

# The Forgotten People Lack of Premedical Advisement for Alaskan Students

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## Ethnicity Stratification of Survey Respondents and Workshop Attendees

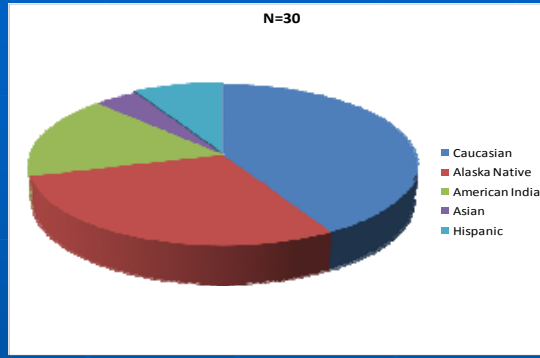
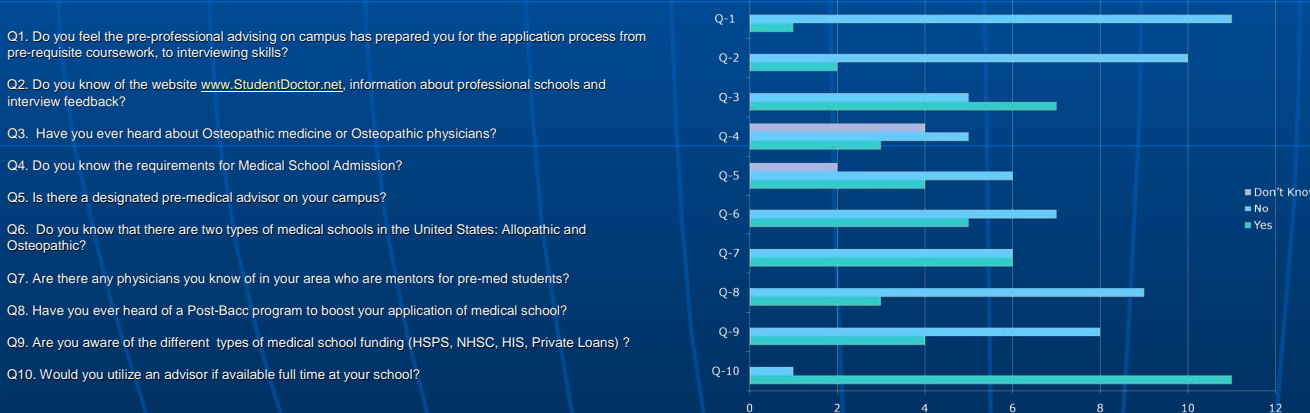


Figure 1

## Survey Questionnaire Results (Q1-Q10)



### INTRODUCTION

In 2007 inquisitions began about how Pre-Medical advising could have been improved on the campus of The University of Alaska Fairbanks. It is through these preponderances that the essence and spirit of being an Osteopathic physician came to fruition. The concept of returning to ones origin, and make use of ones experience and knowledge to better the future for all those who would come after along the trail blazed through sweat and perseverance. One of the professional obligations felt charged to complete was return to the undergraduate institution and right the wrongs of inadequate and sub-par medical school advising received 18 years prior.

The decision was made to formulate and coordinate an advising workshop focused primarily on Alaskan students and attempt to enlighten anyone who had been lost or discouraged with no official academic advising. Past professors were contacted; travel arrangements made and the maiden voyage had begun in establishing a pre-med academic advising workshop at the UAF. An initial audience and warm reception came with the local pre-med club who graciously disseminated the attempts by mass communication through flyers around campus with a generalized presentation outline. With The Pre-Med club as an adequate catalyst, time was allotted for a speech at the bi-monthly ANSEP meeting (Alaska Native Science & Engineering Program) a professional organization designed to encourage Alaska Natives and American Indians to strive for professionalism beyond traditional post secondary education.

It was apparent early on in the process that the information was well received in a much needed arena of medical school advising ignorance. It was later communicated that many in attendance during that initial conference received profound inspiration that they too can overcome social stigma and ethnic adversity and truly consider a career in Primary Care Medicine. For the remainder of the week, as per a pre-established outline, students were given the opportunity to sign up for individualized sessions to discuss Premedical Degree options, transcript analysis, essays topics, and the various application systems designed for the two types of Medical Schools available for consideration. The response to that opportunity was overwhelming and after 4 days and 10 hrs daily consumed it was evident that the hunger for good advising was beginning to become satiated.

