

“Who Do I Think I Am?”
A Model Explaining the Process of Deciding to Apply to
Medical School for Women

(Document is available at <http://www.aikenwisniewski.com>)

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ABSTRACT

This study describes the process of deciding to apply to medical school used by women. Based on numbers from American Association of Medical Colleges (AAMC), certain geographic areas produce fewer women for the medical school applicant pool. Due to these data (AAMC) as well as administering a pre-professional advising office and advising premed women, I developed this study to explore how certain experiences contributed to the process of deciding to pursue a career in medicine.

A constructivist grounded theory methodology layered with a feminist perspective offered guidance in answering the questions and developing a substantive theory. Primary data were drawn through semi-structured interviews with 16 women who were living in a geographic area in the western United States and had considered medical school education. The first participants were selected from an open sampling process that was later replaced by theoretical sampling to test various hypotheses that were emerging from these data. Trustworthiness was achieved through optional follow-up sessions with participants to review coding and preliminary findings.

The analysis produced a substantive theory that describes the process of deciding to apply to medical school for women. From this theoretical framework, four findings emerged. First, connectivity to multiple people was important for women. Second, ignoring subjective activities such as shadowing and research for objective evaluation methods such as grades and test scores denied women the opportunity to understand self as well as their future career. Third, women did identify barriers that existed within the process. The fourth finding focused on the development of strategies to overcome barriers which resulted in women authorizing themselves to continue in the process of deciding.

All four findings inform practice, policy, and future research. First, practitioners should develop activities that connect women to women, encourage interaction with staff and faculty, and direct the focus to extra-curricular activities. Second, this study offers information for policies that address listing premed as major, increasing mentoring programs, and investigating the grading policy within certain disciplines. Third, the research methodology could be replicated to understand the experience of other underserved populations in medicine, to explore women's experiences in other geographic regions, to explore the process of deciding to pursue other career fields besides medicine, and the process of developing an identity that relates to a career.