

Attitude and Interest towards Psychiatry among Medical Internship Students**Renu Pandey¹, Krishna Kumar Carpenter², Abdul Sajid Mansoori³, Divya Modi⁴**¹Assistant Professor, Department of Psychiatry, Sukh Sagar Medical College, Jabalpur²Assistant Professor, Department of Psychiatry, American International Institute of Medical Science, Udaipur³Associate Professor, Department of Psychiatry, American International Institute of Medical Science, Udaipur⁴Senior Resident, Department of Psychiatry, American International Institute of Medical Science, Udaipur

Received: 25-07-2023 / Revised: 28-08-2023 / Accepted: 30-09-2023

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Conflict of interest: Nil

Abstract:

Introduction: Mental health disorders are among the nation's leading health problems due to their high prevalence and their chronic course. Deep-seated prejudices against people with mental illnesses result from negative attitudes concerning psychiatric problems. Deep-seated prejudices against people with mental illnesses result from negative attitudes concerning psychiatric problems. The general public around the world has negative attitudes and preconceptions about psychiatry as a subject, psychiatry as a profession, and patients with psychiatric problems.

Aim:

- To assess the attitude of medical internship students towards psychiatry
- To find interest towards psychiatry as a choice for post-graduation among these students

Materials and Methods: On an average 3-4 students are posted in psychiatry posting for 15 days among which 100 students were taken. To these students following below-mentioned scales and tests were applied after explaining them about the study. The responses were recorded and the data so obtained were analyzed using SPSS version 21 the responses were recorded and the data so obtained were analyzed using SPSS version 21

- Informed consent form (Hindi and English)
- Socio-demographic questionnaire
- ATP- 30 (Attitude towards psychiatry questionnaire)

Results: Out of total 100 students 30 had favourable response towards psychiatry 3 was neutral and 67 had unfavourable towards the subject.

Conclusion: In the current study, we found that the medical students have multiple lacunae in their knowledge about psychiatric patients, psychiatric illness, psychiatric treatment, psychiatrist, and subject of psychiatry. Increasing negative attitude in higher classes might be due to poor social image of psychiatrist, relatively financially unrewarding specialty, poor teaching in under graduation, lesser duration of psychiatric clerkship, ridiculous stereotypic comments and remarks by medical teachers and practitioners belonging to other specialty branches.

Keywords: Attitude, Medical Students, Psychiatry.

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Introduction

Mental health disorders are among the nation's leading health problems due to their high prevalence and their chronic course. Psychiatric disorders are prevalent in every part of the world. Almost 10% adults are affected by psychiatric disorder at any given point of time. [1] The WHO has estimated that unipolar depression will rank first as leading cause of disease burden ahead of ischemic heart disease and road traffic accidents by the year 2030. [2] Prevailing negative attitude in

the general population and mental health professional's leads to a great impediment in providing mental health care to the psychiatrically ill patients. It also contributes in inattention to the required mental health-care needs, superfluous referrals, indecent treatment, and poor social support and acceptance by family members. It is imperative to fill the gap in the knowledge and increasing awareness about mental disorders in society to deliver efficient mental health-care

services [3,4,5]

Deep-seated prejudices against people with mental illnesses result from negative attitudes concerning psychiatric problems. The general public around the world has negative attitudes and preconceptions about psychiatry as a subject, psychiatry as a profession, and patients with psychiatric problems. Nationwide recruitment in psychiatry has been falling for many years because medical students and graduates find it unattractive. Medical students have stigma regarding psychiatry, even before they start graduation. Major factors, which affects the medical students from taking over psychiatry a future career, are misinformation regarding psychiatry, poor prognosis of mental illness, lack of scientific standards in psychiatry, low status of psychiatrist among peer physicians, fear of violence from mental patients and majorly lack of resources. Meta-analysis by Schomerus et al. has reported that negative attitude toward psychiatry and psychiatric patients had not improved significantly in last two decades. Most part of attitude building toward specialty subjects takes place during UG training. Therefore, attitude of medical students is of utmost importance. Thus, an understanding of the attitudes of medical students toward psychiatry is important, as they are the potential trainees in psychiatry. The study was planned to know the perception, knowledge, and attitude toward psychiatry as a discipline and as a career option among UGs of different years of medical education. [6]

Aim:

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Materials and Methods

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Instruments:

