



Narrative Analysis of Ethiopian Medical Students Major Department Choice: Factors, Performance and Challenges

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Abstract

This study investigated the factors, challenges, and school performance that influence major choice among fourth year medicine students of Hawassa University (HU). Highest score in University Entrance Examination (UEE) is required from students to join medical school as their choice of interest. The study uses qualitative research methods; interview as a major tool of data collection. It is important to understand the reasons behind students' major choice decisions, factors, and career satisfaction. This study intended to provide valuable information on the reasons for choosing a professional career among purposefully selected HU fourth year Medicine students. These selected HU medical students were interviewed and the collected information were narrated in recurrent themes. The finding evidence that social status of being a doctor, job security, employment opportunity, good salary, helping people and characters in a fiction were some of the factors for students to join medicine. Besides, personal background, early childhood experiences, and parental motives have influenced students' major career choices. The finding further demonstrated that early decision to join medicine was contributing to performing high in prior schools. However, it is difficult to generalize the findings of this study that was conducted using very few respondents from one university. This study suggested researchers conduct studies helpful to fill the gaps observed in existing major career choices literature.

1 Introduction

The history of Ethiopian higher education institutions (HEIs) showed that students' selection for entry to higher learning institutions and placement to major fields held by centrally established institutions by the Ministry of Education; HEIs have little room in these tasks (UNESCO, 1988). For instance, in the mid-1940s and 1950s students' sit for the General School Leaving Certificate Examination, the 1951 established University College at Addis Ababa has taken the mandate to process students' placement (Adane, 1996). The act of choosing a college major is one of the most profound decisions in the life of students' that requires the need of ana-

lyzing complex information (Amir & Gait, 2013). Asking early school children, a question related to careers they want to be when grown up; they mostly respond to becoming princess, King, Doctor, Lawyer and other perceived prestige careers (Schaefer, Rivera & Ophals, 2010).

However, many studies of pupils' career aspirations in early ages found a limited relationship between their college major and future career goals (Johnson, 2000). Students' choices of major fields of study in colleges have emerged as early as lower high schools and their career aspirations in middle grades (Schaefer, *et al.*, 2010). This research aimed to study Hawassa University (HU) Medical

students' major choice factors, performance, and challenges using qualitative research methods.

Early examples of research about students' interest, factors, and decisions to college major choice. The decisions appropriateness judged by knowing contextual values of respective major fields of studies emanated from students lived experience and mostly relied on intrinsic, extrinsic, social, and prestige career attributes (Semela, 2010; National Middle School Association (NMSA), 2010; Duffy & Sedlacek, 2007; Hirschi & Lage, 2005). However, findings affirmed that students' career choice decisions have been influenced by lack of knowledge, and career orientation that caused difficulties in their future life (Amir & Gati, 2010; Schafer, *et al.*, 2010).

Therefore, it is imperative to conduct studies that recognize the factors of major choice and drawbacks of choice to support students to make informed major career choice decisions that align with their interest and ability. A considerable number of studies suggest career orientation programs, counselling service, teachers mentoring, and career assessment to be designed and implemented to help students to make informed and knowledgeable decisions of their college major fields of study in western context (NMSA, 2010).

However, little is known about these career interventions and the underlying factors that contribute to African students' interest to study their respective college major. Some studies conducted in Ethiopia, particularly the reason for students majoring in medicine, the prestigious value given by the public is found to be the prominent one (Tsion, Damen, Wubegzier & Miliard, 2017; Assefa, Adane & Aneme, 2008). Studies further identified reasons such as direct linkage of medical activity with life care of individuals, attention given by government, and graduates incur more payment to major medicine (Tsion *et al.*, 2017).

Major fields for students of Ethiopia to pursue in respective HEIs have been decided based on their aggregate scores achieved in UEE, scoring higher is an asset to join their choice of interest as compared to other students with similar interest of choice, but with lower UEE results (Mulu, 2012; MOE,

2008; Getachew, 2008). The study of Mulu (2012) apart from other fields of studies, medicine students have highest scores as compared to other students who took UEE in the same year. The rest students' major choice of interest were maintained when the number of highest scoring students did not exceed the admission quota of specified HEIs, and major department. Such major choices of Ethiopian HEIs are believed to have considerable drawbacks.

