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Exploring Career Choice Among Black Psychiatry Interns: an Exploratory Qualitative Study

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Abstract

Objective Relative to the Black American population size, there is an underrepresentation of Black psychiatrists in the USA. In order to address this issue, it is important to explore factors that contribute to Black medical students' decision to pursue a career in psychiatry.

Methods First-year psychiatry residents who identify as Black ($N = 7$) were interviewed. Career Construction Theory provided a structured framework for the interview process. For qualitative analysis of data, codes were assigned to reflect concepts and develop themes.

Results All participants mentioned the impact of being a Black psychiatrist in the Black community, the influence of strong female role models on their life, and the importance of the fit between their personality and the work done within psychiatry. The majority of interviewees identified macro-level and cultural events that had influenced them and discussed a desire for advocacy and the influence of Black role models, perseverance, and the importance of work-life balance.

Conclusion This qualitative study identified many influential factors that were deemed important to Black interns in their decision to pursue a residency in psychiatry. With the information learned from these interviews, educators within psychiatry can bolster their support of Black medical students, encourage pursuit of a career in psychiatry, and ultimately, work toward reducing disparities in psychiatric care. Future research should examine additional collective notions of career decision-making.

Keywords Minority · Residents · Career exploration

Although 13% of the US population identifies as African American, only 9.5% of matriculating medical students in 2020 identified as Black, and only 2% of US psychiatrists are Black [1–3]. Previous research has highlighted that for Black patients, seeing a physician who is also Black is beneficial. For example, in a study of patients and providers in outpatient mental health clinics, those therapeutic dyads that

had concordant race/ethnicity displayed a better quality of working alliance, as evaluated by objective raters [4].

To address underrepresentation of Black psychiatrists, exploring motivations for pursuing a career in this field is important. As with any exploration of groups of people, it should be noted that career decisions intersect with person experiences and thus are quite heterogeneous [5]. However, the importance of role models that individuals can relate to is also important [6], thus leading to exploration of potential factors that help attract individuals into the field of psychiatry.

Given the forms of structural racism that Black trainees may face, it is important to explore how they navigate barriers and choose their specialty. Specifically, in order to provide psychiatric care to those patients who desire to work with a Black psychiatrist, it is important to address the shortage of Black psychiatrists. One step in this direction is for medical school educators in psychiatry to understand what draws Black students into the field. In the following

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qualitative study, members of the Association of Directors of Medical Student Education in Psychiatry Research Committee interviewed first-year psychiatry residents who identify as Black to understand what motivated them to select a residency in the field.

Methods

This study recruited Black physicians in their first year of psychiatry residency programs approved by the Accreditation Council for Graduate Medical Education (ACGME). First-year residents were chosen to participate due to the proximity in time of choosing psychiatry as a specialty. Qualitative methods were used to elicit inflection points in the participants' medical school experience, which are defined as influential people and events that may resonate with early life experiences and influence career choice. Career Construction Theory, which “emphasizes the interpretive and interpersonal processes through which individuals impose meaning and direction on their vocational behavior” [7], provided a theoretical framework to structure the interviews.

Recruitment occurred via contact with liaisons known by the authors who were affiliated with ACGME-approved psychiatry residency programs. Liaisons identified potential participants and provided email addresses. An invitation email was sent to individuals from seven sites. Prior to the interview, participants were emailed an information sheet describing the study, including its anonymous nature, and the residents' ability to withdraw at any time. In addition, as an incentive for completing the interview, residents were informed that they would receive a \$50 Amazon gift card at the end of the study. As part of the informational email, they were informed that agreeing to schedule an interview indicated their consent to participate in the study.

Although researchers were aware of the participants' names and institutional affiliation from email communication, all identifying information was excluded from audio recordings and no other identifiable information was asked. Participants were interviewed by White-identifying faculty members who were unknown to the interviewees. The research team included a Black psychiatrist to ensure lived experience would be considered while the interview script was developed.

A semi-structured interview script (available by request from the corresponding author) provided a guide for the interview. Interviews took place over Zoom, and audio recordings were saved on a secure cloud platform and sent to a professional company for transcription. The transcribed interviews were inductively analyzed for content using thematic analysis [8]. The interviews were initially coded manually by two of the investigators (MM, JR). For each participant response, codes were assigned to reflect concepts,

and illustrative statements were listed to define the code. The compiled coding dictionary was compared across interviews by three investigators (GBD, MM, JR). Finally, the remaining three authors (RB, RR, LT) compared the coding dictionary across all interviews, and additional codes and statements were added when pertinent. Codes were organized into themes and discussed by the group to achieve consensus on the themes and their meaning.

