Why Not Medicine? Perceived Barriers to Pursuing Medical Degrees in Junior College Students.

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Abstract

Many academic institutions like Indiana University School of Medicine have created specific programs to increase diversity in admissions of underrepresented minorities. This is often achieved with a master's program designed to increase applicant "competitiveness". The issue that arises is that many of these programs are directed toward students at 4-year colleges or post-baccalaureate programs which excludes students pursuing education at 2-year community colleges without these programs. This is a missed opportunity to increase diversity as 2-year colleges often have higher proportions of underrepresented minorities (22% African American representation at this level of institution compared to 11.3% at 4 year or higher universities).[4] A large share also come from low-income families (36.7% of students whose families make less than $20k/year attend 2-year institutions compared with 17.7% of students whose families make more than $100K/year).[5,6] Sequela of this lack of resources for these students manifests as lower rates of application to medical school (only 28% of applicants in 2013 had a history of 2-year college attendance).[2,3,5] This highlights the need for quality research on this particular subset of health science students not only from a system and access-based approach but also from a motivational standpoint. Junior colleges have some of the most diverse cohorts of students with profound interest in health science yet who often chose pathways other than medical school. So, why not medicine?

Introduction

This research examines the issue of diversity in medical school admissions and the missed opportunity to include the underrepresented minorities at 2-year community colleges. Many academic institutions have created specific programs to increase competitiveness for applicants, but these programs are often directed towards students at 4-year colleges or post-baccalaureate programs. This exclusion of 2-year college students, who often come from low-income families and have a higher proportion of underrepresented minorities, results in lower rates of application to medical school.

Materials & Methods

For this exploratory qualitative study, a survey was formulated based off the Abdulrazak et al. Med Achieve survey to be administered to students seeking degrees in health science related fields at a Midwest junior college.[1] The survey was be administered by Austin Blais, MS3 at IU School of Medicine and adjunct faculty at Ivy Tech Community College, as part of the IVYT 112: Student Success in Health Science course and focused on themes of perceived barriers to pursuing medical school.

Population: Students (N=90) pursuing degrees related to health science at a Midwest 2 year-college from January-March 2023 were the target population. The survey had a survey open rate of 34% (n=31) and a survey completion rate of 94% (n=29).

Exclusion Criteria: Question responses were not forced, and surveys with fewer than 90% of items answered (n=2) were not included in the data analysis.

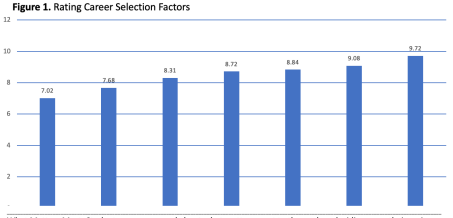
Demographics

Table. Demographics

Age, average, years(SD)	25.7 (6.5)	Marital Status, No. (%)	
Gender, No. (%)		Single	22(75.9)
Female	24 (84)	Married	5(17.2)
Male	4 (13.8)	Divorced	1(3.4)
Preferred Not to Say	1 (3.4)	Separated	1(3.4)
Ethnicity, No. (%)		Dependents, No. (%)	
White	19 (65.5)	None	20(69)
Black	5 (17.2)	One	4(13.8)
Other	3 (10.3)	Two or More	5(17.2)
Hispanic or Latine	1 (3.4)		
Prefer Not to Say	1 (3.4)		

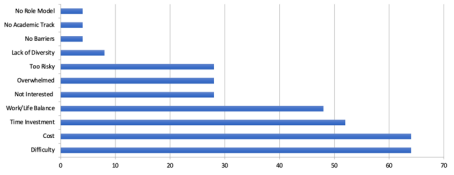
Results

Figure 1. Rating Career Selection Factors



What Matters Most: Students were surveyed about what matters most to them when deciding upon their major and career pathways, enjoyment and work/life balance were rated the highest with autonomy and quick time to pay off being rated the lowest.

Figure 2. Hypothesized Medical Degree Barriers



Hypothetical Medical School Barriers: Students were explained the process of pursuing a medical degree, then asked to what barriers would hinder their success with difficulty of medical school and cost of attendance being a recurring theme.

Single Most Important Barrier: When asked to identify the single most important factor in deterring their pursuit of medicine, cost, time, and family needs were the most cited barriers.
See examples of responses below:

"Amount of time it takes to finish medical school"

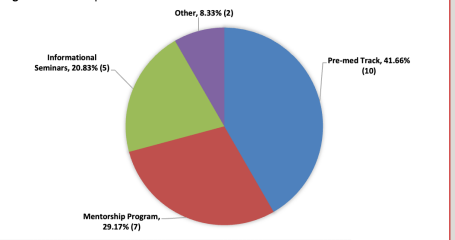
"Financing- I want to be able to have a family in 2-3 years and I do not believe I would be able to afford taking care of my children while still in school."

"How long it would take to achieve the degree. Also, it would take a lot of money and i cannot keep living check to check."

"I am unsure if I want to go to medical school. I think it's safer for me to be 100% certain before I spend that kind of money on school."

"Time, money and my children."

Figure 3. Most Helpful Resource



Most Helpful Resource: After identification of perceived barriers, students were asked to identify what resources they believe would be most helpful in overcoming these obstacles.

Discussion

The results of this study shed light on the evolving culture of healthcare professions, with personal wellness increasingly becoming a major consideration for future professionals when choosing their career paths. The high ratings of enjoyment and work/life balance reflect this desire to find fulfillment in one's work without sacrificing personal wellbeing. These findings are consistent with previous research on the importance of work-life balance for medical professionals and highlight the need for academic institutions to prioritize the well-being of students.[7,8]

This study found that students were most concerned about the time investment and cost of attendance associated with medical school. This finding suggests that academic institutions should explore ways to reduce the length and cost of medical school programs without sacrificing the quality of education. For example, programs that offer more flexible scheduling or opportunities for part-time study could be particularly beneficial for students who need to balance their studies with work or family obligations.[9,10]

Conclusions

Students at junior colleges are a diverse body of untapped potential for medical school recruitment. From these data we can see that academic tracks are of interest to students and that their concerns focus primarily on the cost of attending medical school and the time investment associated with it. To increase the diversity of our medical schools we must identify the needs of prospective students and create tailored solutions.

Limitations

- The survey instrument was not tested for validity.
- Survey distribution to a single professor's course reduced the generalizability of results.

References

For access to digital poster and references: