

## ORIGINAL ARTICLE

# Selection of Specialty for Post Graduation by Medical Doctors: A Need for Career Conselor in Medical Institutions

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### ABSTRACT

**Introduction:** The post graduate speciality selected by a medical doctor plays an important role in the production of satisfied, content and enthusiastic medical specialists. Many young doctors do not seem to be very satisfied with their jobs and show a lack of interest in their fields of specialization so we decided to carry out a study to know the factors considered by these young doctors for opting for a particular speciality. We also wanted to know the level of satisfaction among these doctors perusing their respective fields of post graduation. Moreover, there is another alarming fact that as a result of open merit in medical colleges, the number of female doctors is increasing per anum. The lady doctors are more concentrated in specialties like gynae and obstetrics, pediatrics, pathology etc and show no interests in fields like neurosurgery, urology etc. Role of career conselor is clearly lacking in the medical institutions.

**Aims and Objectives:** To evaluate level of satisfaction among young postgraduate trainees. To study the over saturation of certain specialties. To evaluate the need for a career Conselor in medical institutions .

**Material and Methods:** A cross sectional questionnaire based survey was carried out among 136 female and 136 male post graduate trainees working in different specialties in Ganga Ram Hospital, Lahore General Hospital and Children Hospital. **RESULTS:** A total of 272 post graduate trainees responded to the our questionnaire based survey. Reasons for selecting particular speciality included their own wishes (69.8%) Future private practice was among the second most popular reasons (16.5%) Family pressure (10.6%) and work life balance ( 10.2%) were also among common reasons . Peer pressure , easy job , opportunity to settle abroad, double job opportunity were also reasons considered by some trainees. Majority of female postgraduate were working in gynae and obstetrics , pediatrics , pathology . Vice versa there was no male post graduate in gynae and obstetrics. 44% of trainees were moderately satisfied . 36.7% of trainees were well satisfied . 19 % were dissatisfied with their chosen fields of specialization. No post graduate was guided by a career conselor while chosing these specialties.

**Conclusion:** There is gender based saturation in many fields of medical specialization that may eventually lead to lack of specialists in less popular fields. Though the medical doctors have chosen their respective fields of specialization themselves yet they are not very happy with their selection. This indicates that they probably were not aware of their aptitude and could have done better if they were guide by a career conselor.

**Key words:** specialty selection, satisfaction, career councilor

### INTRODUCTION

The post graduate specialty selected by a medical doctor plays an important role in the production of well satisfied ,content, professionally sound and enthusiastic specialists. Role of career conselor is extremely important in this respect. Many times the novice trainee gets attracted to certain medical fields due to amateur reasons but later realizes that probably it was not the best choice for him. More over it has also been seen that there is gender bases saturation in certain specialties . Female doctors opt for fields like gynecology & obstetrics, pediatrics and pathology. Each year the

medical colleges are producing higher number of female graduates because of admissions based on open merit. Thus it is feared that this gender based selection of post graduate specialties may eventually result in lack of specialists in fields like neurosurgery , urology, orthopedics,. Therefore, we decided to carry out a study to know the criterion on which the medical doctors choose their post graduate specialties and also if they were helped out by a carrier conselor.

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### Aims and objectives

1. To study the criteria for selection of postgraduate specialty.
2. To evaluate the level of satisfaction among the post graduate trainees.
3. To evaluate the need for a career counselor in medical institutions.

### Study Design

Cross sectional survey .

## MATERIALS AND METHODS

A cross sectional questionnaire based survey was carried out among the first year to fourth year post graduate trainees working in different departments of Sir Ganga Ram Hospital , Services Hospital, Lahore General Hospital and Children Hospital. An equal number of male and female trainees were selected to answer the questionnaire. 136 male and 136 female doctors responded . The questionnaire comprised of their personnel data i.e. name, age, sex, year of training, specialty, reasons for choosing that specialty ,eg. personnel choice , easy job, peer pressure, family pressure, future private practice, job opportunities in foreign countries, work life balance, role model, good salary ,double job opportunities etc. They could choose more than one reason. They were also supposed to declare their level of satisfaction in their current specialty. At the end they were asked if there was a career counselor available in their institution to guide them.

