**Project Title:**
The Path Less Taken: Understanding the Experience of Black Pre-Medical Students

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**Amount of Funds Granted:**
$3000

**Background of Research Project:**

There is an alarming lack of African-American representation within medical education. This lack of diversity continues to produce educational environments that are biased and intolerant, and can perpetuate persistent health disparities. Previous research has highlighted such issues as perceived and experienced discrimination and racism, lack of financial and social support, lack of role models, and inadequate training in math and the sciences as consistent hurdles for minorities. Yet, a majority of these studies have focused on the perspective of medical school admissions committees, African-American physicians who are already practicing, or African-American interns/residents, and have been overwhelmingly survey-based. Therefore, little is known about the experiences of Black undergraduates during the “pre-medical track”. This specific study explored how African-American pre-medical students experienced their education, and if/how these experiences, as well as predisposing and enabling factors, affected if and how they continue on the pre-medical track. This study aimed to spotlight barriers that these students faced, but also promote the design of effective interventions and programs to assist future students through these processes, and develop avenues for increasing diversity in medical education.

This study was based at the University of Delaware but included scholars and samples from Delaware State University, Emory University, Duke University, University of Miami, and Vanderbilt University. Funding from the Center for the Study of Diversity (CSD) was received specifically for transcription of interview audio files – so this report will focus on this aspect of the study specifically.
At this time, at total of 140 students and 20 Faculty/staff members were interviewed (160 total). See the Table for a more detailed description of the types of students interviewed, and the number of students interviewed from each category and school.

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It is important to note that interview follow-ups (with students and faculty) may need to be conducted. Funds from CSD were used, in part, to fund the transcriptions of the audio files of these interviews. With each interview lasting about 30-60 minutes, and Rev Transcription services (https://www.rev.com) charging $1 per minute – the costs for professional transcription services were indeed quite high, and the funds awarded from CSD were incredibly helpful. At this time, all 160 interviews have been transcribed thanks to the award from CSD.

**Preliminary Findings from Interviews:**

As stated by the PI in a recent presentation of this study, given the extent of the quantitative and qualitative data – not all data has been analyzed. However, there are a few preliminary findings that were shared at that presentation that are also presented below.

At this time about one-third of all the interviews have been initially coded, and the analyses of the interview data has revealed no discernible differences between different races, different genders, or public/private school regarding pre-med students’ experiences. I use the term “discernible” because I have a feeling that differences may be lurking in the data given that only 1/3 of the interviews have been coded. All students (regardless of race, gender, or public/private school) report receiving support (emotional, psychological) from their family and friends, significant financial concerns regarding medical school – and the findings on whether or not the student feels their high school adequately prepared them for college (and the pre-med path specifically) is mixed.

However, there is some evidence to suggest that that there are race-based differences in pre-med/med socialization regarding students’ experiences on the pre-med path. More specifically,
Black students appear (again, not enough data to make a substantial claim at this point) to report less available role models, and report different information (often incorrect information) relating to medical school requirements as compared to white pre-medical students. Moreover, Black students appear to engage and integrate with the “Pre-Med Identity” differently → these is just a “hint” of this at this point, but I am investigating it further.

At this time in the analyses, very few pre-med and non-premed students recollect of experiences/perceived prejudice, discrimination, racism, sexism. I accredit this to a few things: a.) not enough data (including not enough data from Black men specifically), b.) interview questions that were not probing/digging enough, c.) Participants - Co-I race dis-concordance, and d.) Students not wanting to talk about it (perceived and/or potential repercussions). There is the chance that perhaps students are not to “seeing”/“feeling” discrimination/prejudice – and this is highlighted from the quote from one student below.

“The thing is, I want to say no, but with all of the sociology classes, and involvement in Black student life and all that, I feel like they’ve taught me that the answer is yes, but sometimes things just go over my head. Because, especially before coming here, I was very naïve about certain things and still am sometimes. I think everything’s great when sometimes things really aren’t.”

(Black Female Premed)

This is something I will continue to investigate in the data.

What I am seeing analysis of the data is possible differences between Pre-Meds and Non-Pre-Meds in general. For example (as referenced above), there appears to be a differences in the degree of students’ integration with Pre-Med Lifestyle & Identity – this includes the level of involvement with Pre-Med specific (not just STEM) programs, groups, and extracurriculars, engagement with requirements (shadowing/volunteering), engagement with like-minded peers (i.e., core network is/are other Pre-Meds), what appears to be a level of Self-Attribution of failure/poor performance (“It’s on me”), and a perception of “I’m different”, “I’m unique” (comes from Non-Premeds and only a few Pre-Meds).

Previous studies suggest that Black males report being less like to ask for help, seek assistance regarding academics – this could impact willingness to get involved in (med specific) program. The students’ interviews don’t necessarily show this (among pre-med students), but appears to be some evidence of this issue in the interviews with Faculty/Advisors and Program Directors (explicitly stating this as an issue to involvement). I do see it a bit among non-pre-med students – but again, I need to gather more data on Black males. Perhaps this has something to do with the level of Integration into Pre-Med Identity, and Pre-Med Lifestyle. Similarly, there are a number of studies on Academic vs. Racial Identity so this “tension” could have an impact on help-seeking behavior, especially given the specificity and length of the pre-med path.

There are other preliminary findings related to competitiveness and evidence of a “knowledge gap” (and distance between pre-med students and non-pre-med students), but these are in relation
to the sample overall. Moving forward – my plan is to continue with the analyses. I think there is an extensive amount of excellent and valuable data in these interviews and I need to get it out in publications. I plan to have at least 1-2 manuscripts out for review by June 30th. I also plan on using these data to submit an R21 to either conduct a similar study (but nested in positive inquiry) with HBCU-specific students, or conduct a diary-based study with a selection of students from various schools.

Concluding Remarks

This study would not have been possible without the financial assistance from the CSD. With all of the interviews transcribed, I must focus my attention on analyzing the data and submitting manuscripts to reputable journals (as well as preparing scholarly presentations). Although there was a “team” to help conduct the interviews at each school – given my extensive training in qualitative data analysis (and the lack of such training from other team members) I am taking on the brunt of the responsibility to analyze the interview data, and I am doing such by hand (i.e., not using NVivo as originally planned), which is therefore taking a bit more time – but given the lack of studies on this topic I feel it is essential to be very careful with the data. Despite slight delays in analysis, I do feel I have met and am meeting the goals I set forth in my CSD proposal, and am very confident that I will have manuscripts and presentations prepared by the end of June.

Barret Michalec, PhD

3/31/16