

**UK Medical Careers Research Group**

**1993 cohort of UK Medical Graduates**

**Report of Third Survey**

**June 2000**

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## Summary

- The UK Medical Careers Research Group has surveyed doctors who qualified in the UK in 1993 on three occasions – in 1994, 1996, and 1999. This report describes the findings from the 1998/9 survey.
- Mailing began in February 1999. A response rate of 75.1% (2732/3639) was achieved.
- The doctors' median age was 30 years at the time of the survey, two-thirds were living with a spouse or partner, a fifth had at least one child, and a sixth were non-white.
- In September 1998, 87.8% of the respondents were working in the UK NHS / University sector (89.7% of men, 85.8% of women). Only 5.6% of women but 11.6% of men were working in UK universities. Only 1.4% of men but 6.6% of women were not in paid employment.
- In 1998, 27.0% of respondents in the UK NHS / University sector were working in general practice; 21.3% of men and 32.8% of women. In general practice locums outnumbered both principals and registrars, comprising 9.5% of all respondents compared with 8.1% who were GP registrars and 7.2% who were principals. The surgical specialties showed a large sex difference, with 14.1% of all respondents, and 21.6% of men and 6.5% of women working in them.
- Part-time working in the NHS was less common for men than for women; 6.2% of men and 19.2% of women in the NHS were working part-time. For both men and women part-time working was much more common in general practice than in the hospital specialties. In hospitals, 2.6% of men and 8.4% of women were working part-time. In general practice, 17.3% of men and 37.9% of women were working part-time. In UK universities part-time working was very uncommon; it was undertaken by only 1.8% of respondents (0.7% of men, 4.1% of women).
- The percentage of NHS respondents who were SHO's fell from over 90% in 1994 to approximately 30% by 1998, as large numbers moved into the Specialist Registrar grade or into vocational training for general practice.
- These respondents, five years after graduation, were reasonably sure of their long-term career choice, with 89.6% describing their career choice as a 'definite' or 'probable' choice (59.3% definite). Women were less sure than men of their choices, with 54.4% of women and 64.2% of men describing their career choice as definite.
- First choices of long-term career largely reflected (in percentage terms) the doctors' current areas of work, with the exception that in general practice there were substantially more choices (32.8%) than the numbers currently working in that specialty (27.0%). A higher percentage of those choosing the surgical specialties and obstetrics and gynaecology were definite about their choice, compared with those choosing other specialties.
- Thirteen named factors which might affect career choice were scored by the doctors for their degree of effect on their choice. Four factors - enthusiasm and commitment, experience of jobs in training, self-appraisal and hours or working conditions - had the most effect on career choices, and financial factors and inability to secure qualifications had the least. Hours or working conditions and domestic circumstances were more significant for women than for men; otherwise, the results for men and women were very similar.
- A large majority (81.4%) of respondents definitely or probably intended to practise medicine in the UK for the foreseeable future. There was no appreciable sex difference.
- Twelve statements about medical careers were scored with *strongly agree*, *agree*, *neither agree nor disagree*, *disagree*, *strongly disagree*, or *no opinion*. Most respondents were happy with their

present position and their career opportunities and prospects. Almost half agreed that their postgraduate training had been of a high standard. Approximately a third thought their hours were excessive and less than a quarter had been able to find useful careers advice since graduation.

- Respondents working in the NHS scored seven statements about the NHS in the same way. Almost half felt treated fairly by the NHS, thought the NHS was a good equal opportunities employer with regard to sex, and thought there were good prospects for improvement of the NHS in their specialty. Ratings of the NHS as an equal opportunities employer with regard to ethnicity and disability were quite low. Only a quarter agreed that the introduction of the Specialist Registrar grade was benefiting most junior doctors, but respondents endorsed the reduction in juniors' hours.
- Almost half of respondents who were Specialist Registrars agreed with the proposition that their training was too short to enable them to practise adequately as new consultants. Almost four-fifths were concerned about potential problems in securing their first consultant post within six months of completing their CCST.
- Job enjoyment and job satisfaction were rated more highly than the level of satisfaction felt by respondents with the amount of time their work left them for family, social and leisure activities.

## Introduction

This report describes the results of the third survey of the cohort of 3672 doctors who qualified from UK medical schools in 1993. We began surveying 1993 qualifiers with a baseline survey during the PRHO year in 1994, and followed up with a second survey two years later. This third survey finds the cohort members in their sixth postgraduate year, when many are in Specialist Registrar or GP Registrar posts, and some have recently qualified as GP Principals. The first mailing for this survey was completed in February 1999 and the bulk of replies were received during the following three months, with late replies arriving up to the end of 1999.

This report describes the main results from the third survey, focusing on the current employment, career choices and demographics of the respondents. It also contains some information about their views and attitudes and future intentions. It is not intended as an analytical report and does not seek to relate data from this cohort with that obtained from other cohorts. It does however contain some description of trends over time in this cohort.

We expect this report to be of interest to medical workforce planners and policymakers, and researchers and others with an interest in medical careers.

## Methods

The study population comprised all doctors who qualified in medicine in the UK in 1993. Subjects were originally identified in early 1994 using medical school graduation lists provided by the General Medical Council (GMC). Both graduates in the summer of 1993 and the smaller numbers who qualified in the spring of 1994 were included, to ensure that the cohort comprised a complete year of medical school intake.

For this survey we continued to mail to the entire cohort of qualifiers, whether or not they had replied to our earlier two surveys. Only the small numbers who qualified in 1993 but had never registered with the GMC, or were known to be deceased, or who had indicated in a previous survey that they wished to remain non-participants were excluded. After an initial mailing, up to three reminder mailings were sent to non-responders.

The questionnaire used is reproduced at the end of this report. Career choices and posts undertaken were grouped into mainstream specialties based on those initially defined in the Todd Report. A complete list of specialties included in each broad group is reproduced as an appendix.

## Response

Table 1 shows the final response. Excluding those deceased, never registered and non-participants the response rate was 75.1% (2732/3639). Among women it was 81.2% (1383/1704) and among men it was 69.7% (1349/1935).

**Table 1: Response rate**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
No reply	586	30.0	321	18.7	907	24.7
Replied	1349	69.0	1383	80.5	2732	74.4
Deceased	5	.3	3	.2	8	.2
Not participating	9	.5	2	.1	11	.3
Never registered	5	.3	9	.5	14	.4
Total	1954	100.0	1718	100.0	3672	100.0

## Demographics

### Age

The 2694 respondents whose date of birth was known had a median age of 30 years at the end of September 1999. 75.3% were aged 30 or less (35.4% age 30, 35.5% age 29, 4.3% age 27 or 28) and 96.3% were 35 or less. The oldest respondents were aged 47 years.

### Marital status

Almost two-thirds of respondents were living with a spouse or partner, and almost one-third were single (Table 2). These proportions were very similar for men and women.

**Table 2: Marital status of respondents**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Living with spouse/partner	842	62.4	870	62.9	1712	62.7
Single	419	31.1	445	32.2	864	31.6
Widowed/Divorced/Separated	25	1.9	25	1.8	50	1.8
Blank	63	4.7	43	3.1	106	3.9
Total	1349	100.0	1383	100.0	2732	100.0

### Children

Three-quarters of respondents did not have children, and this proportion was similar for men and women (Table 3).

**Table 3: Numbers of children of respondents**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
0	1008	74.7	1081	78.2	2089	76.5
1	175	13.0	168	12.1	343	12.6
2	86	6.4	76	5.5	162	5.9
3	13	1.0	13	.9	26	1.0
4	2	.1	1	.1	3	.1
5	2	.1	1	.1	3	.1
Not given	63	4.7	43	3.1	106	3.9
Total	1349	100.0	1383	100.0	2732	100.0

Of the 537 respondents with children, 399 had a youngest child under two years of age, and 510 had a youngest child who was pre-school (i.e. under 5 years of age).

Respondents were asked if they had adult dependants who might affect their ability to pursue their chosen career; 21 did so (0.8% of respondents).

## *Ethnicity*

Concerns that an ethnicity question might have a low completion rate were not realised; 2.6% non-response is lower than for the question about marital status. Non-white respondents comprised 16.6%, with Indians being the largest component (6.0%), followed by Chinese (3.5%).

**Table 4: Ethnicity of respondents**

	Count	Col %
White	2208	80.8
Indian	164	6.0
Pakistani	43	1.6
Bangladeshi	12	.4
Chinese	95	3.5
Asian - other	47	1.7
Black Caribbean	8	.3
Black African	7	.3
Black - other	3	.1
Other	75	2.7
Blank	70	2.6
Total	2732	100.0

## Current employment in 1998

### *Occupation group*

Table 5 gives a breakdown of the main posts held by respondents at the end of September 1998, five years after graduation. As in previous surveys the posts have been summarised in occupation groups whose descriptions should be largely self-explanatory. The distinction between UK University and NHS posts has been made on the basis of the grade of the post as described to us by the respondents. Posts described in academic terms have been assigned to the 'UK Medical Universities' group. However many of these posts carry honorary contracts and may involve NHS service work.

Respondents who did not give details of their employment in September 1998 have been excluded from the table.

Overall 87.8% of respondents (89.7% of men, 85.8% of women) were working in the NHS/University sector. Male-female differences are evident in the percentages working in UK universities (more of the men), HM Forces (more of the men) and in those not in paid employment (more of the women).

**Table 5: Occupation group of respondents in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
UK Medical, fully NHS funded	982	78.1	1052	80.2	2034	79.2
UK Medical Universities	146	11.6	74	5.6	220	8.6
HM Forces	24	1.9	8	.6	32	1.2
UK Other Public Sector	2	.2	1	.1	3	.1
UK Medical Private Sector	7	.6	10	.8	17	.7
UK Non-Medical	6	.5	3	.2	9	.4
UK Not in Paid Employment	14	1.1	76	5.8	90	3.5
Abroad Medical	72	5.7	76	5.8	148	5.8
Abroad Non-Medical			1	.1	1	.0
Abroad Not in Paid Employment	4	.3	11	.8	15	.6
Total	1257	100.0	1312	100.0	2569	100.0

### *Specialties*

By five years after qualification a large majority of doctors are working in their long-term career specialty. Table 6 shows the breakdown by mainstream specialty grouping of the respondents who were working in the NHS/University sector in September 1998. The largest percentage (27%) was in general practice, followed by the hospital medical specialties (18.4%) and the surgical specialties including general surgery (14.1%). Sex differences were most notable in the percentages working in surgery and general practice.

**Table 6: Mainstream specialties of respondents in the NHS and UK Universities in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specs.	239	21.2	175	15.5	414	18.4
Paediatrics	69	6.1	107	9.5	176	7.8
Accident & Emergency	24	2.1	25	2.2	49	2.2
General surgery	46	4.1	16	1.4	62	2.8
Other Surgical Specialty	197	17.5	57	5.1	254	11.3
Obstetrics & Gynaec.	41	3.6	75	6.7	116	5.1
Anaesthetics	127	11.3	97	8.6	224	9.9
Radiology	19	1.7	28	2.5	47	2.1
Clinical Oncology	19	1.7	31	2.8	50	2.2
Pathology	20	1.8	34	3.0	54	2.4
Psychiatry	67	5.9	82	7.3	149	6.6
General Practice	240	21.3	369	32.8	609	27.0
Community Medicine	3	.3	9	.8	12	.5
Public Health Medicine	8	.7	10	.9	18	.8
Other Medical Spec.	4	.4	4	.4	8	.4
Two or more specialties	5	.4	7	.6	12	.5
Total	1128	100.0	1126	100.0	2254	100.0

Table 7 shows the same breakdown by mainstream specialty for the 148 doctors working abroad. Among these general practice was a less common career destination than among home-based respondents. This may reflect different patterns of medical practice abroad as much as real differences in career choices and career paths.

**Table 7: Mainstream specialties of respondents in medicine abroad in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specs.	21	29.2	20	26.3	41	27.7
Paediatrics	4	5.6	12	15.8	16	10.8
Accident & Emergency	7	9.7	7	9.2	14	9.5
General surgery	1	1.4	1	1.3	2	1.4
Other Surgical Specialty	4	5.6	3	3.9	7	4.7
Obstetrics & Gynaec.	2	2.8	4	5.3	6	4.1
Anaesthetics	8	11.1	5	6.6	13	8.8
Clinical Oncology	2	2.8			2	1.4
Pathology	4	5.6			4	2.7
Psychiatry	4	5.6	6	7.9	10	6.8
General Practice	12	16.7	10	13.2	22	14.9
Community Medicine			1	1.3	1	.7
Other Medical Spec.	3	4.2	5	6.6	8	5.4
Two or more specialties			2	2.6	2	1.4
Total	72	100.0	76	100.0	148	100.0

## Grades

These respondents were at a transitional stage in their career progression, as evidenced by Table 8 which shows the breakdown by grade of those respondents working in the NHS/University sector in September 1998.

In the hospital sector specialist registrars (27.4% of the total) and senior house officers (27.8%) were the vast majority; there were also substantial percentages of research fellows (6.7%) and research registrars (2.8%). Among those in general practice locums were (perhaps surprisingly) the largest group (9.5% of the total) with registrars being the next largest group (8.1%), and slightly smaller numbers of principals (7.2%) and assistants (2.0%).

The male-female difference in the percentage in the UK universities was reflected in the smaller percentage of the women in the research registrar and research fellow grades. In general practice, women were under-represented among principals. Although 7.5% of women and 7.0% of men were principals, this represents only 23% of women respondents in general practice but 33% of men respondents in general practice.

