

## Who pays for orthodontic education?

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Who should pay for orthodontic education? A couple of years ago, I would have told you that I knew the answer, absolutely and without a doubt. Now, I'm not so sure. You may think this is an easy question. If you do, your answer likely depends on in which country you live, what your experience was when you were in school, and maybe what type of school you attended, public or private.

Higher education throughout the world is either funded publicly, by way of taxation, or privately, by collecting tuition. In many cases there are combinations, with some proportion of central support being augmented by fees paid by the students enrolled. In the US, there is a wide range of educational financial options available from the orthodontic resident's perspective, between being paid \$160,000 to actually paying \$240,000 over the duration of a residency program.<sup>1</sup> If I were an applicant, it would seem obvious that I would opt for a graduate program that paid me a stipend or at least one that didn't charge, if that were possible. Yet, just two days ago, I was contacted by a prospective student by email asking me what she would "miss out on" by attending a program that paid a stipend rather than choosing a school charging a hefty tuition. I can understand her confusion.

As far as I can tell, the main difference between programs that charge tuition and those that pay a stipend is the financial model under which they operate and that's it. There are differences among programs in teaching, research, and clinical balance and philosophy but these are not necessarily correlated with the amount of tuition they charge. Every program has good and bad characteristics depending on your perspective and it's up to the programs and the applicants to sort that out so that they match up appropriately.

Dental education is very expensive to deliver. In post-graduate dentistry and in orthodontics in particular, however, there is an opportunity to generate financial support for education through the treatment that residents provide to patients. Where I am, we have been able to sustain a favorable balance financially by running an efficient orthodontic treatment practice as part of the orthodontic post-graduate program. Though the details of how the resources generated are distributed have varied over time depending on the higher administrations' policies, patient treatment revenues have been sufficient to cover the cost of running the orthodontic program. The model works well because having financial responsibility provides incentive for all the parties

involved to make it successful. The residents themselves enjoy the experience because the environment required for the program to meet its expenses mimics what they will need to do in their future practices. Also, it means that the residents don't have to pay tuition, actually receive a small stipend, and even get an allowance for travel to scientific conferences and meetings.

However, it is not always an easy task to meet a program's financial needs. An orthodontic graduate program with a clinical component that runs like a private practice experiences the same ups and downs of any orthodontic practice. When economic times are good, profits come easy. When the economy is tight, it is more important to watch where the money is spent. The staff members still need to be paid, the facility still needs to be upgraded to attract new patients, the residents still need resources to complete their research requirements. The challenges posed in hard economic times like the current one provide a learning opportunity for residents, faculty, and administrators alike. In some ways, it is actually instructive for the residents to experience the administrative pain of planning out how the practice (and hence the program) will meet its financial obligations.

So, who pays for orthodontic education? I believe it is just too easy to say "let's raise tuition to cover our increased costs." With residents graduating from programs in the US with an average debt approaching \$200,000,<sup>2,3</sup> it is irresponsible to keep raising tuition without considering the burden this places on the residents themselves, but also on the specialty and its future. Yet, not every program has the opportunity or ability to sustain its own financial health by managing an efficient treatment facility successfully. It is a question that is difficult to answer and yet is becoming a more critical problem than ever to solve.

### REFERENCES

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