FACTORS AFFECTING THE CHOICE OF A PSYCHIATRIC CAREER: AN EXPERIMENTAL STUDY

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Some factors affecting the choice of a psychiatric career are explored using experiential data from all medical students in two classes who started their clinical clerkships with a strong interest in psychiatry. Information was obtained via regularly scheduled observations and discussions over 13-month clerkship periods. A number of themes were expressed by the clerks and explored in this paper. The significant impact of role models was especially noted. Experiential research can be most helpful in deepening one’s understanding of the day-to-day forces that impinge upon the clinical clerk and influence the career decision process.

Within the last several years there has been concern among psychiatric educators that the numbers of medical students choosing careers in psychiatry has been decreasing. While there is some controversy as to the exact extent of this decline, recent papers indicate that a drop in the number and percentages of medical students entering psychiatry has occurred and is likely to continue at least in the near future.

This paper is aimed at providing more information regarding medical students’ responses to a career in psychiatry. It uses medical students’ ongoing accounts of their career decision process as its data. While the number of student “subjects” is limited and the data generated impressionistic in nature, it is felt that first-hand-account information that is collected over time can provide a much needed window into the formation and development of career attitudes and decisions.

METHOD

The main responsibility of this author over the last four years has been in the Office of Student Affairs in a three-year medical school. In order to understand more fully the experiences of the medical student, this author, with the

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permission of students and attendings, followed groups of students over the course of their 13-month clinical clerkship experience. This included meeting with an individual student approximately every other week for lunch, an on-call evening, rounds or having coffee or a beer during some break in the day or evening. This was done with groups of clinical clerks over each of three successive years.

The selection of the students involved those who felt some interest in having a "participant observer" with them. Time and work pressures limited the author to working with a small group of individuals and choosing to work with those students he knew well before the start of clerkships. While this latter selection factor introduced an obvious bias into the data (e.g., the author may be overly sympathetic in some situations to a clerk's concerns), it was felt that the positive factors (e.g., being able to obtain more extensive, personal feelings from the clerk who had greater knowledge and trust in the relationship with the author) were sufficiently strong to cause the author to use this selection criteria.

**Students**

There was an additional most important attribute of the student groups I worked with for two of these years (1977 and 1978). This was that all of the students who reported at the beginning of clinical clerkships that psychiatry was one of their two or three most serious career interests were included in the groups I followed. Thus, the information presented here concerns the progress of those 20 clinical clerks out of classes of 80 and 96 each who began their clinical clerkships with a strong career interest in psychiatry.

This group is composed of 12 males (five of whom married) and eight females (three of whom married). Their ages ranged from 23 to 29. They came from middle to upper-middle class backgrounds and had parents who were professionals, in business or were skilled craftsmen. Two-thirds of the students had undergraduate majors in the sciences, while the remaining one-third had majors in the humanities or social sciences. Finally, there were ten Protestants, seven Catholics and three Jews in this all white group.

**RESULTS AND DISCUSSION**

The results of this lengthy observation and discussion experience with the students included many different vignettes and comments about their own career goals and their reactions to a career in psychiatry. This study generated data that cannot be easily quantified. Nevertheless there were a number of issues that concerned virtually all of the clerks followed.

No Payoff Talking with Patients

Both early and later in clerkships on non-psychiatric wards, students noted that attendings seemed more interested in whether the clerk knew the results of the lab tests that were run on the patient than whether the clerk talked about personal