From this experience it is proof positive that many students are being unnecessarily defeated and the educational opportunities of Medical Schools to reach qualified candidates is being inadvertently undercut at the undergraduate level. Through no fault of their own, professors appointed as advisors may be lacking the necessary expertise to disseminate adequate knowledge regarding Pre-Medical requirements and may be unknowingly passing along false information. It appears that the access to good pre-med advising appears to be a rift as large as the reality of moving greater than 2000 miles to attend the nearest medicine school in the lower forty-eight.

### METHODS

Utilizing various models and applicable methods the decision was made in order to best culminate large opinions and responses both prior and after exposure to the workshop presented, it was decided to distribute a questionnaire that would be completed at the monthly ANSEP Meeting. Responses would be tallied cumulatively at a later date and the tallies would undergo rigorous retrospective analyses. Surveys were distributed, completed and mailed with adequate and appropriate chain of custody.

After receipt of surveys analysis began to first tally all responses to all questions proposed. At completion the researchers decided to streamline questions and responses to those numbered below in order to adequately represent the overriding opinions expressed by all the available respondents. The below listed questions chosen best represent the attempt to evaluate Pre-Medical advising offered and available at The University of Alaska Fairbanks. One part of the survey asked the respondent to provide His/Her ethnic classification. This data was later visually represented in Pie Graph form. In addition the assigned numbered questions afore mentioned and listed below correspond to the questions (Q1-Q10) designated along the X-Axis on the bar graph created.

### DISCUSSION

After completion of the Advising workshop and survey distribution results were received and analysis begun. Initially it was determined that the total respondents used first for the Ethnicity analysis would be Thirty (N=30). Located on page 4 of the Survey the respondents were given six options in which to categorize themselves which included Alaskan Native, Native American/American Indian, Caucasian, Hispanic, Asian, or Other. After thorough evaluation it was determined and reported the following distributions: Caucasian (10/30) Alaska Native (7/30) Native American/American Indian (4/30) Hispanic (2/30) Asian (1/30) and Other (0/30). After receipt of data and scrutiny completed it was decided to visually represent the data in Pie Graph form. (see Figure 1). The data was imported into an Excel spreadsheet via Windows Vista. After values placed and graph created an additional review was undertaken to ensure integrity and accuracy. The graph was established to display an ethnic percentage found among those completing the survey. After completion it was found that 33.3% reported Caucasian, 23.3% reported Alaska Native, 13.3% reported American Indian, 6.7% reported Hispanic, and 3.3% reported Asian Ethnicity.

In a similar form and fashion the questionnaire was keenly scrutinized to ensure accurate non-biased opinions regarding the state of Pre-Med Advising at the University of Alaska Fairbanks. The decision was made to formulate this data into visual formal likewise utilizing a Bar Graph Layout (See Figure 2). Again after receipt of surveys both via United States Postal Service and Electronic communication via email the decision was made to choose the listed Questions Numbered One (1) through Ten (10). Responses to the various questions were simplified to include either a Yes, No, or Don't Know. All questions were appropriately double-spaced and numbered using Microsoft Word Document with 12 point font and New Times Roman style. After data receipt it was decided to use the same previous software the data was imported with a total respondent value of twelve (N=12). It should be noted that the two (N) values did not correspond secondary to the fact that not all whom completed the survey questionnaire attended the advising workshop.

