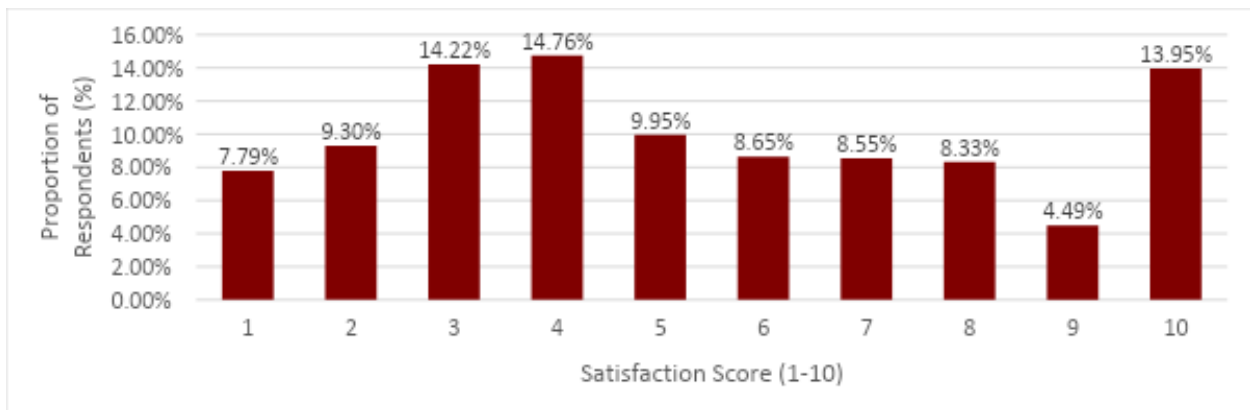
5.2 Debt Load

Respondents were polled about their comfort level with their current debt load on a scale from 1 to 10, with 1 being not comfortable at all and 10 being very comfortable. Respondents were distributed across satisfaction scores, with most respondents (14.2% and 14.8%) reporting slight dissatisfaction (3 and 4) with their currently debt load. As scores trail towards greater satisfaction or dissatisfaction, the proportion of respondents decreases, with 7.8% of respondents reporting strong dissatisfaction (1) and 4.5% of respondents reporting strong

satisfaction (9) with their current debt load. Interestingly, a large proportion of respondents (14.0%) report maximal satisfaction (10) with their current debt level, defying this trend.

Comfort level with current debt load (1=not comfortable at all; 5=indifferent; 10=very comfortable)

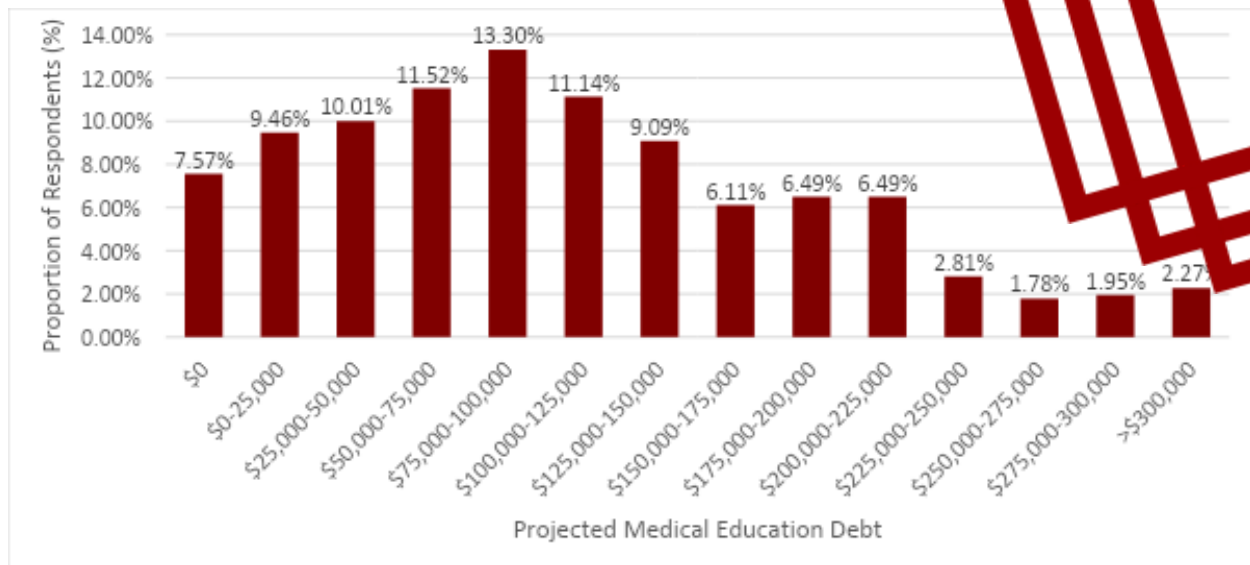
N = 1849



We polled respondents about their estimated amount of total debt at the end of their medical education. We found that a plurality of respondents reported between \$75,000-\$100,000 of debt. The proportion of respondents trended towards decrease as the amount of debt decreased or increased from this modal bin, with around 7.6% of respondents reporting no debt and 2.3% of respondents reporting greater than \$300,000 of debt.

Total Projected Debt at end of Participant Medical Education, Inclusive of all Government Loans and Lines of Credit

