

Identifying and addressing the challenges of widening participation in medical education

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What we will cover

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- Methodology
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- Summary





About the Project

Focusing on the differences in the challenges and experiences faced by applicants to and students at one UK medical school based on socio-economic status.

Subject	% of UK domiciled young entrants to full-time first degree courses from POLAR3 low participation neighbourhoods by subject and entry qualification 2015/16
Medicine, Dentistry and Vet Science	4.8%
Law	12.7%
Mathematical Sciences	9.0%
Historical and Philosophical Studies	8.7%

About the Project

- Aims of project
 - » To identify variance in challenges and develop a toolkit to ameliorate these.
 - » Support recruitment to/completion of undergraduate medical training for students from non-traditional backgrounds.
- Mixed methods approach.
- About me
 - » Background in widening participation.
 - » 10+ years experience in Higher Education outreach.



Methodology

- 1-2-1 interviews with current undergraduate students at one medical school
- Students across all year groups and educational backgrounds
- 11 interviews
- Analysis using NVivo software, taking a phenomenographic approach
- Findings will be used alongside focus groups and data analysis to inform toolkit and provide guidance to medical school and admissions tutors.







Initial Findings

3 distinct themes so far

- Information, Advice and Guidance
- Work placements
- Support and networks (pre and during)



Information, Advice and Guidance

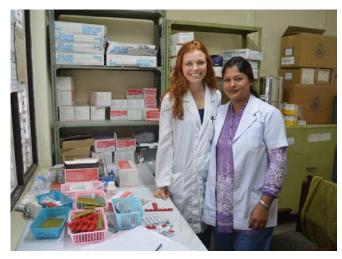
- Many knew they wanted to do science from a young age but may have decided on medicine at a later stage.
- Year 11 seemed to be most popular time to decide on medicine
 - » Varying perceptions on whether this was "early" or "late".
- Motivation and perseverance came up as key trait for knowing, and achieving, requirements for reading medicine.



Initial Findings

Work Placements

- Networks played a big part in finding work placements.
- Feeling of "luck" in finding placements amongst students who did not have familial links.
- Being able to afford volunteering opportunities abroad (which are plentiful and easier to access).
- Found volunteering opportunities useful for developing skills/understanding work and to decide if this is right career path (not just for application/interview process even though this is why they did it).







Initial Findings

Support and Networks

- School medical societies were perceived as key support functions (where they existed), particularly for sharing "successful" personal statements.
- Being able to afford training opportunities for e.g. UKCAT etc.
- Societies again were of significance in terms of on-course peer-support at university.
- Transition experience to University varied depending on personal preparedness.











Challenges Identified

- Comprehensive schools notoriously came out as least able to support students applying to medicine.
- Prevalence of money and networks easing the application process.
- Wanted to make content-driven choice of medical school but state school students particularly found it difficult to decide using this when they haven't experienced these teaching styles.
- Time lag (compared to peers applying to other programmes) in hearing back from offers caused additional stress when trying to focus on studies.
- Timing of BMAT was a deterrent.



Discussion Points

- How can UK Medical Schools better support students from nontraditional backgrounds in applying to read medicine where they don't get support from their schools?
- How can we support students in the transition to university to increase preparedness and on-course success?
- How can we support undergraduate students without the variability that student societies offer?



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Summary

- Accessing work placements is still a large barrier to entry.
- Pre-entry support is variable and weighted against those who attended non-selective state schools.
- Networks and ability to pay for opportunities play a major part in application preparation.
- Information, Advice and Guidance needs to be more readily available at pre-16.
- Societies are currently a key element of support both pre and postentry.

QUESTIONS?

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