A self-designed, Semi-structured sociodemographic proforma was used to record the age, sex, religion, address, occupation, marital status, education status and income of the patient. ATP- 30 (Attitude towards psychiatry questionnaire). The ATP is a 5-point Likert scale designed and validated in Canada by Burra et al. [7] The scale consists of thirty positively and negatively phrased items that measure the strength of the respondent's attitude to various aspects of psychiatry. A score of 1 denotes a highly positive attitude, 5 denote a highly negative attitude, and 3 denote a neutral response. The score of each positively phrased item was converted by subtracting it from 6. The total global scores range from 30 to 150. A global score of <90 (scores of 1 and 2 combined) suggests a negative attitude to psychiatry, a score of >90 (scores of 4 and 5 combined) denotes an overall positive attitude, while a global score of 90 (average score of 3) is considered to represent a neutral attitude. Each of the thirty questions were analyzed independently and thematically with groups of questions together. The study was conducted after obtaining approval from the Institutional Review Board and permission was sought from the college authorities.

Results:

All the data analysis was performed using IBM SPSS ver. 21 software. Frequency distribution and cross tabulation was used to prepare the tables. Categorical data was expressed as percentage and numbers.

PRISM and Microsoft office was used to prepare the graphs.

Chi Square test was used to compare the categorical data. P value of < 0.05 is considered as significant.

Table 1:

| ATP 30 total score | | |
|--------------------|---------|-------------|
| Favorable | Neutral | Unfavorable |
| 30 (100) | 3 (100) | 67 (100) |
| 100.0% | 100.0% | 100.0% |

Table 2: Age Distribution

| Age | ATP 30 total Score | | | P Value |
|-----|--------------------|---------|-------------|---------|
| | Favorable | Neutral | Unfavorable | |
| 22 | 0 (0) | 0 (0) | 7 (11.6) | |
| 23 | 12 (40) | 3 (100) | 18 (27.5) | |

| | | | | |
|-------|-----------|---------|-----------|--------------|
| 24 | 10 (33.3) | 0 (0) | 26 (37.7) | 0.011 |
| 25 | 0 (0) | 0 (0) | 12 (17.4) | |
| 26 | 2 (6.7) | 0 (0) | 4 (5.8) | |
| 27 | 2 (6.7) | 0 (0) | 0 (0) | |
| 29 | 4 (13.3) | 0 (0) | 0 (0) | |
| Total | 30 (100) | 3 (100) | 67 (100) | |

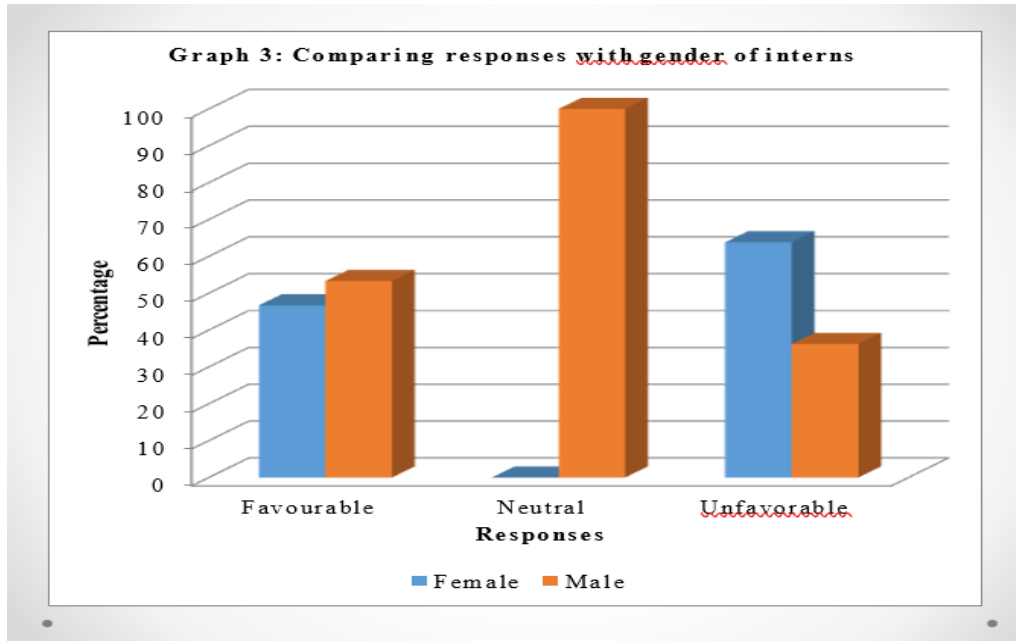
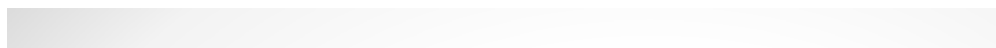


