



Motivation, Career Aspirations and Reasons for Choice of Medical School among First Year Medical Students in Ogun State, Nigeria

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Authors' contributions

This work was carried out in collaboration with all the authors. All the authors were involved in the design of the study protocol. Author TA managed the data collection process, analysed the data and wrote the first draft of the manuscript. The final draft of the manuscript was read and approved by all the authors.

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ABSTRACT

Introduction: The current challenges facing the Nigerian health sector make it imperative to examine the long term goals of students training to become medical doctors. Such information is vital for policy makers and administrators of medical schools charged with forecasting the future manpower needs of the nation's health sector.

Aim: The aim of the study was to ascertain the factors that influenced the choice of medical school among first year students of the Benjamin Carson Sr. School of Medicine, Babcock University, Ogun State, Nigeria. The study also examined the career aspirations of the medical students and their reasons for choosing medicine as a discipline.

Methods: The study design was a descriptive cross-sectional survey. Data was collected on the

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students' career aspirations and the factors influencing their choice of a medical school using a structured self-administered questionnaire.

Results: After completing medical school, 70.6% of the students desired to set up their own medical practice and 88.2% of them desired to pursue specialty training. Surgery (43.1%), Obstetrics & Gynaecology (13.7%) and Paediatrics (11.8%) were the preferred choice of specialty among the students. Only 13.7% of the medical students planned to undertake further training in basic medical sciences. The students' choice of medical school was influenced by their preference for the religious and moral discipline of the institution and the ability of their sponsors to afford a private medical school. Most students (90.2%) opted to study medicine because of their interest in the course.

Conclusion: Majority of the students (86.3%) desired to undergo specialty training after graduating from medical school. Less than 20% of the students desired to practice in Nigeria or pursue further training in basic medical sciences upon completing their medical education. Further research is required to identify factors that will encourage the students to pursue careers in these areas.

Keywords: Career aspirations; motivation; medical school; specialty choice; Nigeria.

1. INTRODUCTION

The current situation in the Nigerian health sector characterised by inadequate funding and manpower shortage makes it important to understand students' motivation for studying medicine as well as their future aspirations on completion of their medical education.

Studies conducted in different countries of the world have examined students' reasons for choosing medicine as a discipline [1-7]. Reasons for the choice of a medical career include prestige, personal interest, financial stability, parental wish as well as the desire to be of service to humanity [1-8]. Other reasons for choosing a medical career were interest in science, interest in people, vocation and wide range of professional opportunities [9-16]. The desire to care for the sick and save lives is an important factor motivating students to choose medicine as a career [2,15,16]. Other factors such as social prestige, personal ambition and financial interests have been reported as factors influencing the choice to study medicine among students [9-16].

Previous studies have also indicated that motivations for the choice of medicine as a career vary by gender [6]. Males were significantly more likely to choose medicine as a profession because of the lucrative wages, prestige associated with the medical profession and the ease of getting a job [6]. Having a physician in the family or among close relatives also motivated male students to study medicine [6]. However, female students were more likely to choose medicine as a discipline because of their love for the medical profession, their interest in

people and academic prowess in school.[6] In addition, career guidance significantly influence the choice of medicine as a discipline among female students compared to their male counterparts [6]. Parental influence is also an important factor that motives students to study medicine. Many students pursued a career in medicine based on their parents' desire for them to study medicine [3,8,9,10,16]. Previous studies also indicate that teachers have an important role in influencing students to choose a medical career [16].

There is dearth of information on the factors that influence the choice of medical schools by prospective medical students in Nigeria. A previous study identified the factors that influence students' choice of medical school to include proximity to place of residence, reputation of the medical school, quality of the medical school and availability of standard learning facilities among others [4]. Promotional campaigns organised by medical schools were found to have little influence on the choice of prospective medical students [4].

