

A Study of Attitude towards Psychiatry among Private Medical College Undergraduates

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Abstract

Introduction: The attitude of medical students towards psychiatry has been studied extensively in this developed world. The inability to attract medical students to specialize in psychiatry has always been a serious challenge to psychiatric recruitment in developing countries like India. *Aims and Objectives:* To study the attitude of undergraduate medical students toward psychiatry. *Materials and Methods:* This is a cross-sectional study with a sample size of 200 participants who are undergraduate medical students of Mamata Medical College, Khammam, Telangana. The samples were drawn using convenience sampling method. Attitude towards Psychiatry scale (ATP) was the tool used to collect data for this study. *Results:* The senior students have more favorable attitude towards psychiatry than the junior students (75% vs. 45%). Only 8% second year and 12% final year students affirmatively said they wanted to become a psychiatrist, while around 70% denied psychiatry as their career option. *Conclusions:* The final year students displayed a more positive attitude towards psychiatry when compared to second-year students owing to the increased exposure during their clinical rotations.

Keywords: Medical College; Undergraduate; Attitude towards Psychiatry.

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Introduction

Psychiatric disorders are becoming more protrusive and frequent over the years.

World Health Organization reports, neuropsychiatric disorders alone contribute to about 33% of the years lived with disability (YLD) and four of the five leading causes are neuropsychiatric. (depression, alcohol use disorder, schizophrenia and bipolar disorder).^[1]

Almost 10% adult are affected by psychiatric disorder at any given point of time. WHO estimates that unipolar depression will be the lead cause of disease burden succeeded by ischemic heart disease

and road traffic accidents by the year 2030.^[2]

The prevalence of serious mental illness, in India, is 6.5%, which translates to about 71 million people but the country still has deficit of health workers trained in mental-health to cater to such a huge population of the mentally ill.

Literature suggests the deficit to be roughly around 78% in contrast to ideal number of 1 per 100,000 populations.^[3,4] As a result of this, mentally-ill patients are mostly ignored or are taken care primarily by the general practitioner.

Psychiatry remains subject known for its stigma. Students seldom opt for the subject as a

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specialty. Medical students, being a member of a large community, are also not immune to negative prejudice about mental illness.^[5,6]

Meagre knowledge about the psychiatry as a science or rare interaction with the patient with mental illness may be the reason of irreparable stigma.

It is imperative that the students develop appropriate attitude toward psychiatry as a medical discipline,^[7] because graduating as doctors with negative attitude toward psychiatry has far reaching consequences.

The integration of psychiatry in the curriculum has been found to have a significant Positive effect on the attitude of students toward psychiatry as a profession and the mentally ill patients.

Studies suggest that better clinical exposure in psychiatry is the key in changing the attitude of these students. Specific factors that are found to be crucial are the experience of direct involvement in care of patients, witnessing patients responding favorably to the treatment and the student having ample and satisfactory interaction with staff, both clinical and non-clinical, and patients at a psychiatric center.⁸

Aim

The aim is to comparatively study the attitude of 2nd year and Final year MBBS students toward psychiatry.

Materials and Methods

Study design

The study was conducted in the Department of Psychiatry, Mamata Medical College from 1st October 2019 to 31st December 2019. The sample comprised of 100 2nd year and 100 Final year students who were posted in the Department of Psychiatry for 2 weeks as part of their clinical rotations. A standardized questionnaire (Attitude Towards Psychiatry -30 [ATP 30]) and a socio-demographic profile was given to the students to fill up after taking written consent to participate in this study.

Inclusion Criteria

1. 2nd and Final MBBS year students who are willing to participate with the written consent.

Exclusion Criteria:

1. Students with major psychiatric illnesses/ substance use disorders
2. Students with prior exposure to psychiatry which might have influenced their attitude toward psychiatry (as patients/as patients' relatives/as relatives of psychiatrists)
3. Non-consenting Students

Size:

100 2nd year and 100 Final year students

Place:

Department of Psychiatry, Mamata Medical College

Duration:

1st October 2019 to 31st December 2019

Type of Study:

Cross-sectional Prospective Study

Tools

1. The authors mapped out a questionnaire enquiring about socio-demographic details, which was used to obtain data, such as age and sex. It also enquired possible exposure to psychiatry in the past.
2. The attitudes of interns toward psychiatry (represented by psychiatric illness and alcohol/ drug dependence) was evaluated using standardized questionnaire (Attitude Towards Psychiatry -30 [ATP30]) which is basically a non-condition specific scale to capture biases, emotions, and expectations generated by medical condition descriptors. The ATP is based on 5-point Likert scale designed and validated in Canada by Burra et al.^[9] It consists of thirty positive and negative phrases(items) that measure the strength of the participant's attitude to various aspects of psychiatry. A score of 1 denotes a highly positive attitude, 5 denote a highly negative attitude, and 3 denotes 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) indicates a negative attitude to psychiatry, a score of >90 (scores of 4 and 5 combined) implies an overall positive attitude,

while a global score of 90 (average score of 3) is representative of 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.

