

## **Factors that Impact Health Career Decisions of Second-Generation Nigerian Students**

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### **Abstract**

*It is widely known that adult learners are self-directed and focused in their career decision making strategies. Research is lacking when it comes to the career decisions of second-generation adult learners from Nigerian immigrants. The purpose of this study is to determine the factors that impact health career decisions of second-generation Nigerian adult learners. The results from the triangulated data collection and analysis on seventeen adult learners show that parental influence was the primary factor that impact health career decisions of the participants. The use of qualitative grounded theory was useful in generating “culturally-directed decision-making (CDDM)” model to explain factors that impact health career decisions of second-generation Nigerian adult learners. The results also show that health career decisions vary by family structure.*

**Keywords:** Health career decisions, second-generation Nigerian, grounded theory research.

### **Introduction**

There are over twenty million US born second-generation adult learners in United States today according to a new Pew Research Center analysis of US Census Bureau data. Research on the characteristics and career aspirations of these second generation adults focused on Hispanics and Asia-Americans (Brown, 2004; Corey, 2006; Louie, 2001). Corey (2006) explored the career aspirations of first-generation and second-generation Asian-American college students and concluded that their parents encouraged them to pursue a career in science and technical fields. In 2001, another researcher that explored the role of parents in career decisions of second-generation Chinese-American College students concluded that Chinese immigrant parents expected their children to graduate from college with a degree in technical fields. There is no such study that focused on career aspirations and decisions of second-generation college students of Nigerian immigrants. As such, there is a need to examine the influence of parents in their career decisions. This study was intended to bridge the research gap by focusing on the factors that influence health career decisions of second-generation college students of Nigerian immigrants.

### **Purpose and Research Questions**

The purpose of the exploratory grounded research study is to explore the perceptions of second-generation college student from Nigerian immigrants on the factors that impact their health career decisions. The following research questions guided the focus of the study:

1. What are the perceptions of second-generation college students from Nigerian Immigrants on factors that influenced their health career decisions?
2. Do their perceptions on factors that influence their health decisions differ by gender and family structures?

## ***Theoretical Framework***

Career decisions, especially in health related fields are a family decision among second generation Nigerian students. Overall, the objective of an average Nigerian family is to mentor and guide their children into health related career in order to maximize their expected employment potentials and minimize any possible labor market bias. As such, career choice, especially in technical and health related fields do have many components. They include home leadership/ guidance, cultural attachment, and parental education Career decision can be modeled as:

$$H = f(CA, HL, PE);$$

Where; H is the health career choice;

CA is cultural attachment which includes the role of nuclear and extended family;

HL is home leadership; and

PE is parental education

Career decisions and processes are complex phenomenon that can be addressed through multiple lenses. This study is grounded in systems theory framework (STF) of career development (Watson & McMahon, 2005) and strategic decision-making model (SDM). The systems theory framework (STF) is a process that is connected with influences that consist of individual's system at the core of the decision making as well as other social systems such as family and broader environmental social systems (Whiston & Keller, 2004). The theory aligns with the motivational systems of career decisions and developments (Kniventon, 2004). It is important to understand the factors that influence health career decisions of second-generation college students from Nigerian immigrants since there are no such studies. In STF, the individual system is characterized by intrapersonal influences like personality, ability, and motivation. The family system is characterized by parents, which include the nuclear and extended families. The social and environmental system is characterized by the community groups and cultural organizational memberships as well as peers from different social groups which help to shape the identity and decision making schema of the individual. This framework is appropriate for this study.

Strategic decision-making model (SDM) is also appropriate for this study as career decision is categorized as a strategic decision (Dean & Sharfman, 1996). According to the authors, the assumption in this model is that the relationship between strategic decision-making processes and its effectiveness is that choices are related to outcomes. Hilt and Tyler (1991) concluded that external forces influence SDM effectiveness and outcomes. The SDM is rooted in the economic theory of rationality and choice. It postulates that human beings are rational as they make decisions by choosing the best alternative to maximize utility. The issue of rationality is also deeply rooted in group decision making process. Research has shown that group decision-making influences positive and successful outcomes (Guzzo, 1988; Hackman, 1991).

