Some areas of Australia experience shortages of general practitioners, and this may become worse and more widespread. Yet only a minority of Australian graduates choose a career in general practice. About one-quarter of junior doctors applied for a general practice registrar position in 2002. There remain unfilled vacancies in general practice training programs. Therefore it is important to attract more medical graduates into general practice, and to that end, identify and understand factors influencing career interests of medical students.

Methods
Between March and August 2002, 10 focus groups of 6–10 medical students were conducted at three New South Wales universities, and at a national student conference on rural health. Focus groups included either first or final year students. The three universities have different entry criteria, (undergraduate, graduate and mixed entry); we attempted maximal variation in sampling by recruiting students from a wide range of backgrounds. Some students were strongly influenced by negative attitudes of the GPs they were taught by, deciding against general practice as a career.

Discussion
Medical educators and GPs should be aware of this important influence.
Becoming a GP – a qualitative study of the career interests of medical students and students who entered medicine as school leavers.

Emergent themes

Most first year participants had broad ideas about their future career intentions. Many anticipated their career interests would be influenced by undergraduate experience. About half had an interest in general practice. Others had narrowed their career interests to areas such as medicine or surgery. Many students were attracted to general practice by the diversity, variety and continuity of care, preferring to work in a community and family context. Some were attracted to rural practice by the opportunity to practice a wide range of skills, both procedural, and providing hospital care. A few, who had worked in allied health professions before entering medicine, thought general practice would offer an opportunity to use pre-existing skills.

Most students, particularly women, saw general practice as providing flexibility, especially with their plans for having a family, but also the availability of part time and flexible training, part time work after graduation, and the portability of GP qualifications.

Some factors about general practice were unattractive. Thus some participants preferred to focus on one area rather than all, expressing discomfort with the inherent uncertainty of general practice such as assessing the urgency of undifferentiated problems. Some thought that the work of urban GPs was limited with any serious problems being referred to specialists. Most students were concerned about the relatively poor remuneration of GPs. Workload, especially long work hours, and on-call commitments and levels of responsibility in rural general practice were a concern to some. Others had concerns about the amount of paperwork GPs have, and their professional isolation. Some were not interested in the business aspects of practice. Some indicated they would choose general practice over some specialties because of negative factors associated with specialties including medical indemnity issues (especially obstetrics and gynaecology), intensity and length of training, long working hours (especially surgical specialties), and teaching hospital culture. Some saw generalist work as being more varied and interesting.

Final year students remembered that undergraduate experiences had influenced their career preferences, positively if they were now interested in general practice. Many, originally interested in general practice, had lost interest because of GPs’ negative attitudes (Table 2). These related to remuneration, workload, red tape, and medical politics. First year students indicated they expected undergraduate experience to influence their final career decisions. Specialists, including teachers, had negative attitudes to general practice that some students remembered, critical

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Year 1</th>
<th>Year 1</th>
<th>Year 1</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of NSW (undergraduate entry)</td>
<td>University of Sydney (graduate entry)</td>
<td>University of Newcastle (mixed entry)</td>
<td>Rural conference, from eight medical schools</td>
</tr>
<tr>
<td>Year 1</td>
<td>Year 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 4</td>
<td>Year 6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 1</td>
<td>Year 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year 5</td>
<td>Year 5</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Table 1. Focus group composition: one focus group was held in each category shown

Table 2. Influences on interest in general practice

General practice experience

‘Just from other students, it seems to be the people who’ve had some really good GPs as supervisors, they’re keen to do general practice’

‘I am yet to come across a GP who I have spoken with who has said, you’ve got to become a GP, it’s the best profession... they’ve just told me all the bad points about it – the pay’s crap, the work, the hours suck’

‘Surprisingly I’ve found I’ve been turned away from general practice by GPs... Oh the college is doing this and that to us and we’ve got to pay this much insurance and we’re covering all these other people’

‘It’s becoming quite depressing because I used to think general practice would be a great option for a woman wanting to work part time. These days I just don’t know whether I want to get into all that’

Opinions and advice of specialists and others in the medical faculty

‘I’ve also found with specialists, I think they’re pretty hard on GPs as well... every specialty lecture they give, oh bloody GP did this, sort of thing’

Reprinted from Australian Family Physician Vol. 34, No. 3, March 2005
in GPs’ management of patients in lectures and tutorials (Table 2). Others felt that family and friends would be disappointed if they became GPs instead of entering specialist practice.

Discussion

We found that most students were deterred from a career in general practice because of negative undergraduate general practice experiences; consistent with other data. In addition to data on what attracts registrars to general practice, we provided reasons for students to not be attracted to it. Most important are the perceptions that GPs are poorly paid, overloaded with paperwork and, in rural areas, work long hours with a large burden of responsibility. Such perceptions were based on undergraduate experience with GPs. Specialists denigrating GPs as identified in other studies, influenced some participants, as did the low status of general practice in the community. This may reflect a low morale in general practice, with GPs communicating it realistically. This presents a dilemma to those involved in undergraduate medical education as exposure to rural practice is the main strategy being used to encourage students to consider rural practice. Perhaps to the contrary, sometimes this actually discourages them.

Implications of this study for general practice

- Undergraduate experience is an important influence on medical students’ career choices.
- Among the negative experiences, students heard pessimism from their GP preceptors.

Conflict of interest: none.

Acknowledgments

Thanks to the NHMRC for funding this research through a postdoctoral fellowship, and for the assistance provided by the University of NSW Rural Health Unit and the University of Sydney Medical Education Unit.

References


Correspondence

Email: afp@racgp.org.au