



Attitude towards Psychiatry among intern doctors before and after attending their internship in Psychiatry

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Abstract

Background and Objectives: India has only one trained psychiatrist available for every 1,00,000 people with mental illnesses and to fulfill this gap we need more trained psychiatrists for effectively dealing with mentally ill patients. Intern doctors are the future of our health care system. For this reason, it is of paramount importance to create more positive attitude towards psychiatry and mental illnesses among intern doctors. Present study was done with objectives to assess the baseline attitude of intern doctors towards psychiatry and to assess the impact of educational intervention.

Material and Methods: A cross sectional study of 1 year duration from March 2018 to February 2019 was conducted at tertiary care hospital affiliated to a medical college in a city of Gujarat. The ATP 30 questionnaire was used which was filled up by the intern doctors on the day of joining and at the end of their term. During the 15 days period of internship, they were taught around 11 different topics. Data analysis was done by Epi info 7 software version.

Results: In our study, baseline attitude was positive and it improved after clinical posting. The goal of latest NMC internship regulation is to impart such knowledge and skills that may enable them to diagnose and treat common psychiatric illnesses. Our study shows that attitudes not only improved toward psychiatry, mental illnesses, patients and treatment but also towards the psychiatrist, institution as well as pursuing psychiatric teaching as a career.

Conclusions: Educational intervention plays a significant role in improving attitude towards psychiatry among intern doctors.

Key-words: Attitude, Mental Illnesses, Intern, Psychiatry

Key Messages: Educational interventions like teaching play an important role in improving attitude towards psychiatry.

Introduction:

Mental health is an integral part of health. It is more than just absence of mental illnesses. It includes mental wellbeing, prevention of mental disorders, treatment and rehabilitation. WHO Estimates the burden of mental health problems in India is 2243 disability-adjusted life years (DALYs) per 10000 population.^[1] According to published data, in India only one trained psychiatrist is available for every 1,00,000 people with mental illness.^[2] Hence, the need arises for more and more trained psychiatrists to effectively deal with mentally ill patients. To fulfil this need we should focus more on positive attitude towards psychiatry and mental illness among medical students as well as in interns so as to open up avenues for aspiring

students to opt for psychiatry as a specialization in the future. Current NMC guidelines does not include any standardized weight age to Psychiatry as far as MBBS exams are concerned, which is significantly less as compared to the current scenario in other countries like America and Britain^[3] where 60-80 hours of teaching followed by approximately a month of clerkship in Psychiatry department is mandatory. This leads to an Indian undergraduate doctor having very little exposure to Clinical Psychiatry. The two clinical postings one in 2nd MBBS and the other in 3rd MBBS do exist and often coincide with the preparation time for written internal exam and are not attended diligently or not given enough emphasis to. Only 15 days of compulsory internship is the period when medical students are exposed to clinical psychiatry as a trainee doctor. Some believe that separating the mainstream subjects from psychiatry has led to its ignorance, and if this continues to persist, it would result in attitudes of ignorance and indifference towards Psychiatry among medical students.^[4] Studies report that a psychiatrist earn less money, and acquires less respect and less prestige as compared to other specialties.^[5,6] Majority of the studies revealed negative attitude of medical students toward psychiatry.^[5,7,8,] Some studies also show that increasing the duration of Psychiatry posting resulted in a more positive impact on attitude among medical students and interns.^[9, 10, 11, 12, 13, 14, 15]

Intern doctors are the future of our health care system their attitudes affect community at large. This study aims at understanding the attitude of interns towards psychiatry and evaluating the effects of clinical posting on their attitudes. Lack of availability of mental health professionals can be curtailed to some extent if future doctors are capable of identifying common mental health ailments and can guide patients further in the right direction.

Recent study by NMParikh^[16] et al shows that intern doctors had neutral to negative attitude toward psychiatry. Gujarat is having approximately 0.7 psychiatrists and 0.006 psychologists per lakh population at present. Educating the interns about psychiatric illnesses can make some difference in mental health care of the state in the long run. The latest guidelines of NMC for internship rotation emphasises that they shall acquire competence for clinical diagnosis based on history, physical examination and relevant laboratory investigations and institute appropriate line of management.⁽¹⁷⁾

Aims and objectives

This study has been planned with the following objectives:

- 1) To assess the baseline attitude of intern doctors towards psychiatry.
- 2) To assess the impact of educational intervention during the period of internship on the attitude of intern doctors towards psychiatry.

