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Medical student perspectives on the change to pass/fail scoring for the USMLE step 1 exam: a subset analysis through a diversity lens

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Keywords

Medical education, diversity, inclusion, wellness

Abstract

OBJECTIVE

Historically, underrepresented in medicine (URiM; individuals from Black/African American, Hispanic/Latinx, and American Indian/Alaska Native racial and ethnic groups) have lower USMLE scores compared to their White counterparts. Transitioning the USMLE Step 1 to a pass/fail scoring system has been hypothesized to increase diversity and inclusion, and student well-being. Since its transition, we investigate differences in wellness amongst minoritized (URiM, LGBTQ+, first-generation college students) and non-minoritized medical students.

METHODS

Medical students who had completed the Step 1 exam and received a pass/fail score were recruited for this study between January and March 2023. Participants completed a 27-question anonymous electronic survey including self-identified demographics, access to study resources, and wellness before and during their study period. A subset analysis was completed for minoritized student groups.

RESULTS

Of the 98 total participants, 40 met at least one criterion for subset analysis. URiM (80.0%), LGBTQ+ (63.6%), and first-generation students (59.1%) reported “poor” or “terrible” wellness more often than their counterparts (48.2% non-URiM, 50.0% non-LGBTQ+, and 51.3% non-first generation, respectively). Minoritized students overall reported more anxiety (42.5%) and poor or terrible social connection (60.0%) compared to their non-minoritized counterparts (36.2% and 51.7%, respectively). Notably, nearly half (40%) of minoritized students reported “disagree” or “strongly disagree” when asked if they had adequate financial resources to access study materials compared to their counterparts (17.2%). Over one-third (35.0%) of minoritized students reported that their confidence and interest to pursue certain specialties has been affected compared to 24.1% in their counterparts.

CONCLUSION

Although intended to improve diversity and inclusion and student well-being, differences in wellness between minoritized and non-minoritized test takers for the pass/fail Step 1 exam were observed. Further investigation into specific needs (financial support, mental health support) can aid medical schools in expanding wellness efforts and providing more inclusive, individualized support.