Graduates from medical school contribute significantly to the number of physicians in a country [17]. In order to ensure a balanced distribution of physicians across the different specialties, it is important to identify the various factors that influence the choice of specialties among medical students [17]. Several studies have examined the career aspirations of medical students across different countries of the world [1-6,13-22]. Several of these studies were conducted in Nigeria [15,18,19,22]. Previous studies indicate that an overwhelming majority of medical students desire to pursue specialty

training after completing medical school with internal medicine, paediatrics and surgical specialties being the preferred specialties among medical students [1-3,7-22]. Similar findings have been reported in studies conducted among medical students and house officers (interns) in Nigeria with the majority of medical students and house officers desiring postgraduate medical training [15,18,19,22]. Previous studies indicate that the preferred specialties among medical students and interns in Nigeria were internal medicine, paediatrics, surgical specialties and anaesthesia [15,18,19,22]. Few medical students and interns in Nigeria were interested in pursuing postgraduate training in basic medical sciences and diagnostic sub-specialties. Similar findings have been reported elsewhere [8,20]. Factors influencing the choice of specialty among medical students and newly qualified doctors were personal interest, perceived abilities, prestige, career opportunities and the potential for better remuneration [15,18,19,22].

Previous studies have reported varied results on the willingness of medical students to practice on their home countries after completing medical school [3,9,20,21]. Some studies report a high proportion of medical students being willing to practice in their countries after finishing medical school [2,9,10,20,21]. In contrast, some other studies report a relatively high proportion of medical students desiring to practice medicine in other countries after completing medical school [15,18,19,20-22]. Previous studies indicate that student from higher income families and those who desired to earn higher incomes were more likely to choose to practice medicine in other countries after graduating from medical school [20].

In view of the short fall of manpower in various specialties of medicine, it becomes imperative to examine the career aspirations of young medical students and to identify the factors that influence their choice of one specialty or sub-specialty over the other. The findings of this study will provide crucial information on the factors that motivate students to choose medicine as a discipline as well as the factors that influence their choice of a medical school. It will also provide information on the preferred career paths of the students after completing medical school. Such information is relevant for administrators of medical schools, policy makers and employers of labour involved in forecasting future manpower needs of the health sector. The specific objectives of this study were: i) to explore the motivations for

studying medicine among first-year medical students in Benjamin Carson Sr. School of Medicine, Babcock University, Ogun State, Nigeria; ii) to determine the factors that influenced the students' choice of medical school; iii) to explore the career aspirations of the students after completing medical school.

2. METHODOLOGY

2.1 Study Area

The study was conducted at Babcock University, Ilishan-Remo, Ogun State, Nigeria. Babcock University is an educational institution of higher learning fully owned and operated by the Seventh Day Adventist Church. It has a population of over 10,000 students spread over different schools and colleges.

2.2 Study Population

This comprised first year medical students of Benjamin Carson Sr. School of Medicine, Babcock University registered for the 2014/2015 academic session.

2.3 Study Design

The study design was a descriptive cross sectional survey conducted among first year medical students of the Benjamin Carson Sr. School of Medicine, Babcock University registered for the 2014/2015 academic session.

2.4 Sampling Technique

A total of 53 medical students were registered for the 2014/2015 academic session. A total population survey of the first-year medical students was conducted. All the first year medical students who were fully registered for the 2014/2015 academic session were included in the study. Students who declined to participate in the study and those who were absent during the course of the research were excluded from the study.

2.5 Study Instrument

This was a structured self-administered questionnaire comprising nineteen items including closed and open-ended questions. The questionnaire was adapted from validated study instruments which had been used in previous studies [4,5,9-16,18,19]. The adapted questionnaire was further validated by a group of

experts in the field who reviewed the items in the questionnaire for appropriateness, completeness (i.e. content validity) and ease of comprehension [14]. The study instrument comprised questions on the socio-demographic characteristics of the respondents, the factors influencing their choice of a medical school as well as their desired career path following the completion of medical school.

Eight questions provided data on the socio-demographic characteristics of the respondents. Reasons for choosing medicine as a career were elicited using the question: "Why did you choose to study medicine" and the students were to select their reason(s) for studying medicine from a list of options provided. The students were also asked the question: "Is there any other course you would have chosen to study if you had not been admitted to study medicine?" A total of five questions were used to ascertain the future plans of the students after completing medical school including their preferred place of practice, intention to specialise and the preferred choice of specialty. A further question was asked to ascertain reason(s) for the preferred choice of specialty. With regards to the choice of medical school, the students were asked to select the factor(s) that influenced their choice of a medical school from the list of options provided. The students were also asked questions on their willingness to become medical missionaries in future as well as the factors that influenced their decision. The questionnaires were fully anonymised and the students were not required to write their names on the study instrument. A copy of the questionnaire is included as an appendix.

