

The Scottish Landscape: Research Priorities for Widening Participation to Medicine



Authored by Dr Matt Johnson, Dr Katie Gibson Smith, and Dr Anita Laidlaw on behalf of Scottish Widening Access to Medicine Research Network (SWAM-RN), funded by Public Services Delivery (PSD) Scotland.

Modified Delphi

A modified Delphi exercise – a structured way of gathering expert opinions – was used to develop consensus regarding research priorities in relation to widening participation (WP) to medicine across Scotland.

Recruitment and Participants

Stakeholders engaged in WP to medicine (inc. members of SWAM-RN; recipients of Scotland's Community of Access and Participation Practitioners (SCAPP) newsletter; those subscribed to the Scottish sCholars and Researchers in healthcare Professionals education (SCRiPT) mailing list) were invited to participate in two online surveys (referred to as Round 1 and Round 2 from here on).

60 named individuals were invited directly by email. Recipients were also encouraged to forward the invitation to others with relevant expertise; some additional participation beyond these 60 may have occurred but was not tracked. Only those who completed Round 1 were invited to take part in Round 2.

60	32 (53%)	26 (81% of R1)	>70% Agree
Directly invited	Completed Round 1	Completed Round 2	Consensus threshold

Survey Design and Administration

- **Round 1:** Participants rated 15 research priority statements on a 6-point scale, from “Strongly Disagree” to “Strongly Agree.”
- **Consensus:** For each statement, the percentage of participants who rated it “Agree” or “Strongly Agree” was calculated. Statements above 70% were considered to have reached consensus.
- **Round 2:** Statements that reached consensus in Round 1 were rated again. Participants could see Round 1 percentage agreement for every statement, including those that had not reached consensus (shown for reference only, and not re-rated).
- **Agreed priorities:** The statements that met the 70% consensus threshold in Round 2 formed the final set of agreed research priorities (Table 1)

Table 1: Research priority statements with percentage agreement.

Removed at Round 1	Removed at Round 2	Agreed priorities
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Category	Statement	Agreement (%)	
		Round 1	Round 2
Conceptual	Research is needed to...		
	develop consistent definitions of WP.	62.5	-
	examine WP by following candidates across the medical career continuum (i.e., from medical student to consultant).	90.6	96
	examine how aspects of identity (e.g., status as a mature student, disability, ethnicity, neurodiversity, etc.) interact with WP to shape access to and progression across the medical career continuum.	68.8	-
Pre-entry	understand how institutional, cultural, and policy-level factors influence outcomes for medical students and doctors from WP backgrounds (e.g., course entry, attainment, specialty, etc.)	93.8	88
	understand why individuals from WP backgrounds who have an interest in studying medicine choose not to apply.	87.5	80
	evaluate medical school WP selection processes, including contextual admissions, in relation to fairness, admissions outcomes, and best practice.	78.1	68
	examine how different school-level educational experiences (e.g., modes of learning during Highers, such as online versus face-to-face learning; remote and rural schooling; access to foundation apprenticeships) impact on applications to medicine among candidates from WP backgrounds.	71.9	40
Undergraduate	underpin the development of theoretically informed, evidence-based interventions to support candidates from WP backgrounds through the application process and into medical school.	87.5	68
	understand attrition in WP cohorts.	87.5	76
	understand how different factors (e.g., financial pressures, access to supportive social networks, etc.) influence students from WP backgrounds experiences and outcomes at medical school.	87.5	80
	explore the experiences and needs of diverse groups within WP and how they intersect, including mature, disabled, ethnically diverse, and neurodivergent students.	59.4	-
Postgraduate and career continuum	underpin the development of theoretically informed, evidence-based interventions to support students from WP backgrounds during their time at medical school.	87.1	76
	understand career trajectories, workplace experiences, and cultural factors influencing widening participation beyond medical school, including how these differ across intersecting WP demographics.	68.8	-
	define what constitutes success for doctors from WP backgrounds at the end of training and to identify how best to support them in achieving this.	62.5	-
	underpin the development of theoretically informed, evidence-based interventions to support doctors from WP backgrounds as they progress along the career continuum.	68.8	-

Key Findings

Of the 15 statements considered, six reached consensus (i.e., >70% agreement in both rounds), representing agreed research priorities for WP to medicine in Scotland:

Conceptual

- Examine WP by following candidates across the medical career continuum (i.e., from medical student to consultant).
- Understand how institutional, cultural, and policy-level factors influence outcomes for medical students and doctors from WP backgrounds (e.g., course entry, attainment, specialty, etc.)

Pre-entry

- Understand why individuals from WP backgrounds who have an interest in studying medicine choose not to apply.

Undergraduate

- Understand attrition in WP cohorts.
- Understand how different factors (e.g., financial pressures, access to supportive social networks, etc.) influence students from WP backgrounds experiences and outcomes at medical school.
- Underpin the development of theoretically informed, evidence-based interventions to support students from WP backgrounds during their time at medical school.