It is important to note that whether one focuses on medicine, dentistry, pharmacy, public health, veterinary medicine, etc.—the number of Blacks, Hispanic, and Native Americans earning health professional degrees is not reflective of the United States population (Mitchell & Lassiter, 2006; Noonan & Evans, 2003). But, a recent research by Pew Research Foundation (2010) concluded that more than a third of Black students in US medical schools and colleges represent second-generation students from Africa and Caribbean.

## ***Methodology***

### **Research Design**

In this qualitative research study, grounded theory approach was utilized to explore the perceptions of second-generation college students from Nigerian immigrants on factors that impact their health career decisions. The researchers utilized the Strauss an grounded theory design to guide the collection and coding of data to generate theory of career decision. The grounded theory is a qualitative research approach in which theory emerges from, and is grounded in data (Glaser & Straus, 1967). The key elements of this type of qualitative approach according to the authors include (a) the systematic collection of data, (b) the constant comparative method of data analysis, and (c) the generation of theory. According to Charmaz (2006), this strategy of inquiry involves collecting and analyzing data to generate a theory. The grounded theory approach is well suited for this research study on the perceptions of college students on factors that impact their health career decisions.

### ***Theoretical Sampling***

Glaser and Strauss (1967) advocated for the use of “theoretical sampling” in grounded theory research (p.45). Theoretical sampling is a process of deciding what data to collect as data collection, coding, and analysis are occurring jointly. This means that data coding and analysis occur during data collection until data is saturated. The participants for this study were purposefully selected using criterion sampling to ensure inclusion of students from different health careers. All the seventeen (17) participants met the inclusion criteria and they are all college students in medical, dental, and nursing programs. Their ages ranged from 22 to 28 years. Three of the participants are in dental school, three are pursuing a nursing degree, and the rest are in medical school. Six of the participants are males, representing 35% of the study group. The participants and their parents are all members of a cultural organization in their community and they voluntarily agreed to participate in individual interview and small group interview that lasted between 45 minutes to an hour.

### ***Data Collection***

Glaser and Strauss (1967) stressed the need for rigorous data collection strategy in qualitative research. Data collection strategy for this study included in-depth structured individual interviews as well as unstructured small groups interview using active interview strategy. According to Holstein and Gubrium (1995), active interview is an “interpretive practice” (P.16). The authors stressed that active interview is a collaborative conversation between the interviewer and the respondents as they engage in making meaning to the conversation as it occurs. This process demands respect from the interviewer. The researchers conducted a structured face-to-face or phone interview based on the respondents’ desire that lasted for 45 minutes and small groups unstructured interview that lasted for an hour with a major question on their perceptions of factors that influenced their health career decision. Both interviews were tape-recorded with the permission of the participants. The participants were asked to select names to represent their identity for confidentiality purposes. Multiple interviews were conducted to reach data saturation.

### ***Role of the Researchers***

In qualitative research, researchers are instruments of research. Corbin and Strauss (2008) advocated for researchers to be actively engaged with their research participants. The authors also stressed the value of reflexivity from researchers with similar culture with the participants. Although the researchers are not medical professionals, they are Nigerian immigrants who are educators in universities with interest in health career decisions of second-generation college students from Nigerian immigrants. The researchers were able to bracket their views to avoid allowing any preconceived theory to emerge. Journaling and member checking were utilized to ensure that the findings were reliable. The researchers also adhered to the ethical requirements of their Institutional Research Board (IRB) approval.

### ***Data Analysis***

According to Bryant and Charmaz (2007), data analyses in grounded theory occur simultaneously as the data is being collected. So, as multiple interviews were conducted to achieve theoretical saturation of data, they were recorded, organized, and transcribed to explain the factors that influence career decisions of the participants. Data analysis followed the following process:

#### ***Constant Comparative Analysis***

Statements from respondents were analyzed and compared to statements from other respondents. Similarities and differences were identified in writing, memos, and coding while we constantly engaged in analyzing, comparing, and abstracting from the data.

#### ***Open Coding***

According to Corbin and Strauss (2008), open coding involves breaking the data into parts that includes words, phrases, and statements from the data. The authors emphasized that the role of the researchers is to look for terms used by the participants. Bryant and Charmaz (2007) stressed that memo writing is an important aspect of open coding. The researchers used memos to document key concepts and categories from the data.