For example, findings of studies demonstrated that most students assigned to study physics without their choice were blamed for lack of interest to learn, low achievement, lack of academic success and low academic self-concept even as compared to their counterparts assigned in other natural science departments (Semela, 2010). Similarly, study findings and reports further strengthen Ethiopian students' college major choices have known in its implementation with little or no career guidance and counselling orientations either given to students in early schooling years or at the time of their HEI career choice (AAU, 2008; Gerachew, 2008; UNESCO, 1988; Gilbert, 1967).

Despite this, the enrolment policy of HEIs has exacerbated the inequalities created by disregarding lower scoring students' choice of interest and further caused them frustration and discouragement (e. g., Semela 2010; Woodward, 1969). Students Who score high in UEE have greater probabilities of getting their top ranked college major choices. Studies evidenced that 97 percent of students who enroll to pursue medical education have joined with their first choice of interest that they believe will guarantee them future employment (Tsion *et al.*, 2017; Mulu, 2012). Reviewing existing studies mostly conducted in western countries (e. g. Amir and Gati, 2013; Thompson & Dahling, 2010; Wille, De Fruyt & Feys, 2010; Duffy & Sedlacek, 2007; Hirschi & Lage, 2007; Porter & Umbach, 2006; Rosenbloom, Ash & LeAnne, 2006) and African countries (Mulu, 2012; Edoh & Alutu, 2011; Semela, 2010; Agulanna & Nwachukwu, 2004) indicated that students college major choice affected by various factors like parents, teachers, peer group, radio, television and books that they experienced in their day to day life.

Despite these apparent similarities, however, the

significance factor to place students based on their interest to HEI and major field of study accounted most on their UEE results. For instance, a study of Mulu (2012) in public HEIs found out that around 97% in medicine, 91% in law, 85% in technology, and 64% in business and economics who scored higher results in UEE have placed in these major departments based on their interest, and pleased with their placement.

On the contrary, findings showed that the majority of respondents from the College of Education and the Faculty of Sciences had joined their fields of study without their choices, rather by assignment (Semela, 2010). As a result students in the aforementioned faculties pursuing their study in college were not for love of the profession rather for the sake of getting a job and lack of options.

Faculties with more applicants such as medicine and law are in a better position to enroll students with better UEE results as compared to faculties with fewer applicants such as education. However, studies on UEE students' results and major career choice showed no significant relationship with their academic self-concept and academic performance, instead it has shown significant relationship with attitude, value orientation, admission preferences and motivation (Getachew, 2008; UNESCO, 1988; Gilbert, 1967).

The number of students enrolled in HEIs in their major field dependent on UEE results have paved a way to conduct a qualitative research on issues related to the career related major choice construct on medical students who are known in their highest UEE scores.

It is imperative to conduct a study on medical students 'major choice decision in the following reasons: most of the studies are conducted in other major department students and focus on self-efficacy and pays little attention on career choice, studies on overall evaluations of HEIs but gave little attention to career related issues (Semela, 2010). As well, little research has been conducted on the challenges of medical students.

Therefore, this study intended to contribute in addressing these gaps in career studies by answering

the following research questions;

- How students lived experience, and other factors have shaped their career orientation or decision to choose medicine?
- How do students' early decision to study medicine contribute to their school performance and motivation to learn?
- What are the challenges medical students face in pursuing their medical study?

2 Career Choice in Ethiopia

People in Ethiopia have been known to engage in numerous jobs either encouraged or discouraged by the society (Harold Marcus, 1994). For example, jobs like blacksmith; Goldsmith; Clay maker; Carpenter, Weaver, and leather making not only have gone beyond cultural devaluation, but are also prone to stereotype; but also as being forbidden for people to engage (Ayalew, 2000; Teshome, 1979).