## RESULTS

A total of 272 postgraduate trainees working in different specialties of different hospital responded to our questionnaire based survey. An equal number of male and female trainees were selected to know if there was a genuine gender based saturation of certain specialties. (Table 1). 41 female post graduates (PG) were working in gynae & obs, while there was no male PG perusing this specialty. There was one male PG in urology department while no female was perusing this specialty. One male PG had opted for neurosurgery while no female PG had chosen this specialty. Department of surgery had 35 male PGs and 14 female PGs, similarly the department of medicine had 30 male PGs and only 7 female PGs. Likewise the department of pathology was dominated by female pgs.

69.8 % post graduates said that they chose the specialty because of their own desires. Future private practice was the second most common reason comprising 16.5 % of the reasons. Family pressure and work life balance were among the third favorite reasons comprising 10.6 % and 10.2% respectively. Surprisingly ease in job was also an important reason for selecting specialties. This reason weighed 9.5%. 8.8 % doctors dedicated their choice to role models in respective fields. Job opportunities in foreign countries were also among popular reasons for choosing specialties. 7.3% opted for this reason. Good salary was mentioned by 5% doctors only. Peer pressure was not one of the major reasons. Only 4 % doctors attributed their selection to this cause. Very few also mentioned that possibility of doing double jobs during their training was also motivation for them to select a specialty (table 2)

As far as level of satisfaction is concerned 44% were moderately satisfied with their specialties. 36.7 % were well satisfied . and 19 % were dissatisfied and wanted to change their specialty if given a choice.(diagram 1)

None of the post graduates were guided by any career counselor for choosing their post graduate specialty. There was no aptitude test or advice what so ever. It was solely their personal reasons.

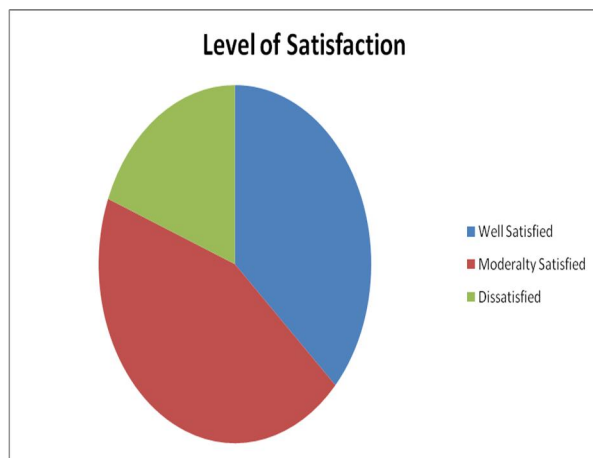
**Table 1:** Gender Respective Specialty

Specialty	Gender		Total
	Male	Female	
Anesthesia	1	0	
E. N. T	7	2	
Dermatology	0	10	
Neurosurgery	1	0	
Gynaecology& Obstetrics	0	41	
Haematology	1	9	
Histopathology	2	12	
Medicine	30	7	
Microbiology	0	2	
Neurology	0	1	
Ophthalmology	1	1	
Orthopaedic	17	0	
Paediatrics	39	29	
Radiology	1	8	
Surgery	35	14	
Urology	1	0	
	136	136	272

**Table 2:** Criterion for choosing Specialty

Reasons	Number	Percentage
Own Wishes	190	69.8%
Easy Jobs	26	9.5%
Peer Pressure	11	4%
Future Private Practice	45	16.5%
Job Opportunities in foreign countries	20	7.3 %
Family Pressure	29	10.6%
Work Life Balance	28	10.2%
Role Model	24	8.8%
Good Salary	14	5 %
Double Job Opportunities	3	1.1 %

**Diagram 1:**



## DISCUSSION

In our survey most of the young specialists were only moderately satisfied with their chosen field of specialization. They were unhappy regarding the pay package, long duty hours and poor method of knowledge and skill achievement. They were also having concern regarding the future prospects. The young female doctors who had joined the surgical and allied specialties were having difficulties to cope with the long duty hours especially the night and emergency duties. 19 % of the doctors were actually thinking of changing their specialties but were worried that they would have to waste further time before getting into practical life.