**Table 8: Grades of respondents in the NHS and UK Universities in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Staff Grade	9	.8	17	1.5	26	1.2
Specialist Registrar	322	28.6	295	26.2	617	27.4
SHO	320	28.4	307	27.3	627	27.8
Clinical Assistant	1	.1	5	.4	6	.3
Other Hospital Grades	54	4.8	37	3.3	91	4.0
Public Health Medicine (All Grades)	8	.7	9	.8	17	.8
Community Health (All Grades)	3	.3	9	.8	12	.5
Research Registrar	41	3.6	21	1.9	62	2.8
Research Fellow	107	9.5	44	3.9	151	6.7
Other Academic Grades	9	.8	10	.9	19	.8
GP Principal	79	7.0	84	7.5	163	7.2
GP Registrar	67	5.9	115	10.2	182	8.1
GP Assistant	12	1.1	32	2.8	44	2.0
GP Locum	80	7.1	133	11.8	213	9.5
GP Retainee			5	.4	5	.2
Other Grades / Unspecified	15	1.3	3	.3	18	.8
Total	1127	100.0	1126	100.0	2253	100.0

## Full-time and part-time working in medicine

Tables 9a – 9d show the percentage of respondents working full-time and part-time in their main post in September 1998, for all NHS, NHS hospital, NHS general practice, and UK University posts respectively.

Part-time working was much more common in general practice than in the hospital specialties; almost all those in UK universities were working full-time. Higher percentages of women than men were working part-time in each sector. However, even in general practice most women were working full-time.

**Table 9a: Working patterns of respondents in the NHS in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Whole-time	920	93.8	850	80.8	1770	87.1
Part-time/flexible	61	6.2	202	19.2	263	12.9
Total	981	100.0	1052	100.0	2033	100.0

**Table 9b: Working patterns of respondents in hospital specialties in the NHS in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Whole-time	714	97.4	610	91.6	1324	94.6
Part-time/flexible	19	2.6	56	8.4	75	5.4
Total	733	100.0	666	100.0	1399	100.0

**Table 9c: Working patterns of respondents in general practice in the NHS in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Whole-time	196	82.7	229	62.1	425	70.1
Part-time/flexible	41	17.3	140	37.9	181	29.9
Total	237	100.0	369	100.0	606	100.0

**Table 9d: Working patterns of respondents in UK universities in September 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Whole-time	144	99.3	70	95.9	214	98.2
Part-time/flexible	1	.7	3	4.1	4	1.8
Total	145	100.0	73	100.0	218	100.0

## Employment trends

Figures 1,2 and 3 show the percentage breakdown of respondents by occupation group in each year from 1994 to 1998, for men, women and all respondents respectively. The percentages are based on all respondents with known employment details in the year in question. The employment of respondents has been subdivided into five groups:

1. NHS
2. UK universities – medical posts in UK universities
3. Other UK medical – including non-NHS public sector, private sector medicine and UK Armed Forces
4. Abroad medical
5. Non-medical or not in paid work – UK and abroad

Note that the figures have a ‘false origin’ of 70% on the y-axis.

Overall (Figure 3), the NHS percentage falls with time and there is growth in the university and non-medical/not in paid work categories. Comparing men and women (Figures 1 and 2), there is a higher

percentage of men than women in UK university employment, and a higher percentage of women than men in the non-medical/not in paid work category.

For respondents who were working in the NHS, Figures 4, 5 and 6 show the percentages occupying each main grade in each year from 1994 to 1998. Overall (Figure 6), the percentage of NHS respondents who were SHOs fell from over 90% in 1994 to approximately 30% by 1998, as large numbers moved into the Specialist Registrar grade or into vocational training for general practice. Comparing men and women (Figures 4 and 5), there were larger percentages of women than men in GP training and in GP locum posts.

