

Career Decision Making, A Question for Young Medical Undergraduates: A Study at Government Medical College

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Abstract

Objective: To know the causes/problems of medical graduates which comes during selection of their sub-specialty after completion of their MBBS/BDS graduation course.

Material and Method: This study done at Government Medical College of Pakistan from April 2023 to June 2023. Two groups were made and a questionnaire based data collected. The data later was analyzed.

Results: A total of 100 students participated in first group of this study including 17 in year I, (out of 30) 08 in year II, (out of 30) 09 in year III (out of 25) and 06 in year IV (out of 15). The final year was not included as they were scattered in various wards. The age range of the respondents was 18-20 years. 45.1% participants were single. 47 male and 53 female students participated.

Conclusion: Professional and personal life dynamics as well as urge for and concern in the effort to choose sub-specialty was tremendous.

Keywords: Career, Medical Graduate

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Introduction

Learning during under graduation as medical student confers good mental decision making strength to medical students. This empowers the health department to adjust this technical force according to the needs of provincial population.¹ Health Department Government of Balochistan has reported that many specialists in certain fields are needed while new medical graduates require selected career counseling.² The Medical graduates in Balochistan (mostly rural) needs career coun-

selling at undergraduate level, as most of the medical students in the field feel very tense during service provisioning after getting medical degree and job.³ It is quite vague that how medical students precedent various factors during selecting a medical speciality after graduation.⁴ Medical students in the field of health profession have extreme level of anxiety, depression and distress while comparing to non-medical professionals. A successful medical professional requires to prove medical field a prestigious one during practice.⁵ Upon graduation students directly link money in choosing specialty, have greater earning probabilities in addition to life style.⁶ High earning potential during medical practices always matters in selecting future sub specialty after completion of under graduate studies, says students.⁷ Its unclear that during subspecialty decision making by fresh medical doctor; any consultant, postgraduate, family member, can play role in career decision making or speciality selection.⁸ Making career decision during studies is quite difficult to plan. The parent and society pressure in addition to children for best outcome often matter to reduce this stress. This may boost to develop psycho-

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logical illness while making any stressful career decision making.⁹ This decision can assist the administration of potentials at under graduate level, increases career gratification and selection of doctors according to the needs of population.¹⁰ The aim of this study is to find those aspects which were most relevant in guiding speciality choice amid medical students from Bolan Medical College Quetta Pakistan. The role of medical institute or health administration during student’s study for selection of subspecialty or career counselling can also be sorted out in this study.

Material and Methods

Approval from research ethical board has been taken before initiation of this study. Various number of medical students from first to fourth year mbbs/bds have been taken randomly from Bolan Medical College Quetta. Written and implied consent taken from all participants. After approval from ethical committee IRB No 34/2023. This study was conducted from April 2023 to June 2023. Separate focus groups made for students of each year. Demographic information collected from students. Data was collected and analyzed in iterative manner, using constant comparative analysis based on grounded theory approach. Three investigators (ZK, MM, MZ) coded freely and data analysis done with generation of designs and themes regarding study. In second stage of study a survey conducted used data from focused student groups to make a questionnaire.

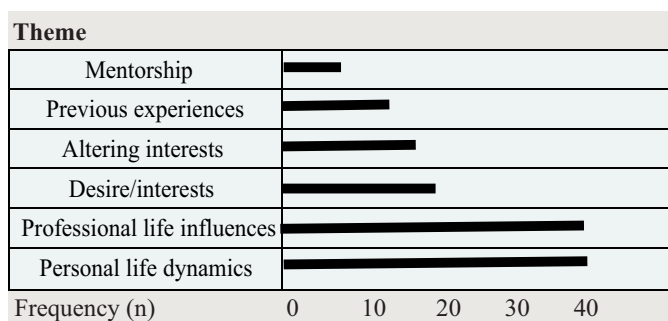
Table 1: Basic Demographic Description

Demographic Information		
1	Age n (%)	
	18-20	50 (90)
	21-23	7 (8)
	24-26	1(2)
2	Year of Study n (%)	
	Year I	17 (30)
	Year II	8 (30)
	Year III	9 (25)
	Year IV	6 (15)
3	Gender n (%)	
	Male	24 (47)
	Female	31 (53)
4	Marital status	
	Single	41 (90)
	Married	3 (10)
5	Postgraduation preference	
	Yes	51
	No	11
	Don't know	38