Figure 1: comparing responses with gender of interns

Table 3: Marriage status

| Marriage | ATP 30 total score | | | P value |
|-----------|--------------------|---------|--------------|---------|
| | favourable | Neutral | unfavourable | |
| Married | 0 (0) | 0 (0) | 6 (8.7) | 0.234 |
| Unmarried | 30 (100) | 3 (100) | 63 (91.3) | |



Graph 4: Comparing responses with the marital status

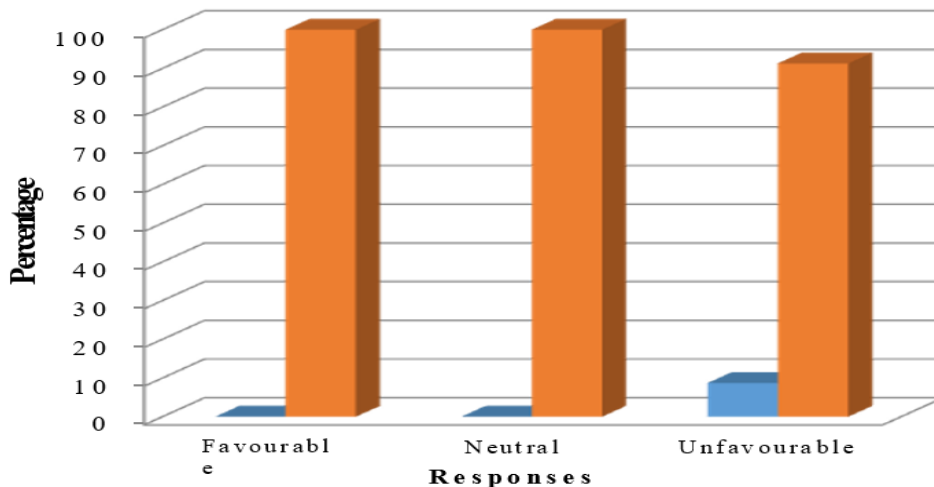


Figure 2: Comparing responses with the marital status

Table 4: Residence

| Residence | ATP 30 Total Score | | | P Value |
|-----------|--------------------|---------|-------------|---------|
| | Favorable | Neutral | Unfavorable | |
| Rural | 4 (13.3) | 3 (100) | 13 (18.8) | 0.081 |
| Urban | 26 (86.7) | 0 (0) | 56 (81.2) | |

Table 5: “I would like to be a psychiatrist” (Item 4 on ATP – 30)

| Responses | No. of intern | percent |
|-------------------|---------------|---------|
| Strongly Agree | 22 | 22.0 |
| Agree | 24 | 24.0 |
| Neutral | 36 | 36.0 |
| disagree | 14 | 14.0 |
| Strongly disagree | 4 | 4.0 |
| Total | 100 | 100.0 |