With all data received the following responses were recorded: Question Number One (Q1) Eleven (11)/No, One (1)/Yes, Question Number Two (Q2) Ten (10)/No, Two (2)/Yes, Question Number Three (Q3) Five (5)/No, Seven (7)/Yes, Question Number Four (Q4) Five (5)/No, Three (3)/Yes, Four (4)/Don't Know, Question Five (Q5) Six (6)/No, Four (4)/Yes, Two (2)/Don't Know, Question Six (Q6) Seven (7)/No, Five (5)/Yes, Question Seven (Q7) Six (6)/No, Six (6)/Yes, Question Eight (Q8) Nine (9)/No, Three (3)/Yes, Question Nine (Q9) Eight (8)/No, Four (4)/Yes, Question Ten (Q10) One (1)/No, Eleven (11)/Yes. In Regards to Question One (Q1) it appears that the overwhelming majority 92% (11/12) stated that the pre-medical advising on campus had not adequately prepared the respondent for the various application steps in applying to Medical School. In Question Two (Q2) the data suggests that 83% (10/12) had not heard of [www.studentdoctor.net](http://www.studentdoctor.net) an invaluable resource when applying to Medical School. Question Three (Q3) showed that 58% (7/12) had not even heard of Osteopathic Medicine prior to the workshop. Question Four (Q4) proved that a majority 75% (9/12) either responded No or Don't Know to the inquiry on awareness of Medical School Requirements. Question Five (Q5) responses showed that 57% (8/12) either stated that there was no advisor or did not know whether there was an advisor at all. It should be noted that there is a designated PhD faculty assigned for pre-medical advising. Question Six (Q6) split a 58% (7/12) for the question posed whether the respondent knew that there existed two schools of Medicine offered in the United States. Question Seven (Q7) showed that a majority 75% (9/12) on whether there existed a mentor for the respondent to look toward in the event of questions were to arise regarding the application process and/or requirements for applying to medical school. Question Eight (Q8) showed an overriding majority of survey participants 75% (9/12) had never heard of a Post-Bacc Program and its significance in the application process. Question Nine (Q9) again at 75% (9/12) showed ignorance to various funding opportunities available to aide in Medical School. Finally and not surprisingly 92% (11/12) stated that if available they would utilize an Academic Pre-medical Advisor, appropriately and adequately qualified current and in tune to the latest trends in Medical School admissions both Allopathic and Osteopathic.

### CONCLUSION

As the data suggests the campus of UAF would benefit immensely from a full time appropriately skilled and properly trained faculty member in advising not only the Pre-Medical applicants but other health care professionals as well. From the data collected and afore results presented it appears that there exists a vast opportunistic theatre in which to establish an official Pre-Medical advising forum. It would behoove the AOA to realize the untapped potential of Alaskan students and realize there are underrepresented students of certain ethnic groups in Alaska striving to become physicians. The osteopathic community has great opportunity to fulfill Dr. Still's dream of practicing rural medicine in the most rural state in the union.

### VISIONS ON THE HORIZON

After the second consecutive year of completion the question arose and theories ascertained as to how to continue the yearly workshop while at the same time maintaining a constant available presence on the campus of UAF. Goals established both this and last year were to provide adequate advising for the pre-med club and to spread the word about the differences between allopathic and osteopathic education, admissions processes and what's important for their respective applications.

The AOA has campaigned enthusiastically to try and get more students to think about osteopathic medicine and create more Primary Care Physicians especially in rural areas. Alaska traditionally has been courted by the WWAMI program; a program designed to designate 20 admission slots at University of Washington School of Medicine in Seattle. An amazing stride for Alaskan students in theory; however, concerns arise as to where do all the other students go when these slots are filled? WWAMI admirably and nobly has on its own attempted to try and fill the void in an attempt to train local Alaskans and quell the shortage of 100 physicians statewide per year. In this instance the demand for physicians far outweighs the supply. It would only stand to benefit both the medical community and the Colleges of Osteopathic Medicine to attempt and fulfill Dr. Still's rural concept and vision by assisting its allopathic brethren in closing this opportunistic gap. For starters, further trips to Alaska are needed to expand the discussion, campus wide, regarding pre-professional advisory services. UAF and its affiliates are both needed in conjunction to better prepare and remain positive, as they have up to this point, about Alaska's students being able to successfully apply for health professional educations and become Physicians of osteopathic or allopathic medicine. It is evident through this experience that there are very few Alaska Native doctors in existence and Alaska continues to suffer from a shortage of physicians overall. In addition it may be possible to expand this workshop across more than one campus within the University of Alaska system, or perhaps even establish periodic teleconferences between the two major campuses in the union rural geography Alaska maintains as her defining characteristic.

The ultimate goal foreseen and the self-actualization of this entire process would be to see the day when an official established agreement existed between the Alaska University System and a School of Osteopathic Medicine to hold and/or provide guaranteed positions for Alaskan residents and any other states at this time are deficient in Medical Education. This challenge is presented and the task has been charged for whichever School of Medicine in the lower forty-eight steps to the forefront, will not only find a wealth of educational opportunities, they will have the unique vantage point in which to meet qualified highly skilled and enthusiastic individuals, but most importantly, will assist and foster these same applicants in seeing and obtaining their dreams of one day becoming a physician.

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