Figure 1: Occupation groups of 1993 graduates 1994-8, men respondents

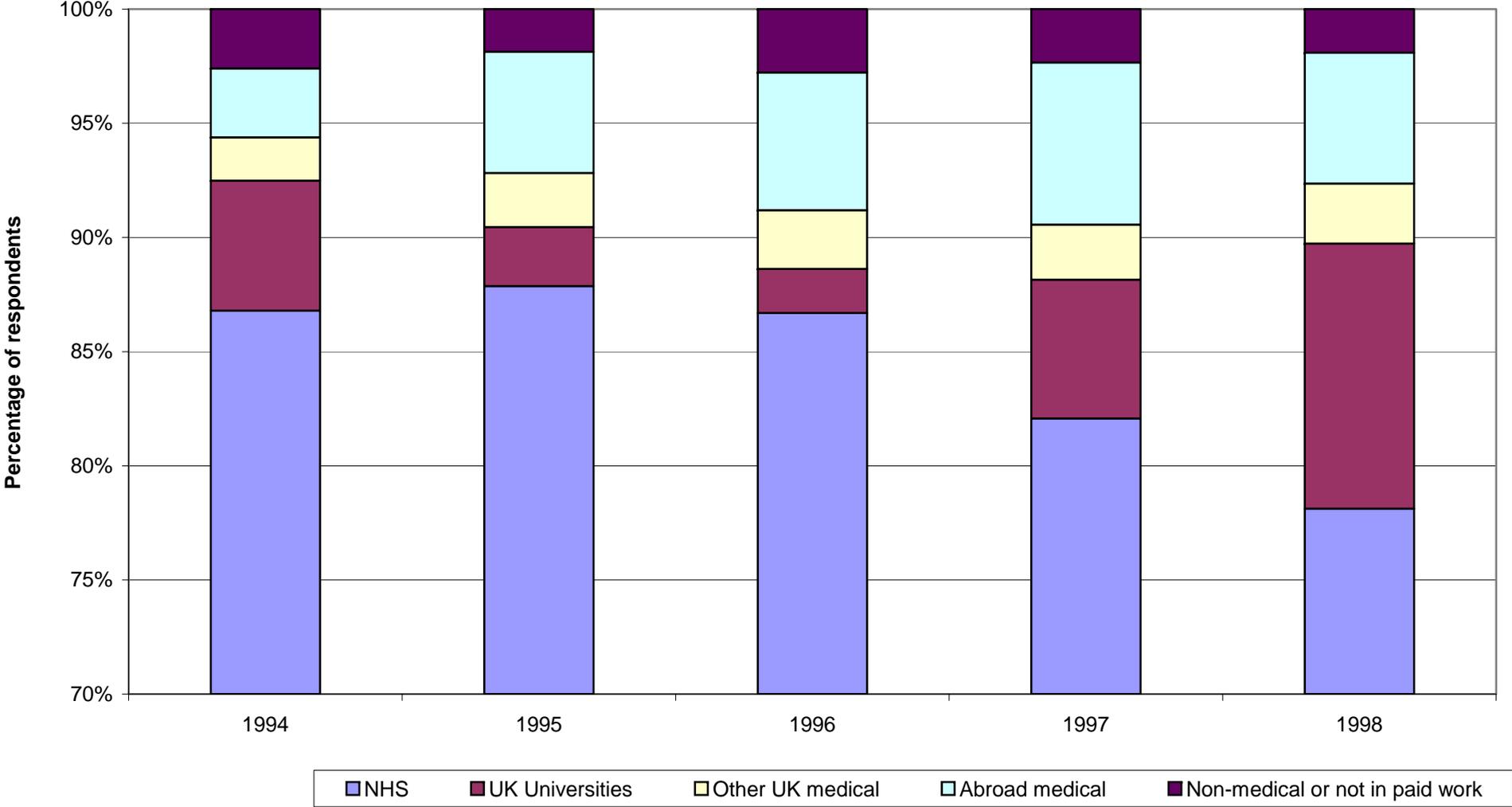


Figure 2: Occupation groups of 1993 graduates 1994-8, women respondents

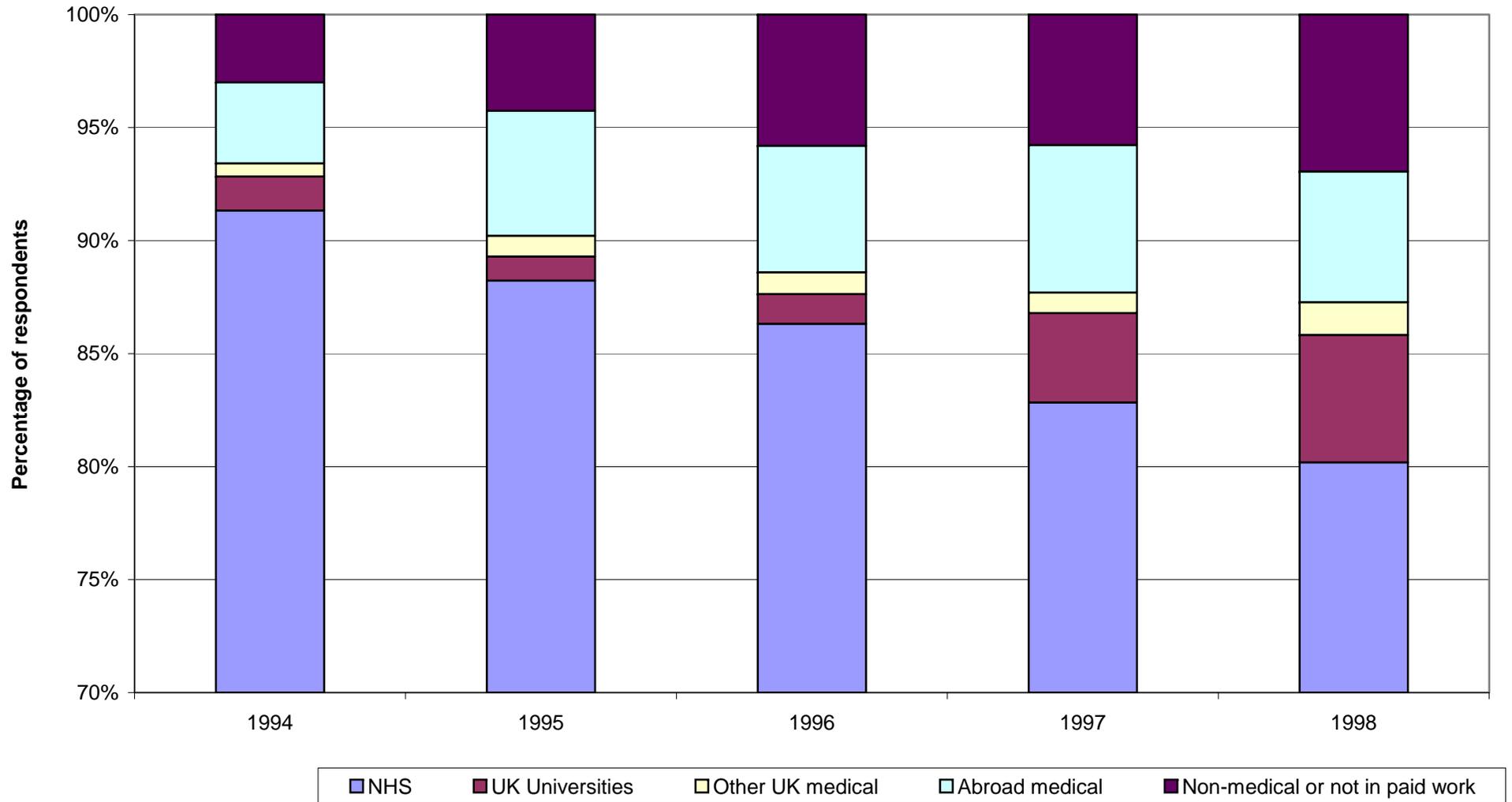


Figure 3: Occupation groups of 1993 graduates 1994-8, all respondents

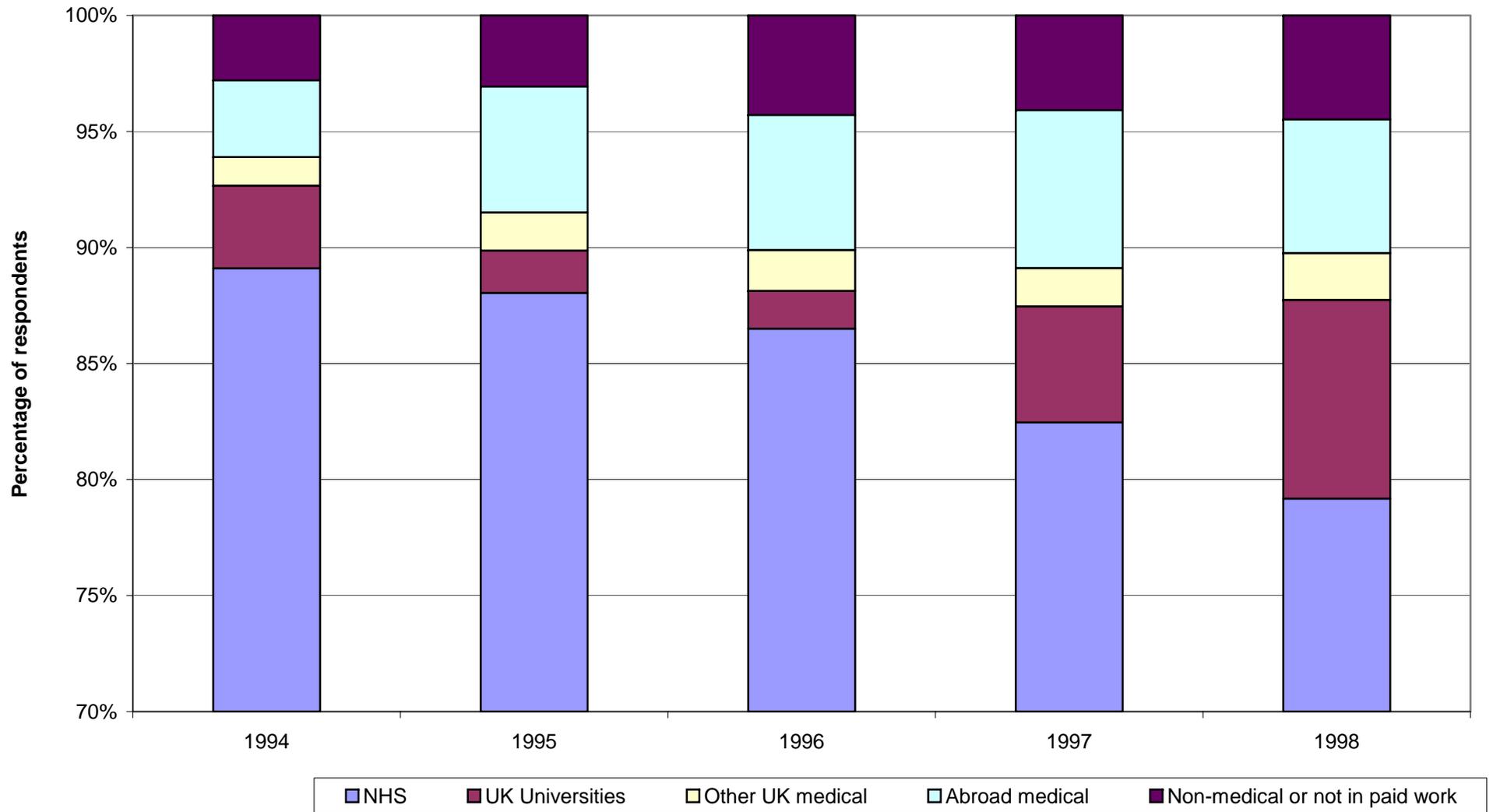


Figure 4: Grades of 1993 graduates working in the NHS in 1994-8, men respondents

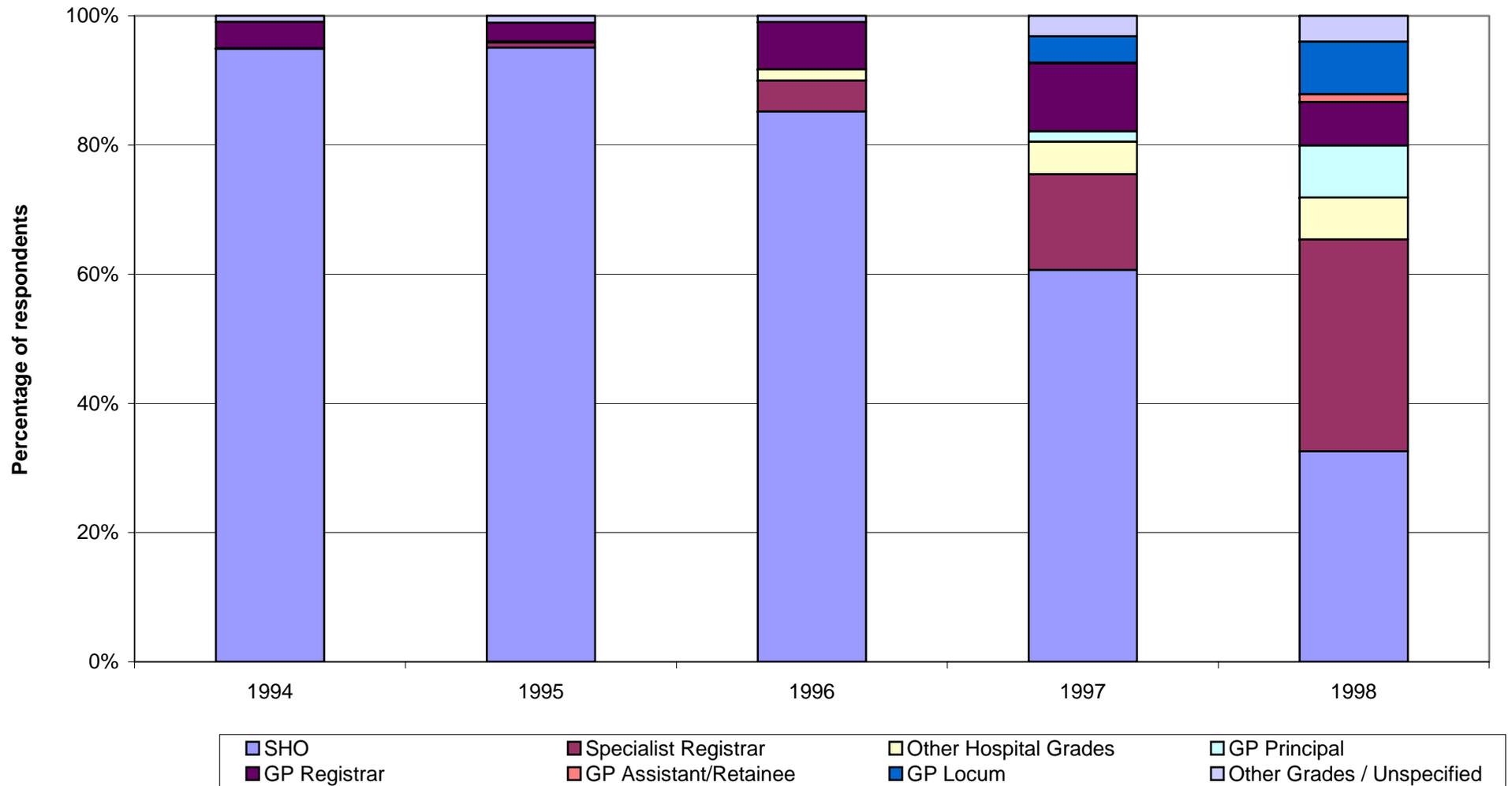


Figure 5: Grades of 1993 graduates working in the NHS in 1994-8, women respondents

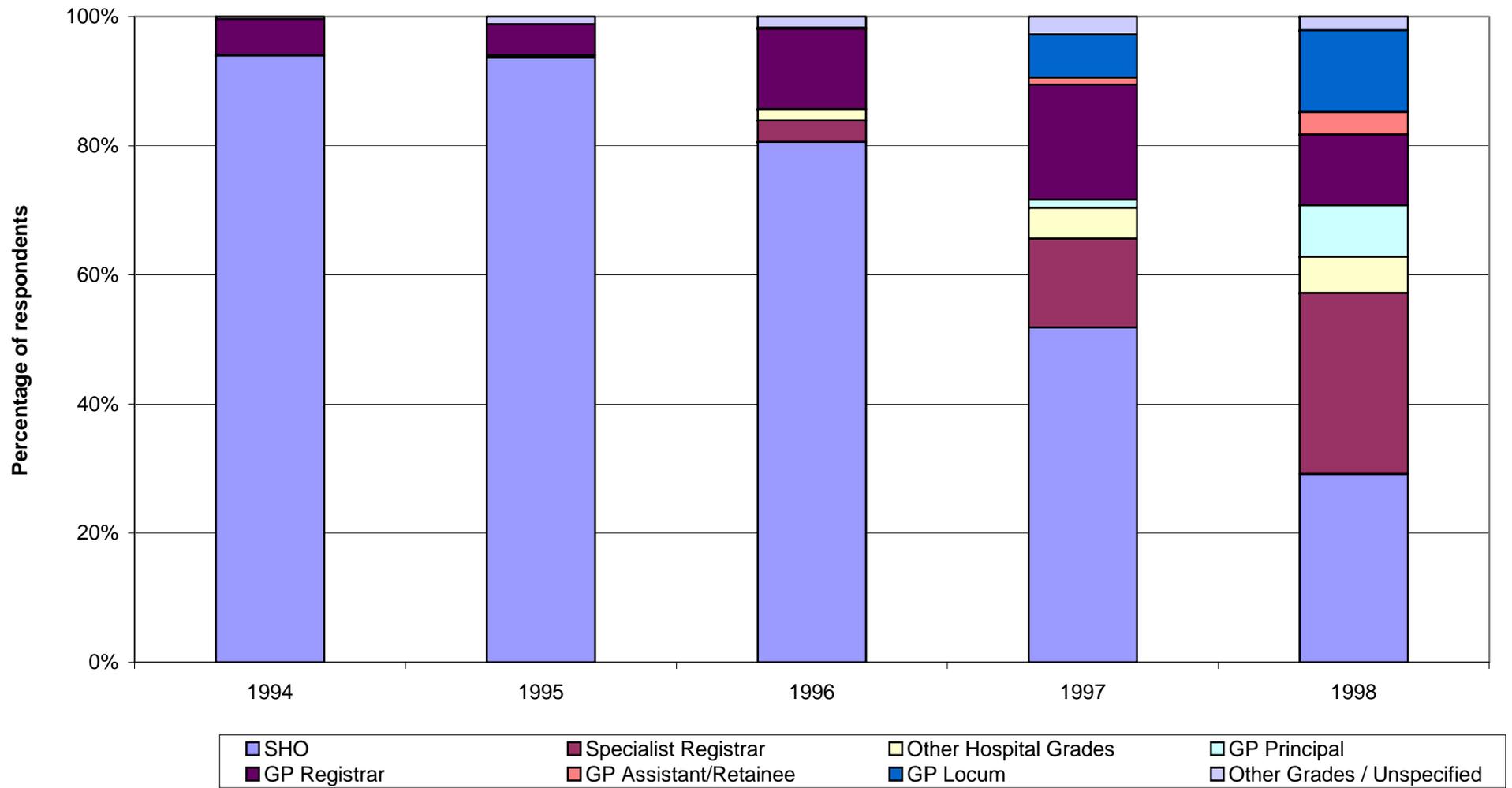
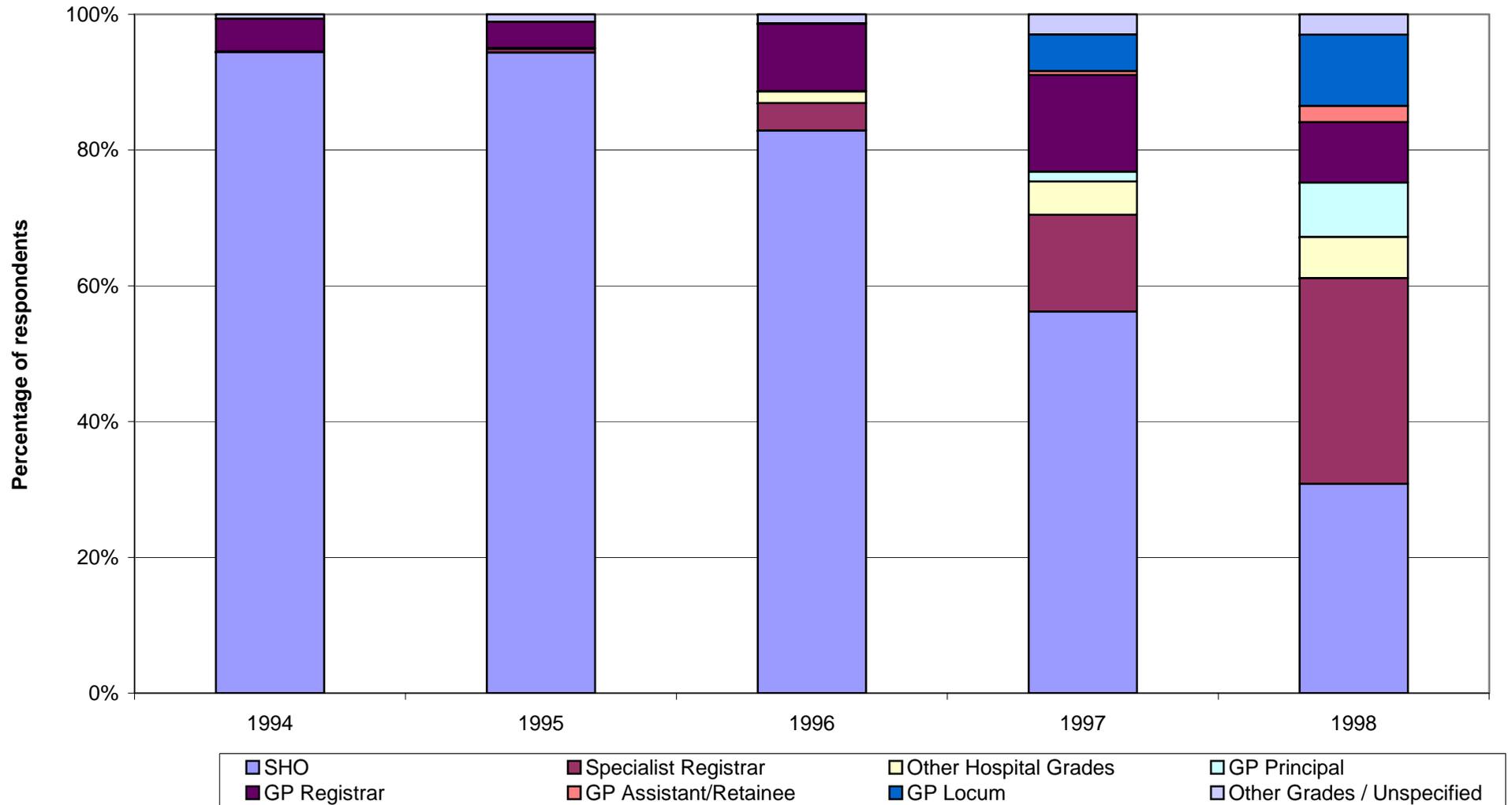


Figure 6: Grades of 1993 graduates working in the NHS in 1994-8, all respondents



## Career choices in 1998

These respondents, five years after graduation, were reasonably sure of their long-term career choice, with 89.6% describing their career choice as a 'definite' or 'probable' choice (Table 10). Women were less sure than men of their choices, with 54.4% of women and 64.2% of men describing their career choice as definite.

