

To the Members of the Oregon Senate Health Care and Human Services Committee:

As a physician in training in psychiatry, I am asking that you **vote NO on H.B. 2902-A.**

I was 28 when I started medical school at Oregon Health & Sciences University. During medical school, I had two children. My husband was a medical resident at the time, and he did not make enough money to pay for our basic needs, my medical school fees and childcare; therefore, I had to take out extensive childcare loans in addition to loans to pay for medical school. In total, I took out over \$300,000 in loans during medical school.

My two children were seven months old and two-and-a-half years old when I started my residency in psychiatry. I finished three years of training in adult psychiatry, and am now in my first of two years of fellowship in child psychiatry. When I am finished with my training, I will have spent four years in medical school, and five years in residency and fellowship; in total, I will have spent nine years learning to become a child psychiatrist. I will be over a quarter million dollars in debt. More important to me, however, is the time I have sacrificed away from my own children. By the time I am finished, my children will be almost six and eight years old. The many hours I have spent in training - in the hospital, in the clinic, at community sites, in Emergency Rooms, at the State Hospital - is time that I - and they - will never get back. I know in my heart that my training is critical to provide the care that many of the most vulnerable children in Oregon need. It allows me to understand the complex interplay of medical illness, psychological and physical trauma, poverty, family stressors, and other factors that contribute to psychiatric illness in children. It feels quite incomprehensible to me that there is now a movement arguing that I should not be compensated at a level that reflects my many extra years of training and the financial and personal costs of this training, as well as arguing that mid-level providers who do not have as much training should get as much compensation as I should.

Please -- do not disregard the many sacrifices that I and my family have made, so that I can acquire the most advanced training in caring for psychiatrically ill children. It would be an injustice to me, to my own family, and to the children and families for whom I provide care. I urge you to **vote NO on H.B. 2902-A.**

Sincerely,  
Rebecca Marshall, MD  
Child and Adolescent Psychiatry Fellow PGY-4  
Oregon Health and Science University