Various ques-tions were asked in survey from medical students directly. The data collected into MS Excel and analyzed later. Descriptive statistics described as mean + SD. Propor-tions explained in percentages. The methodological triangulation form generated the second dataset by the survey which compare the findings from focus group.

Results

A total of hundred students participated in this study. Most of them did not responded at all. The respondents involved were seventeen in first year, eight in second year, nine in third year and six in fourth year. Many efforts were made to conduct a focus group among students offering many sitting sessions. Very poor response rate were noted due to lack of student reply interest. The age of the respondents were 18-20, male were 47% and 53% were female. Maximum number (17) of participants were from first year. 45.1% participants were single. 51% were aiming to do postgraduation after completion of graduation. They all want to stay in the main city and not to move in periphery. Here six major notions appeared: personal life dynamics; professional life influences; desire/interests; altering interests,



previous experiences and mentorship (Fig 1).

Figure 1. Frequency of theme occurrence

Within these primary themes additional 12 subthemes were identified.

Table 2. Amongst four subthemes within professional life influences (40) comprised flexibility (21), job market (10), income (8) and research prospects (1):

The four subthemes within personal life dynamics (36) included lifestyle (12), family commitments (9), and maternity leave/pregnancy (5):

- “Lifestyle would be a big question. I think that is one of the factors which splits people as to whether they need to continue with family medicine or surgery like field which is more time consuming.”

- “I am interested in emergency medicine and I am sure work load would affect the quality of time with the family.”
- I have to live in city, I can’t live anywhere else. I lived in Quetta for my 1st year of undergrad.
- For women, we know that we are the ones getting pregnant, we are probably thinking more about what would come after that residency.
- At the end of the day, I think I made more of an emotional decision. I decided on something I really liked.....”
- I find it a little overwhelming. When you go in you are bombarded with so much information.

The hidden curriculum and the subthemes of prestige and stigma emerged with concerns being voiced around family medicine in particular:

- So, when someone asks you what are you thinking of going into, neurologists’ sounds really cool, but family doctor doesn’t sound that cool.
- With regard to family medicine, there is the feeling that you should be striving for more.

Ninety students involved in this second study phase (Table-3). Though students from all four years were invited to involve in the study, the majority were from year two (n=55). 20 students from year one (n=20). 10 students from year three (n=10), 5 students from year

four (n=5). More than half number of students were female 48 (53%). More than two third of the students

Table 3: Demographic Information for participants.

Demographic Information n=90	
Age (mean ± SD,)	25 ± 2.0 (20-25)
Year 2 (n %)	55 (61)
Male/female %	53/47
Relationship %	
Single students’ %	78%
Engaged or married	22%
Have any other degree too	04
Economic status (middle class)	54%

were single. Engaged or married were 20. Few students had got any other university degree. Majority of students came from middle class family 54%. Out of 90 participants 10 had any immediate family member who was physician.

Before beginning in medical school only one third students had some idea of which speciality they wanted to follow and the same ratio changed their mind in selection. Reasons student explained why change speciality comprised experiences in hospital services (45%), medical college syllabus (20%), mentorship (30%) and others. Experience of career selection, 55% of students change the ideas during medical schooling, 50% students expressed it depends on anxiety & stress during work load and 48% students excitedly selected the field more