**Table 10: Firmness of career choice in 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Definitely	866	64.2	753	54.4	1619	59.3
Probably	355	26.3	473	34.2	828	30.3
Not really	62	4.6	107	7.7	169	6.2
Not given	66	4.9	50	3.6	116	4.2
Total	1349	100.0	1383	100.0	2732	100.0

Tables 11a-c show the first, second and third choices of career expressed by the respondents, with choices grouped into mainstream specialties. Most respondents expressed only a first choice. The first choices in percentage terms largely reflect the current areas of work (Tables 6 and 7), with the exception that in general practice there were substantially more choices than the numbers currently working in that specialty.

**Table 11a: First choices of long-term career in 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specs.	238	18.8	203	15.4	441	17.0
Paediatrics	57	4.5	87	6.6	144	5.6
Accident & Emergency	44	3.5	34	2.6	78	3.0
General surgery	34	2.7	11	.8	45	1.7
Other Surgical Specialty	229	18.0	56	4.2	285	11.0
Obstetrics & Gynaec.	34	2.7	52	3.9	86	3.3
Anaesthetics	135	10.6	97	7.3	232	9.0
Radiology	34	2.7	29	2.2	63	2.4
Clinical Oncology	23	1.8	30	2.3	53	2.0
Pathology	21	1.7	37	2.8	58	2.2
Psychiatry	58	4.6	78	5.9	136	5.2
General Practice	315	24.8	534	40.4	849	32.8
Community Medicine	3	.2	20	1.5	23	.9
Public Health Medicine	8	.6	13	1.0	21	.8
Other Medical Spec.	19	1.5	23	1.7	42	1.6
Non-Medical	17	1.3	15	1.1	32	1.2
Not in Paid Employment	0	.0	3	.2	3	.1
Total	1269	100.0	1322	100.0	2591	100.0

**Table 11b: Second choices of long-term career in 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specs.	121	26.9	130	26.9	251	26.9
Paediatrics	23	5.1	38	7.9	61	6.5
Accident & Emergency	20	4.4	20	4.1	40	4.3
General surgery	4	.9	2	.4	6	.6
Other Surgical Specialty	45	10.0	8	1.7	53	5.7
Obstetrics & Gynaec.	3	.7	9	1.9	12	1.3
Anaesthetics	34	7.6	13	2.7	47	5.0
Radiology	8	1.8	1	.2	9	1.0
Clinical Oncology	4	.9	6	1.2	10	1.1
Pathology	6	1.3	7	1.4	13	1.4
Psychiatry	22	4.9	39	8.1	61	6.5
General Practice	54	12.0	82	16.9	136	14.6
Community Medicine	4	.9	30	6.2	34	3.6
Public Health Medicine	13	2.9	16	3.3	29	3.1
Other Medical Spec.	51	11.3	43	8.9	94	10.1
Non-Medical	37	8.2	37	7.6	74	7.9
Not in Paid Employment	1	.2	3	.6	4	.4
Total	450	100.0	484	100.0	934	100.0

**Table 11c: Third choices of long-term career in 1998**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specs.	26	17.6	25	17.2	51	17.4
Paediatrics	3	2.0	6	4.1	9	3.1
Accident & Emergency	10	6.8	6	4.1	16	5.5
General surgery	3	2.0	1	.7	4	1.4
Other Surgical Specialty	7	4.7	2	1.4	9	3.1
Obstetrics & Gynaec.	1	.7	0	.0	1	.3
Anaesthetics	6	4.1	2	1.4	8	2.7
Radiology	3	2.0	2	1.4	5	1.7
Clinical Oncology	1	.7	1	.7	2	.7
Psychiatry	6	4.1	7	4.8	13	4.4
General Practice	25	16.9	31	21.4	56	19.1
Community Medicine	0	.0	11	7.6	11	3.8
Public Health Medicine	5	3.4	9	6.2	14	4.8
Other Medical Spec.	20	13.5	14	9.7	34	11.6
Non-Medical	32	21.6	27	18.6	59	20.1
Not in Paid Employment	0	.0	1	.7	1	.3
Total	148	100.0	145	100.0	293	100.0

Table 12 shows the percentages of those choosing each mainstream specialty who were expressing a definite, probable or uncertain choice. There was considerable variation by specialty, with surgical choices being the most definite.

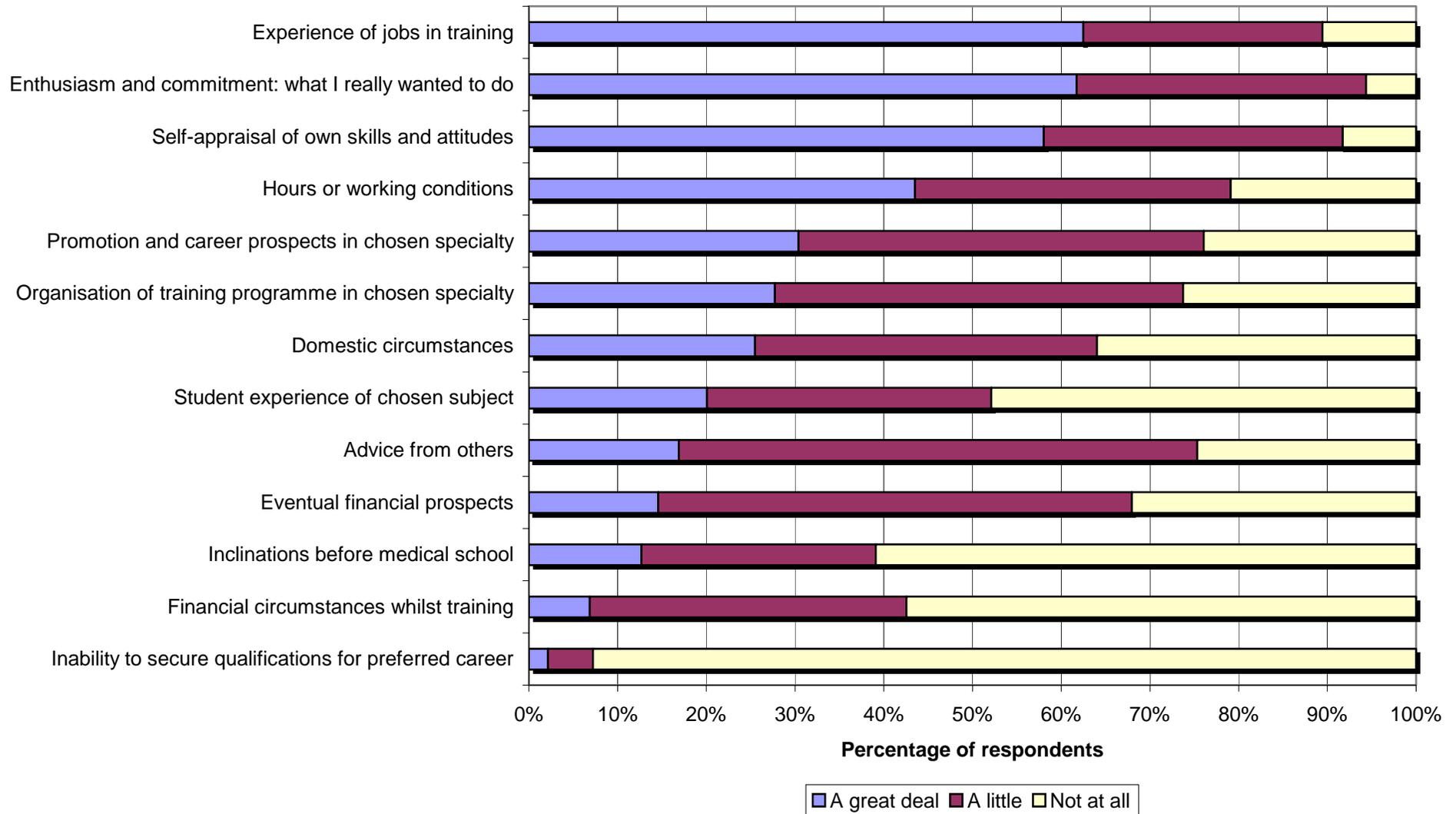
**Table 12: Percentages of those choosing each mainstream as their first choice of long-term career, whose choice was definite, probable or not really definite in 1998**

	Definitely	Probably	Not really	N (100%)
Medical Specs.	60%	32%	8%	439
Paediatrics	46%	51%	3%	144
Accident & Emergency	57%	30%	13%	77
General surgery	82%	18%	0%	45
Other Surgical Specialty	82%	17%	1%	285
Obstetrics & Gynaec.	77%	21%	2%	86
Anaesthetics	66%	30%	4%	231
Radiology	71%	27%	2%	63
Clinical Oncology	62%	32%	6%	53
Pathology	55%	41%	3%	58
Psychiatry	51%	44%	5%	136
General Practice	63%	31%	5%	845
Community Medicine	43%	43%	13%	23
Public Health Medicine	38%	57%	5%	21
Other Medical Spec.	21%	60%	19%	42
Non-Medical	23%	48%	29%	31
Not in Paid Employment	33%	33%	33%	3
Total	62%	32%	6%	2582

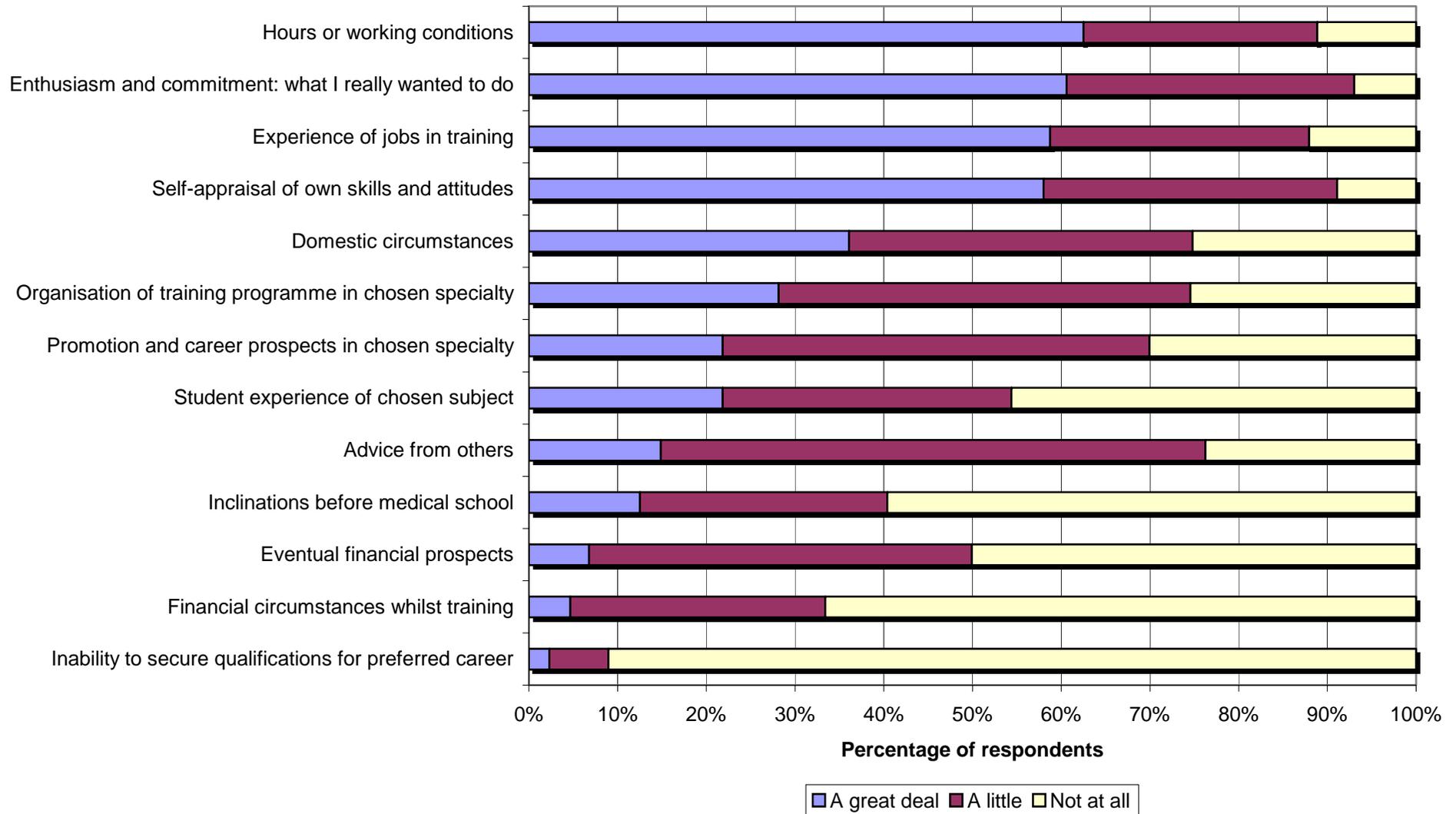
## Factors affecting career choices

Figures 7, 8 and 9 summarise the degree to which each of 13 factors affected the career choice of respondents. Overall, enthusiasm and commitment, experience of jobs in training, self-appraisal and hours or working conditions had the most effect on career choices, and financial factors and inability to secure qualifications had the least (see Figure 9). Hours or working conditions and domestic circumstances were more significant for women than for men; otherwise, the results for men and women were very similar.