These situations somehow shifted with the beginning of Western education during the regime of emperor Minilik II in 1908 that in need of citizens to cope up with western ideas and to modernize the country (Ayalew, 2000). This initiative was further catalyzed by the motivation rooted from the Italian invasion's unexpected utilization of flying rockets as part of an advance in military science and which is new and challenging, the emperor at that time expressed his feeling in Amharic by saying:

*“Be Mach’ewimi sīmech yigebu neber
Be’Ogadēnim sīmech yigebu neber
Besemayi layi gebu bemanawuk’ewu hāger”*

This poetry demonstrated the emperor's understanding of the gaps existed between Italian and Ethiopia with regard to modernity and technology (Ayalew, 2000; Adane, 1996; Kehoe, 1962) that further ignited a candle in his mind and opted to start modern education. The initial public resistance to western education is replaced by appreciation of the teaching profession disseminated and popularized through wedding songs in Amharic:

*“Ye’inya mushirīti kurī kurī
Wesedati āsitemarī”*

This poetry is tried to send a message that dignify the status a society gave to teachers with historic rhymes; —married women feel happy and joy, “because her husband is a teacher” that evidenced how people sing to glorify teachers. This respect was also kept for other civil servants including health workers.

However, evidence in the past showed that, health workers are not only sufficient in number but also rarely available particularly in rural parts of the country in which more than 85% of the population dwells (CSA 2014). To address the community health needs, the country established the first medical education program in the 1960s (Kehoe, 1962).

The highest scoring student’s interest to study medicine have evidenced that, socially prestigious, offer opportunity to explore, attract good salaries, guaranteeing job, offer people opportunities to help others, to make good money and driven by service were the major reasons of choice (Tsion, et.al, 2017 and Wakgar, 2012). The country’s history evidenced that medical students are highly valued and esteemed by the people, society and government.

3 Method

In order to answer the research questions, the study employee’s qualitative research design. According to Davis (2007), “Good qualitative helps to understand a complex phenomenon; it must consider the multiple ‘realities’ experienced by the participants themselves from ‘insider’ perspectives.”

The description of people’s lived experiences, events, or situations is often described as ‘thick’ (Denzin, 1989), meaning attention is given to rich detail, meaningful social and historical contexts and experiences, and the significance of emotional content in an attempt to open up the word of whoever or whatever is being studied. This study employees ‘narrative analysis using the record interviews of mostly three fourth year HU Medical students using life story method, describe their life experiences via storytelling.

3.1 Participants, and Sampling

To answer the research questions of this study, HU was purposefully selected and a convenient sample of fourth year Medical students were interviewed due to proximity to the researchers. Due to unavailability of an adequate number of participants, the responses of three participants with pseudonyms using the first letters of the phrase Student Hawassa Medicine (SHM) followed by numbers, hereafter named as SHM1, SHM2, and SHM3. The interview data of these pseudo-named students were narrated and presented in this study together with a few numbers of other participants who responded to some of the questions. The sample students are given pseudo names for confidentiality and to keep privacy.

3.2 Material, and Procedures

Interview questions were raised to assess medical students’ lived experience, social values, models and other factors that shape their career orientation and decision to choose medicine, challenges they face in medical school, and perceived factors to their performance and motivation to learn in HEI.

Interviews were conducted with fourth year medical students at the end of the semester. At the beginning of the interview, they were asked regarding their background including: whether they would be the first in their family to enter HEI; experiences with health related activities; aspiration towards future study; career attitude, orientation and interest; and reasons of choice and motivation prior to attending medical school and after pursuing the medical field.

The research employed deep interviews using recommended interview techniques and tried to discover possible uncovered career constructs related with pursuing medicine in HEI. Revisions have been made until the interviewer is satisfied with the responses or none generation of new ideas.

3.3 Analysis

For the attainment of the study objectives, participants interviewed data were recorded and carefully transcribed to emerge recurrent themes (read Flick, 2014). In this paper, interview data of fourth year students (aged 22-26 years) were narrated and pre-

sented under the themes; story, earlier schooling activities, mechanisms to accommodate other activities, factors for choice, reasons of choice, and challenges in medical school.