2.6 Method of Data Collection

A questionnaire-based survey was conducted among the medical students. Hard copies of the structured questionnaires were distributed by hand to the students who were gathered in a classroom. The students were informed that participation in the study was purely voluntary and that the data collected during the study would be used for research purposes only. The students who agreed to participate in the study provided written informed consent. The questionnaires were retrieved from the students after about thirty minutes.

2.7 Data Analysis

The completed questionnaires were collected and entered manually into spread sheets. The

data was analysed using the Statistical Package for the Social Sciences version 16 (SPSS Inc. Chicago, Illinois, United States of America). The data was presented as tables, frequencies and percentages. Descriptive statistics were computed for the socio-demographic characteristics of respondents. Inferential statistics comprising the Student T-test, Chi-square test, the Fisher's exact test and the Yates' continuity correction were used for the data analysis. The Student T-test was used to compare means between two independent groups. The Chi-square test, the Fisher's exact test and the Yates' continuity correction are non parametric tests which were used to examine associations among the key study variables [23]. The Fisher's exact test and Yates' continuity correction are more appropriate for testing for associations among study variables when the sample size is small [23]. All statistical calculations were performed at 5% level of significance.

3. RESULTS

Of the fifty-three questionnaires that were administered, a total of fifty-one questionnaires were returned giving a response rate of 96.2%. The socio-demographic characteristics of the first year medical students are presented in Table 1. A total of 51 students; eighteen males (33.3%) and thirty-three females (64.7%) participated in the study. Forty-seven students (92.2%) were in the age-group 15-19 years and four students (7.8%) were in the age-group 20-24 years. The mean age of the male respondents was 18.3 years (SD=2.03 years) and the mean age of the female respondents was 17.5 years (SD=1.20 years). There was no significant difference in the mean age of the male and female respondents in the study (T-test = -1.88, df=49, p-value =0.066). All the students were single and ninety-eight percent of them were Christians. Twenty-nine students (56.9%) had medical doctors in their extended family and thirteen of them (25.5%) had medical doctors in their nuclear family. Forty-nine of the students (96.1%) were being sponsored by their parents through medical school.

With regards to their reason for choosing medicine as a discipline, majority of the students (90.2%) chose medicine based on their interest in the course of study. Table 1 indicates the students' reasons for choosing to study medicine.

Forty-five medical students (88.2%) desired to practice medicine after graduating from medical school. Forty-four of the medical students (86.3%) expressed their intention to undergo specialist training after completing their medical education. The preferred medical specialties among the students were Surgery (43.1%), Obstetrics & Gynaecology (13.7%) and Paediatrics (11.8%). Thirty students (70.6%) desired to establish their own medical practice after graduating from medical school. Table 2 highlights the career aspirations of the students after completing medical school.

Table 1. Respondents' reasons for choosing medicine as a course of study

Reasons	*N	%
Interest in medicine	46	90.2
Desire to help the sick	36	70.6
Available Job opportunities	19	37.3
Prestige	17	33.3
Good remuneration	13	25.5
Parents' wish	13	25.5
Desire to emulate role-model	10	19.6
Religious conviction	9	17.6
Other family members are doctors	1	2.0

* Multiple responses

The most frequent reason for the preferred choice of specialty reported by the students was interest in the specialty (73.2%, N=30), followed by the desire for self-fulfillment (53.7%, N=22) and the desire to serve humanity (46%, N=19). Table 3 outlines the reasons for the preferred choice of specialty among the medical students.

The respondents in this study identified several factors that influenced their choice of a medical school. These included preference for the moral discipline in the university (58.8%, N=30), ability of their sponsors to afford a private medical school (54%, N=28) and preference for the religious discipline in the university (N=23, 45.1%). Table 4 lists the factors that influenced the students' choice of a medical school.

