

# A Response to Widening Participation in Medicine: The Impact of Medical Student-Led Conferences for Year 12 Pupils [Letter]

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## Dear editor

We read with great interest the article by Ryan et al<sup>1</sup> which highlights the impact of medical student-led widening participation (WP) conferences on the confidence of Year 12 pupils, producing a positive impact post conference.

As final-year medical students who have experienced applications to medical school, we would firstly like to commend the organisers and authors for their incredible work and additionally hope to offer our perspectives in this letter.

A successful approach to widening participation of underrepresented groups warrants a comprehensive understanding of the unique obstacles students face when engaging in courses such as Medicine. Ryan et al<sup>1</sup> assessed student confidence following conferences, which included discussions on medical ethics, professionalism, and clinical skills. However, more pertinent discussions that could generate greater effect sizes post conference could be those relating to the immediate hurdles students in this year group face, namely, those regarding the admission process to medical schools. Sanders et al<sup>2</sup> produced a similar study on the impacts of InsideMed, a WP programme, in which students rated the usefulness of University Clinical Aptitude test (UCAT) practice sessions and personal statement workshops highly. Furthermore, students' feedback following this programme suggested that their main difficulty was in organising work experience. Indeed, Sartania et al<sup>3</sup> showed that school assistance and work experience opportunities are less accessible to WP students and are offered on the basis of "people you know". As done by InsideMed, adding a short observational clinical placement as well as UCAT and personal statement workshops could significantly increase student confidence.

The authors conclude that the conferences significantly improved student confidence. While this may be true, these outcomes are student perceived. A previous study showed that the association between perceived and actual knowledge is not well defined.<sup>4</sup> Also, students could have rated their initial confidence at a lower level as they were expecting an increase following the conference. In terms of providing a more objective measure of student confidence, authors could compare pupil acceptance rates in medical schools with students from the same catchment area that had not participated in the WP initiative. Higher Education Access Tracker (HEAT)<sup>5</sup> is a service that can be implemented into WP events in order to

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longitudinally monitor and assess outreach delivery and in this case, track students and their success rate into medical school.

Additionally, asking students to rate their confidence regarding the topic each individual session covered, rather than an overall confidence rating, could provide feedback with more granularity, as was elucidated by Sanders et al.<sup>2</sup> Sanders et al also used open-ended questions to generate qualitative feedback organised into themes, allowing students to better express their thoughts on the programme.

In conclusion, the work by Ryan et al is admirable and provides an essential contribution into the field of WP outreach programmes, which are key in ensuring we have doctors that are representative of the population they serve. We hope the above-mentioned recommendations provide medical students with motivation and help in the planning of their own WP schemes.

## Disclosure

The authors report no conflicts of interest in this communication.

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<https://doi.org/10.2147/AMEP.S340235>