Studies by different authors also show some level of dissatisfaction in different specialties. The study by Ben Hammoud et al ,also refers to

different levels of satisfaction among the young residents working in the emergency department.<sup>1</sup>

The study by Joyce Frieden showed that nearly 60% of physicians ages 40 and younger don't hold out much hope for American healthcare, according to results of an online survey released by the Physicians' Foundation. Among the 500 respondents, nearly a third (31%) said they were "highly pessimistic" about the future of the U.S. healthcare system. Another 26% characterized them as "somewhat" pessimistic.<sup>2</sup>

Similar to our study that showed that 44 % of the trainee doctors were moderately satisfied and lesser number were fully satisfied, the study by Catherine M also shows the result that 85.7% of doctors were moderately satisfied with their jobs. There were no differences in job satisfaction between GPs, specialists and specialists-in-training. Hospital non-specialists were the least satisfied compared with GPs. For all doctors, factors associated with high job satisfaction were a good support network, patients not having unrealistic expectations and having no difficulty in taking time off work. Compared with GPs, on-call work was associated with lower job satisfaction for specialists and hospital non-specialists.<sup>3</sup>

Our young doctors rated their own ambitions and personal preference as the most common reason for choosing a specialty. Family pressure and future job perspectives were also common reasons. . The study done by khader et al is showing that intellectual contents of the specialty and the individual's competencies were the most influential on their preference of specialty. Other influential factors were the reputation of the specialty", "anticipated income and focus on urgent care".<sup>4</sup> Study done by Baboolal NS is suggesting that medical student rank the diagnosis and treatment of disease and ability to help patients as the greatest influence in choosing a specialty.<sup>5</sup> Study done by the Knox K E et al is showing that relationship with patients, scope of practice, and road models important in their carrier choices.<sup>6</sup> Study done by Huda N et al showed that personal interest was ranked as the most influencing factor that contributed to choice of specialty<sup>7</sup> In our study work life balance was an important considering factor specially by the married trainees. A similar study shows that lifestyle – friendly, that a quest for a manageable lifestyle-defined as having control of professional hours and thereby having more time for family, leisure and a vocational pursuits- is what's driving the stampede

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out of primary care.<sup>8</sup> Study by Pawelczyk A et al is showing the result that respective personalities of the individuals, prestige and respect, international opportunities and time commitment matter a lot.<sup>9</sup> Student of Michigan Medical School in Ann Arbor listed their first preference, anticipated income and work hours, and the influence of attitudinal and social factors.<sup>10</sup> Over 95% of Aga Khan University (AKU) and over 65% of Baqai University (BU) final year medical students intend to proceed abroad for their post-graduate training. The two most important factors behind this intent, as pointed out by the students, are poor salary structure and poor quality of training in the home country.<sup>11</sup>

In our country certain specialties are over-saturated with female doctors, like in Gynaecology, 41 female trainees were noted as compare to zero male trainee doctors. As the majority of the female doctors may quit their job, so they are hardly available for rural area and hard to reach area. On the other hand due to open merit, more female students are now getting admission in medical college, so they occupy the seat but later on due to different factors, leave the medical profession. On the other hand there are certain specialties in which, none of the female doctor is available i.e. Urology, orthopaedics, neurosurgery etc. These facts suggest that we either need to revise our admission policies or subject these medical doctors to aptitude tests and career counselling so that the government resources are not wasted.

Even if Japan's current medical school enrollment capacity is maintained in subsequent years, the number of physicians per 1000 population is expected to increase from 2.2 in 2006 to 3.2 in 2036, which is a 46% increase from the current level. The numbers of obstetrician/gynecologists (OB/GYNs) and surgeons are expected to temporarily decline from their current level, whereas the number of OB/GYNs per 1000 births will still increase because of the declining number of births. The number of surgeons per 1000 population, even with the decreasing population, will decline temporarily over the next few years. If the percentage of female physicians continues to increase, the overall number of physicians will not be significantly affected, but in specialties with currently very low female physician participation rates, such as surgery, the total number of physicians is expected to decline significantly.<sup>12</sup>