## **Axial Coding**

Bryant and Charmaz (2007) stressed that axial coding is about the core category that emerged from the data. It is the most “theoretically saturated and relevant” (p.852) data that can lead to the generation of a theory. The researchers identified the core category which became our guide for further theoretical sampling and data collection towards theory generation in our selective coding.

## **Results**

In grounded research approach, it is critical to reach theoretical saturation (Creswell, 2014) which was achieved in this study when no new ideas emerged from the participants during the small group interview. Research has shown that adult learners are independent students who have the ability to direct their learning (Brookfield, 1993; Gross, 1994; Knowles, 1980; Merriam & Caffarella; Mezirow, 1981). That statement was contrary to the decision making strategies of the participants from this study. The results show that career decisions were made at home in a culturally-directed pattern that relied heavily on parental experiences and perceptions. It is apparent from the findings of this study that parental influence was the most important factor in the health career decisions of all the participants. These sentiments about culturally-directed decisions were echoed by all the participants during their individual interview as well as small group interview. As Chi-Chi, a female participant who is finishing second year in medical school commented,

“My parents wanted the best for us based on their experiences here and wanted us to do better than them and not to be exposed to the hardship of work discrimination based on their last names and accents. In my home just like in other Nigerian homes, you are not allowed to argue with your parents because it is not allowed culturally. You simply agree and hope for the best. I have grown to know that my parents will never change their cultural views and they are quick to say “this is our culture, ok.” I have also grown to appreciate some of those cultural views based on their merits and if you ask me, medical field is the only career choice for my sisters and brother because it is the only field where you can minimize the impact of racism and discrimination and be able to enjoy the American dream (Chi-Chi, 2016).”

It is important to note that Chi-Chi’s father is also a medical doctor with four children who are all pursuing health career fields. When asked to explain some cultural views that she appreciates, she quickly emphasized her parents’ beliefs in hard work, dressing appropriately, and not engaging in risky behaviors like her peers in high school. She also stated that these cultural views shaped her into a stronger woman that is highly competitive in medical school. As one male participant stated that his decision was based on his observation of the lifestyles of health professionals in his community, coupled with the moral and financial support he received from his parents. He went on to emphasize that:

“My dad always stressed the importance of doing very well in science courses in high school and college to gain admission into a good medical school. He did not just stress this, but, supported his words with actions. He made sure that we followed the science career path through intensive advising and monetary rewards which actually motivated me. My dad and other member of my Nigerian community encouraged me to follow a medical path that will lead to a successful career just like all the Nigerian doctors in my community. I would not have made this important decision by myself. My high school and college counselors tried to dissuade me from majoring in biology, and I remember my dad advising me to go ahead and change my major from biology to public health in college. I listened, changed my major, was able to graduate in four years, and gained admission to a competitive medical school. One cannot make the decision alone, you need a community and your parents should be at the core of that community. I have friends in college that have spent years and still undecided and I always wondered why their parents were not intervening on their behalf. Colleges don’t care if you spent six to seven years paying tuition trying to find yourself, so, I am not ashamed to say that my parents introduced me to medical field; I am the one in medical school now based on my ability and will be the one to reap the benefits at the end. What separates us from the others is nothing but the Nigerian culture of hard work and respect for parental decisions (Fola, 2016).”

Folais a fourth year student in a division one school in the State of the study and as he eloquently stated, there are about forty (40) Nigerian medical doctors in this one community plus many other health professionals. This community has a number of Nigerians in other fields like lawyers, teachers, social workers, higher educational administrators, but, the majorities of the Nigerian population in this community are medical doctors.

Although the participants attributed their parents as the primary influence in their health career decisions, they also emphasized that their ability and motivation in the field contributed to their decision to continue in the health career path. As Nonso stated: “I can tell you that while most Nigerian parents want the best career for their children, my parents wanted me to be a medical doctor only. I was told that the only way that I can avoid discrimination against Black males in American as well as make significant contribution to the family and society is to become a doctor. I definitely agree with their view and I am glad that they really directed my career to the medical field. But, I can also state that I have worked very hard to meet their expectations and without my inner drive, persistent, and ability, I would not have been able to achieve what I call “their dream” which I know is also my dream to become a dentist. We have all grown to appreciate the Nigerian culture of persistence (Nonso, 2016).”