Statistical Analyzes

Statistical analyzes was done with Statistical

Package for Social Sciences version 21 software. Descriptive statistics were used to analyze sociodemographic data. The change in attitude toward psychiatry as measured by 5-point Likert scale designed and validated in Canada by Burra et al.^[9] 'P' value of less than 0.05 was considered to be statistically significant.

Prior approval for the study was taken from Institutional Ethics Committee, Mamata Medical College and Hospital. Prior written informed consent was taken from the participants of the

Table 1: Sociodemographic Characteristics of the Participants

Variable	Group of Medical Students (n)	Age (Mean ± SD)	P
Age	2 nd Year	20.10 ± 1.11	< 0.0001
	Final Year	23.65 ± 0.71	
Characteristics	2nd Year	Final Year	P
Sex, n(%)			0.1594
- Male	62	55	
- Female	38	45	
Family type			0.0105
- Joint	25	20	
- Nuclear	30	45	
- Nuclear extended	45	35	
Locality			0.1025
- Urban	52	60	
- Rural	48	40	
Monthly income			0.1192
- < 10,000	4	3	
- 10,000 - 20,000	66	57	
- > 20,000	30	40	

Table 2: Attitude Toward Psychiatry-30 scores in terms of cutoff value 90 representing attitude toward psychiatry in both the groups

Group	Positive ATP (ATP>90) (%)	Neutral ATP (ATP=90) (%)	Negative ATP (ATP<90) (%)	P
2nd Year	45	14	41	0.000058
Final Year	75	4	21	

Table 3: I would like to be a psychiatrist (Item 4 in attitude toward psychiatry 30)

Responses	2nd Year	Final Year
Strongly Agree	8	12
Agree	20	36
Neutral	24	16
Disagree	26	24
Strongly Disagree	22	12

Table 4: Means of scores on items measuring attitude toward psychiatric patients and illnesses

Items	2nd Year (Mean ± SD)	Final Year (Mean ± SD)	P
Psychiatric illnesses need attention(12)	3.80 ± 1.22	4.29 ± 0.77	0.0008
Interesting to unravel cause(18)	3.91 ± 0.87	4.09 ± 0.95	0.1639
Psychiatric patients are human(27)	3.67 ± 1.35	4.08 ± 0.94	0.0135
Psychiatric patients are interesting(29)	3.42 ± 1.25	3.71 ± 1.12	0.0856

Table 5: Mean responses of items measuring attitude toward psychiatric knowledge and teaching

Items	2nd Year (Mean \pm SD)	Final Year (Mean \pm SD)	P
Psychiatric teaching increases our understanding of medical and surgical patients (9)	3.45 \pm 1.16	3.57 \pm 1.04	0.4421
Students who report that their psychiatric undergraduate training has been valuable (10)	3.69 \pm 1.06	3.54 \pm 0.96	0.2955
Psychiatry has very little scientific information to go on (13)	3.26 \pm 1.15	3.88 \pm 1.00	<0.0001
These days psychiatry is the most important part of the curriculum in medical school (23)	3.18 \pm 1.15	3.89 \pm 1.20	<0.0001
Psychiatry is so unscientific that even the psychiatrists cannot agree to scientific basis (24)	3.37 \pm 1.06	3.79 \pm 1.01	0.0046
Most of the so called facts in psychiatry are vague speculations (26)	3.21 \pm 0.97	3.68 \pm 1.00	0.0009
Psychiatry is so amorphous that it cannot be taught effectively (30)	3.16 \pm 1.25	3.14 \pm 0.93	0.8980

Table 6: Mean responses of items measuring attitude toward psychiatric treatment and hospitals

Items	2nd Year (Mean \pm SD)	Final Year (Mean \pm SD)	P
Psychiatric hospitals little more than prison (3)	3.21 \pm 1.21	3.37 \pm 1.30	0.3687
Efficacy of psychotherapy (5)	3.32 \pm 1.04	3.42 \pm 1.20	0.5296
Psychotherapy is fraudulent (8)	3.84 \pm 0.77	3.50 \pm 1.33	0.0281
With therapy, patients improve (14)	3.77 \pm 1.04	4.00 \pm 0.78	0.0784
Psychiatric treatment cause patients to worry about symptoms (16)	3.33 \pm 1.20	2.89 \pm 1.11	0.0077
Little that psychiatrist can do for their patients (19)	4.01 \pm 1.09	3.06 \pm 1.18	<0.0001
Psychiatric hospitals have a specific contribution to make to the treatment of mentally ill (20)	3.26 \pm 1.18	4.01 \pm 1.06	<0.0001
Psychiatric treatment has become effective (25)	3.70 \pm 1.11	4.04 \pm 1.08	0.0293

Table 7: Mean of scores on items measuring attitude towards psychiatrists and psychiatry