The factors influencing the students' decision to specialise after completing medical school are listed in Table 5. There was no significant association between gender, age-group, or presence of a medical doctor in the family and the students' desire to specialise after completing their medical education.

Table 2. Career aspirations following graduation from medical school

Aspirations	N	%
Desire to practice medicine after qualification:		
Yes	45	88.2
No	1	2
Undecided	5	9.8
Preferred place of medical practice after qualification:		
Nigeria	7	15.2
Outside Nigeria	21	37.0
Nigeria and outside Nigeria	1	2.2
Undecided	21	45.7
Intention to specialise after qualification:		
Yes	44	86.3
Undecided	7	13.7
Preferred choice of specialty:		
Internal Medicine	3	5.9
Community Medicine	1	2.0
Surgery	22	43.1
Obstetrics & Gynaecology	17	13.7
Paediatrics	6	11.8
Family Medicine	1	2.0
Medical Psychology	1	2.0
Undecided	3	5.9
*Career aspirations:		
To have my own practice	30	70.6
To work in a private hospital	24	47.1
To work in a teaching hospital	22	43.1
To become a professor	20	39.2
To work in a research institution	18	35.3
To be a medical missionary	17	33.3
To focus on research	17	33.3
To work in a general hospital	16	31.4
To work in a Primary Health Care Centre	8	15.7
To further studies in basic medical sciences	7	13.7
To work in United Nations or World Health Organisation	2	3.9

*Multiple responses

4. DISCUSSION

Most of the students were single, Christians with the Senior School Certificate Examination (S.S.C.E.) as their highest level of qualification. Almost two-thirds of the students were female in line with the increasing feminisation of the medical profession observed in similar studies [5]. Majority of the students reported that their medical education was being sponsored by their parents. This is not surprising considering the fact that close to fifty percent of the students

were below the age of 18 years. Increased availability of government scholarships and bursary awards for the students would reduce the burden of financing medical education on the parents of these students. It would also provide indigent students who are brilliant from accessing medical education in this institution.

Table 3. Reasons for choice of specialty

Reasons	*N	%
Personal Interest	30	73.2
Self fulfillment	22	53.7
Service to humanity	19	46.3
I have role models in the specialty	17	33.3
Job Satisfaction	13	31.7
Bright prospects	11	26.8
Better remuneration	10	24.4
Prestige	9	22.0
Possession of the required personality trait	8	19.5
Flexible working hours and conditions	7	17.1
Employment opportunity	6	14.6
Personal convenience	6	14.6
Parental influence	2	4.9
Requires few years for specialisation	1	2.3
Personal experience	1	2.3

* Multiple responses

Almost 60% of the respondents reported having a medical doctor in their extended family while about 25% reported that they had a medical doctor in their nuclear family. Previous studies indicate that having a doctor in the family motivates students to choose a career in medicine [8,9,11,20]. Having a medical doctor within the nuclear or extended family may have a profound effect on the career aspirations of young people by serving as role models for them. Similar findings have been reported in the literature [4,6].

An interesting finding of this study is the fact that majority of the respondents (N=44, 86.3%) expressed a desire to pursue specialty training after qualifying as medical doctors. Even more surprising was the fact that about 95% of the students who desired to undertake specialty training already had a preferred choice of specialty so early in the course of their medical education. The preferred specialties among these students were surgery, obstetrics & gynaecology and paediatrics. Similar findings have been reported in the literature [1,11,13,18].

Table 4. Factors influencing the choice of medical school

Factors	*N	%
Moral discipline in the university	30	58.8
Sponsor can afford a private medical school	28	54.9
Religious discipline in the university	23	45.1
My first choice of university	16	31.4
Sponsor decided on my behalf	15	29.4
Religion influenced my choice of medical school	11	21.6
Proximity to place of residence	9	17.6
Best private university in Nigeria	3	5.9
Relationship of the school with Ben Carson	1	2.0
Recommended by a relative who is a doctor	1	2.0
Fixed duration of the programme	1	2.0
Good learning facilities	1	2.0
Standard teaching facilities	1	2.0
Affiliation with hospitals outside Nigeria	1	2.0
To study medicine	1	2.0
I had no other choice	1	2.0
Faith in God's work at Babcock University	1	2.0
My preferred university was on strike	1	2.0
It is an approved medical school	1	2.0