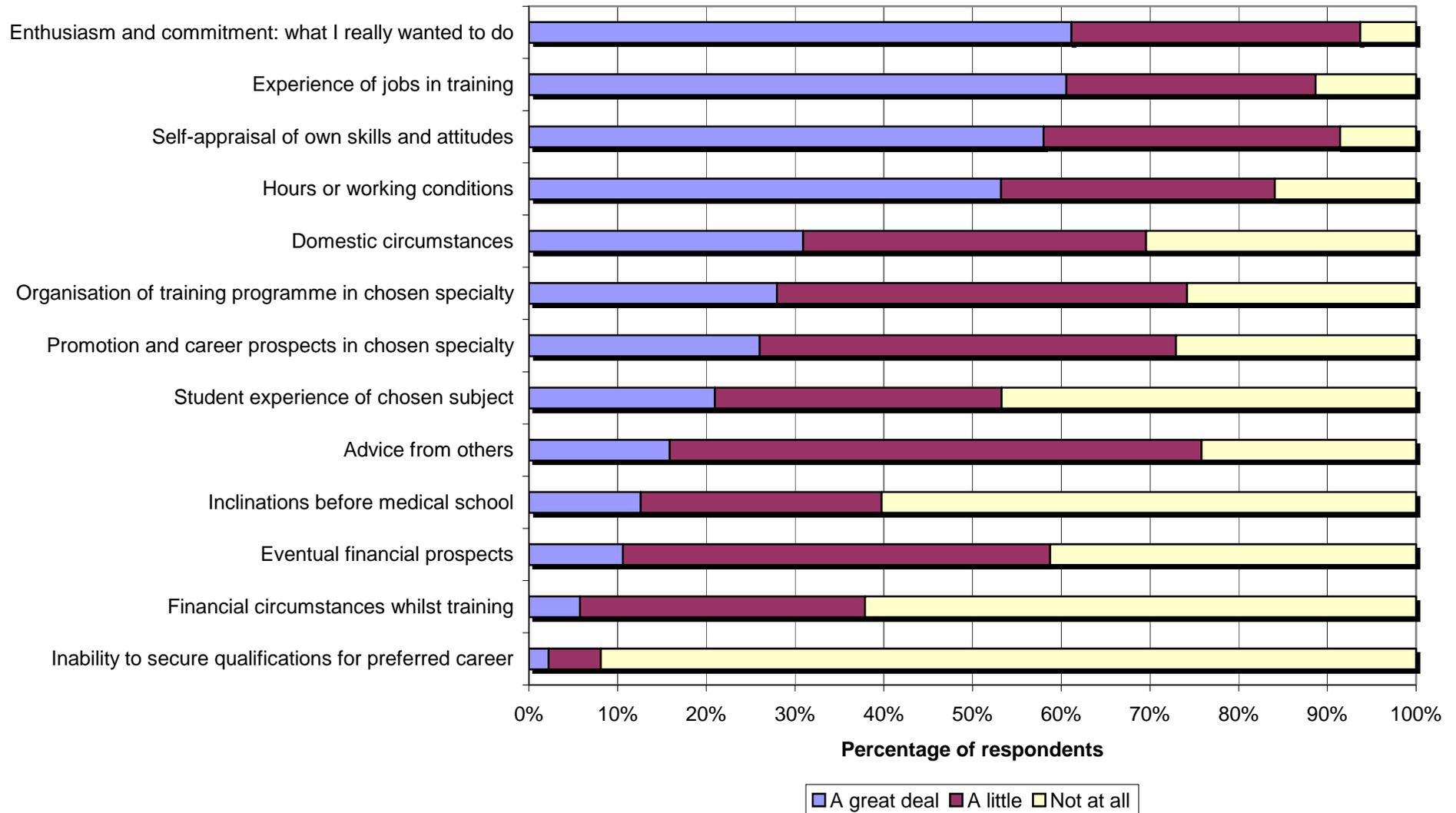
**Figure 7: Factors affecting career choice a great deal, a little, or not at all - Men**



**Figure 8: Factors affecting career choice a great deal, a little, or not at all - Women**



**Figure 9: Factors affecting career choice a great deal, a little, or not at all - All respondents**



## Intentions to practice in the United Kingdom

A large majority (81.4%) of respondents definitely or probably intended to practise medicine in the UK for the foreseeable future (Table 13), with 7.8% undecided and 6.6% definitely or probably not intending to do so. There was no appreciable sex difference.

**Table 13: Intentions of respondents to practise medicine in the UK for the foreseeable future**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Yes-definitely	686	50.9	747	54.0	1433	52.5
Yes-probably	410	30.4	380	27.5	790	28.9
Undecided	102	7.6	111	8.0	213	7.8
No-probably not	51	3.8	63	4.6	114	4.2
No-definitely not	33	2.4	32	2.3	65	2.4
Blank	67	5.0	50	3.6	117	4.3
Total	1349	100.0	1383	100.0	2732	100.0

Table 14 shows the alternative intentions expressed by those who did not definitely intend to practise in the UK. The three categories in Table 14 were not mutually exclusive. 33.5% of respondents would consider practising medicine abroad, 9.1% leaving medicine but remaining in the UK, and 2.8% leaving medicine and the UK.

**Table 14: Percentages of respondents considering different alternatives to UK medicine**

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Practising medicine abroad	477	35.4%	439	31.7%	916	33.5%
Leaving medicine, remaining in UK	113	8.4%	136	9.8%	249	9.1%
Leaving medicine and UK	35	2.6%	42	3.0%	77	2.8%
Total	1349	100.0%	1383	100.0%	2732	100.0%

## Postgraduate qualifications

Respondents were asked to list their postgraduate qualifications. Tables 15a and 15b show the number of respondents holding each qualification mentioned.

**Table 15a : Postgraduate qualifications held - First part**

Advanced Cardiac Life Support	68
Advanced Trauma Life Support	115
Bachelor of Arts, Bachelor of Science, Master of Arts	36
Dipl Medical Radiodiagnosis,Dipl Medical Radiotherapy	2
Dipl Royal College of Obstetricians & Gynaecologists	523
Diploma in Anaesthetics	18
Diploma in Aviation Medicine	1
Diploma in Child & Community Health	6
Diploma in Child Health	196
Diploma in Criminology	1
Diploma in Forensic Medicine	1
Diploma in Geriatric Medicine	38
Diploma in Immediate Medical Care, RCS Edinburgh	3
Diploma in Laryngology and Otology	1
Diploma in Medical Ethics	2
Diploma in Medical Jurisprudence	2
Diploma in Ophthalmology	1
Diploma in Psychological Medicine	1
Diploma in Public Dentistry	1
Diploma in Sports Medicine	2
Diploma in Tropical Medicine and Hygiene	47
Diploma of the Faculty of Occupational Medicine	1
Doctor of Medicine	5
Education Council for Foreign Medical Graduates	4
Family Planning Association Trng Cert,Dipl Family Planning	22
Family Planning Diploma	383
Family Planning qualification	3
Federal Licensing Examination	4
Fell Faculty of Anaesthetists, Royal Coll Surgeons (Final)	8
Fell Faculty of Anaesthetists, Royal Coll Surgeons (Primary)	7
Fell of the Royal Australian College of Physicians (Part 1)	1
Fell of the Royal Australian College of Physicians (Part 2)	2
Fell Royal Coll Surgeons Edinburgh Oral/ Maxillofacial Surg.	2
Fell Royal College of Surgeons Edinburgh (no subject given)	50
Fell Royal College of Surgeons Edinburgh Otorhinolaryngology	7
Fell Royal College of Surgeons England no subject given	182
Fell Royal College of Surgeons Glasgow Ear Nose & Throat	1
Fell Royal College of Surgeons Glasgow no subject given	16
Fell Royal College of Surgeons Glasgow Ophthalmology	1
Fell Royal College of Surgeons London General Surgery	6
Total	1770

**Table 15b : Postgraduate qualifications held - Second part**

Fell Royal College of Surgeons London Otolaryngology	6
Felle Royal College of Surgeons Edinburgh General Surgery	1
Fellow in Dental Surgery (Final)	2
Fellow of the Royal Australian College of Surgeons (Part 1)	1
Fellow of the Royal Australian College of Surgeons (Part 2)	1
Fellow of the Royal College of Anaesthetists (Final)	57
Fellow of the Royal College of Anaesthetists (Part 1)	177
Fellow of the Royal College of Anaesthetists (Part 2)	52
Fellow of the Royal College of Ophthalmologists	75
Fellow of the Royal College of Physicians	2
Fellow of the Royal College of Radiologists (Final)	3
Fellow of the Royal College of Radiologists (Part 1)	44
Fellow of the Royal College of Surgeons Dublin Part A	30
Fellow of the Royal College of Surgeons Edinburgh Pt 1	18
Fellow of the Royal College of Surgeons Edinburgh Pt 2	17
Fellow of the Royal College of Surgeons Final	4
Fellow of the Royal College of Surgeons Glasgow Part 1	12
Fellow of the Royal College of Surgeons London Part 1	195
Intrauterine Contraceptive Devices Certificate	4
Licentiate of the Faculty of Homeopathy	1
Master of Public Health	3
Master of Science	16
Memb Royal College of Obstetricians & Gynaecologists (Pt 1)	104
Memb Royal College of Obstetricians & Gynaecologists (Pt 2)	24
Member of the Faculty of Homeopathy	2
Member of the Faculty of Public Health Medicine	3
Member of the Royal College of General Practitioners	434
Member of the Royal College of Ophthalmologists	8
Member of the Royal College of Pathologists (Final)	2
Member of the Royal College of Pathologists (Part 1)	11
Member of the Royal College of Physicians (Part 1)	588
Member of the Royal College of Physicians (Part 2)	766
Member of the Royal College of Physicians of Ireland	15
Member of the Royal College of Psychiatrists	131
Non-medical diploma, degree etc. after leaving med school	18
Other American Boards	16
Other overseas qualification	23
Other UK qual	155
Total	3021

