Research Article

Career Aspiration and Life Satisfaction of Final Year Medical School Students

Uzma Zahid

Medical Officer, Hearts International Hospital, Rawalpindi.

Abstract | The aim of this study was to assess career aspiration and its three subscales (leadership, achievement, educational) and their relationship with life-satisfaction in final year medical school students of both genders. This cross-sectional study was carried out in final year students of a medical college in Rawalpindi, Pakistan using 24 items revised English Version of Career Aspiration Scale and 5 items Satisfaction with Life Scale (SWLS). This study was conducted on total 88 final year medical school students, among them 44 were males and 44 were females. Findings show significant correlation of career aspiration with life satisfaction, as well as of its educational subscale and life satisfaction. There was a non-significant correlation of achievement and leadership subscales of career aspiration with life-satisfaction. Medical students who are more aspired towards their career seem to be more satisfied in their life. Moreover, medical students were more interested in getting more and more education but there is lack of aptitude towards achievement and leadership, signifying the need of mentoring amongst medical students. Practical steps should be taken to develop achievement and leadership aspects of medical students, which can ultimately enhance their career aspirations.

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***Correspondence** | Uzma Zahid, Medical Officer, Hearts International Hospital, Rawalpindi; **Email:** druzmazahid@yahoo.com
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Introduction

To be motivated for the career-of-choice, driving force for education and life-long professional development are required. Aspiration from career choice boosts our motivation, leading our career to a desired level and ultimate success. Different factors are likely to affect the career aspiration in different ways with variations in gender [3],[4] Research on career aspiration has grown with development of Original Career Aspiration Scale [5] (CAS) and its English version [6] and further its translation and modification into Chinese (2012)[7] and Korean (2014)[8] languages. These versions are followed by the Revised English Version.[1] The CAS was used for assessing women's career choices and was revised to contain two subscales; Leadership and Achievement Aspiration and Educational Aspiration.[6] The original CAS was translated into Chinese version (CASC) to assess education and career aspiration among Hong Kong High School students. This included three subscales (Leadership and Achievement, Job Satisfaction and Continue Education) and suggested that Chinese CAS provides adequate indicators of Chinese education and their career aspirations.[7] The American version of the Career Aspiration Scale-Revised (CASR) has also developed.[9] CASR English version was translated into Korean (CASRK) version (18 items) using multiple

strategies of translation to assess career aspiration in undergraduate Korean Women who scored high for career aspiration on the scale.[8] English version of Career Aspiration Scale was revised by adding items to the Educational and Leadership scales. The items for Achievement Aspiration were also developed.[1]

Research on career aspiration with cultural and demographic variations is of great interest. Such studies include a focus on gender, students, and professionals from managerial and technical careers.[10] Those who aspire for high leadership positions would seek organizational training and support.[11] The role models in community help in career aspiration development among college students.[12] Discrepancies exist between career aspirations and expectations and the labor market of college students.[13]

Previous studies have shown gender differences in career aspiration among high school students and for different occupations.[4],[14] A study conducted on leading professionals in Pakistan showed that women seemed more aspired as compared to male while selecting career.[16] The interest to serve the community has more impact than financial benefit and family pressures on the career aspiration and ultimately career selection of medical school students.[17]

Investigations have been conducted on career aspiration of students of both genders as well as of women of different age groups and occupations in past, however, there is a lack of research on career aspirations of medical students especially in developing countries such as Pakistan. Therefore, this study was planned to assess career aspiration of final year medical school students in Pakistan, and its relation to life satisfaction. This will help to understand medical students' aspiration towards their career and the extent to which it contributes to their life satisfaction.

Materials and Method

A cross-sectional study was carried out on a total of 88 final year medical students. Among them 44 were males and 44 were females to assess career aspiration with its three subscales of Achievement, Leadership and Education, and their correlation with Life Satisfaction using Revised English Version Career Aspiration Scale (R-CAS) and Life Satisfaction Scale. Students were approached on the basis of convenience and data were collected after their informed consent. Data were analyzed using SPSS (VERSION-21). Correlational analysis was conducted to understand the significance of relationships between Career Aspiration Scale, its subscale and Satisfaction with Life Scale. Student t-test was performed to analyze the gender difference in career aspirations and life satisfaction.

Results and Discussion

Initially item-total correlation and alpha reliability of the subscales of career aspiration scale were calculated. The correlation of items was satisfactory with total (above .30). Therefore all items were retained for main analyses. After that, reliability of the subscales of CA Scale was calculated which was found satisfactory (add reliability here). The reliability of Leadership subscale was 0.73, Educational subscale was 0.84 and Achievement subscale was 0.72. After conducting these initial analyses, correlational analysis and t-test were performed in SPSS to meet the objectives of the study. Next, given are the inter-correlations (r values) of the subscales and total of CA Scale with life satisfaction ($p< 0.01$).