This study was approved by the Wayne State University Institutional Review Board (IRB). Each faculty interviewer also received approval from their respective IRB.

Results

Of the 18 individuals invited, a total of 7 first-year psychiatry residents (39%, 6 females and 1 male) from four sites agreed to participate and were interviewed. Using the Career Construction Theory framework, this study identified 11 themes: (1) desire for advocacy; (2) impact of being a Black psychiatrist in the Black community; (3) importance of Black role models; (4) importance of strong female role models; (5) role of faith; (6) family approval; (7) family experience with mental illness; (8) macro-level and cultural events; (9) perseverance; (10) personality match; and (11) work-life balance. Themes, the number of participants who made statements that fit into these themes, and a selection of exemplar statements are included in Table 1.

All participants mentioned the impact of being a Black psychiatrist in the Black community, both as a means of addressing stigma and providing an opportunity for patients to feel more understood and “seen.” All participants noted the influence of strong female role models on their life, noting both personal and professional female influences. The importance of the fit between their personality and the work done within psychiatry was also described by all participants, noting their comfort with being able to interview and elicit information from patients.

Six interviewees identified macro-level processes and cultural events that had influenced them, including racism in America, police violence, the Black Lives Matter movement, and both social media and traditional media reports. Six interviewees discussed a desire for advocacy to influence policy but also in a more personal manner, to reduce stigma toward mental illness within the Black community and provide mental health care to those who face more barriers. Finally, six interviewees reported the influence of Black role models and perseverance (both from role models and as a personal attribute) and the importance of work-life balance.

Three residents mentioned the influence of faith on their lives, either through a discussion of biblical stories that were important to them or considering the work of psychiatry to be “God’s work” or their divine calling. Regarding familial

Table 1 Major themes and correlating exemplary statements from participants ($N=7$)

| Themes | Number of participants | Participant statements |
|---|------------------------|---|
| Desire for advocacy | 6 | <ul style="list-style-type: none"> • At first I just thought I loved kids but I realized that I just love helping and advocating for and working with people who are vulnerable. • Let's say I went into surgery and I do it for five years, I always knew that I would want to move on to like administration or policy or advocacy and do more. |
| Impact of being a psychiatrist in Black community | 7 | <ul style="list-style-type: none"> • I think that is true of any ethnicity, be it Asian American or Indian American, or anything like that. I feel like when you have someone that has experienced the same thing you have experienced, it's just almost sometimes easier for you all to converse and to understand each other. • The Black community doesn't really think that psychiatric conditions are a thing and that's ridiculous, especially when in a psychiatric hospital a lot of patients are Black. But the people who are taking care of them do not at all represent, racially, the proportion of the patients we're taking care of...I can bring perspective that I feel is being missed in a lot of spaces by being Black. |
| Black role models | 6 | <ul style="list-style-type: none"> • [A Black psychiatric attending] pulled me aside and was like "I know you don't have any aspirations of going into psychiatry but I think you would really do well in this field." • The preceptor that I worked with...she was an African American woman...she was just such a strong yet calm and gentle woman, and she reminded me a lot of myself. I could see myself... and she was someone I can aspire to be. |
| Strong female role models | 7 | <ul style="list-style-type: none"> • I've always given credit to the women in my life. Especially in my academic and professional endeavors. It's always been women...who have been able to guide me or have been able to kind of pluck me out of the mass and say "Okay, I think you are worthy." • My grandmother was so giving and did so much for family. She wasn't able to get that far in school because her mother died and she had to take care of the home...with that obstacle in mind, she was able to have several kids and put them all through college. |
| Role of faith | 3 | <ul style="list-style-type: none"> • I don't know how to say it without getting too spiritual...but it just seemed like (psychiatry is) what God wanted me to do, put me here to do. • [A favorite story of mine is] the story of the Good Samaritan...who by every means was an outcast, who was the unexpected person to help one who was beaten and bruised and kind of left for dead. |
| Family approval | 3 | <ul style="list-style-type: none"> • After I talked with them about my decision and we've seen...family members and friends going through mental health issues and needing resources and the impact on the Black community, I had all the support in the world from my family. |
| Family experience with mental illness | 3 | <ul style="list-style-type: none"> • [Mental health] was something that we didn't talk about, but it was clearly there. Maybe most of us didn't know much about it and there was stigma around it. I wanted to be in a position to not only educate my family about these things, but other families experiencing the same thing. |
| Macro-level and cultural events | 6 | <ul style="list-style-type: none"> • Even when police respond and it's a mental health issue and they shoot first and ask questions later...if I could, I would be there to talk. • When [suicide] happens in the Black community, it's like a whole lot different, the media presence is different, the conversations around it are different. • Maybe it's just the things I choose to follow on Instagram...but we are going through a pro-self-care, pro-mental health kind of thing. |
| Perseverance | 5 | <ul style="list-style-type: none"> • My dad experienced a lot of racism in his field and people trying to bring him down... teachers would purposefully fail him because he was a Black man trying to do engineering. He had to deal with that every day and keep pushing and keep moving. • I never say "can't" because I believe that most things are possible and maybe you just have to figure out another way of doing it. |
| Personality match | 7 | <ul style="list-style-type: none"> • I could always get more out of a patient. I don't care if I was on surgery or internal medicine or [pediatrics]. I could always get more out of a patient than anybody else that went in a room before or after me. • It was during medical school that I saw that my personality aligned with psychiatry more and that I just wanted to sit and talk and listen to people for more periods of time and figure out what was actually going on. |
| Work-life balance | 5 | <ul style="list-style-type: none"> • Attending psychiatrists seem to value their life outside of work and are really big on well-being. • It aligned with some of the goals that I envisioned, such as work-life balance, being able to pick and choose where you want to practice and it can be different days. It could be practice in one place for a year and then switch it up. |