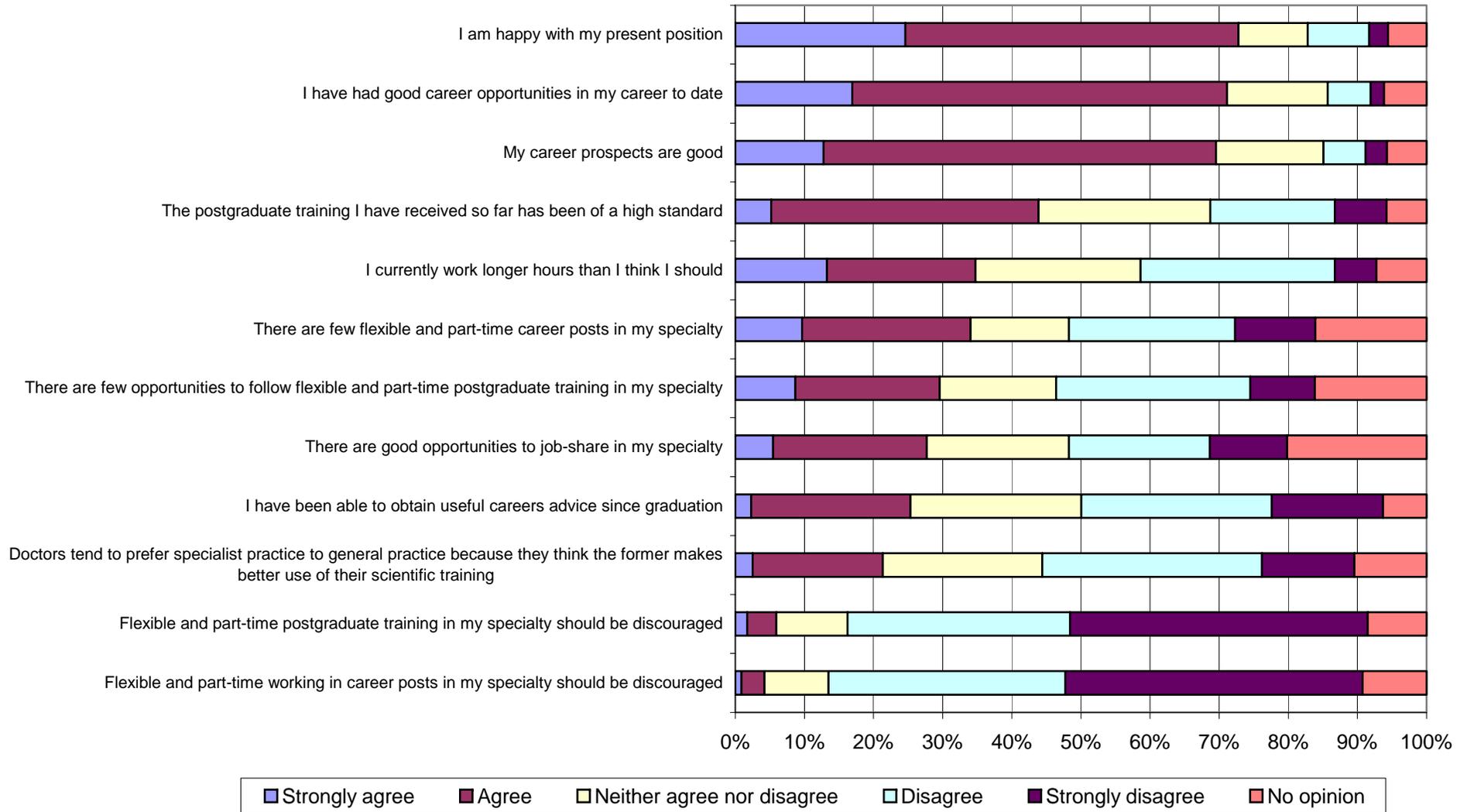
## Views and attitudes

### *Medical careers in general*

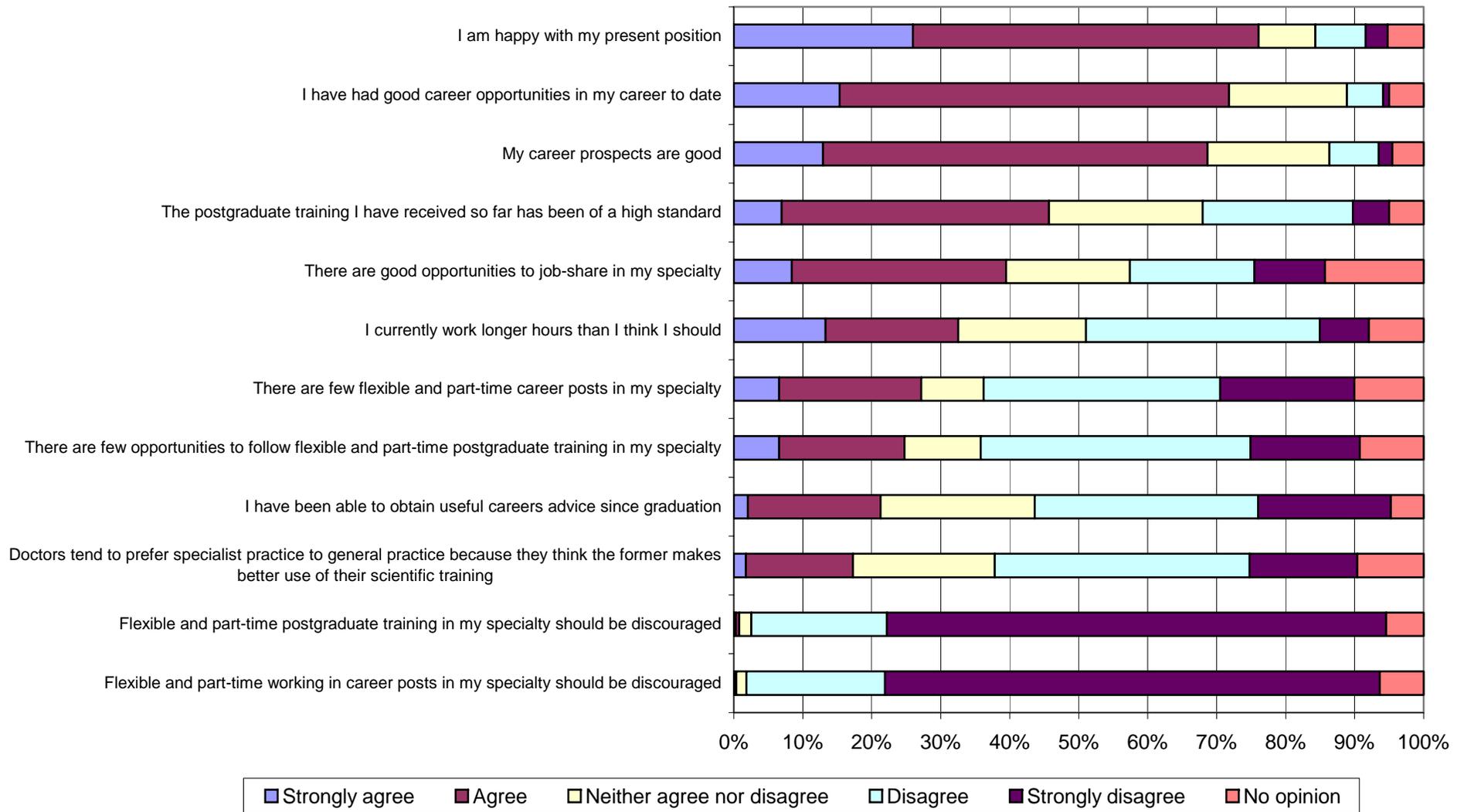
Figures 10, 11 and 12 show, for men, women and all respondents respectively, the percentages of respondents who scored each of twelve statements about medical careers with *strongly agree*, *agree*, *neither agree nor disagree*, *disagree*, *strongly disagree*, or *no opinion*. The statements have been ordered from top to bottom in each figure in declining value for the total of the *strongly agree* and *agree* percentages.

The majority were happy with their present position, their career opportunities to date, and their career prospects (Figure 12). Almost half agreed that their postgraduate training had been of a high standard. Approximately a third thought their hours were excessive and less than a quarter had been able to find useful careers advice since graduation. Very few agreed with the proposition that flexible and part-time training and career posts should be discouraged; a little over a quarter felt that there were few flexible and part-time posts available. Men and women held very similar views (Figures 10 and 11) on most of the topics, with women disagreeing more strongly with the proposition that flexible and part-time working and training should be discouraged.

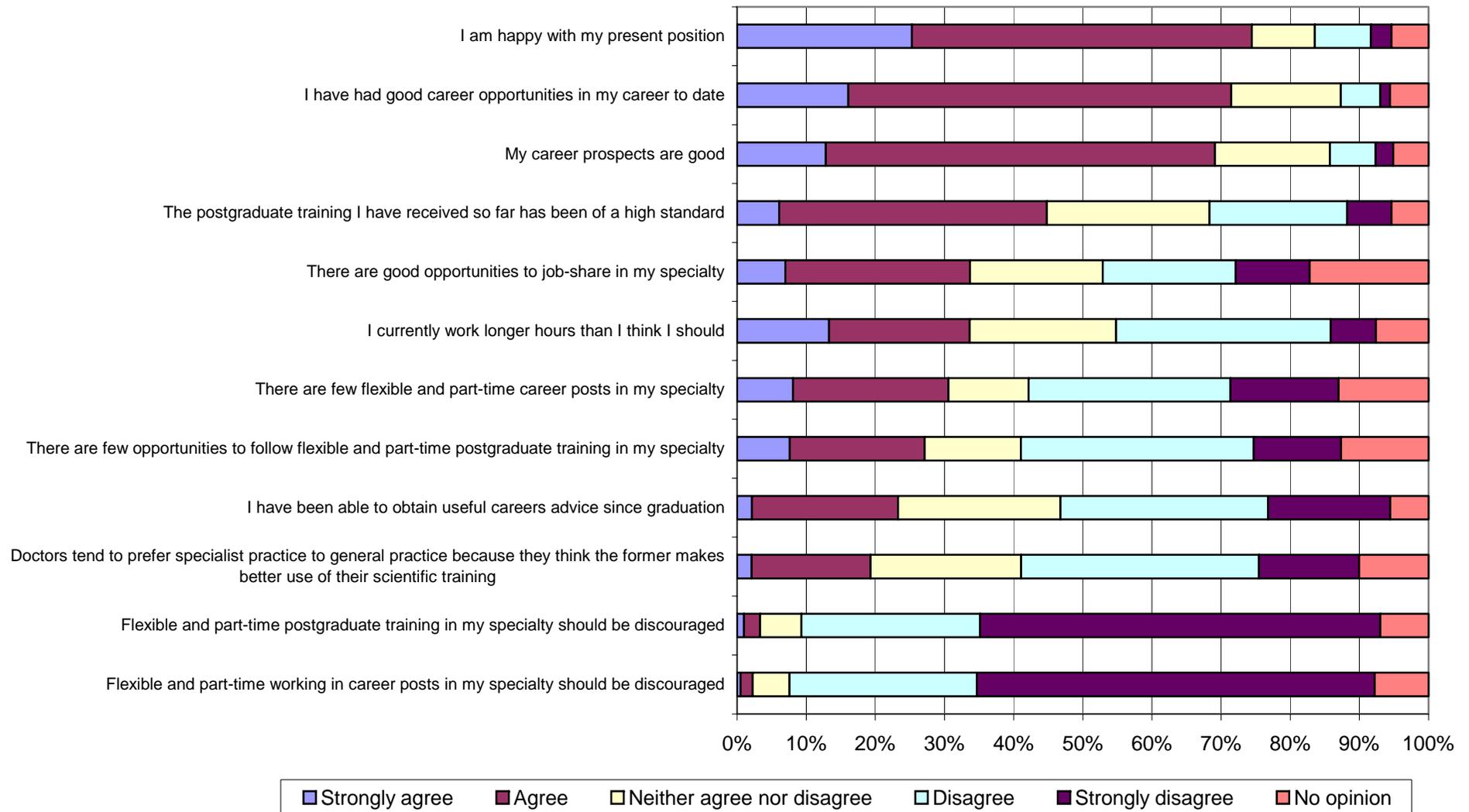
**Figure 10: Views on medical careers in general - Men**



**Figure 11: Views on medical careers in general - Women**



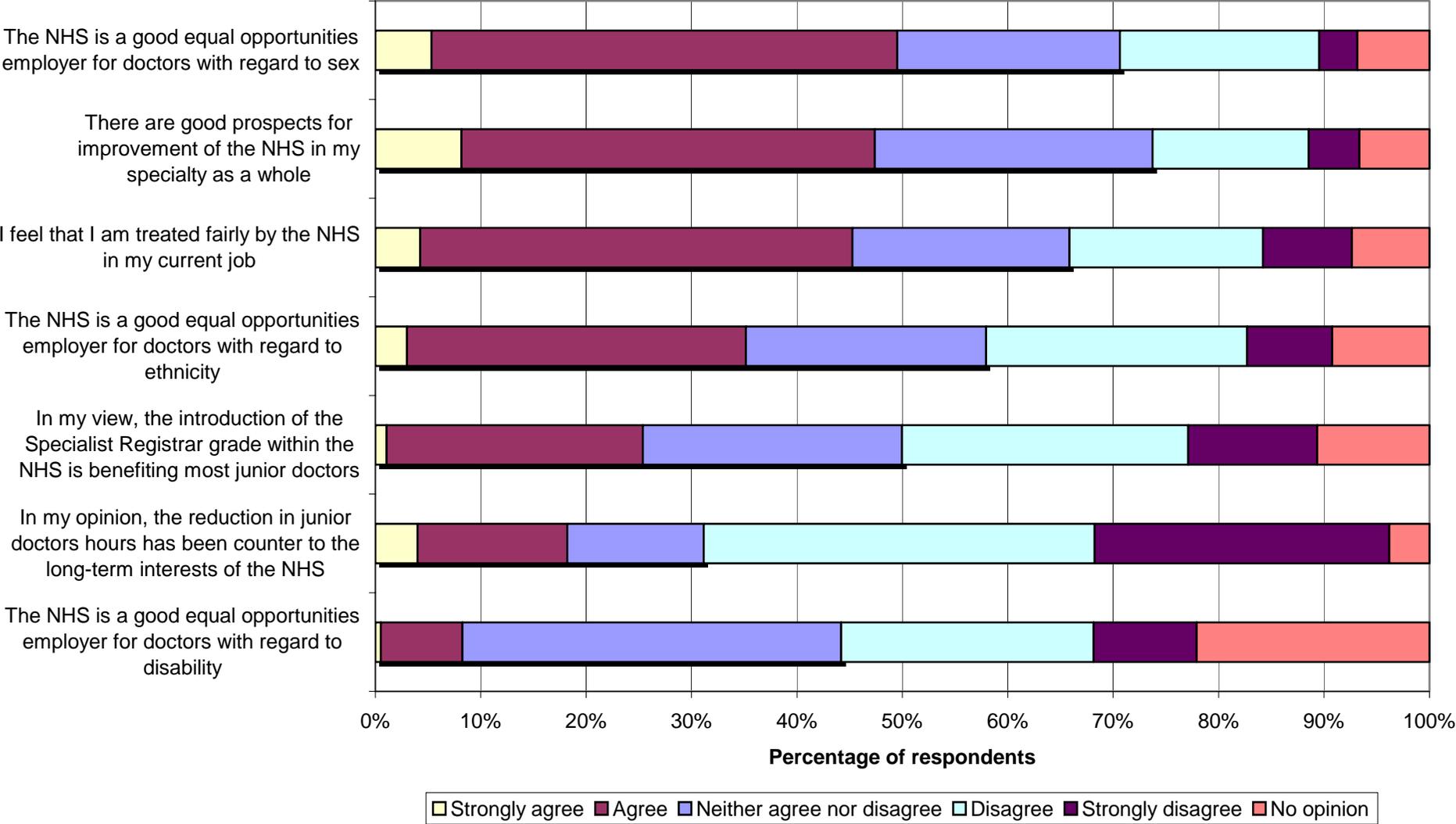
**Figure 12: Views on medical careers in general - All respondents**