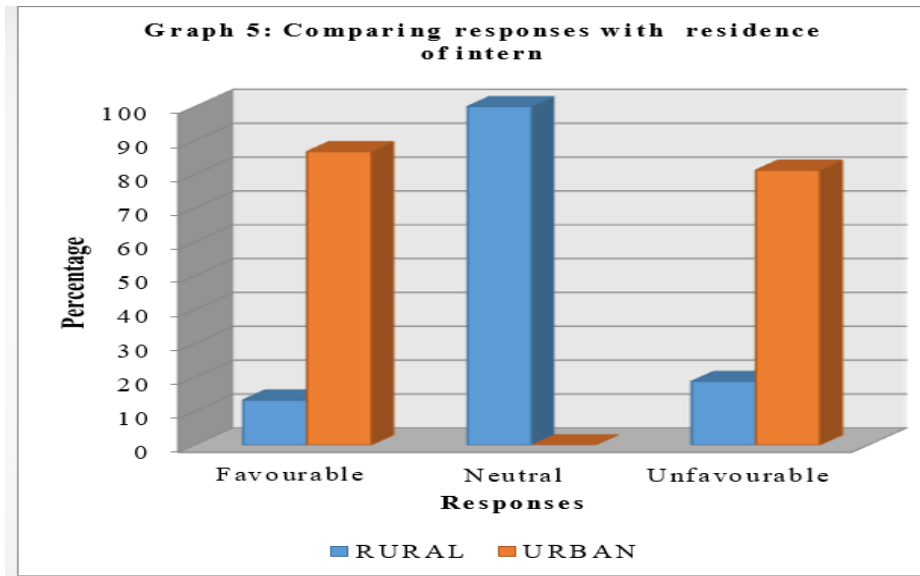


Figure 3: Comparing responses with residence of intern

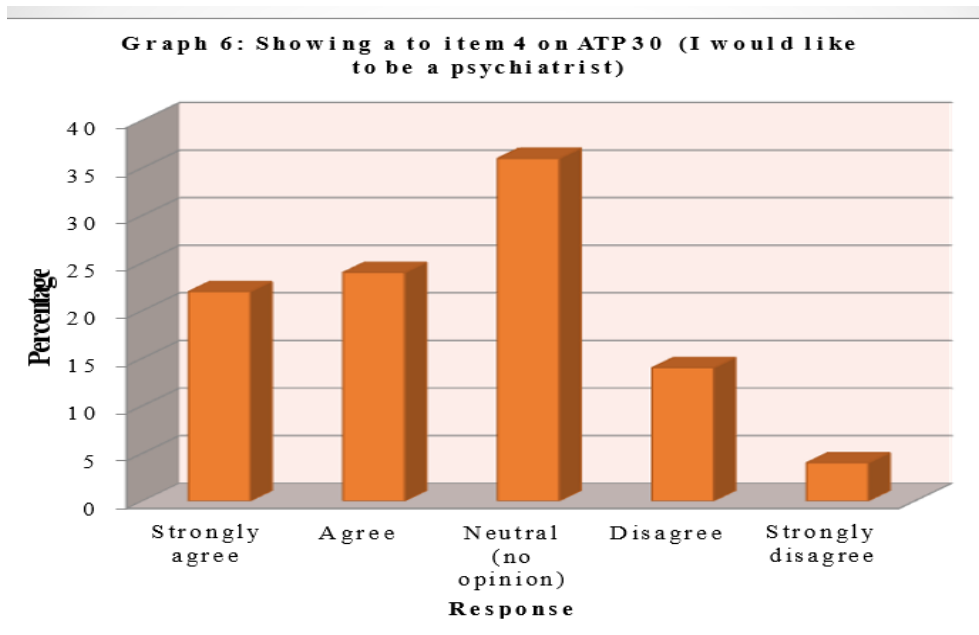


Figure 4: Showing a to item 4 on ATP30 (I would like to be a psychiatrist

Discussion:

The present comparative study was designed to know the attitude of medical students with different years of exposure of medical education, toward psychiatry as a specialty and career option. Similar findings were found in other studies also conducted in Kenya [8] and Bahrain.[9] Whether this downfall in attitude toward psychiatry was related to decrease in interest in psychiatry or to increase in interest in other fields needs further clarification. Item no. 4 on ATP 30 questionnaire “I would like to be psychiatrist” has been given special concern because it provides an association between overall general attitude and career choice. Similar disparity between positive attitude and choosing psychiatry as a career choice was also found in study done in Kenya,[8] Pakistan,[10] and the USA.[11]

Medical students' attitudes towards psychiatry are influenced by a number of factors such as personality, quality of psychiatric education at medical school, perceived social rewards, career prospects and other socio-cultural factors. However positive attitudes to psychiatry may not always guarantee a choice for a lifelong career in psychiatry. Medical interns are the future doctors of the country and are in the process of deciding their future medical career.

Conclusion:

In the current study, we found that the medical students have multiple lacunae in their knowledge about psychiatric patients, psychiatric illness, psychiatric treatment, psychiatrist and subject of psychiatry. Increasing negative attitude in higher classes might be due to poor social image of psychiatrist, relatively financially unrewarding specialty, poor teaching in under graduation, lesser duration of psychiatric clerkship, ridiculous stereotypic comments and remarks by medical teachers and practitioners belonging to other specialty branches Current study conclude that majority of responders with the ATP 30 gave unfavorable response towards psychiatry, among that majority of them were females of age group 24 years. It has been felt that psychiatry remains neglected subject during the UG training. Thus, there is a need to reassess and modify accordingly

the UG medical student's current curriculum.

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