4 Results

4.1 Participants story

A 24 years old and a third child in the family; SHM1, born in one of the zonal capital towns of Ethiopia. SHM1's father died in his early age as he hears from his mother. His mother soon took, together with his sister to another town found near to the capital city of the country, at that time his mother was pregnant with his sister.

During the interview SHM1 is HU fourth year, semester one medical student. When asked about his lived school experience before joining medical school, SHM1 told; my Mom gives due attention to education, when I start school I am the youngest. .. My mother encouraged me ..., she has a desire from us to learn properly.

“Aha... I started to read, and to make my mama become Happy, I am strongly devoted to acquiring knowledge in education . . . God supports me and I became a clever student in early school”. The story of SHM2 and SHM3 were presented subsequently.

SHM2, who was born and grew up in a small town in Oromia region, reported to be the first child in her family, and is 22 years old. She attended her KG and primary school near her home, taking only 15 minutes on foot. She grows up with her parents and two elders. She is looking happy, her parents are both working as primary school teachers in the same school.

At present, she is fourth year medicine student at HU and shared her remarkable experience which lead her to join health science. “Ih. In my early grades my parents, particularly my father, checked my exercise books, assisting me in reading and writing skills, solving some questions. . . and carefully doing my home works. Gradually I started to do some of my activities independently and got interested in the learned subjects. Starting from the beginning of secondary school, our English teacher advised us to have a study schedule, and I discussed

it with my father, and he arranged a separate reading room for me. On a program basis, sometimes I started to read and revise my subjects, and solve calculations at calm midnight, this became my reading habit”.

Uuum. . . I can't remember the days I became absent or late from class during my primary school. I prefer class participation and presentations so that it improves my confidence to deal with my friends. I also used to participate in competitions like question and answer programs in my school, representing my classmates as I stood among the frontier three ranks every semester. This helped me to score high points in grade 10 and makes natural science my preferred subjects.

The other interviewee, SHM3 who was born in rural areas of Arsi zone, the last and the only female to her family, and she is 23 years old attending medicine at HU. She said, though attending schools, her brothers are not successful to join higher education, self-employed in the private sector. SHM3 further tried to remember her early life experience as: “Though my brothers are not successful in their education, they advise and coach me to succeed in my education which contributed a lot in my school life. Every day, they show love to me and call me by the naked name Nurse SHM3”.

I started off thinking and wanted to study medicine because of my interest in science and my fascination with the way in which the human body functions. I think it runs deeper than that, when I was younger enough at grade 8, my mother suffered from a heart attack, sadly she didn't survive. I think this situation ingrained my interest to join medicine. I remember feeling so helpless when the ambulance took over my mam, an hour to get to her. My mother, father, brothers and I (I was 15) went straight over to arrive at the health post and she obtained treatment for a moment, but she failed to follow prescriptions to improve her problem, . . . this is what I remember most specifically, which I think was unconscious at that time.

I blamed myself for a long time, thinking that she might have lived if I had given her the instructions more clearly. This experience has made me want to be involved in a caring profession. I see it as an

opportunity to help and prevent families who pass through similar situations.

4.2 Other activities in early schooling

SHM1's response on other activities he was involved in his early schooling indicated as follows. "Yah. Side by side with education, I read books. When I was a grade three student, I read my first book that my elder sister borrowed from the school; I remember "*Konjowochu*" was the title of the book. I hid myself from my sister to read when I was a grade three student. Up to grade six, I read many books that my sister borrowed from the school library".

When I enter grade seven our school formally allowed students to enter the library. At that time I started entering the library and I proceeded to read fiction. I read most of the fiction when I was in grade 7 and 8. My score on the 8th grade regional exam is the first and top score of the zone and the second from the region.

SHM2's response to this question; during my extra time, I used to draw pictures, maps, and diagrams. Especially I like to construct parts of the human body and wild animals through local materials and pieces. She added; "sometimes, I enjoy walking and relaxing near big trees. As I became mature, when I was in grade 8 I saw patients in our locality who suffered from different diseases like malaria, and I started to worry about the situation due to lack of health services and inadequate health professionals in the locality. This brought humanitarian thinking into my life".