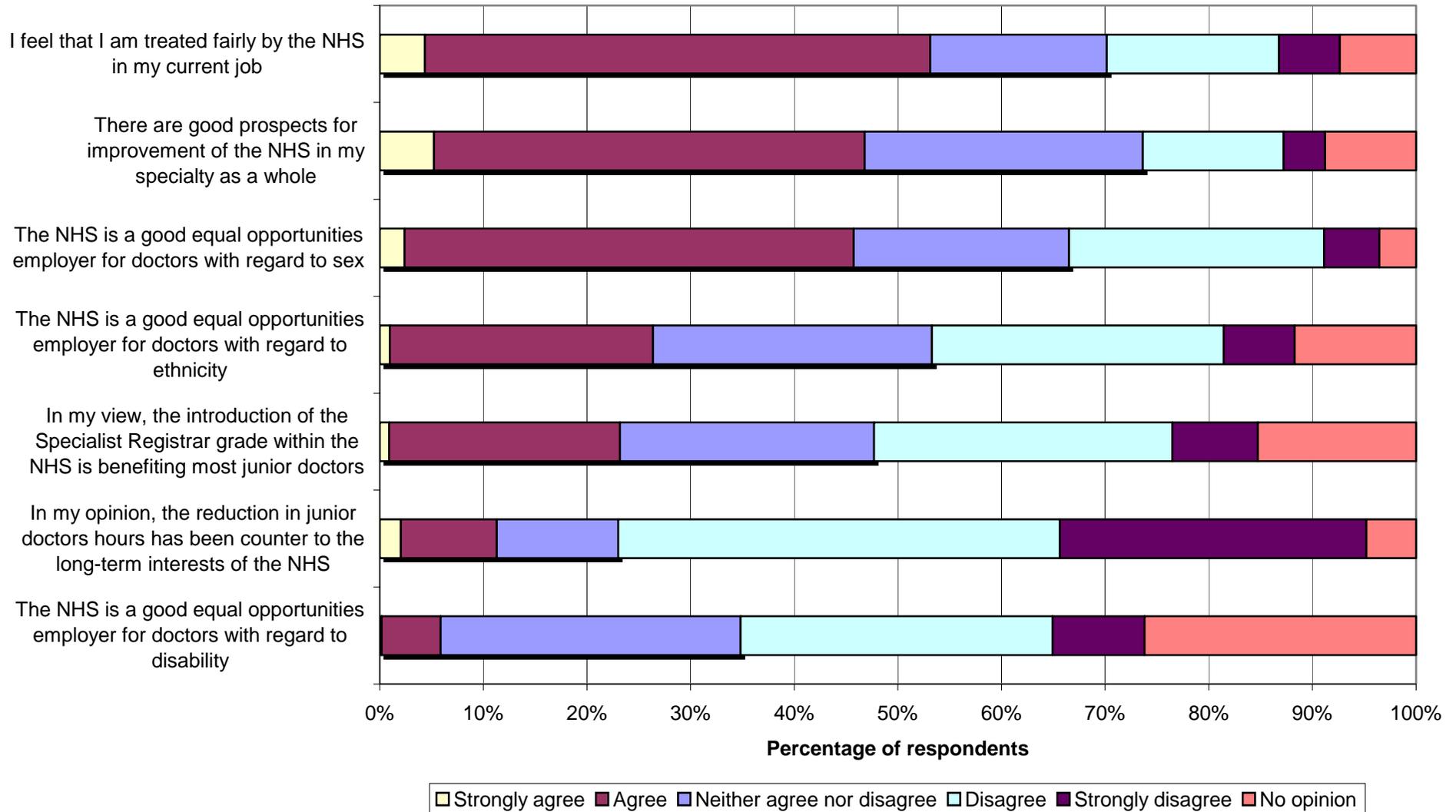
## *The NHS*

Figures 13, 14 and 15 show the results from seven statements relating to the NHS, for those respondents currently (September 1998) working in the NHS. Almost half of respondents felt treated fairly by the NHS in their current job, thought that the NHS was a good equal opportunities employer with regard to sex, and thought there were good prospects for improvement of the NHS in their specialty (Figure 15). Ratings of the NHS as an equal opportunities employer with regard to ethnicity and disability were quite low. Only a quarter agreed that the introduction of the Specialist Registrar grade was benefiting most junior doctors, but respondents endorsed the reduction in juniors' hours. Sex differences in the responses to these statements were small (Figures 13 and 14).

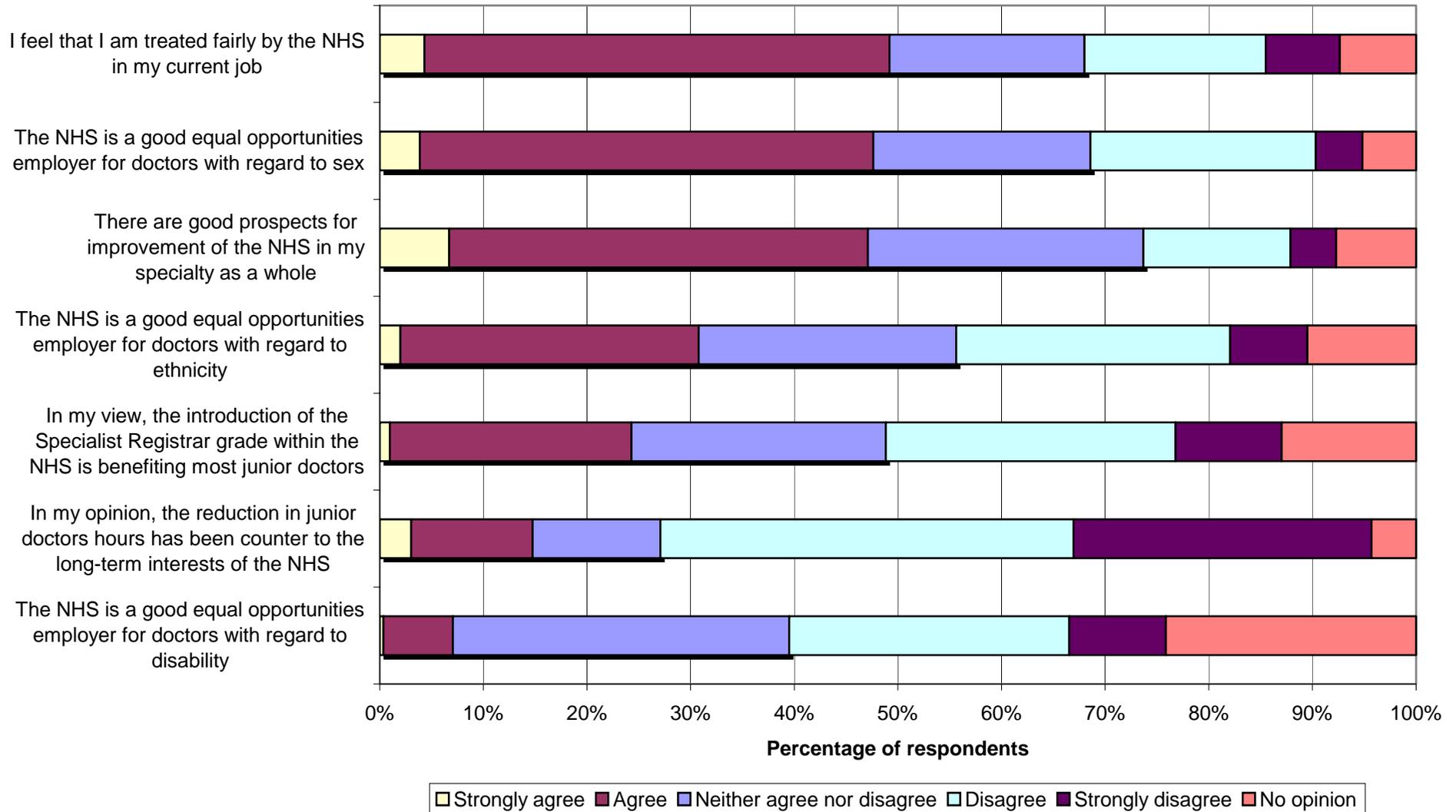
**Figure 13: Views about the NHS - Men**



**Figure 14: Views about the NHS - Women**



**Figure 15: Views about the NHS - All respondents**



## *Specialist Registrars*

Specialist Registrar respondents were asked whether they felt their training was too short, and whether they were concerned about securing a consultant post within 6 months of obtaining the Certificate of Completion of Specialist Training (CCST). 46.9% agreed (including 13.5% who strongly agreed) that their training was too short to enable them to practise adequately as new consultants. 78.2% were concerned (including 41.7% who were strongly concerned) about securing their first consultant post within 6 months of completing their CCST.

### *Job satisfaction*

To obtain a measure of job satisfaction five statements were presented for evaluation on a scale from strongly agree to strongly disagree. The statements were

*I find enjoyment in my current post*  
*I am doing interesting and challenging work*  
*I feel dissatisfied in my current post*  
*Most days I am enthusiastic about my work*  
*I am often bored with my work*

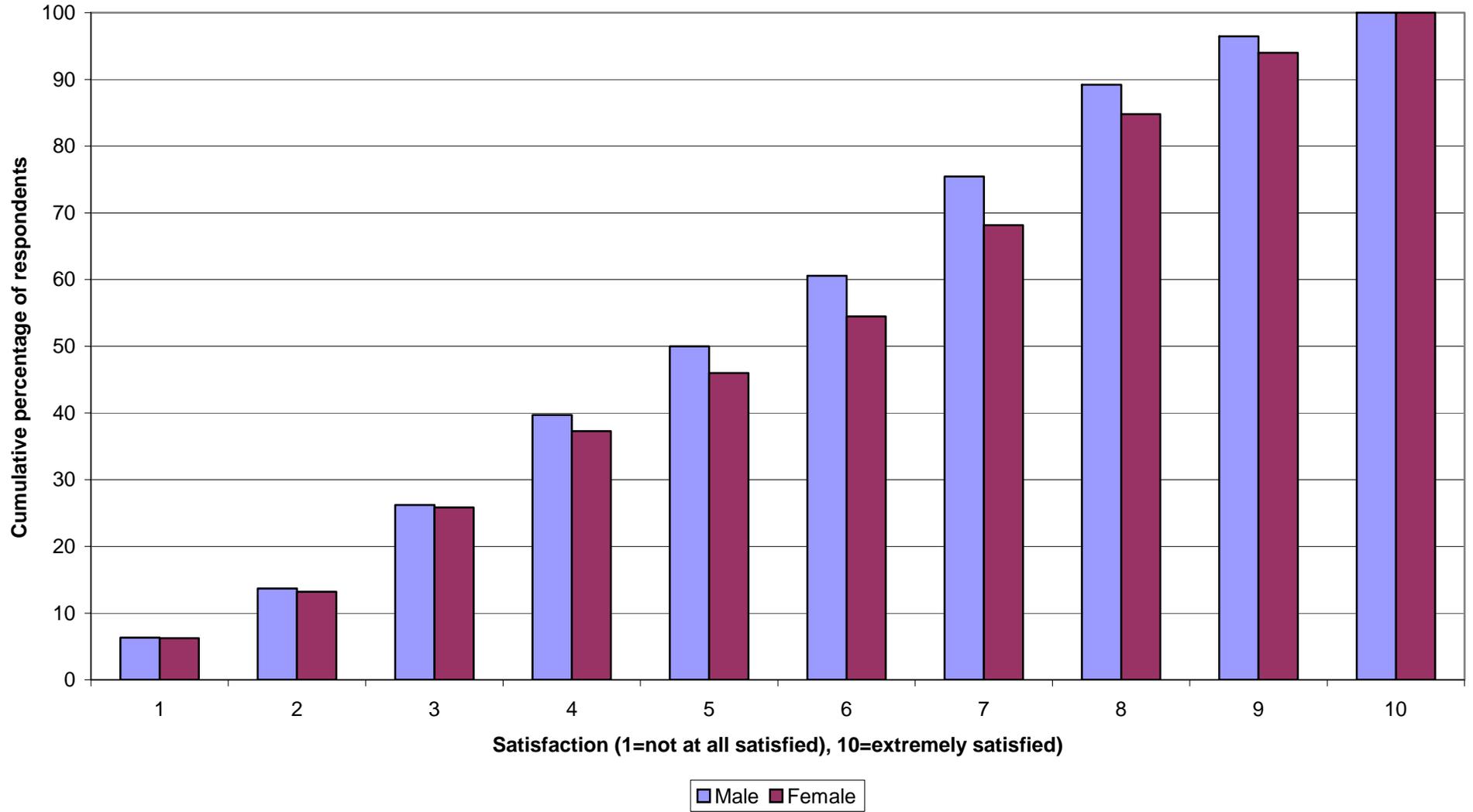
Scores of 1 to 5 were assigned to the responses (with scales reversed for the 1<sup>st</sup>, 2<sup>nd</sup> and 4<sup>th</sup> statements) and the average for the 5 statements was calculated. The average score for both men and women was 3.9, indicating a good level of job satisfaction.

### *Job enjoyment and lifestyle*

Respondents were asked how much they were enjoying their current position, on a scale from 1 (*not at all*) to 10 (*greatly*). Figure 16 shows cumulative percentages for men and women. Less than a quarter of respondents scored 5 or less, and half scored 8, 9 or 10, indicating a high level of enjoyment.

They were also asked how satisfied they were with the amount of time their work left for family, social and recreational activities, on a scale from 1 (*not at all satisfied*) to 10 (*extremely satisfied*). Results (see Figure 17) were evenly distributed across the range from 1 to 10, with half scoring 5 or less. Men showed a slightly lower level of satisfaction than women did.

**Figure 17: Satisfaction with leisure time**



**Figure 16: Enjoyment of current position**







## **Questionnaire**

The following pages contain a copy of the questionnaire used for the survey.