N = 1489

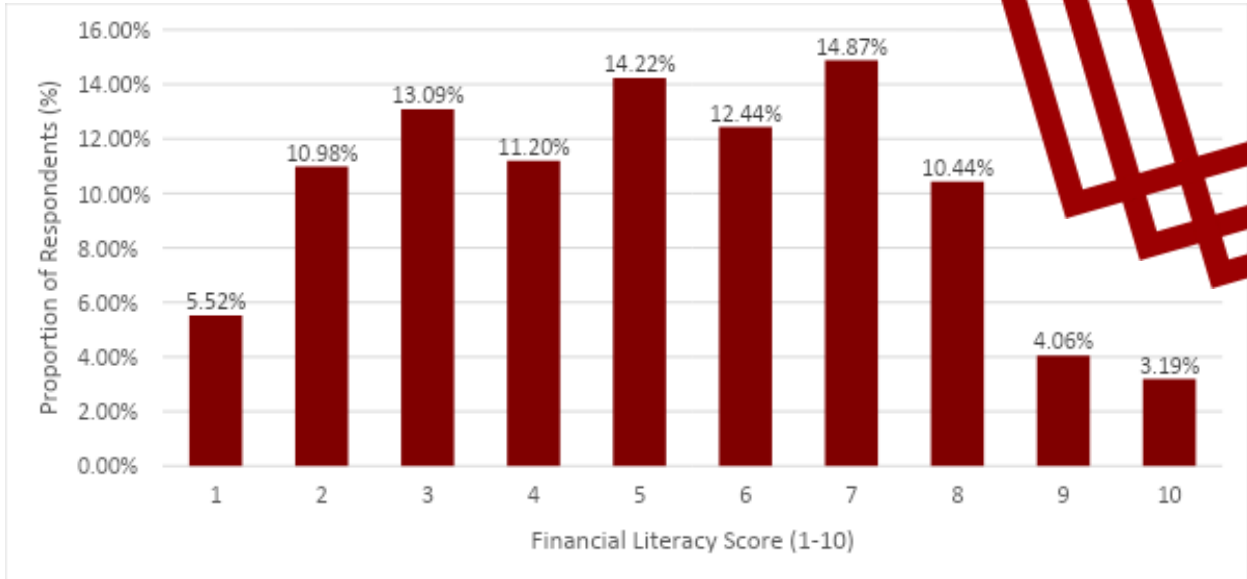


5.3 Financial Literacy

We asked participants to self-grade their financial literacy on a scale from 1 to 10, where 1 is no self-reported financial literacy and 10 is high financial literacy. The largest proportion of respondents (14.9%) reported a greater-than-neutral financial literacy of 7. The next largest proportion of respondents (14.2%) reported a neutral financial literacy of 5. The third largest proportion of respondents (13.1%) reported a less-than-neutral financial literacy of 3. The smallest proportions of respondents (4.1% and 3.2%) reported the highest two categories of financial literacy (9 and 10). The third smallest proportion of respondents (5.5%) reported no financial literacy (1).

Participant Self-Reported Financial Literacy Scores (1 = no financial literacy, 10 = high financial literacy)

N = 1849



6.0 Electives Experience

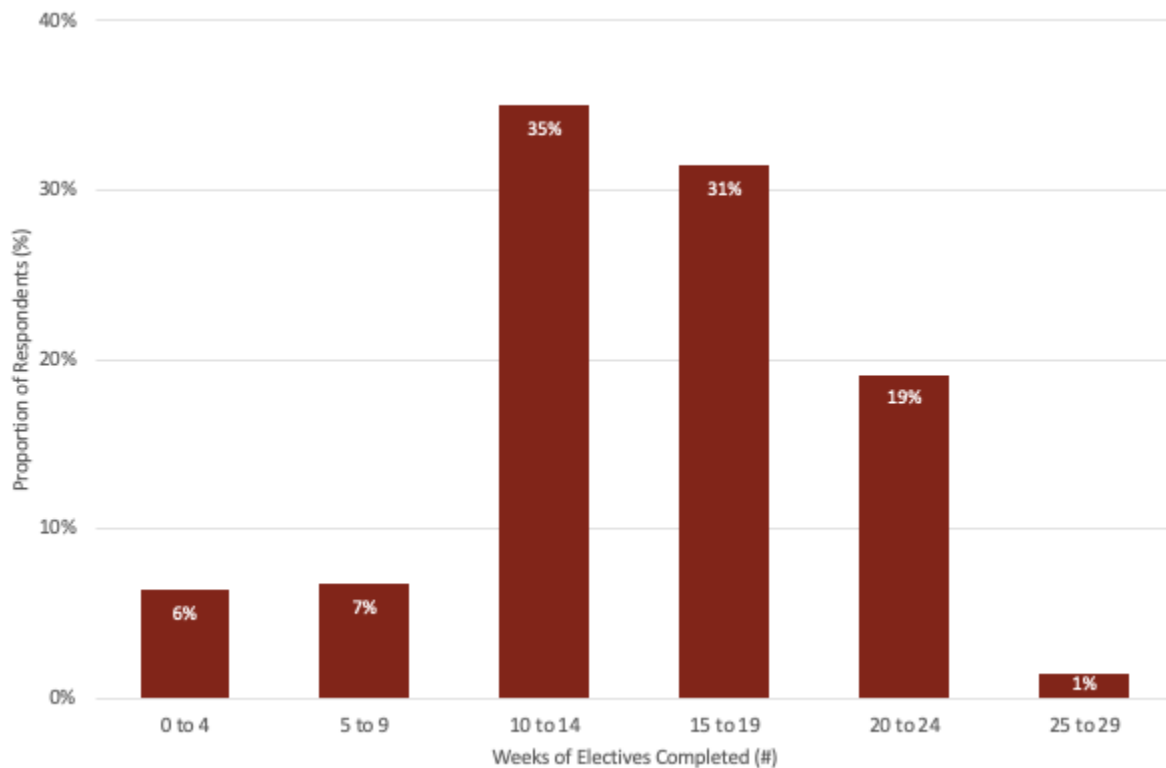
Please note that all respondents for questions found within this section were required to have used The Association of Faculties of Medicine of Canada (AFMC) Student Portal to book electives. This data was gathered in the spring of 2020, during the start of the COVID-19 pandemic. As such, respondents to this section of the survey experienced significant disruption to their ability to secure and participate in traveling electives.

6.1 Electives Overview

The survey results in this section provide insight into the duration of electives that medical students engaged in. A plurality (35%) of medical students engaged in 10-14 total weeks of electives. The vast majority (85%) of students completed between 10-24 total weeks of electives. Only 13% of medical students reported engaging in less than 9 weeks of electives. A small minority of 1% of students reported completing more than 25 weeks of electives.