SHM3's response to this question; "Woo. ...At my preschool age, I enjoyed playing different games with my neighbourhood children and, always, I take the role of nurse and act as a nurse. During my primary education, especially at the beginning of grade 3, on the way to my school, I always saw health extension workers supervising residences in small towns and giving advice about environmental sanitation".

My experience and dream, along with high achievements in my secondary school, led me to give attention to science subjects, particularly Biology,

and follow some medical films. During my preparatory class, I put in more effort and really scored high marks which help for my direct placement to medicine department.

Afterwards, my decision to study medicine aligns with the knowledge and understanding I will have of the human body. Also, I imagine there is a massive amount of job satisfaction working as a doctor, as well as a lot of pressure that would be challenging, yet enjoyable to deal with, and successfully overcome.

4.3 Accommodates reading books out of the school subject

SHM1's response when he asked about the mechanisms, he accommodates reading books out of the school subject and how it contributes to becoming clever, he said: "... my vision. ...Aha. ..Making my mother proud of me. ..You see, succeeding in school was my plan. ..Always to be rewarded. ..You know, "Seni 30", the day to receive a card. To be rewarded is my obligation and it was the only thing I gave to my mother as a gift. In my mind, I believe in this. I became the top ranked student and was rewarded".

When, I am retrieving my childhood. I sometimes asked my mother about my father. She told me things, he drank, had come home to disturb, picked a knife, terrorized her to slaughter. She said to me repeatedly; you didn't waste any time thinking about him. She made me perceive my father as bad. In most of my school years, my concern about my father was eliminated. My mother reared me. ..Her generosity, love and empathy. She fulfils basic things for me every time, as far as her capacity is concerned.

SHM3 responded to this question; "sometimes, I join health extension workers and talk to them. They also appraise and walk with me and share love and affection to me. Always they advise me to be a strong student and have a planned study schedule for all my duties. Beside my class subjects, I prefer worship and read spiritual books with an emphasis Christian Bible".

Even though the department makes my life very

busy due to various burdens, and long study years related to other departments, I am happy with my stay for these years of study. I found the content and staffs interested me, and at the same time I like the active and practical job, creative, challenging and I like working under pressure and applying what I know and scenarios where I have to tackle the problem. The job satisfaction is the bonus, but I believe even if tomorrow, medicine became an average degree, I would still do it for my further study and nothing is more satisfactory than helping people.

I imagine—doctors can experience pressure while dealing with patients that often cause them depression and stress. For me . . . why this happens is. . . ‘because, one year you could be transplanting organs and the next you could be growing them from stem cells. . . . again one year you could be watching a disease cause someone to die but another time you see people cured soon. It is a challenging career with options from clinical work to research to teaching and you get to meet new interesting people every day because as a doctor you are the frontier to protecting and improving a person’s quality of life.

Following this, the study will narrate turn by turn and present the narratives under the recurrent themes; underlying reasons of choice or factors, decisions to study medicine in HEI and its contribution to prior school performance, and challenges of medical school students in the HEIs.

4.4 Factors for Choice

When asked why he/she has chosen to study medicine, SHM1 told us that he was surprisingly influenced by the character in the fiction read. “The reason that caused me to join medicine was a book I read at grade seven. The book named ‘ENBUT TSIGIREDA’ has influenced me to join medicine. In the book, there is a growing girl, her mother with a serious illness, she is beautiful, and I hope it is around 16 year’s old girl, she went to examine. . . the physician. . . . Their families have not any money to examine her mother, with this problem; the physician at that time requires some affair and asks about her dating relationship”.

I decided once he died. . . I wasn’t prone to know the details, why did he die? And how he dies, I didn’t have any interest. The Physician said to her, if you say no, I didn’t examine your mother and he said the chance of your mother is at your hand. I remember. . . “At that time my mind decided, I should learn and become a doctor”. After I become a Physician, I decide to avoid those physicians with such undesirable behaviour in the health profession. Starting from grade seven, the only goal of my future is to become a physician; no other vision is coming in my mind (SHM2).