Nonso is a male student in dental school and his parents are both in the health career field. His father is a medical doctor and his mother is a nurse and he is the only child. There seem to be some variations in the responses of the participants based on their family structures. All the participants came from two-parent household. The participants from homes where both parents are professionals tend to have more financial support for study abroad, Science Olympiad participation, science organizational memberships, and leadership roles than participants in a family structure with one working parent. The participants from homes where both parents are in health fields have more opportunities shadowing professionals from the medical fields as Eno, a participant in a dental school echoed:

“I knew that I will be a dentist early in my life because my father’s best friend is a dentist. I had the privilege of shadowing him every summer for a very long time that his patients got to know me as a junior dentist. I believe that my parents intentionally structured those visits without really saying it and I got their message. In most Nigerian homes, children simply follow the instructions and decisions of their parents as they have the best intention in mind. My parents wanted me to be the best for God without going through what they went through. I am happy that I am where I am today and I know that I will not be where I am without their support. I like the high expectations that they set for me, and as such, there is no room at all for failing. I cannot fail in my quest to become a dentist (Eno, 2016).”

### ***Conclusion, Implications, and Recommendations***

The purpose of this study was to examine the factors that impact career decisions of second-generation adult learners from Nigerian immigrant. Using a grounded theory qualitative approach, culturally-directed decision-making (CDDM) model emerged as the overarching theme to explain how second-generation Nigerian made health career decisions. The participants echoed the importance of Nigerian culture in their reliance on parental decisions for their health careers. The results show that parents played a significant influence in the health career decisions of their children. Individual abilities, interest, and drive also played some role in their decisions. The CDDM model illuminated the importance of culture in decision-making process of these second-generation adults from Nigerian immigrants. One can reasonably assume that independent adults are capable of directing their career decisions which is not the case from the findings in this study. Based on the results from this study, it is reasonable to assume that participants’ parents are making significant contribution in filling the medical diversity as reported in studies. (Larson, 1995; Lopez & Andrews, 1987; Mitchell & Lassiter, 2006; Noonan & Evans, 2003; Whiston & Keller, 2004). The participants in the study reported that their cultural training and upbringing helped in building their persistence and dedication in college (Toven-Lindsey, Levis-Fitzgerald, Barber & Hassan, 2015).

The findings also show that the family influences were driven by the parental expectations of the future job market for their children. The parents want their children to live the American dream without significant job discrimination. The findings also show that health career decisions vary by family structures in terms of career profession of the parents. Families with college degrees and are engaged in professional careers, usually financially supported science extracurricular activities than others. Research has shown that students who engaged in these activities were more likely to be successful in majoring in STEM fields (Zacherman & Foubert, 2014). The use of grounded theory was appropriate in explaining the factors that influence the health career decisions of second-generation college students from Nigerian immigrants. The use of this approach is not an attempt to generate a widely applied theory but to generate an explanation of the phenomenon. Culturally-directed decision-making is a model that emerged from this study. It is the hope of the researchers that culturally-directed decisions should be embraced in African homes in the diaspora.

It is known that many second-generation students from African immigrants face multiple identity challenges in terms of adapting to African national versus African-American versus mainstream orientation identities (Stebleton, 2007). But, it is clear that the participants in this study appreciate the Nigerian culture and attributes it to their health career decisions and college success. So, it is important to understand the multiple lenses and systems that influenced the health career decisions of second-generation college students from Nigerian immigrants. The findings from this study are consistent with research on second-generation Asian-Americans (Corey, 2006; Devos, 1983; Kim, 1993; Louie, 2001) that concluded that career decisions of second-generation Asian students were culturally based. The findings from this study add to literature on factors that influence health career decisions of second-generation Nigerian college students.

The results from this study have policy, practical, and leadership implications to education agencies especially those in adult career counseling and advising. The sample size for this study is limited to fifteen which is adequate for the current study, but, the researchers do recommend a larger sample pool for a quantitative analysis that will investigate factors that impact career decisions of second-generation Nigerians in American colleges and universities. This approach will yield a stronger data pool with reliable results.

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