Number of Weeks of Electives Completed

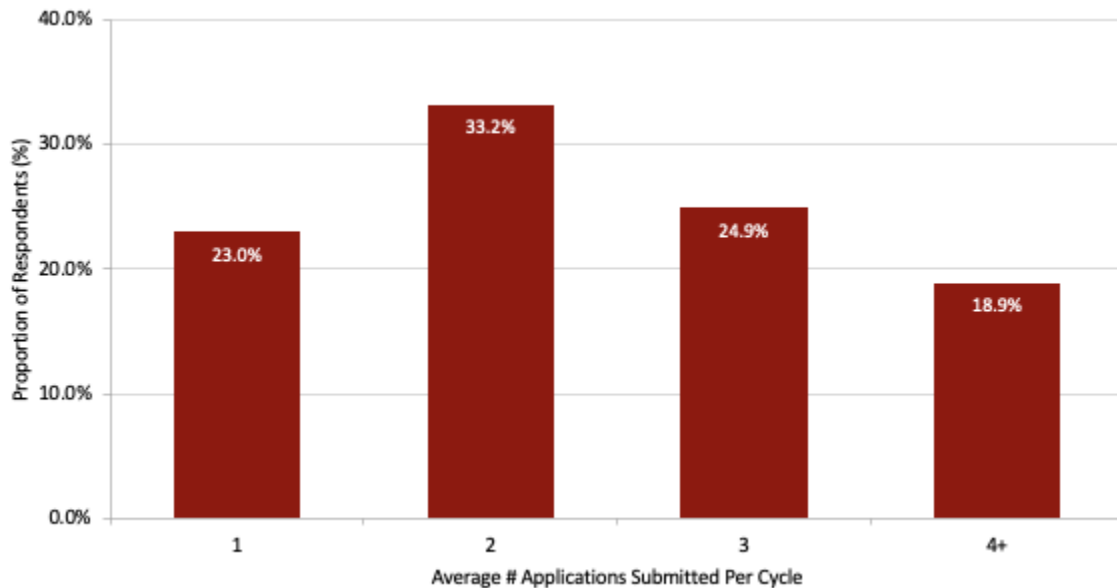
N = 283



A plurality (33.2%) of applicants applied to an average of 2 electives per cycle, however respondents were fairly well balanced between groups. In descending order of proportions, the next most common average number of elective applications per cycle was 3 (24.9%) followed by 1 (23.0%). Submitting greater than 4 elective applications was the least common, with only 18.9% of respondents applying to 4 or more electives on average.

Average Number of Elective Applications Per Application Cycle

N = 906



6.2 Costs Associated with Electives

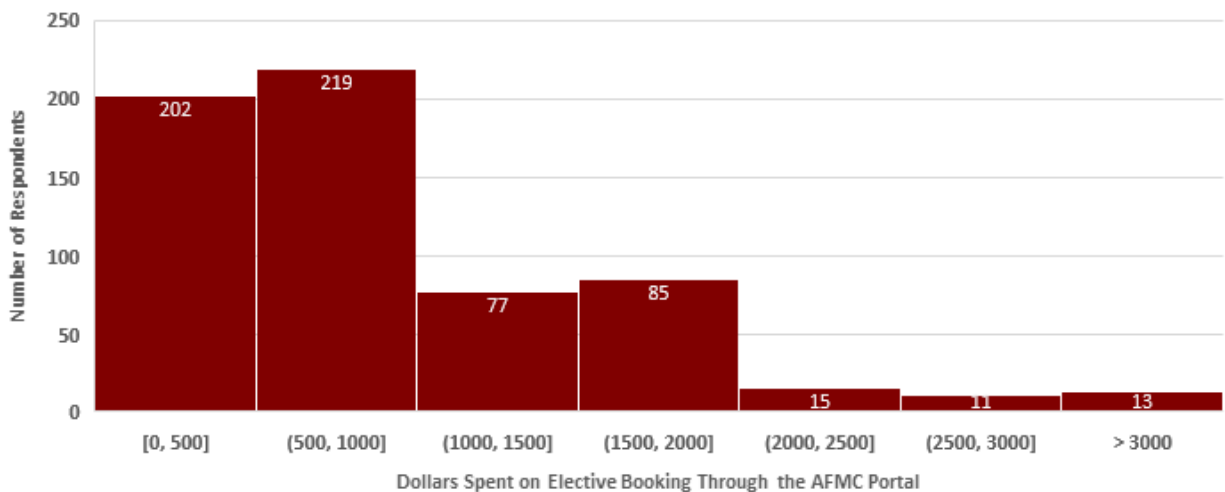
Students were polled about the cost of booking and pursuing electives as part of their medical education. In reviewing this data, it is important to note that this survey was conducted in 2020, at the start of the COVID-19 pandemic. As such, many students reported electives being canceled. As such, costs for booking and pursuing electives are likely to be underreported this year relative to others. Furthermore, the AFMC student portal was updated since the collection of this survey data. Current students may have a different experience compared to the respondents of this survey.

Even with this in mind, a plurality of respondents (219, 35.2%) report spending between \$500-1,000 on booking electives through the AFMC portal alone. The next largest grouping of students (202, 32.5)% report spending between \$0-500 on elective bookings. It is worth noting that 20.8% of these respondents report spending \$0 on booking electives, likely representing students who either are in pre-clerkship years prior to electives or had electives canceled due to the COVID-19 pandemic.

A sizeable proportion of students report spending greater than \$1,000. 77 students report spending between \$1000-1500, 85 report spending \$1,500-2,000, 15 report spending \$2,000-2,500, 11 report spending between \$2,500-3,000, and 13 report spending more than \$3,000 dollars on booking electives alone.