Material and Methods

It was a cross sectional study of 1 year duration conducted at a tertiary care hospital affiliated to a medical college in a city of Gujarat. The study was conducted in interns of both major batch and minor batch who were attending their internship rotation in psychiatry for the first time during the academic year of March 2018 to February 2019. We excluded the interns who could not remain present on the day of filling up questionnaire and who did not have attendance of more than 75% during their scheduled term.

We used Attitude Toward Psychiatry 30 (ATP 30) questionnaire^[18] ATP 30 is a five-point Likert type scale that records responses of individuals (strong agreement, agreement, neutral, disagreement, strong disagreement). It consist of 30 items of which 15 items indicating positive attitude and rest of 15 items indicative of negative attitude. Positive phrased items were reversed by subtracting score from 6. A total score was calculated by adding all the

items scores. More than 90 score indicates positive attitude towards psychiatry while cut off score of 90 indicates neutral attitude.

We divided ATP Scores into 3 categories

1) ATP>90 –Positive attitude

2) ATP=90- Neutral attitude

3) ATP<90-Negative attitude

The instrument showed good internal consistency in this study (Cronbach's alpha = 0.874). In demographic details we included age, sex and roll no and past history of psychiatry.

This study was conducted after explaining study to all interns. After obtaining consent from all interns, they were requested to fill ATP 30 Scale questionnaire on the day of joining as well as at the end of their term.

Educational intervention

On the first day internship, each intern filled an ATP 30 questionnaire. During 15 days period of internship, they were taught 11 different topics with major focus on clinical aspects. Topics included were General psychiatry with assessment in psychiatry, Depressive disorder, Bipolar disorder, Anxiety spectrum disorders, Obsessive compulsive spectrum disorders, Schizophrenia and related disorders, Delirium, Substance use disorders, Dementia, Somatoform disorders and Childhood disorders. Average duration of each lecture was one and half hours. Each intern was given one topic to present to improve their presentation skills. They were also asked to attend the new and follow up out patient department cases under the supervision of a faculty and were asked to be present during the in patient department ward rounds. At the end of the clinical posting, they were given a multiple choice questions test and were asked to fill ATP 30 questionnaire again.

Measurements and outcomes

All the measurements (basal and post intervention) performed using self-reported questionnaire. The main outcome was the baseline attitude of intern doctor towards psychiatry and impact of educational intervention during the internship on attitude toward psychiatry.

Data analysis was done by Microsoft Excel. We used Wilcoxon matched pair signed rank test. A P value of <0.05 was considered to be statistically significant.

Results

We had total 108 interns of which all completed pre and post questionnaire. Among 108 interns, 47 (43.51%) were males and 61 (56.48%) were females.

There was a statistically significant increase in score of ATP-30 after 15 days of clinical posting.(table 1). We also compared difference of attitude between male and female and found no significant difference between them. (p value >0.05).

Table 1: Scores of ATP-30 before and after 15 days of clinical posting

| Variables | Pre clinical posting | Post clinical posting |
|-----------|----------------------|-----------------------|
| Mean | 112.26 | 119.58 |
| SD | 7.93 | 8.07 |
| Variance | 62.99 | 65.16 |
| P value | <0.0001 | |

Groups were compared by independent t-test. P value<0.05 is considered to be significant. We divided ATP 30 questions in four areas and assessed improvement in score after clinical exposure. The four areas are psychiatry and mental illness, patients and treatment, psychiatrist and institution and psychiatric teaching and as a carrier. We found improvement in score in all areas. (Table 2)

Table 2: Scores in statements depicting ATP-about Psychiatry and mental illness, patients and treatment, psychiatrist and institution and psychiatric teaching and as a carrier.(group 1 to 4)