factors, three participants noted approval of their specialty choice by family members and a family history of mental illness as contributing factors.

Discussion

To our knowledge, this is the first study to examine factors that influence Black psychiatry residents to choose a career in the field. There were several themes identified that are similar to a study that explored career choice factors in Generation Y psychiatry interns [9]. For example, in the study of Generation Y, participants also noted the influence of work-life balance, stigma, family history of mental illness, advocacy, and personality fit. Unlike the Generation Y survey, the participants in this study noted factors specific to being Black, including their future role as a Black psychiatrist within the Black community, the importance of Black role models, and racism. Additionally, 3 out of the 7 participants in this study mentioned faith as an influence in their career decision.

How might academic psychiatrists support and encourage Black medical students who display interest in pursuing a career in the field? From the sample in this study, it is clear that role models are an important factor for specialty choice. We cannot, however, expect our Black colleagues to address this alone without providing protected time to do so. As Thomas et al. wrote in an editorial related to the recruitment of Black men and women into psychiatry [10], this is the “very definition of the ‘minority tax’: asking underrepresented minority faculty to take on higher burdens and presence simply because they are a minority.” However, Isik and colleagues [11] offer suggestions that could be applied by anyone. For example, all of us can certainly point out to Black medical students when we see characteristics within them that would suit their role as a future psychiatrist (perseverance, “personality match,” etc.), which promotes building a sense of belonging. In instances where there are no faculty role models, we can help Black medical students to build a network, even if it is virtual. In addition, we can continue to lead by example, demonstrating the importance of work-life balance within our field. Through faculty-led discussions of the biopsychosocial formulation and social determinants of mental illness, students can identify opportunities for advocacy that are unique to psychiatry and that resonate with their desire to make change. Additionally, current events influenced by racism can be connected to detrimental psychiatric outcomes at both the individual and group level.

This descriptive study exploring perceptions of seven Black, first-year residents is limited by its sample size. Although qualitative research with small sample sizes have

limited generalizability, the themes constructed from these interviews add to the existing literature. An additional limitation is the recruitment method, which may have presented interviewee selection bias. Participants reflected on decision-making factors, which could lead to recall bias. Since first-year residents were targeted for inclusion in this study, the temporal proximity to the application process may have mitigated recall bias. In addition, responses may have been biased toward those individuals who had stronger feelings about becoming a Black psychiatrist and, therefore, more eagerness to share their experience. It is important to consider conducting this study with a larger sample size with a multiracial sample, which may help to elucidate novel themes and specific racial dimensions of Black psychiatrists’ career decision-making.

In conclusion, utilizing the Career Construction Theory framework, this qualitative study identified many influential factors that were deemed important to Black interns in their decision to pursue a residency in the field. Future work is needed to elucidate additional collective notions of career decision-making.

Declarations

Disclosures JR has received research support from Otsuka, Usona, Sage, Compass Pathways; consultation fees from 11Ten; and honoraria from FOCUS, SMI Clinical Advisor, and Wayne State University. MM and RB are deputy editors and LT is an editorial board member for *Academic Psychiatry*; manuscripts that are authored by members of the editorial board undergo the same review process applied to all manuscripts, including anonymous review. The other authors have nothing to disclose. This study was supported by the Association of Directors of Medical Student Educators in Psychiatry.

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