Cumulative Cost of Booking Electives through the AFMC Portal

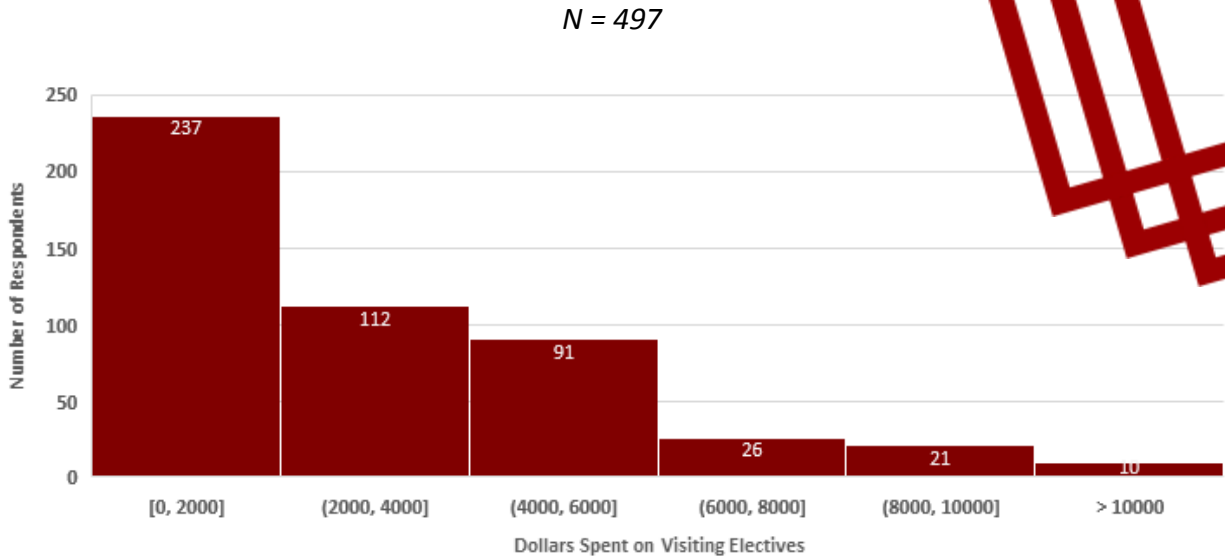
N = 622



On top of polling students about the costs of booking electives, we also asked students about the cumulative cost they incurred on visiting electives, excluding the costs of booking through the AFMC portal. A plurality (237, 47.7%) of students report spending between \$0-2,000 on visiting electives. Notably, 41.4% of these respondents (98) report spending \$0 on visiting electives, perhaps reflecting limited opportunities to pursue visiting electives due to COVID-19. This may skew this year’s survey results relative to others by implying that electives this year were comparatively inexpensive, when in reality they were simply less available.

The number of respondents decreases as the amount spent on visiting electives increases. While 112 respondents report spending \$2,000-4,000 and 91 respondents report spending \$4,000-6,000 on visiting electives, only 26 respondents report spending \$6,000-8,000 on visiting electives. As cost increases further to \$8,000-10,000, the number of respondents decreases further to 21. The smallest bin consists of 10 respondents who report spending more than \$10,000 on electives. The vast majority (369, 74.2%) of participants report spending greater than \$1,000 on electives.

Cumulative Cost of Visiting Electives (Excluding Booking Costs)

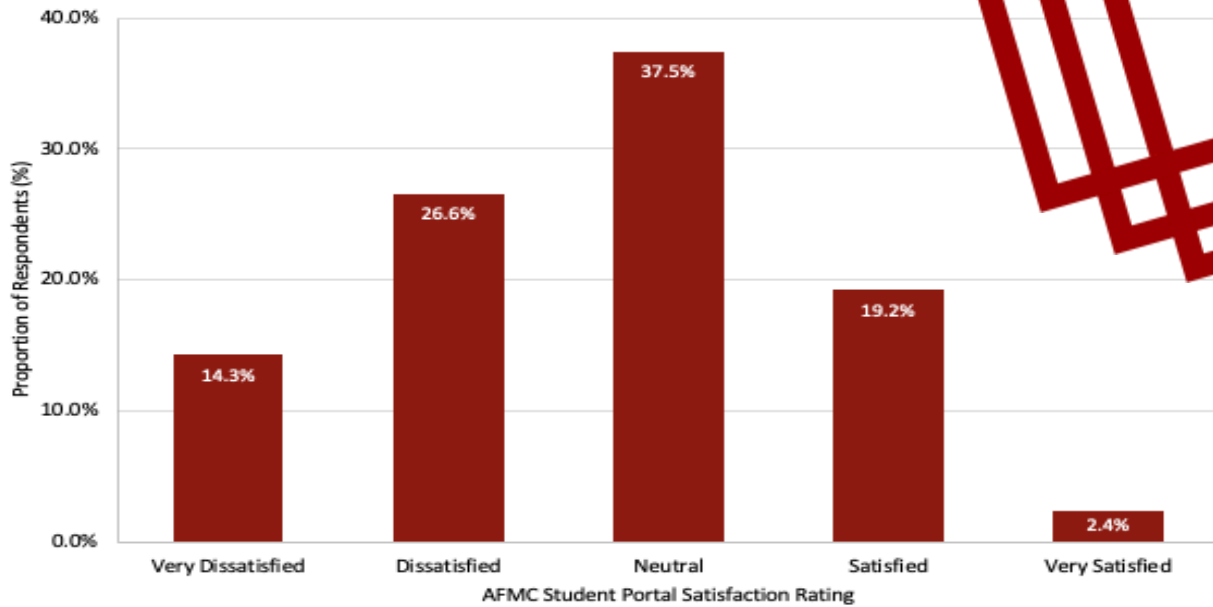


6.3 AFMC Student Portal

We asked students to report their satisfaction with the AFMC student portal used to book visiting electives, and with the CFMS' advocacy efforts on this issue. A plurality (36.5%) of students report neutral satisfaction with the AFMC student portal. A greater proportion of students report dissatisfaction than satisfaction, with 40.9% reporting that they were either dissatisfied (26.6%) or very dissatisfied (14.3%) with the AFMC student portal. By contrast, only 21.6% of respondents report that they were either satisfied (19.2%) or very satisfied (2.4%) with the AFMC portal.

