Title: Community immersion and graduates’ perceptions towards career choice

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Context and setting: As a state-subsidized medical school, our university is committed to producing graduates who will serve the country, where health care delivery remains dismally poor with a doctor:patient ratio of 1:20,000 in the rural areas.

Why the change was necessary: Only 30-40% of the college’s graduates establish their practices in the country but little is known about what motivates them to stay. This preliminary study was done to identify the factors that encourage medical graduates to remain in the country and to determine whether community immersions alter the perceptions of graduates regarding their career choice and decision to establish future practice in the country.

What was done: A survey questionnaire was sent by email to all graduates from 2004 to 2009. Responses were collected using SurveyMonkey and descriptive analysis was done. Of the 870 emails sent, 89 (10.2%) answered the survey. When asked whether they had had community immersion experiences other than those prescribed by the curriculum, 30/89 (33.7%) responded affirmatively.

Evaluation of results: Curricular programs that increased the graduates’ desire to practice included rural community immersions and urban community rotations.

Forty-four (49.4%) graduates had completed or were undergoing residency training, 28 (31.5%) had been involved in research, and 25 (28.1%) had engaged in private practice. A greater proportion of those who had undergone extracurricular community immersions were in government service [8/30 (26.7%) vs. 10/59 (16.9%)] or NGO work [9/30 (30%) vs. 3/59 (18.6%)].

When asked what type of work the graduates would be involved in after ten years, the top three choices were clinical specialist practice in an urban area [60/89 (67.4%)], teaching [56/89 (62.9%)] and research [55/89 (61.8%)]. The least likely choice was as a generalist in a rural area [12/89 (13.5%)]. In this particular category, 9/12 had had extracurricular community immersions. Although only 18/89 (20.2%) envisioned themselves to be in community practice, 10/18 had had some form of community immersion.

The top 3 factors which would encourage the graduates to establish future practice included: opportunity to practice his/her chosen field, being with his/her family and community needs. Students with extracurricular community immersion tended to rate more highly factors related to community, family, career, training and work as reasons to stay (t=1.70, p=0.08). They were more agreeable to practice as a municipal or provincial health officer or work in the Department of Health. They also felt that more community immersions and community needs would encourage them to stay.
Career counseling, establishing a network of alumni, job placement services and increasing financial incentives were some of the suggested strategies to encourage graduates to establish practice in the country.

This study shows that community immersions encourage graduates to establish practice in our country. Graduates with extracurricular community immersions are more willing to do community work, establish practice in the rural areas and are more inclined to work as a local government health official or in the Department of Health.