| No | Questions | P value |
|--------|--|---------|
| Group1 | <p>Psychiatry is unappealing because it makes little use of medical training.</p> <p>On the whole, people taking up psychiatric training are running away from participation in real medicine.</p> <p>Psychiatry is a respectable branch of medicine.</p> <p>Psychiatry has very little scientific information to go on.</p> <p>These days psychiatry is the most important part of the curriculum in medical school.</p> <p>Psychiatry is so unscientific that even the psychiatrists cannot agree to scientific basis.</p> <p>Most of the so-called facts in psychiatry are vague speculations.</p> <p>The practice of psychiatry allows the development of really rewarding relationship with people.</p> <p>Psychiatry is so amorphous that it cannot be taught effectively.</p> <p>Psychiatric illnesses deserves at least as much attention as a physical illness</p> <p>It is interesting to unravel the cause for any psychiatric illness.</p> | <0.0001 |
| Group2 | <p>There is very little that a psychiatrist can do for their patients.</p> <p>If we listen to them, Psychiatric patients are human like other people.</p> <p>Psychiatric patients are often more interesting to work with than other patients.</p> <p>It is quite easy to accept efficacy of psychotherapy.</p> <p>The practice of Psychotherapy is fraudulent as there is no strong evidence about its effectiveness.</p> <p>With the form of therapy at hand, most psychiatric patients improve.</p> <p>Psychiatric treatment causes patients to worry about symptoms.</p> <p>Nowadays psychiatric treatment has become effective.</p> | <0.0001 |
| Group3 | <p>Psychiatrists talk a lot but do very little.</p> <p>Psychiatrists seem to talk nothing but sex.</p> <p>Psychiatrist tend to be as stable as average doctors.</p> <p>Psychiatrists get less satisfaction from their work than other specialists.</p> <p>At times it is hard to think of psychiatrists equal to other doctors.</p> <p>Psychiatric hospitals are not very different from prisons.</p> | <0.0001 |

| | | |
|--------|---|---------|
| Group4 | <p>Psychiatric hospitals have made specific contributions to the treatment of mentally ill.</p> <p>Psychiatric teaching increases our understanding of medical and surgical patients.</p> <p>Majority of students report that their psychiatric undergraduate training has been valuable.</p> <p>I would like to be a psychiatrist.</p> <p>If I were asked what I considered to be the three most exciting specialties, psychiatry would be excluded.</p> | <0.0001 |
|--------|---|---------|

Groups were compared by independent t-test. P value<0.05 is considered to be significant.

Discussion

This study focused on impact of educational intervention on attitudes towards psychiatry among intern doctors after 15 days of clinical posting. In our study, baseline attitude was positive and it was improved after clinical posting. During 15 days of their clinical posting, they were taught about different topics, they have attended the indoor and outdoor patients under supervision of faculty and an MCQ test was conducted at the end of posting. These multiple ways of teaching psychiatry in intern doctors made their attitude more positive. In the latest notification for rules and regulation by NMC, goal of compulsory posting of 2 weeks in psychiatry is to impart such knowledge and skills that may enable them to diagnose and treat common psychiatric illnesses. We have been practicing the same before and our study shows that attitudes not only improved toward psychiatry and mental illness, patients and treatment but also towards the psychiatrist, the institution and psychiatric teaching as a career. Few of the students also expressed their interest to pursue post-graduation in Psychiatry after completing their term.

After such educational intervention, a statistically significant improvement in overall attitude towards psychiatry was found in our study. Our study is consistent with previous study yadav et al⁸ which stated that interns had overall favorable attitude as compared to 1st year students. A study conducted by Hemanthkumar BG⁹ also showed similar findings of improvement in attitude towards psychiatry after 2 weeks clinical posting but they used MCRS scale to measure the attitude towards psychiatry (psychiatric illness and alcohol/drug dependence). In contrast to our study, the study by NMparikh et al¹⁰ showed interns had overall neutral to negative attitude towards psychiatry; however in their study no educational intervention was conducted. They assessed attitude on 1st day of their clinical posting. This further puts more emphasis on the impact of educational intervention as we did in our study further cementing the fact that continuous training and teaching has a positive effect in improving the overall attitude of interns towards psychiatry.

Our study is also consistent with findings of the study by rishi et al which was done in undergraduate medical students and showed that at the beginning of their clinical posting, there was a neutral attitude which significantly improved after clinical posting.

A study by Antonio et al shows changes in attitude towards psychiatry after training and increase in percentage of students considering psychiatry as a career option after training.

Recent internship guidelines of NMC also emphasize on teaching intern doctors during the compulsory posting of Psychiatry about various clinical aspects and handling of patients at a primary level to fulfil the shortage of psychiatrists in the country and meet the basic mental health care needs of the community.⁽¹⁷⁾

Limitations

This study is single centered, limited to one medical college and has small sample size of 108. It may not be representing the general findings of all medical institutes. At the end of the posting, overall positive attitude increased, so it can be said that educational intervention plays a significant role in improving attitude towards psychiatry.

Conclusions

Educational intervention plays a significant role in improving attitude towards psychiatry among intern doctors. A multi-centric study with a larger sample size and follow up studies can overcome these limitations by assessing changes in the long run as well as impact of new internship guidelines by NMC.

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