**Career Preferences and Experiences of Doctors qualifying in 1993  
1999 Enquiry**

**YOUR NAME, ADDRESS AND DATE OF BIRTH**

**We use this information to match your replies to previous surveys in the study.**

**This sheet is stored separately from the rest of the questionnaire.**

Study Reference Number **9 3** /

Name used professionally

Maiden/married /former name (if any)

Current address  
*(Your preferred address for our use)*

Date of birth 

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Date of completion of questionnaire 

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Study Reference Number

9 3

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**Career Preferences and Experiences of Doctors qualifying in 1993  
1999 Enquiry**

*Your replies will be treated as strictly confidential.*

*Please answer the following questions as fully as you are able, by ticking or writing in the shaded boxes provided, and return the questionnaire in the envelope provided.*

*Please write clearly.*

**A. BACKGROUND INFORMATION**

1. What is your current marital status? Living with spouse or partner   
Single   
Widowed/Divorced/Separated

2. How many children under 16 are normally resident in your household?

If there are children, what are their ages in years?      
*(Enter 0 for 0-11 months)*

3. Are there any dependent adults (e.g. disabled, sick or elderly) in your household whose needs affect your ability to pursue your chosen career? Yes   
No

*In common with many other research groups, it is now our practice to ask respondents to indicate their ethnic origin. We have used standard Office of National Statistics groupings.*

4. Which of the following best describes your ethnic origin?
- |                                       |  |
|---------------------------------------|--|
| White <input type="checkbox"/>        | Black: <input type="checkbox"/>          |
| Asian: <input type="checkbox"/>       | Black Caribbean <input type="checkbox"/> |
| Indian <input type="checkbox"/>       | Black African <input type="checkbox"/>   |
| Pakistani <input type="checkbox"/>    | Black-other* <input type="checkbox"/>    |
| Bangladeshi <input type="checkbox"/>  |  |
| Chinese <input type="checkbox"/>      | Other* <input type="checkbox"/>          |
| Asian-other* <input type="checkbox"/> |  |

\* Please specify

**B. PROFESSIONAL QUALIFICATIONS**

5. Please list all higher professional or academic qualifications obtained since 19\_\_\_\_  
*Please give details below (spell out in full rather than initials) and the year passed.*

Qualification	Year



## D. CURRENT EMPLOYMENT

### 7. Are you currently in medical employment?

Yes  No; I am in *non-medical* employment  
**GO TO QUESTION 8** No, I am *not* in employment  
 ↓

⇒ **GO TO QUESTION 13**  
 ⇒ **GO TO QUESTION 10**

### 8. Which one of these broad groupings best describes your *main* medical post?

General Medicine Group <input type="checkbox"/>	Obstetrics and Gynaecology <input type="checkbox"/>	Psychiatry <input type="checkbox"/>
Paediatrics <input type="checkbox"/>	Anaesthetics <input type="checkbox"/>	General Practice <input type="checkbox"/>
Accident and Emergency <input type="checkbox"/>	Radiology <input type="checkbox"/>	Community Health <input type="checkbox"/>
General Surgery <input type="checkbox"/>	Clinical Oncology <input type="checkbox"/>	Public Health Medicine <input type="checkbox"/>
Other Surgical specialty <input type="checkbox"/>	Pathology <input type="checkbox"/>	Other <input type="checkbox"/>

### 9. Details of your *main* post

Specialty <i>If your specialty has a more precise title than that ticked in Question 8, please name it precisely</i>	<input type="text"/>
Grade <i>Give the grade (SHO, Reg., Senior Reg., Consultant, Principal; and specify if locum, retainer scheme or other scheme)</i>	<input type="text"/>
Name of employer <i>e.g. NHS trust. Specialists and GPs contracted to provide services to the NHS (including locums) – please just enter NHS. Private GPs please enter 'Private'</i>	<input type="text"/>
Name of funding body <i>e.g. NHS, MRC, University, HM Armed Forces, Private company or Charity (please name), Honorary (unpaid)</i>	<input type="text"/>
Start date <i>Give the month and year</i>	<input type="text"/>
Place of work <i>Give the name of the town or city in UK, or country if outside the UK</i>	<input type="text"/>

Are you working full-time or part-time in this post?  
 If part-time, **how many** weekly sessions/hours do you usually work?

Full-time   
 Part-time  ⇒ Sessions   
 or Hours

Does this post carry an NHS contract (*include honorary as 'Yes'*)?

Yes  No

**GO TO QUESTION 15**

### 10. When were you last employed?

*Give month and year*

### 11. Why are you currently not in employment?

*e.g. illness, career break/travel/holiday, domestic commitments, inability to obtain suitable work*

### 12. Are you currently seeking employment?

No-not seeking paid work   
 Yes-whole-time, in medicine

Yes-part-time, in medicine   
 Yes-outside medicine

**GO TO QUESTION 16**

### 13. When did you start your non-medical post?

*Give month and year*

### 14. Please describe your post and give its location

**GO TO QUESTION 15**

**15. Please give brief details of any other posts you currently hold.**

*For medical posts please include specialty, grade, whether within the NHS, and the weekly time commitment*

**E. FUTURE CAREER INTENTIONS, AND INFLUENCES ON YOUR CAREER TO DATE**

**16. Have you made up your mind about your choice of long-term career ?**

Definitely       Probably       Not really

**What is your choice of long-term career ?** *List up to 3 choices in order of preference. Bracket together any choices that are equal. Be as specific or as general as you wish.*

1	
2	
3	

**17. How much has each of the following factors influenced your choice of career to date?**

*For each factor, please tick one of the three boxes :*

	Not at all	A little	A great deal
Domestic circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours / working conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial circumstances whilst training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eventual financial prospects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organisation of training programme in chosen specialty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotion/career prospects in chosen specialty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-appraisal of own skills/aptitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advice from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclinations before medical school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student experience of chosen subject	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Experience of jobs in training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiasm/commitment: what I really wanted to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to secure qualifications for preferred career	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* Other reasons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

\* Please specify

**18. Career influence of non-clinical factors.**

*We are interested in ways in which **non-clinical** factors such as domestic circumstances or disability have affected your career choices and career development. If such factors have significantly affected your career please give details.*

**19. Intention to practise medicine in the UK**

**Apart from temporary visits abroad, do you intend to practise medicine in the United Kingdom for the foreseeable future?**

- Yes-definitely
- Yes-probably
- Undecided
- No-probably not
- No-definitely not


**a) If you did *not* answer ‘Yes-definitely’, are you**

- Considering practising medicine abroad?
- Considering leaving medicine but remaining in the United Kingdom?
- Considering leaving medicine **and** leaving the United Kingdom?


**b) If you are considering one of the options in Question 19a, what is your main reason for doing so?**

**c) If you intend to practise medicine outside the UK, in which country or continent?**

*\* If you wish to make fuller comment on any of these points, please do so in Section H.*

## F. YOUR VIEWS AND ATTITUDES

*This part of the questionnaire consists of a number of attitude statements. Please consider each statement and tick the response box which most accurately reflects your own opinion. Although it may be difficult to make a choice, please answer every statement. Please use 'No opinion' for topics about which you do not feel you have enough information to express an opinion. For example, if you are working outside the UK NHS you may be unable to respond to some statements.*

### 20. Views

<b>Medical careers in general</b>	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
I have had good career opportunities in my career to date.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am happy with my present position.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I currently work longer hours than I think I should.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My career prospects are good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The postgraduate training I have received so far has been of a high standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have been able to obtain useful careers advice since graduation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctors tend to prefer specialist practice to general practice because they think the former makes better use of their scientific training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are few opportunities to follow flexible and part-time <i>postgraduate training</i> in my specialty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible and part-time <i>postgraduate training</i> in my specialty should be discouraged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are few flexible and part-time <i>career posts</i> in my specialty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible and part-time working in <i>career posts</i> in my specialty should be discouraged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are good opportunities to job-share in my specialty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>The NHS in the UK</b>	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
In my view, the introduction of the Specialist Registrar grade within the NHS is benefiting most junior doctors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In my opinion, the reduction in junior doctors' hours has been counter to the long-term interests of the NHS.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS is a good equal opportunities employer for doctors with regard to ethnicity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS is a good equal opportunities employer for doctors with regard to sex.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The NHS is a good equal opportunities employer for doctors with regard to disability.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are good prospects for improvement of the NHS in my specialty as a whole.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel that I am treated fairly by the NHS in my current job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>For those in Specialist Registrar posts (including those with honorary contracts)</b>	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
My training is too short to enable me to practise adequately when I first become a consultant.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am concerned about securing a consultant post within six months of obtaining my CCST.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## G. ENJOYING YOUR JOB

### 21. Job satisfaction

*This section provides a simple measure of job satisfaction which we can use to compare doctors with other professional groups.*

	Strongly Agree	Agree	Neither Agree nor disagree	Disagree	Strongly disagree
I find enjoyment in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am doing interesting and challenging work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel dissatisfied in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most days I am enthusiastic about my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often bored with my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 22. Job enjoyment and lifestyle

*We would like you to respond to the following two questions by circling the number which you think most accurately reflects your opinion.*

#### a) How much are you enjoying your current position?

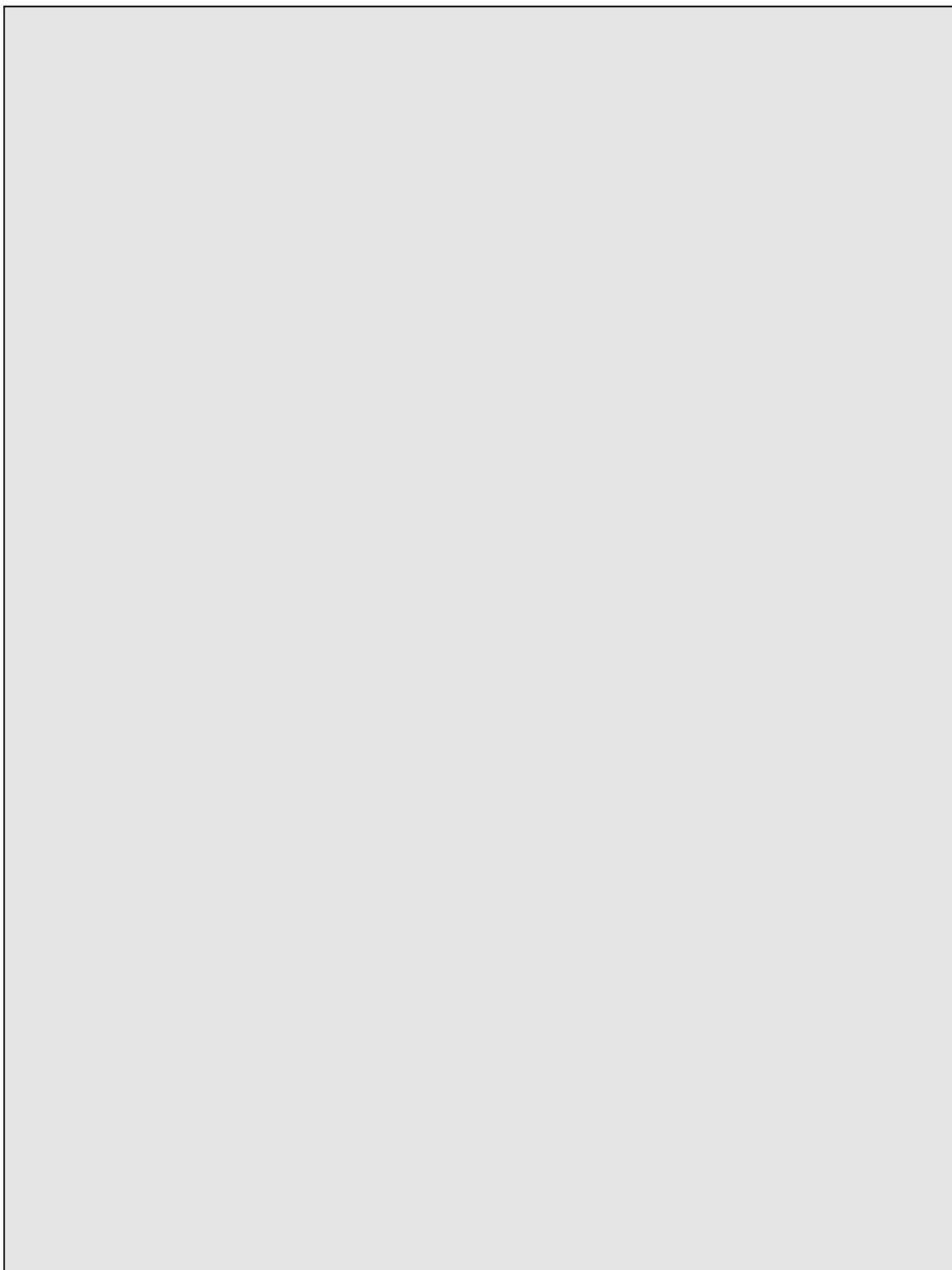
1	2	3	4	5	6	7	8	9	10
Not enjoying it at all								Enjoying it greatly	

#### b) How satisfied are you with the amount of time your work currently leaves you for family, social and recreational activities?

1	2	3	4	5	6	7	8	9	10
Not at all satisfied								Extremely satisfied	

## H. ADDITIONAL COMMENTS

*Please give us any comments you wish to make, on any aspect of your training, career choices or work, on this page (and continuation sheets if necessary). As with your responses to the preceding questions, your individual comments will remain totally confidential to senior researchers in the UK Medical Careers Research Group.*



*Thank you for your co-operation.*

*Please return this questionnaire to:* UK Medical Careers Research Group, Unit of Health-Care  
Epidemiology, Institute of Health Sciences, Old Road, Oxford OX3 7BR.

## Specialty mainstream groupings

1. Accident and emergency
2. Anaesthetics (includes intensive care)
3. Clinical Oncology
4. Community Health (includes family planning)
5. General Practice
6. Medical specialties (includes academic medicine, cardiology, chest medicine, clinical pharmacology, dermatology, endocrinology, gastroenterology, general medicine, genetics, geriatrics, industrial medicine, infectious diseases, nephrology, neurology, rheumatology / rehabilitation, tropical medicine, venereology)
7. Obstetrics and gynaecology
8. Other medical (includes academic work, general hospital work, HM Forces, Third World medicine)
9. Surgical specialties (includes academic surgery, cardiac surgery, dental surgery, ear nose and throat, general surgery, neurosurgery, ophthalmology, orthopaedics/trauma, paediatric surgery, plastic surgery, urology, vascular surgery)
10. Paediatrics
11. Pathology (includes clinical chemistry, forensic medicine, haematology, histopathology, immunology, microbiology)
12. Psychiatry (includes adult psychiatry, child / adolescent psychiatry, forensic psychiatry, psychogeriatrics, psychotherapy)
13. Public health medicine
14. Radiology