Student Satisfaction with the AFMC Student Portal

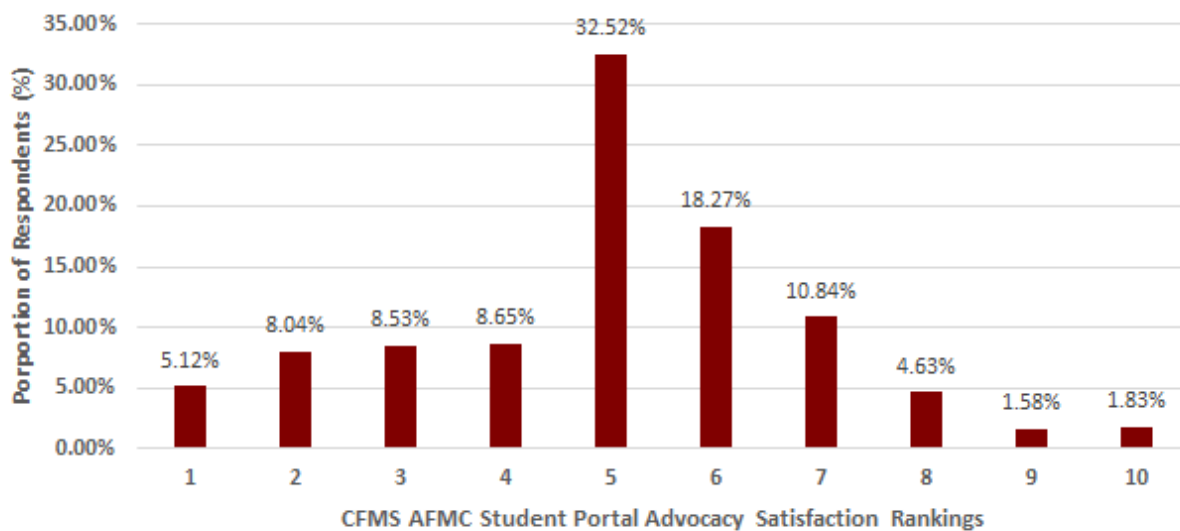
N = 1124



A plurality (32.5%) of students also report neutral satisfaction with the CFMS' advocacy efforts towards improving the AFMC student portal. However, contrary to the satisfaction scores with the AFMC itself, students generally report greater satisfaction with the CFMS' advocacy efforts, with 37.2% of students reporting a ≥ 6 satisfaction score and only 30.34% reporting a ≤ 4 satisfaction score.

Student Satisfaction with the CFMS' Advocacy Towards Improving the AFMC Student Portal

N = 821



7.0 CaRMS Match 2020

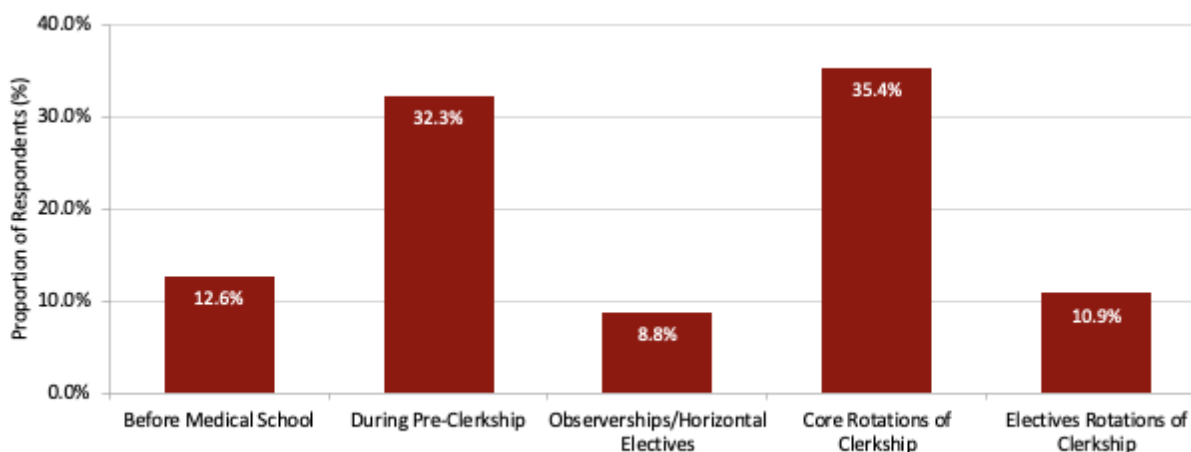
All responses to questions in this section were collected from final-year medical students who participated in the CaRMS R1 Main Residency Match in 2020.

7.1 Career Decisions

The questions in this section provide insight into the career planning process of students throughout their undergraduate medical education. Most students identified that they decided upon the specialty(ies) that they applied to in the CaRMS Match in pre-clerkship (32.3%) or in the core rotations of clerkship (35.4%). In contrast, only 12.6% of students responded that they decided on their specialty(ies) of interest before medical school. Furthermore, 10.9% of students reported making this decision in the electives rotation of clerkship, and 8.8% of decided during observerships and/or horizontal electives.

Time at Which Students Decided on their CaRMS Application Specialty(ies)

N = 625



For all entry route options in the CaRMS R1 Main Residency Match, students were asked whether they received adequate exposure in undergraduate medical education to make an informed decision regarding applications at the time of CaRMS application submission. Overall, the greatest number of students reported receiving the adequate exposure to Family Medicine with 86.0% of respondents declaring that they received enough exposure to make informed decisions regarding CaRMS applications. The majority of respondents also reported receiving adequate exposure to Internal Medicine (78.9%), Paediatrics (70.9%), Obstetrics & Gynecology (69.2%), General Surgery (68.8%), and Psychiatry (68.6%). Alternatively, the smallest number of respondents reported receiving adequate exposure to Nuclear Medicine (2.7%), Neuropathology (3.2%), and Medical Microbiology (2.6%).