* Multiple responses

Majority of the students (73.2%) reported that their choice of specialty was based on their interest in the specialty. Previous studies have identified the factors that influenced the choice of specialty among medical students and newly qualified medical doctors. These factors include interest in the specialty, desire for job satisfaction, a need work-life balance, availability of career prospects and the influence of teaching faculty and hospital consultants in a particular area of specialty [15,16,18,19,22]. The prestige and increased visibility associated with the surgical specialties and obstetrics and gynaecology may explain the students' preference for these specialties. This finding suggests that prospective medical students will benefit from career fairs, symposiums and lectures by renowned physicians across different specialties. Such career fairs and symposiums would highlight the contributions of less known

Table 5. Factors influencing the decision of medical students' to specialise after medical school

Factors	Desire to Specialise after medical school					
	Yes		Undecided		Total	
	N	(%)	N	(%)	N	(%)
Gender:						
Male	16	31.4	2	3.9	18	35.3
Female	28	54.9	5	9.8	33	64.7
Fisher's Exact Test = 1.000						
Age group:						
15-19 Years	40	78.4	7	13.7	47	92.2
20-24 Years	4	7.8	0	0	4	7.8
Yates continuity correction = 0.006; P-value = .941						
Medical doctor in nuclear family:						
Yes	13	25.5	0	0	13	25.5
No	31	60.8	7	13.7	38	74.5
Yates Continuity Correction=1.438; df =1, P-value = .23						
Medical doctor in extended family:						
Yes	26	51.0	3	5.9	29	56.9
No	18	35.3	4	7.8	22	43.1
Fisher's Exact test = 0.447						

medical specialties and sub-specialties to the practice of medicine and the alleviation of human suffering. In a previous study conducted among final year medical students in South Eastern Nigeria, 74.6% of the students surveyed had not received any form of career guidance while in medical school [15]. This highlights the need for on-going career counseling for students in medical school particularly in specialties and sub-specialties experiencing severe manpower shortages.

Most of the students (76%) expressed a desire to establish their own medical practice after completing medical school. This proportion is much higher than that reported in a similar study conducted among five medical students in the United Arab Emirate where 13% of the students surveyed desired to own their own medical practice.[16] The high proportion of students in this study who intend to establish their own practice after graduating from medical school may be informed by the prevailing high levels of unemployment in the country and the stiff competition for placements in teaching hospitals and general hospitals across Nigeria and beyond. The desire of the students to establish their own medical practice illustrates the need for

greater inclusion of entrepreneurship and managerial training in the curriculum of the medical students. Such training would prepare the students to be employers of labour rather than job-seekers in the nearest future.

An interesting finding in this study was the fact about a third of the students desired to become medical missionaries after completing medical school. The students in Benjamin Carson Snr. School of medicine are highly encouraged to participate in medical outreach programmes organized for hard-to-reach communities with limited access to health care services. This may explain the students' interest in becoming medical missionaries in future. Further research is required to identify factors that will motivate more medical students to opt to work as medical missionaries in future given the relatively low proportion of Nigerians with access to affordable health care services. Follow-up studies conducted among this group of students would help to ascertain the proportion of students who actually become medical missionaries over time.

A disturbing finding of this study was the fact that less than 20% of the students expressed a desire to practice in Nigeria after graduating from

medical school. Similar findings have been reported in a previous study conducted among newly qualified doctors in Nigeria in which 69% of the doctors surveyed expressed a desire to leave the country [19]. The high cost of living in Nigeria coupled with the prevailing economic and security situation may have accounted for so few of the students opting to practice in the country after finishing medical school. The poor state of existing infrastructure in the country characterised by irregular power supply, bad roads and poorly equipped hospitals might have contributed to the reluctance of the students to practice in Nigeria after qualifying as medical doctors. Consequently, a lot more needs to be done to motivate the students to stay back in the country after their medical education and contribute their quota towards improving the health of Nigerians. Similar findings have been reported in the literature [20,21].