SHM2 also asked and responded, her life experiences to patients in early childhood. I see primary education as a critical time during which I developed interest towards health activities as a result of experiences that I faced from people who suffered from different diseases like malaria as a result of lack of sufficient and qualified health professionals in my locality. This childhood experience has influenced my study habits and motivated me to give priority to science subjects. In addition to this, the personality that I possess to be sociable and loveable to patients affected my tendency to study health and made me to further support people who suffered.

SHM3 also asked and raised reason as: her interest in science subjects and fascination with human body functions that I attained in science subjects played a great contribution in my aspiration to be a doctor. Moreover, “the death of my mother due to a heart attack led me to become involved in a caring profession which could help me prevent families with similar health problems”. On the other hand, the love I had for science subjects and high scores I obtained in my secondary education further deepened my interest to study medicine and made it the first decision during my entrance to HEI.

Furthermore, SHM1 told his memorization of his elder sister in place of the fiction character he read was the major factor for his decision to study medicine. At that time I felt that it just happened to my elder sister and my mind repeatedly told me, assume that she is your sister and it makes me too deeply feel my sister’s pain. Still now the whole picture in my internal mind is that scenario and I only want to become a physician. There is no

reason and bringing other reasons or listing has not required for my decision to study medicine, I internal accepted it as a sufficient reason.

4.5 Reasons of Choice

Asked SHM1 to remember activities you might involve in your previous grades that might be related with medicine or not. He told in schools I was participating in different clubs like the school's Red Cross club, later I became the coordinator or chairman. The other is that the character to help people that I share from my mother and my readings. Together with these things, I have strong stand in my internal mind that helping people is how much satisfying and really developed in my mind through time become the prime reason to join medical school.

SHM2 also asked what influenced her and responded as: since I grew up in a rural community who are in shortage of infrastructures, particularly poor health services, I saw the work of few doctors and health care professionals who more or less tried to save the lives of most important people in my life, sometimes they failed to save patients life. Therefore, I couldn't think of any valuable career for me, except medicine. Besides, the support and encouragement of my father who initiated me to study hard and score high grades every semester helped me to put good effort and increasingly develop my confidence to join health science and study medicine.

The fact I used to be a clever student and some of my teachers' appreciation shaped me the way I keep and the ever increasing knowledge about how to balance the learning systems for good opportunities. With the same vein, the fact that I scored high points in grade 10 Ethiopian General Secondary Education Leaving Examination motivated me to join natural science class and put emphasis on chemistry and biology subjects which were believed to equip students with the medicine concepts.

The other reasons that interested me are, a true sense of being able to make a difference to the community, fascination about human body, how it works, why it doesn't work, how it works, the opportunity to teach and pass my skills on to others,

but mostly, more than any other profession a true sense of being able to make a difference to the community.

Surprisingly, I scored high grades in my entrance exam, and made medicine my first priority. Fortunately, I got my choice and gladly started my study. During my stay in this university, I referred to a lot of medical materials and increasingly I found it compatible with my future life. Again—not only would it be satisfactory but if you love medicine, not only do you get to help people and make a difference but you get to work with the patients you enjoy in an analytical way, which I personally think is rewarding. I also think it is good because you take an active role in making a difference to someone's life.

Additionally, I am happy to be a doctor, medicine as it has many specialties that can make my life successful and as a health professional I want to participate in research activities which could help to invent new drugs. —Because as a career I think it would be constantly changing; new discoveries and treatments become interesting. Hence, the idea of being able to use your medical knowledge to save a life, lifelong learning, job security and stability are more interesting to me.

It is my great pleasure—if all medical professionals are honest and responsible for their job in reducing the gaps regarding health service coverage which is prevalent in our community. Surely, I believe I will become exemplar with this regard and apply my skill and knowledge with commitment (SHM2).

SHM3 on the other hand said: I started off thinking I wanted to go into medicine because of my interest in science and my fascination with the way in which the human body functions. I think it runs deeper than that, when I was younger enough at grade 8, my mother suffered from a heart attack, sadly she didn't survive. I think that this is ignite a candle to be interested in health fields. I remember feeling so helpless, and the ambulance took over an hour to reach my suffering mam. My mother (I was 15) arrived at the health post and obtained treatment for a moment, but she failed to follow prescriptions which might improve her health. —this is what I remember most specifically which I think was

unconscious at that time.