An article of the *Historian* is showing that increasing numbers of doctors — mostly women —

decide to work part time or leave the profession. Since 2005 the part-time physician workforce has expanded by 62 percent, according to recent survey data from the American Medical Group Association, with nearly 4 in 10 female doctors between the ages of 35 and 44 reporting in 2010 that they worked part time. This may seem like a personal decision, but it has serious consequences for patients and the public.<sup>13</sup>

A study by the Patricia Barberis showing that with moderate population growth, the deficit of medical specialists will grow from 2% at present (2800 specialists) to 14.3% in 2025 (almost 21 000). The specialties with the greatest medium-term shortages are Anesthesiology, Orthopedic and Traumatic Surgery, Pediatric Surgery, Plastic Aesthetic and Reparatory Surgery, Family and Community Medicine, Pediatrics, Radiology, and Urology.<sup>14</sup>

The study by Yousef Khader is showing that most preferred specialty expressed by male students was surgery, followed by internal medicine and orthopaedics, while the specialty most preferred by female students was obstetrics and gynaecology, followed by pediatrics and surgery. Students showed little interest in orthopedics, ophthalmology, and dermatology. While 3.1% of females expressed interest in anesthesiology, no male students did. Other specialties were less attractive to most students.<sup>15</sup>

The need of Medical person expert in career counselling is imperative. Medical student and young medical doctors should have the facility during MBBS and while doing internship to get guidance and counselling regarding how to proceed for future planning and adapting a specialty. As we have noted and also supported by different studies that Medical students and young Doctors don't have enough knowledge to judge what medical specialty would suit them the best. Because a Medical career counselor will be the most appropriate person to arrange a tailor made specialty for a particular young doctor. The medical institutions must have a position for a Student Affairs Dean and the multifaceted role of the Student Affairs Dean requires understanding how physician identity is formed; the myriad challenges of being a medical student, including barriers to learning, such as depression, anxiety, substance abuse, and learning disabilities; and awareness of the expectations of "millennial".<sup>16</sup>

Career counseling and career coaching are similar in nature to traditional counseling. However,



the focus is generally on issues such as career exploration, career change, personal career development and other career related issues. Typically when people come for career counseling they know exactly what they want to get out of the process, but are unsure about how it may work. A career counselor helps candidates to get into a career that is suited to their aptitude, personality, interest and skills. So it is the process of making an effective correlation between the internal psychology of a candidate with the external factors of employability and course.<sup>17</sup>

Guidance counsellors work individually and with other educators to meet the developmental needs of all students, including those with special needs or disabilities. Significantly, they focus on the academic, career, and personal/social developmental needs of all students, including those with special needs. Inconsistencies in the roles of practising guidance counsellors have caused some specialists in education to begin to address the emerging role of the counselor regarding students with special needs, especially with respect to their career development. Since the level of happiness an individual exudes in life is closely related to the type of career the person chooses, and other career development activities relating to job retention and advancement, guidance counselors must endeavour to expose their students to several career development activities in order to help them to successfully, choose occupations, prepare for, enter into and progress in them.<sup>18</sup>

Seven-year experience in the methodological guidance of the post-graduate specialization of medical graduates specializing in epidemiology has made it possible for the authors to come to the conclusion on the positive role of the on-the-job training of young specialists for a year after graduation, which is manifested by a shorter time necessary for their professional formation, the development of their capacity for making scientifically grounded, active solutions of practical problems. At the same time some defects, difficulties, and unsolved problems of on-the-job training have been revealed. The authors propose to organize internship also for this category of medical specialists.<sup>19</sup>

## CONCLUSION

Most of the postgraduate trainees are not very well satisfied with their selected specialties and we all know that one can be successful in a profession

only if one believes it to be one's passion. Though they have selected their specialty by their own choice and were not really pushed into it yet there were individuals who wanted to revise their decisions if given a choice. So this means that they actually lacked proper mature guidance and if they had an access to it they would probably be in a different field and doing much better. Further certain specialties are oversaturated and other lack adequate specialists. This imbalance may also lead to an alarming situation in the future. Thus there is an urgent need of career counselor, in all medical institutions, who is able to guide the Medical doctors for selecting the specialty, which suits them perfectly.

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