Reviewer's report

Title: Diversification of U.S. Medical Schools via Affirmative Action Implementation

Authors:

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Version: 4 Date: 5 Aug 2003

Reviewer: Stephen A Magnus

Level of interest: not specified

Advice on publication: Other (see below)

This version is an improvement from the prior version of the article, but I still have some of the same reservations that I expressed in my earlier review. I find the writing to be awkward in many places, the structure and organization in need of strengthening, and the inclusion of many unsupported statements (which make the author's argument less persuasive).

The paragraph starting on the bottom of p. 3 and continuing on the top of p. 4 establishes the structure of the article. However, a clearer "roadmap" would be helpful to the reader, especially since the topics of the article do not follow the order in which they are stated in this paragraph. Such a "roadmap" should clearly identify both the article's goals and the order in which topics will be discussed. Having a "Discussion" section on p. 4 is too early in the article. Furthermore, some of the subheadings throughout the article are unclear, and the sections of the article do not always reflect the implications of the subheadings.

While I agree with the author's argument, I wish he/she could find better and/or more evidence to support it and could improve the logic of the article. In much of the article, it seems the author already has reached a foregone conclusion, irrespective of the evidence. The argument could be made tighter by improving the logical flow and citing more evidence.

A final critical flaw with the article is incorrect information about the history of medicine in the United States (on p. 3). The author should consult Paul Starr's The Social Transformation of American Medicine. Prior to the famous Flexner report of 1910 and the reforms of medical education that followed the report, women, ethnic minorities, and individuals from lower socioeconomic strata had more opportunities to become physicians, although holding the "M.D." degree was not a mark of clear prestige in society at that time. Following the Flexner report, so-called "lower-tier" medical schools, which enrolled many minorities and women, were closed. Medical school training became more scientifically oriented, and the "M.D." degree earned more prestige. However, access to medical training for those other than wealthy white men became more limited. The author should acknowledge in the article these historical facts and not ignore them.

What follows is a page-by-page critique:

p. 2: First sentence: "race-conscious affirmative action policy is committed to for the U.S. Supreme
Court has recently ruled..." is awkward phrasing.

p. 3. First sentence: "exclusive" and "solely" are redundant - use only one of these words. Second from last sentence in first paragraph: Move "virtually" to just before "every facet of American society.' Whole first paragraph: Includes factually incorrect information about access to medical education during the pre-Flexnerian era and about the prestige of the medical degree (i.e., it wasn't all that prestigious until after the Flexnerian reforms). Second paragraph, second sentence: "promoting of tolerance" - eliminate the word "of."

p. 4. First full sentence is awkward: "This paper first familiarizes you with the general admissions process and then in respect to affirmative action policy, both race-conscious and not." Improve the phrasing of this sentence and eliminate the informal pronoun "you." Also make sure the sequence of topics in this paragraph reflects their sequence in the paper as a whole. Finally, make sure the goals of the article are clearly stated here.

"Discussion" heading comes too soon. Eliminate or change it.

First paragraph under "Discussion": "Not only...there is also the necessity...." Correct phrasing would be "Not only... but also...."

Further down the page, the author writes: "Such diversity will create a physician workforce favored to practice in underserved areas...." I think it would be more accurate to write "more favored." In other words, I think there is evidence that while more ethnic minority physicians practice in underserved areas, the majority of ethnic minority physicians do not. Hence, creating a more diverse physician workforce does not guarantee universal access to medical care; there is also a need for other structural changes to medicine and better incentives for physicians.

p. 5: Bottom of page: Unclear what is meant by "group-based intervention." Please clarify this phrase. Also, right after this phrase, the words "in" and "to" should probably be combined. That is, the sentence should read: "factoring of societal or group-based intervention into medical school admission selection process." Also, "admission" and "selection" seem redundant.

p. 6: Middle of page: "Cohen performed a study that which analyzed..." Eliminate the word "which." It is redundant with "that."

p. 7: Middle of page: "Though such expectations are unjustifiable" implies that no one can disagree with the Supreme Court's recent opinion. I don't believe this is the case. Many do, in fact, disagree, and their opposing views should be acknowledged and not summarily dismissed. One line below this, the word "affects" should be changed to "effects."

p. 9: The semi-colon that follows "the Minority Biomedical Research Support Program" should probably be changed to a comma.

p. 10: Middle of page: Add a comma after "ultimately substandard" to improve the clarity and flow of the sentence in which the phrase appears.

p. 11: As noted earlier, the heading "Affirmative Action in Legal Jeopardy" seems inappropriate in light of the material that follows this heading.

p. 12: It would be useful to state the year of the Bakke case.

**Competing interests:**

None declared.