

Medical school prep courses promote equality of opportunity

Getting a place in medical school should be a matter of meritocracy. One's socioeconomic background or personal connections should not affect one's ability to secure a place. In other words, there should be a level playing field. How do we achieve this? Not everyone has a parent who is a doctor or a sibling who is currently in medical school. Access to information and assistance available to these candidates is enviable compared to other candidates. This is where preparation courses can help bridge the gap. By providing personal statement reviews, interview technique tips, and mock interviews, these courses enable isolated candidates to have access to the information that they otherwise would not have.

ACCESSIBILITY

The primary contentious point surrounding these courses is the cost involved: expensive courses are most accessible to those of higher socioeconomic status. Undoubtedly, this is a valid concern. Unequal access to information or training is the very antithesis of equality of opportunity.

In reality, the price of most courses has dropped considerably, and although several still charge hundreds of pounds, the cost of many other courses is far lower and therefore more accessible: personal statement reviews from 'lifeofamedic'¹ are as low as £20 and interview courses by 'PotMed' cost from £15–£25.² In a free market setting, we can anticipate this trend of decreasing prices to continue. New companies are constantly forming and providing these courses, therefore adding more providers to the market. Competition of prices between these businesses and non-profit organisations should continue to drag the price down, thereby making these courses more affordable and accessible to all applicants. Furthermore, some organisations such as K+³ provide these courses exclusively for the benefit of disadvantaged pupils (judged by the location of the school's borough, disability,

under the care of local authority, homeless, or member of a traveller community). Other universities, non-profit organisations, and university societies run similar courses,⁴ which are either free or only charge a nominal fee. This means there is virtually no financial barrier to accessing many courses.

ONLINE HELP

Applicants don't need to participate in a course to reap the benefit of their existence. For prospective medical applicants looking for information regarding the application process, whether that be the personal statement, aptitude tests, or the interview, there is a wealth of information available online. There are hundreds of articles, covering every possible topic, produced by preparation course providers, all of which are absolutely free.⁵ These providers have helped make the medical application process more transparent and accessible.

Suppose, hypothetically, medical school preparation courses vanished one day along with all the resources that they have put out for free, never to reappear again. Where would that leave us? Medicine might eventually take a step back, reverting into an insiders' club, where friends and family connections become the pivotal sources of information that helps secure a place in medical school. Liberalisation of information about the medical application process is precisely what has diminished the importance of having personal connections in the field of medicine.

BRIDGING THE GAP OF INEQUALITY

The counterargument that these courses exacerbate and further widen the inequality gap is an overly simplistic view with an air of pessimism. It is a viewpoint that looks to prevent the privileged from excelling further, rather than looking to harness the potential of these courses to bridge the gap of inequality. This view fails to recognise all the good that has come from these courses to all prospective candidates, especially those

less advantaged. We would propose we look at these courses in a new light; as a vehicle of opportunity. Preparation courses should be actively encouraged, promoted, and even operated by the medical schools themselves. Medical schools can incorporate prospective medical school student education into their curriculum, thereby using current medical students to help aspiring medical applicants. Similar to the way that doctors undertake medical student training. There are several points of access in the curriculum for this addition: Student Selected Component, Scholarly Project, or Quality Improvement Project to name a few. This would accelerate the current trend of having more courses available across the country, which are affordable and accessible. Therefore, ultimately, taking those all-important strides towards equality of opportunity in the medical school application process.

Ishaq Miah,

4th Year Medical Student, King's College London.
Email: ishaqmiah789@hotmail.co.uk

Farzeen Mahmood,

4th Year Medical Student, King's College London.

Mahin Amir,

4th Year Medical Student, King's College London.

Sagal Mire,

4th Year Medical Student, King's College London.

Juwairiya Rehman,

4th Year Medical Student, King's College London.

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