I blamed myself for a long time, thinking that she might have lived if I had given her the instructions more clearly. This experience has made to be involved in a caring profession. I see it as an opportunity to prevent the life of families encounter similar situations.

My experience and dream, along with high achievements in my secondary school, motivated me to give attention to science subjects, particularly Biology, and follow some medical films. During my preparatory class, I put more effort and really scored high marks that help for my direct assignment to medicine department.

Even though the department makes my life very busy due to various burdens, and long study years, I am happy with my stay in these years of my study. I found the content and staff interested me, and at the same time I like the active and practical job, creative, challenging and I like working under pressure and applying what I know and scenarios where I have to tackle the problem. The job satisfaction is the bonus, but I believe even if tomorrow, medicine became an average degree, I would still do it for my further study and nothing is more satisfactory than helping people.

I imagine—doctors can experience pressure while dealing with patients that often cause them depression and stress. For me . . . why this happens is. . . ‘because, one year you could be transplanting organs and the next you could be growing them from stem cells. . . . again one year you could be watching a disease force a death sentence and the next it could be cured. It is a challenging career with options from clinical work to research to teaching, and you get to meet new interesting people every day. As a doctor you are the frontier to protecting and improving a person’s quality of life believed to be the major reason.

The influence of a role model is asked; SHM1 confirmed no one in the school joins medicine beforehand that could become a model to him: When I was a grade 8 student, there was one individual who joined Black Lion Hospital Medical School. I was attracted to him when he came for summer va-

cation. After, I start to dream that field beforehand by the aforementioned reason and I discuss with him about medicine, he also advise me also now you just arrive 9th and 10th grade, he told me to pay attention to biology and other relevant subjects and brings materials beyond my stage to read. When I was in high school, he helped me to understand medical words.

SHM2 has no model to refer to but she said: the appreciation I obtained from my father and the encouragement provided by some of my teachers are undeniable contributors to my achievement. On the other hand, SHM3 took the initiatives that her brothers call her with her naked name ‘which gradually influenced her preference to health professionals, being played as a nurse. Again, the presence of health extension workers that create too close talk and enjoyment with her greatly influenced her interest towards health professions. This improved her life and really helped her to be a doctor.

Despite Reasons for Choice, other medical students’ responses were presented. They reported that in our dorms we talked to each other, some hesitating “*zimibeye new shimideda yegebahut*” (I joined unconsciously to study the field of Rote memorization), and questions rose on the why of joining medicine?

At that time, most classmates reasoned that the values society gives for medical discipline is the major reason. The prestigious values in the society emanated from the service, the medical related with the name of the profession as related with the societal value.

When you are clever, you are perceived to hold the highest post, those students who perform high, allowed and selected to join medicine. In terms of income, medical doctors get a lot of money (“*hakim bizu yagegnal*”) and become rich. Most of them, reason out of two reasons, money and societal prestige value.

In addition to the aforementioned SHM1’s reason, the other two likely reasons for him to choose medicine are, the influence of her sister and mother and his engagement in the Red Cross club in high school beyond his reading. The narrative identi-

fies him as having motives like helping people and bringing profound change in the unethical practices observed in the health service.

Additionally, we asked SHM1 to describe his performance in schools, the way he learn and subjects he perform and relationship with teachers; he told us With relation to school activities SHM1 mentioned: Like other students, I haven't supported by books, and other additional materials; When a teacher teaches, I didn't miss it, I finish what he taught there, I understood and exit the class, I ask there for concepts that I didn't understood, afterward no need of reading.

My experience in subjects and participation in physics, chemistry, mathematics and related activities were believed to be very good. However, I am good in other subjects but very good in biology subject performance, we assumed related to medicine. Throughout my school biology performance is not better than physics, mathematics and chemistry, my mind sets a goal only to become a medical Doctor and I didn't think twice. When the choice came after I took a grade 10 exam, I was the top scorer from the school and all over the zone that allowed to select social and Natural. I did not have anything to think about, I thought only things that took me to my dream of pursuing medical study and joining the natural field of study.