Sufficient Student Exposure to CaRMS Entry Route Discipline

N = 564

- Anatomical Pathology
- Dermatology
- Family Medicine
- Hematological Pathology
- Medical Microbiology
- Neuropathology
- Obstetrics/Gynecology
- Anesthesiology
- Diagnostic Radiology
- General Pathology
- Internal Medicine
- Neurology
- Neurosurgery
- Ophthalmology
- Cardiac Surgery
- Emergency Medicine
- General Surgery
- Medical Genetics & Genomics
- Pediatric Neurology
- Nuclear Medicine

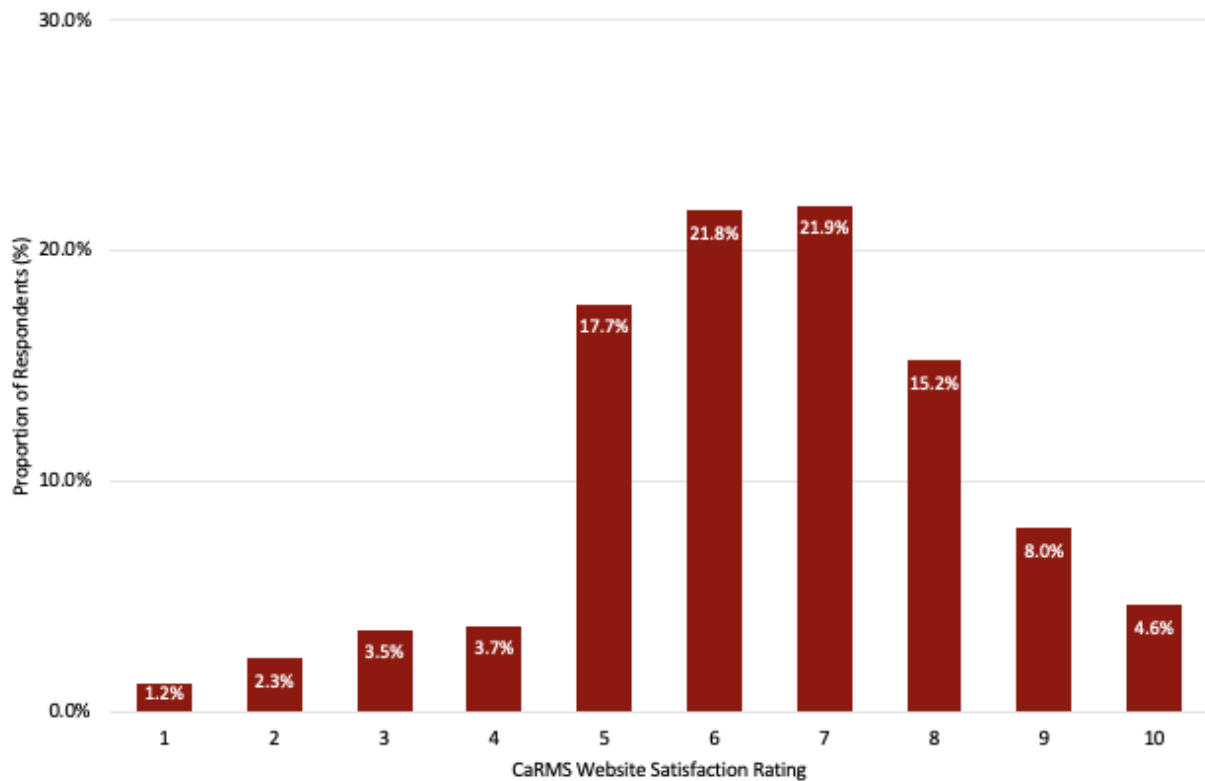


7.2 CaRMS Website

Medical students were surveyed regarding their level of satisfaction with the CaRMS website and areas they believe require improvement.

Medical Student Rating (1-10) of CaRMS Website Satisfaction

N = 565



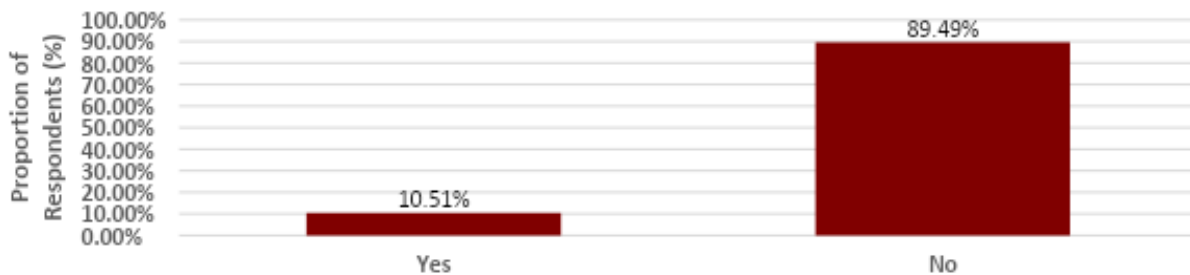
8.0 Membership Engagement and Satisfaction

8.1 CFMS Involvement

We asked survey respondents about whether they were currently involved in the CFMS in some capacity. Around 10.5% of respondents reported being currently involved in the CFMS, with the remaining 89.5% of respondents not reporting involvement.

Proportion of Survey Respondents Currently Involved in the CFMS (e.g. Board Member, National Officer, Committee/Task Force/Working Group, Roundtable Member, etc.)