With regards to the factors influencing the students' choice of a medical school, most of the students selected their medical school because of the moral and religious discipline in the university and because their sponsors could afford a private medical school. The fact that Babcock University is a faith-based institution may have attracted students who place a high premium on moral and religious discipline in higher institutions of learning. As a private medical school, the cost of tuition may have dissuaded individuals or sponsors who cannot afford to enroll their wards in the medical school. Consequently only individuals or sponsors who could afford the cost of enrolling their wards in a private medical school would have selected the Benjamin Carson Sr. School of Medicine which is a privately owned medical school. These findings differ considerably from those of previous studies where proximity to the place of residence, reputation of the institution and availability of learning facilities were the major factors that influenced the choice of a medical school [5].

Finally, the following hypotheses were put forward based on the results of this study:

- i. Medical students choose their area of specialisation very early in their medical careers.
- ii. The choice of medical specialty by the students may change over time.
- iii. Students who attend faith-based institutions are more inclined to become medical missionaries

- iv. The cost of tuition in a private medical school and the desire to earn higher wages may explain the large proportion of students who desired to practice outside Nigeria.

Follow-up studies among this cohort of medical students are required to confirm or refute these hypotheses over time.

5. CONCLUSION

The first year medical students in this study chose their medical school because of their preference for the religious discipline at the university (58.8%), the fact that their sponsors could afford a private medical school (54.9%) and their preference for the moral discipline at the university (45.1%). Most of the students (86.3%) expressed a desire to pursue specialty training after completing medical school with surgery (43.1%) and Obstetrics and Gynaecology (13.7%) being the preferred choice of specialties among the students. Less than 20% of the students desired to practice in Nigeria after finishing medical school. Provision of incentives (monetary and non-monetary incentives) to the medical students during the course of their studies and beyond may motivate them to practice in Nigeria after graduating from medical school. Such interventions may also be required to encourage medical students to pursue careers in the basic medical sciences. Further research is required to identify other factors that will promote the students' interest in the basic medical sciences and motivate them students to practice within Nigeria after completing their medical education. Based on the findings from the study.

6. LIMITATION OF THE STUDY

This study was a cross sectional survey conducted among first year medical students in a private medical school in Ogun State, Nigeria. As a result of the small sample size, the results of this study may not be generalisable to other medical schools in the country. Further research is required to determine if the career aspirations of the medical students vary over time as they progress through medical school. A follow-up study among these medical students will be conducted to ascertain if their future career plans have changed over time following exposure to clinical rotations within the medical school.

7. WHAT THIS STUDY ADDS

This study reports on the career aspirations of students in a private medical school in Nigeria. It highlights the various factors that influence their choice of medical as well as the preferred specialty after graduating from medical school in Nigeria. The information derived from this study will be of vital importance to administrators of medical schools, policy makers and employers of labour charged with the responsibility of planning and forecasting the manpower needs of the health sector in Nigeria and beyond.

CONSENT

Informed consent was obtained from all the students that participated in the study. The students were informed that participation in the study was completely voluntary. They were assured of confidentiality and informed that their responses would be used only for the purpose of the research. The students were not required to state their names on the questionnaires to ensure anonymity of responses.

ETHICAL APPROVAL

The study was approved by the Ethical Committee of the Department of Community Medicine; Benjamin Carson Sr. School of Medicine, Babcock University, Ilishan-Remo, Ogun State.

COMPETING INTERESTS

Authors have declared that no competing interests exist.

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APPENDIX

Career Aspirations of 200 Level Students in a Medical School Lagos/Ogun State

Dr. Ashipa, Dr. Akinyinka & Prof. Alakija

QUESTIONNAIRE

This research is being carried out in order to assess career aspirations among 200 level medical students. Please answer the questions truthfully and freely. All the information provided will be kept strictly confidential, and used for research purpose only,

Your names are not required and multiple answers are allowed where applicable

Answers should be ticked (✓) in appropriate box provided

Thank you.