I remember, my history teacher, now holding his PhD from —Sedist Kilo|| University and currently he is in the teaching career. When I was choosing natural science, my history teacher disputed with me because he appreciated my performance in history. Soon, we joined grade 11th and 12th, later I sat for the leaving exam and I didn't dream of any field other than medicine. I selected medicine as my first choice and I got my physics teacher, he became disgusted like the history teacher of my choice. This all my stable aspiration field because of the influence of the fiction character I read during grade seven, to be a medicine student, I know what is expected from me and to score high is the only option that I have (SHM1).

4.6 Challenges in Medical School

Some of the challenges raised in medicine school are also summarized as: SHM2 and SHM3 raised similar experiences regarding their stay in studying medicine in the university. To mention a few, they raised that every discipline demands hardworking and intensive study. Health science, medicine in particular requires wider study hours and long years of study. The nature of courses is broad to cover and some to understand its theoretical and practical skills and knowledge.

Regarding challenges that block his goals in school, SHM1 stated as: I was preparing for the final exam scoring high and expected to enter medical school, unless and otherwise my dream is not realized. I am in the school, for the last four years no one scored high and joined the medical school. However, my lower first semester grade caused me to be frustrated and my mind asked me, if you can't compute with your classmates, how will your goal be fulfilled? It made me not study, instead I played football and one day my civic teacher asked me about the situation and later he advised me to read. Further, he looks after my activities, fulfilling materials and other moral support. Through his close inspection and support I started studying; my score became the highest not only from the school but also from the zone.

The fact that the subjects need more supplementary reading materials which incurs financial support is one of the challenges, especially for those students that have limited financial and moral support.

5 Conclusions

The right major choice for the students entering into professional education is critical, having a high impact on their professional life and future achievements. This is the turning point; it cannot be left, on intuition, preconceived notions, wild imaginations or popular concepts. A miss-perceived career choice directs all individual efforts and resources in the wrong direction, when not aligned with the expectations; would not only be frustrating rather draining individual energy and wastage of resources.

Realignment is possible, but it has serious impli-

cations in terms of time, money and motivation. The career choice of the students must need to be based on; strong knowledge, adequate career information, and vocational guidance; matching individual personality type and other intrinsic and extrinsic factors.

It was concluded that, a relatively strong sense of major choice, and greater career decidedness exist among participants that emerged from their overall story reports. Assisting students with life transitions through the provision of career orientation at schools, colleges and universities should become the role of different stakeholders, families, guardians, peers, teachers, professionals and significant others.

As well, considerable attention will be given to some students who are disqualified from their study due different reasons. The problem is getting worse since the placement is continued to be only score based, rather suggested to make the placement by taking aptitude tests, and other career tools into considerations.

Implications

The students need to be oriented on new emerging trends, future opportunities and challenges in the context of their career choice decisions. They need to know the market trends and job demands of various sectors along with their personalities. For this end, concerned bodies and educators should work to help students in identifying career objectives by encouraging them to explore careers that align with their values and interests.

The vocational guidance practices at HEIs will be consequent in line with current understandings that students should be provided with an opportunity to unearth career possibilities to discover leading edge interests, assess problems, and motivate to acquire a cognitive structure for evaluating career alternatives, clarifying expectations, and planning interventions along with their established ability and interest.

Even though it is difficult to generalize from data collected from a few sample students, findings of other study results revealed that gender has no ef-

fect on career decisions among university students. But, the interviewee result confirmed that the academic standing has an effect on career decision, and satisfaction in particular.

Based on the narratives, it can be said that students at HU should be in need of high levels of vocational guidance prior to making placement decisions in their respective fields. This helps them to have a clear and stable picture of their goals, interest, personality and talents that lead, in turn, to relatively untroubled decision making and confidence in one's ability to make informed decisions regarding major choices that signify future career satisfaction and alignment to career aspirations.

Limitation

This study is limited in its scope and use of few sample participants that made some of the information unable for generalization and created a room for biases.

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