

What happens to those students who do not get into their desired programme? A personal reflection.

### **Joseph Chen**

School of Medical Sciences Faculty of Medical and Health Sciences University of Auckland

# **Dr Marcus Henning**

CLTA, DipTch, BA, MA, MBus, PhD Centre for Medical and Health Sciences Education School of Medicine Faculty of Medical and Health Sciences University of Auckland

In this article, we discuss the issues that emerge for students who do not get into their first choice option. This article directly addresses the issues faced by students studying in the first year Biomedical Common Year or Overlapping Year I programme at the University of Auckland, and who were aiming for the undergraduate pathway into the Bachelor of Medicine and Bachelor of Surgery programme (MBChB).

The challenges posed by the highly competitive medical entry programmes

The Biomedical Common Year or Overlapping Year I programme consists of several core first-year courses and one general education course. The aim of the programme is to prepare students for a Bachelor of Health Science, Bachelor of Science majoring in Biomedical Science, Bachelor of Pharmacy, Bachelor of Optometry and the Medical programme. <sup>1,2</sup> This is a high-stakes year and is crucial for many students aiming to study medicine. For example, to have the opportunity for an interview for entry into the University of Auckland Medical programme, students need to attain overall grades of 'B+' or greater in the Biomedical Common Year or Overlapping Year I programme.<sup>2</sup> In a recent paper, conducted on this group of students, Henning and colleagues reported that 54% of their sample representing this group had a desire to study medicine.3 If we extrapolate further, this would suggest that over 700 students studying in this year have a definite interest in studying medicine. This is alarming given that there are only approximately 270 places available.<sup>4</sup> This suggests that the programme creates a highly competitive learning environment with a large proportion of students aiming to gain entry into the Medical programme. A further finding from this study suggested that those students wanting to be selected into medicine were more likely to enjoy competition than those not aiming to go into this course of study. Houston, Harris, McIntire, and Francis (2002) describe enjoyment of competition in terms of those students who enjoy competing against each other and who aim to outperform their

Joseph is a postgraduate research student. His interests include neuropsychopharmacology, student welfare, and science exposition. On the side, he avidly pursues musical ventures with his wooden violin.

peers.<sup>5</sup> With a high stakes level of intensity attributed to the Biomedical Common Year or Overlapping Year 1 programme, we wondered what would happen to those students who failed to gain entry into their first-choice course and, further, the implications for students not enjoying this level of high stakes competition.

The experience of failure will likely have many outcomes. Clearly, success or failure has an impact on a person's level of self-concept and self-efficacy both of which are crucial to gaining further academic attainment.<sup>6</sup> From this motivational perspective the students who fail to be selected may experience a loss of motivation which may have a deleterious effect on further learning. The links between perceived poor academic attainment and adverse mental health issues are well established. However, much of the literature considers the impact of early childhood mental issues on academic achievement.<sup>7</sup> Nonetheless, from a theory of continuity perspective,7 life experiences are likely formative and likely to be linked to later life outcomes, whether these be educational, personal or professional. It is also probable that the earlier the life experiences are, the more indelible. Having a contingency plan will likely improve the probability of transforming challenges into opportunities. However, being faced with consistent failures may lead to a depletion of a person's reservoir and may lead to further and more damaging health issues.<sup>8</sup>

In their famous article, Dyrbye and colleagues investigated the general issue of medical student distress.<sup>9</sup> Even though our article pertains to those who are aiming to be selected into medical school, some of the ideas presented by Dyrbye and colleagues, are relevant for those students studying in the Biomedical Common Year or Overlapping Year I programme. For example, Dyrbye and colleagues provided useful information regarding the adverse consequences of competitive study regimens, such as depression, stress and burnout. Some of the solutions that may be useful for those students who are struggling with issues of stress, failure and burnout, may lie with the individual and the

institution. At an individual level, it is important to seek out help, and have contingency plans in place in case things don't work out as planned. At an institutional level, it is important to have easy access to career and personal counselling, and to provide mechanisms for identifying those at risk of academic failure, and to provide advice for students who are experiencing high levels of stress.

# My personal experience

As anecdotal evidence, I went through this experience as a first year Biomedical Science student. I intended to apply for Medicine after my first year of University and was unsuccessful in my undergraduate-pathway attempt. Given that many of my friends were aiming for medicine, it was very disheartening and demoralising. In retrospect, my reasoning for applying for the medical degree fell along the lines of: "all my friends are aiming for medicine, and I'd like to be with all my friends", "I want to be personally impactful and helpful to other people", and "the medical profession is a respectable degree with job security". My perception of failure gave me a lost sense of direction as to what would happen next.

Luckily, however, I knew a few other students who had gone through a Bachelor of Science (Biomedical Science) degree and they helped give advice on which papers to take in order to "maximise my chances" in applying for postgraduate medicine. This advice gave me some form of comfort as understanding both the procedure and realistic expectations at least gave me a goal to strive for. I commenced semester one of my second year with at least some motivation to strive towards a realistic goal of postgraduate application for medicine, but this motivation seemingly drained quickly.

During this time, I remembered how I had enjoyed the atmosphere and teaching of a first-year medical science course and wondered how I could get into teaching. I contacted the course coordinator of a core first year medical science paper and luckily scored a position as a teaching assistant for semester two of my second year. I found this experience to be thoroughly rewarding.