Table 2: Primary themes and Sub-themes

Themes/subthemes	Frequency	Example
Professional Life Influences (40)		
Flexibility	21	“Flexibility that is opportunity to do things other than just clinical practice.”
Job Market	10	“One for me is job offers at the end of it all”
Income	10	“For me it was medical school and about the time that I won’t be making money in 4year of medical school & residency.”
Research prospects	01	“If I see interesting research in a specialty....I can see whatever part of this research is coming to fruition and be a part of that.”
Personal life dynamics (36)		
Life style	13	“Lifestyle and what you want outside of medicine is big factor.”
Family Commitments	09	“I am starting in my thirties, and if I go into a long residency, then I won’t really be earning income until I am in my forties, and I have a family.”
Maternity Leave/Pregnancy	05	It’s different for women. Women are more affected by the length of the program.
Interests	03	Making sure you are going to like what you want to do forever
Altering Interests	06	I have not had exposure to all of the specialties yet but I find my interests have changed very quickly from the day when I began medical.
Previous experiences(13)		
Mentorship	07	One of the big motivators towards the specialties I have been interested in has been the mentors who have been in my life.

than once & changed repeatedly.

Students had asked to mark any five reasons (1 to 5, 1 as most & 5 as least important) in speciality selection guide (Figure 2). Passion the most common factor (n=80), lifestyle (n=75), flexibility (n=60), opportunities of employment (n=60), family concerns (n=55), income (n=60), location (n=40), mentorship (n=35), respect (n=10). Specialists were seen differently by society agreed by 60% participants. Number of students expressed that specialists are more precious than family medicine, “its general view in medicine to look down on general practitioners...valued the surgical practitioners.” Personal possessions like mentors (40%), clinical market (60%), and experiences (50%) were most guided selection of speciality including websites by (35%). Students counselling never helped the students in selection of career and this is used less commonly by students.

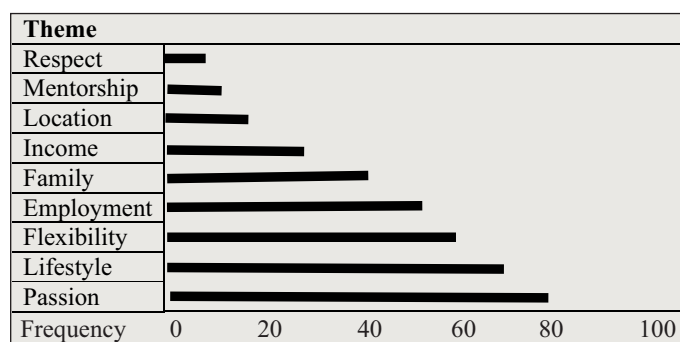


Figure 2. Factors urging choice of speciality

Discussion

This study confers special focus on important factors deciding on a speciality to follow. Here medical students envisaged professional and personal life factors (flexibility & lifestyle) with interest remained most vital. This was expressed in both phases of this study that passion remained most important factor which attracts respondents for field choice. The choices of students may get change simultaneously just because the choice of initial years of study did not solid one and repeatedly gets altered depending on interests & more competitions. This may be to some extent due to having more time to detect their interests lie after experiencing a good time of clinical training with seniors. The student’s career selection obviously depends on their lifestyle and passion.¹¹ Certain other studies also found same tendency for students to decide their specialties with maximum lifestyle control.¹² The observations of limited

education principles were also remarkable. Few students think that family medicine is underrated compared to other specialities.¹³ This observation has been previously explained in the literature with students reporting that some speciality preceptors criticize family medicine.¹⁴ Wide experience to specialists through both clinical experience and class room experience at tertiary level care may influence students insights.¹⁵ Many personal experiences of mentorship, staff and internet search of global demands appear to be the most helpful to students during decision making process.¹⁶ This is also noticed here that students are also concerned over debt interests.¹⁷

Conclusion

Professional and personal life dynamics as well as urge for and concern in the effort of a specialty seem to be extremely significant deliberations for medical students when determining which specialty to follow.

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Authors Contribution

ZK: Conceptualization of Project

AZK, ARZK: Data Collection

MZ: Literature Search

GSS: Statistical Analysis

MM: Drafting, Revision

GSS: Writing of Manuscript