N = 2131

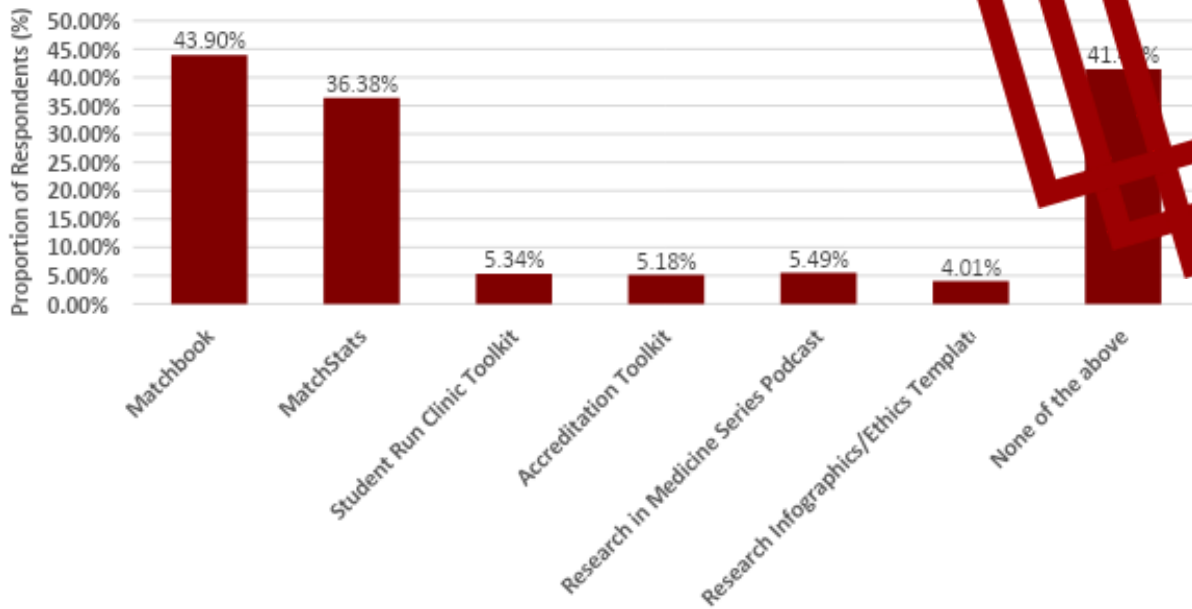


8.2 Resources

Survey respondents were also polled about their awareness of the myriad resources that the CFMS provides. The resources that the most students were aware of related to the CaRMS match, with the CaRMS Matchbook as the resource that the most students were aware of (43.9%) and with the MatchBook as the second most well-known resource (36.4%). The proportion of students aware of all other resources is dramatically lower. Only 5.5% of respondents reported being aware of the Research in Medicine Series Podcast, with a similar proportion of respondents being aware of the Student Run Clinic Toolkit (5.4%), Accreditation Toolkit (5.2%), and Research Infographics/Ethics Template (4%). A substantial proportion of respondents (41.4%) were not aware of any of the resources we listed.

Proportion of Survey Respondents Aware of Resources Provided by the CFMS

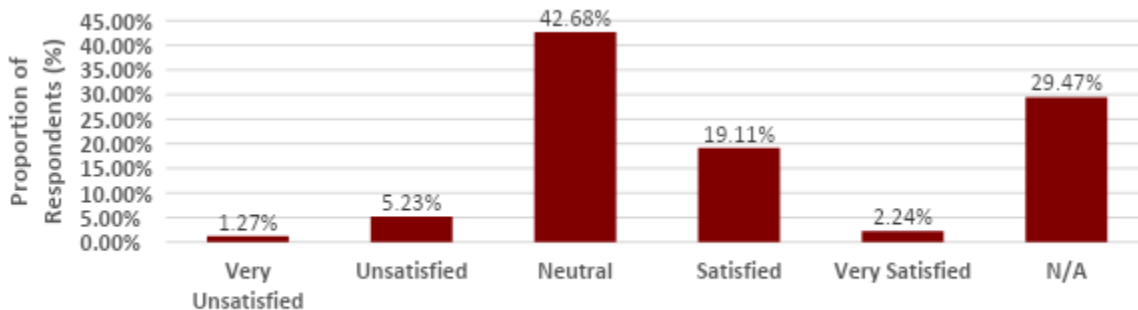
N = 1968



A plurality of respondents reported neutral satisfaction with the research-oriented resources provided by the CFMS. More respondents reported that they were satisfied (19.1%) or very satisfied (2.2%) than dissatisfied (5.2%) or very dissatisfied (1.3%) with these resources. Interestingly, only 29.5% of participants answered N/A to this question, despite 41.4% of participants reporting a lack of awareness of any of the CFMS' resources in the previous question. Considering that this question asked about research-specific CFMS resources, one would expect the proportion of N/A answers to be greater than the proportion of "None of the above" answers in the question prior. It is possible that some applicants unaware of these resources reported neutral satisfaction, accounting for the dominance of the neutral satisfaction category question.

Survey Respondent Satisfaction with CFMS Resources that Support Student Involvement in Research (e.g. Research Podcast, Infographics, Ethics Template, Funding Opportunities)

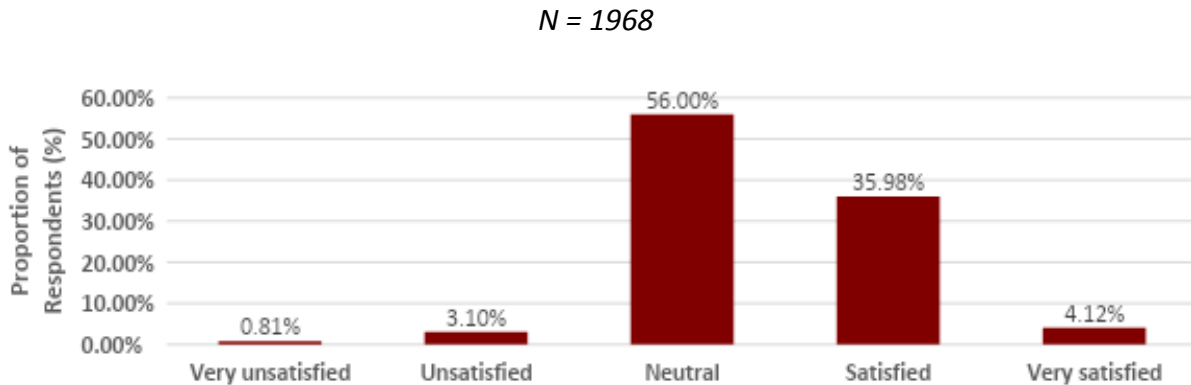
N = 1968



8.3 Education Advocacy

We asked survey respondents about their satisfaction of the advocacy efforts of the CFMS education portfolio. A majority of respondents (56%) expressed neutral satisfaction with the CFMS education portfolio's advocacy efforts. More participants said they were either satisfied (36%) or very satisfied (4.1%) than dissatisfied (3.1%) or very dissatisfied (0.8%).