Coincidentally, in the same semester, I was fortunate to be part of a formative group of students for a student association. Given my prior experience being fortunately helped by other students, I wanted to pay it forwards and co-organised an event for my 'junior' colleagues in first year to guide them through the various other options. In preparation for this event, I tried to better understand the options to ensure I could deliver the information efficiently. Therefore, I consulted various resources and people such as my course coordinators, career advisors, and online career websites. Preparing this presentation for others simultaneously gave me the perfect opportunity to learn about the various other possibilities and to compile them into one easy-to-access information point. During this event, I interacted with many other students finding it an amazing experience to mentor students and help them along their journey and re-establishing my self-worth in finding something that was personally impactful and helpful to others. In trying to summarise and condense all details into a practically helpful article, I published an article through the aforementioned student association's website.<sup>10</sup>

I continued both the organisation of the student association along with more teaching assistant opportunities throughout my third year at University and, furthermore, was exposed to exciting cutting edge research undertaken in my courses. With further consultations with academics and understanding how research was undertaken, I became increasingly fascinated by the vast array of research fields offered by the many academics of the University. This curiosity-driven passion began to drive me to persist even through difficulty.

After completing my Bachelor degree, I continued with a Postgraduate Diploma in Science. During this time, I had the exciting opportunity to become an administrator for various student-related or community organisations; positions which I found also rewarding. Of course, I continued to have many set-backs during this time such as rejections from summer research scholarships, failing a paper, and coping with disappointment. Nonetheless, my self-realisation of the values and work that motivated me began to actualise in my mind with clarity. This journey of self-discovery and reflection helped to shape my goals and enable me to persist even in moments of difficulty. At points where I wanted to turn back and give up, I turned to my respected mentors who gave invaluable encouragement and shared their moments of struggles and how they got through them – thereby highlighting the importance of perceived failure in shaping one's self-worth and self-motivation. For example, one of my mentors recommended that I set aside time to heal from emotional setbacks, and another mentor made a good point about not taking perceived failure too personally.

By the time I had finished my Postgraduate Diploma, I had realised just how pivotal my experiences were towards shaping my motivation; how my motivations helped me persist through times of trouble. Upon realising my main motivations involved education, mentorship, administration, cutting edge research and technology, I browsed through all the career pathways I had previously researched and found academia as the one most resembling my personal motivations and goals. I am currently continuing at the time of publishing to pursue this goal down the academic pathway whilst keeping in mind other alternative options should my current goal not work out.

In summary, salient learning experiences that could assist others in this situation include:

- Obtaining advice and seeking out an immediate goal to strive for
- Having a contingency plan in place in case things do not work out as planned
- Researching other career possibilities
- Experiencing as many different roles as possible to find out what other interests he possessed
- Consulting with mentors, particularly in difficult times, to obtain encouragement to continue

# Final thoughts

As alluded to with the number of students applying for medicine and the number of places, the disparity between expectation and reality leaves much room for disappointment and depletion of motivation. It is difficult to know more conclusively as to what happens to the students who do not get into their desired programme and how they managed to cope, however, we detail here the path of one such student who managed to replenish his motivation utilising various strategies. This would be a useful area for further research. As a final note, we are hopeful that students who face disappointment may be encouraged and can be equipped to perhaps repair any adverse effects happening to them; as the old adage goes, "hope for the best and plan for the worst".

# References

1. The University of Auckland. Biomedical Common Year or Overlapping Year. 2015 Available from: http://www.science.auckland.ac.nz/en/about/ our-programmes/op-biomed-common-year.html. [Cited: 28 Apr 2015]

2. The University of Auckland. Entry requirements for Bachelor

of Medicine and Bachelor of Surgery (MBChB). 2015 Available from: https://www.fmhs.auckland.ac.nz/en/faculty/for/futureundergraduates/undergraduate-study-options/mbchb/entry. html#6a24d5a2b8307836303d44e054d0adb1. [Cited: 3 Jan 2016]

3. Henning MA, Krägeloh CU, Booth R, Hill EM, Chen J, Webster CS. Profiling potential medical students and exploring determinants of career choice. Asia-Pacific Scholar. 2017;2(1), 7-15.

4. Health Workforce New Zealand. An assessment of the utility of graduate-entry medical education programmes for New Zealand. 2011 Available from: http://www.nzdoctor.co.nz/media/930253/graduate%20 medical%20entry%20programme%20report%20final%203%20june.pdf. [Cited: 24 Jan 2016]

5. Houston, J., Harris, P., McIntire, S., & Francis, D. (2002). Revising the competitiveness index using factor analysis. Psychol Rep. 90(1), 31-34.

6. Jansen M, Scherer R, Schroeders U. Students' self-concept and selfefficacy in the sciences: Differential relations to antecedents and educational outcomes. Contemp Educ Psychol. 2015;41:13-24.

7. McLeod JD, Fettes DL.Trajectories of failure: The educational careers of children with mental health problems. Am J Sociol. 2007;113(3):653-701.

8. Sisley R, Henning MA, Hawken SJ, Moir F. A Conceptual model of workplace stress: The issue of accumulation and recovery and the health professional. N Z J Employ Relat. 2010;35(2):209-236.

9. Dyrbye LN, Thomas MR, Shanafelt TD. Medical student distress: causes, consequences, and proposed solutions. Mayo Clinc Proc. 2005;80(12), 1613-1622.

10. Student Association for the Medical Sciences. What Can I Do With a BSc Degree? [Internet]. 2018 [cited 5 December 2018]. Available from: https://www.samsuoa.co.nz/what-can-i-do-with-a-bsc-degree.html

# Correspondence

Marcus Henning: m.henning@auckland.ac.nz Joseph Chen: joseph.chen@auckland.ac.nz