I hereby give my consent to answer the questions a) Yes b) No Signature _____
Date _____

Section A: Socio demographic information

1. Age at last birthday _____
2. Religion: a) Christian b) Muslim
c) African Traditional d) Others; Specify _____
3. Gender: a) Female b) Male
4. Marital Status: a) Single b) Married c) Divorced
5. Highest educational qualification
 - a) SSCE
 - b) OND
 - c) NCE
 - d) HND
 - e) B.Sc
 - f) M.Sc
 - g) PhD
6. Do you have a medical doctor in your extended family a) Yes b) No
7. Do you have a medical doctor in your nuclear family a) Yes b) No
8. Who is sponsoring your medical education? _____

Section B: Career choice

9. Why did you choose to study medicine?
 - a. Interest in Medicine
 - b. Parents wanted me to study Medicine
 - c. Desire to help sick people
 - d. All my friends wanted to study Medicine

- e. Prestige associated with Medicine
 - f. Doctors are well paid
 - g. Other members of my family are doctors
 - h. Job opportunity
 - i. I want to emulate my role model who is a medical doctor
 - j. Religious conviction to study medicine
10. Is there any other course you would have chosen to study if you had not been admitted to study Medicine a) Yes b) No

If yes, what course?

- a) Pharmacy
- b) Physiotherapy
- c) Basic Sciences (such as Biology, Chemistry etc) _____
- d) Others _____ (please specify)
- e) No other course

Section C: Career Aspirations

11. When you qualify, will you continue to practice Medicine?
a) Yes b) No c) Undecided
12. If you have answered 'Yes' to the question above, where would you want to practice Medicine?
a) Nigeria b) Outside Nigeria c) Undecided
13. Do you intend to specialize after you qualify?
a) Yes b) No c) Undecided
14. If yes, which ONE specialty do you prefer?
a) Internal Medicine
b) Community Medicine
c) Surgery
d) Obstetrics and Gynaecology
e) Pediatrics
f) Psychiatry
g) Basic Medical Sciences
h) Family Medicine
i) Others _____ (please specify)

Section D: Reason of specialization

If you have chosen to specialize,

15. Why have you chosen the specialty?
a) Interest/love for the specialty
b) Service to humanity
c) Job satisfaction
d) Self fulfilment
e) Specialty has very bright prospects
f) Personal convenience

- g) I possess required personality trait
- h) Prestige
- i) Better financial remuneration
- j) Parental influence
- k) Close association with doctors in the specialty
- l) Flexible working hours and conditions
- m) Employment opportunity
- n) I have a role model in this area of specialty
- o) It requires few years to specialise

Section E: Choice of medical school

16. Why have you chosen your medical school?

- a) Very near to my residence Yes No
- b) It was my first choice Yes No
- c) My sponsor cannot afford private medical school Yes No
- d) My sponsor decided on my behalf Yes No
- e) My sponsor can afford private medical school Yes No
- f) I like the religious discipline in the University Yes No
- g) I like the moral discipline in the University Yes No
- h) Other reasons _____

Section F: Reason for non-specialization

17. If you would not like to specialize, what are your reasons

- a) Takes many years to specialize
- b) Want to make enough money early
- c) Want to have enough time for my family
- d) Want to devote time to other activities other than medicine
- e) Other reasons , Please stae _____

Section G: Influence of religion on my choice to study medicine

18. What is your religion?

- a) Christian
- b) Muslim
- c) African Traditional Religion
- Others; Specify _____

- a) What denomination of your religion do you belong to _____
- b) My religious belief has influenced in choice of career a) Yes b)No
- c) I wanted to be a medical missionary a)Yes b) No
- d) My choice of medical school was influenced by my religion a) Yes b) No

Section H: Career Aspirations of Medical Students

19. What are your career aspirations after qualifying as a medical doctor?

- a) I wish to establish my own medical practice Yes No
- b) I wish to further my studies in a basic medical science course e.g. Anatomy, Physiology, Biochemistry, Pharmacology, etc Yes No
- c) I would like to focus on research Yes No

- d) I wish to specialise in an area of medical practice Yes No
- e) I would like to work in a private hospital Yes No
- f) I would like to work in a teaching hospital Yes No
- g) I would like to work in a general hospital Yes No
- h) I would like to work in a primary health care centre Yes No
- i) I would like to work in research institution Yes No
- j) I have not decided yet Yes No
- k) I would like to be a professor Yes No

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