

The Academic Option: A Resident's Perspective

Currently, there are widespread concerns in North America about filling future full-time faculty positions in dentistry. In *IJP*'s Workshop for Clinical Prosthodontic Educators, at the Institute for Advanced Dental Studies in Karlsruhe, Germany, the impending shortage of prosthodontic educators, and particularly the challenges facing women in such a career path, were discussed. As a prosthodontic resident at a prominent North American university, I would like to share a personal perspective on some of the issues that potentially impede the choice of an academic career over private practice and offer some recommendations that may enhance the appeal of academia.

A major obstacle for the North American prosthodontist is the length of time it takes to acquire the PhD degree required to pursue an academic career. Prior to gaining acceptance into a dental specialty program, most applicants have a Bachelor's degree, a 4-year DDS, and a 1-year hospital residency or work experience. An MSc in prosthodontics in most North American universities is a 3-year program that emphasizes the acquisition of clinical specialty skills together with the completion of a research project. A PhD requires an additional 3 to 5 years of study and research. The total educational experience of a university professor can range anywhere from 15 to 17 years. This represents a significant challenge in terms of commitment and cost for most residents.

A lengthy university program is always a costly endeavor; however, the cost of obtaining a PhD in a specialty dental program can be prohibitive. Tuition costs for a DDS are usually higher than those of any university programs, often exceeding \$100,000. When tuition for a specialty program and PhD are added to this figure, the expenditures can more than double. This is a major obstacle for students with no income to secure such financing, and servicing such a debt on a typical university starting salary may be impossible.

While the academic journey to professorship is difficult for all, the challenges facing women are particularly noteworthy. Due to the stage of the life in which formal education occurs, women who choose academia must often put off motherhood. Those who do decide to start a family find that maternity benefits for North American students are non-existent, and little provision is made in their academic schedules to accommodate their adjustment to parenthood.

Further, prospective dental academics must deal with the frequent lack of respect they receive from the dental community. Instead of the reverence those in high academic positions enjoy in other parts of the world, North American dental educators are frequently perceived as people who could not succeed in private practice.

Universities are beginning to acknowledge the problems with succession planning for academics, especially with respect to prosthodontics, and are making changes. For example, at the University of Toronto,

MSc students now have the option of converting their current program to a PhD program within 18 months of enrollment, thereby shortening the required educational period.

However, more needs to be done. To offset the high costs of pursuing a PhD, universities could institute measures such as reducing or waiving tuition, paying stipends, or providing loans for residents willing to commit to academia. Additionally, universities could hire residents as salaried assistant clinical professors in return for a year of postgraduate service for every year of employment. This model is common in both the military and private sectors. Another strategy that might encourage prosthodontic residents to pursue a PhD and remain in academia is to consider a portion of the residents' formal education as pensionable years that they can "buy back" upon hiring.

It is also common for universities to actively discourage residents from engaging in outside employment. Allowing students to practice part-time would ease residents' immediate financial burden and reduce future debt. Enlightened institutions, such as the University of London, offer very popular part-time PhD programs that allow students to maintain employment.

Finding solutions to the problem of vacant faculty positions is complex. The priorities of dental educators are changing. Some want to work part-time so they can spend more time with family, while others strive to find a balance between clinical practice and teaching. The academic choice does not have to be an absolute one. The onus is on our universities to acknowledge that change is necessary—to institute mechanisms allowing prosthodontists to combine both private practice and teaching positions, and to create a climate that fosters a sense of fulfillment with this choice.

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