Table 1: *Correlations of total CA Scale, subscales with life-satisfaction.*

	LD	AC	ED	SWL	CAS
LD					
AC	.44**				
ED	.30**	.67**			
SWL	.06	.26	.38**		
CA	.73**	.86**	.82**	.27**	
M	26.5	30.5	28.9	16.2	86.0
SD	6.6	5.5	6.7	4.8	15.1

LD: *Leadership;* **AC:** *Achievement;* **ED:** *Education;* **SWL:** *Satisfaction with Life;* **CA:** *Career Aspiration*

Table 1 depicts the significant correlation of educational subscale (ED) of CA Scale with life-satisfaction whereas nonsignificant aspiration of leadership (LD) and achievement subscales (AC) with life-satisfaction. The total score of CA Scale was significantly related to LS Scale.

The score range for all three subscales of CA was 8-40. The Mean of Achievement Subscale (30.5) is above the Median (24), which shows sample scored high on Achievement Subscale. The Mean of Educational subscale (28.9) is also above the Median (24),

which shows that sample, scored high on Educational Subscale. Furthermore, the mean of Leadership Subscale (26.5) is also above median (24) which shows sample scored average on Leadership Subscale. Overall, Standard Deviation (SD) for the three subscales shows that the responses are dispersed around the Mean. Next given table shows t-test analysis to determine gender differences on CA and SWL Scale.

Table 2: *Gender differences on career aspiration (CA) Scale.*

	Gender	N	M	SD	Sig	t
CA	Female	44	86.75	13.879	.104	.413
	Male	44	85.41	16.457		
SWL	Female	44	15.58	5.346	.215	1.256
	Male	44	16.88	4.266		

CA: *Career Aspiration;* **LS:** *Life satisfaction Mean;* **SD:** *Standard Deviation;* **Sig:** *Significance;* **t:** *score* (*p> 0.05).*

Table 2 shows non-significant difference between male and female medical students on Career Aspiration Scale. Similarly, non-significant difference between male and female medical students was found on Satisfaction with Life Scale (p >0.05).

Present study provided insightful findings when relationship between career aspiration and life-satisfaction was investigated**.** Career aspiration has significant correlation with life satisfaction. Furthermore, significant correlation was found between educational sub dimension of career aspiration and life-satisfaction. Surprisingly, the correlation of achievement and leadership subscales with life-satisfaction was found as non-significant.

This differential level of relationship between the sub-dimension of educational aspiration and life-satisfaction can have a number of culture specific reasons. Parents in our society seem to be over demanding from their children in terms of educational performance whereas achievement and leadership aspects of career aspiration seems not being given a due focus by both the parents. Similarly, educational system also does not seem to focus more on the achievement aspect of the medical students. Attainment of high scores perhaps guarantees their professional success and hence they put effort in educational attainment and scores only. Therefore, the more they seek education and plan for it, the more they are satisfied with their lives Hence, this may be a factor that education component of career aspiration is significantly related to life-satisfaction when compared to achievement and leadership. These findings are contrary to previous studies suggesting that the factors like family background and school mentoring may play a role in career aspirations among medical undergraduates.[18]

A non-significant correlation of achievement and leadership subscales of career aspiration with life-satisfaction reflected lack of formal mentoring programs for medical students**.** Medical school is the ideal time to introduce formal leadership curriculum which predicts individual leadership ability, organizational benefit, and societal impact in health care.[22] This should be implemented for all medical students during their career advancement**.**[21] Research needs to be performed on different sub-dimensions of career aspirations of medical school students in Pakistan by taking into account different psychological and social factors.

The present study on final year medical students suggest a non-significant gender difference in career aspirations and life-satisfaction that is contrary to previous studies on college students showing significant gender differences in career aspirations. Primary explanation is that the majority of the students in the study come from upper or upper middle economic backgrounds. Therefore, same level of results for both male and female doctors depict that there are equal support, opportunities and challenges for the students.

Conclusions

The more the medical students are aspired towards their career, the more they are satisfied in life. Education plays a major role in uplifting career aspiration among final year medical school students in Pakistan. This applies equally to both genders. However strategies need to be improved for different aspects of achievement and leadership. Improvements in these both aspects would help to uplift overall career aspirations of medical students.

Limitations

This study is conducted on a small sample of students. A nationwide study should be conducted in future to assess the effect of demographic differences on career aspiration and life satisfaction of medical students.

Recommendations

There is need for interventional approach to improve aptitude towards leadership and achievement among medical school students in Pakistan. It will help to produce young doctors with more mentoring and sense of achievement that will positively affect their career aspiration and life satisfaction.

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Descriptive Statistics

	N	Min.	Max.	Mean	Std. Deviation
LS_total	88	5	25	16.23	4.853
CA_total	88	54	116	86.08	15.150
leadershiptotal	88	11	40	26.57	6.632
achievementtotal	88	17	40	30.56	5.531
educationtotal	88	8	40	28.96	6.725
Valid N (listwise)	88				