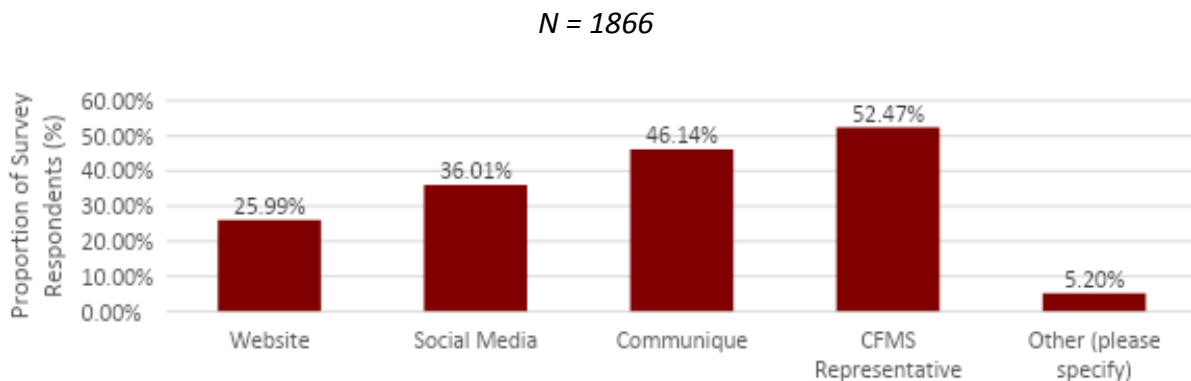
Survey Respondent Satisfaction with the Advocacy Efforts of the CFMS Education Portfolio



8.4 Communication Methods

Survey respondents were asked about the avenues of communication that they learned about CFMS initiatives from. The greatest number of participants (52.5%) learned about CFMS initiatives from their CFMS representative. In descending order of popularity, survey respondents received information about CFMS initiatives from the communique (46.1%), social media (36%), and website (26%). A small proportion of survey respondents (5.2%) received their information another way.

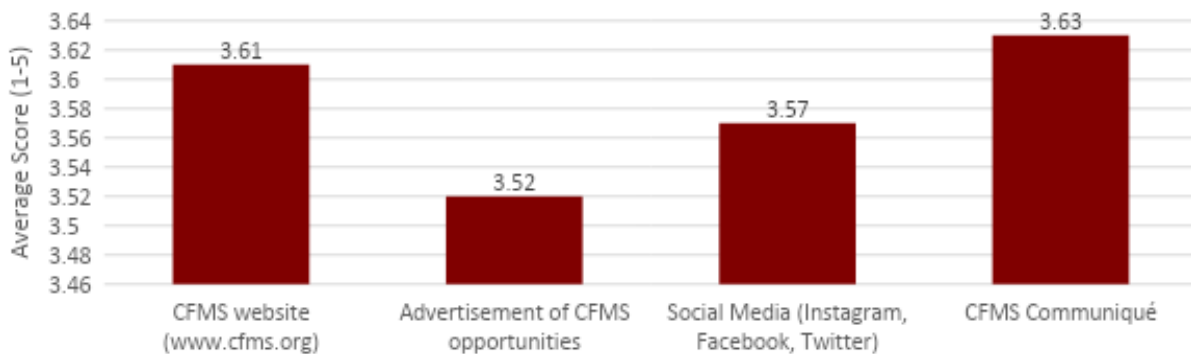
How Survey Respondents Received Information About CFMS Initiatives



We asked participants to rate their satisfaction with each CFMS communication strategy on a scale from 1 to 5, with 1 being very dissatisfied and 5 being very satisfied). Average scores ranged from about 3.5 to 3.6, with the median score being 4, satisfied, for all questions. Mean satisfaction scores were highest for the CFMS communique (3.63) and website (3.61), and comparatively lower for social media (3.57) and advertisement (3.52).

Survey Respondent Satisfaction by CFMS Communication Strategy

N = 1866

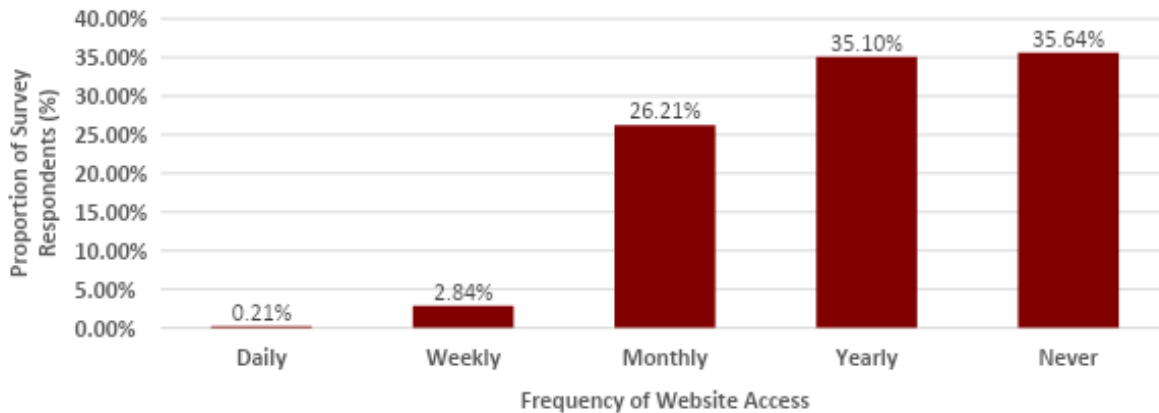


8.5 Website Usage

Survey respondents were polled about how often they accessed the CFMS website. Most survey respondents (35.6%) reported having never accessed the CFMS website. Of respondents who accessed the website, the greatest proportion of survey respondents (35.1%) accessed the website yearly, followed by monthly (26.2%), weekly (2.8%), and then daily (0.2%).

Frequency with which Survey Respondents Access the CFMS Website

N = 1866



We asked survey about their reasons for accessing the CFMS website. The greatest proportion of survey respondents (66.8%) cited discounts as their reason for accessing the website. In descending order of popularity, students accessed the website for the CFMS' resources (51.3%), databases (39.6%), to learn more about the CFMS (32.6%), to learn about the CFMS general meetings (18.3%), to apply for CFMS positions (16.0%), and to access the longitudinal wellness initiative (5.4%). A small proportion of students (3.8%) accessed the website for other reasons.

Reasons Why Survey Respondents Accessed the CFMS Website

N = 1185