Items	2nd Year (Mean \pm SD)	Final Year (Mean \pm SD)	P
Psychiatry is unappealing because it makes little use of medical training (1)	3.20 \pm 1.19	3.77 \pm 1.22	0.0010
Psychiatrists talk a lot but do very little (2)	3.38 \pm 1.26	3.70 \pm 0.98	0.0464
I would like to be a psychiatrist (4)	2.75 \pm 1.20	2.95 \pm 1.21	0.2420
On the whole, people taking up psychiatric training are running away from participation in real medicine (6)	3.49 \pm 1.01	3.15 \pm 0.99	0.0171
Psychiatrists seem to talk nothing but sex (7)	4.00 \pm 0.96	3.69 \pm 0.82	0.0149
Psychiatry is a respectable branch of medicine (11)	4.00 \pm 0.82	4.14 \pm 0.90	0.2516
Psychiatrist tend to be as stable as average doctors (15)	3.22 \pm 1.11	3.41 \pm 1.15	0.2360
Psychiatrists get less satisfaction from their work than other specialists (17)	3.04 \pm 1.07	3.29 \pm 1.19	0.1198
If I were asked what I considered to be the three most exciting specialities psychiatry would be excluded (21)	3.83 \pm 1.22	3.25 \pm 1.12	0.0006
At times it is hard to think of psychiatrists equal to other doctors (22)	3.50 \pm 1.29	3.07 \pm 1.18	0.0148
The practice of psychiatry allows the development of really rewarding relationship with people (28)	3.32 \pm 1.20	3.78 \pm 1.28	0.0094

study. Nearly 66% of second-year students and 68% interns completed the questionnaire and submitted to the investigator. For purposes of intergroup comparison of sociodemographic and attitudinal differences, Chi-square test was utilized.

The mean age of second-year and final year students was 20.10 years and 23.65 years,

respectively (P < 0.0001) [Table 1]. There was no statistically significant difference in other sociodemographic characteristics [Table 2]. The senior students have more favorable attitude towards psychiatry than the junior students (75% vs. 45%). Mean score of ATP-30 was 96.5 and 99.8 for the second-year students and final year students, respectively (P = 0.001).

However, only 8% second year and 12% final year students affirmatively said they wanted to become a psychiatrist [Table 3]. However, Final year students had a firmer belief that psychiatric patients are human (2nd year = 3.67 ± 1.35 , Final year = 4.08 ± 0.94 , $P = 0.0135$) and that psychiatric illnesses need attention (2nd year = 3.80 ± 1.22 , Final year = 4.29 ± 0.77 , $P = 0.0008$).

Meanwhile, responses for item no. 12 and 27 [Table 4] measures the attitude of students towards psychiatric patients and illnesses. Scores were high for final year students ($P = 0.0008$, 0.0135 respectively).

Comparison of mean scores of items number 13, 23, 24, and 26 [Table 5] between the two groups shows significantly higher scores of final years ($P = <0.0001$, <0.0001 , 0.0046 , 0.0009 respectively).

Responses to item numbers 8, 16 and 19 [Table 6] show significantly higher scores of second year student ($P = 0.0281$, <0.0001 , <0.0001).

Similarly, items numbers 6, 7, 21 and 22 [Table 7] which is indicative of negative attitude towards psychiatry and psychiatrists had higher scores among 2nd year students ($P = 0.0171$, 0.0149 , 0.0006 , 0.0148 respectively).

Discussion

The current comparative study was designed to compute the attitude of medical students with different duration of exposure of medical education, toward psychiatry as a medical specialty and career choice. Final-year medical students have more positive attitude than the second-year students. Yadav et al.^[10] proved that interns had an overall favorable attitude toward psychiatric patients when compared with MBBS students.

Item no. 4 "I would like to be psychiatrist" has been given special concern because it provides an association between overall general attitude and career choice. Only 8% 2nd year students and 12% final year group decided to be a psychiatrist. Similar disparity between positive attitude and choosing psychiatry as a career choice was also found in a study done in Kenya,¹¹ Pakistan,¹² and the USA.¹³ One Israeli study found that those 32.8% of medical students who determined to do a residency in psychiatry, only 6% opted psychiatry as their career option.¹⁴

In this study both the groups showed positive attitude toward psychiatric patients and psychiatric illnesses and they all agree that

psychiatric patients are not only human but they are interesting also and require great deal of attention [Table 4]. Similar results were found in another study with somewhat different methodology and questionnaire conducted in medical colleges of Karachi and Abbottabad of Pakistan^[12].

This study found a significant improvement in final years' overall attitude toward psychiatry as assessed by ATP-30 (Burra et al) before and after exposure of students to clinical rotations in psychiatry. The results in the earlier studies have been conflicting with some studies showing significant changes in attitude toward psychiatry after clinical exposure and others concluding that there is no effect of a short exposure.

A study at Nigeria by Adebowale et al.¹⁵ suggested that the 4 week clinical rotation in psychiatry resulted in significant increase in mean attitudinal score. Another study in Spain by Bulbena et al.¹² revealed improvement of attitude toward psychiatry after training in psychiatry.

On the contrary, the results obtained in our study are in contrast with some similar studies published earlier. A study in Bahrain by Al. Ansari and Alsadadi¹⁶ did not support the hypothesis that the greater exposure to psychiatry changes the attitude of medical students toward psychiatry. Another study in Nigeria by Olotu and Osahon¹⁷ indicated that there was no statistically significant change in the beliefs and attitudes of medical students toward psychiatry before the onset and after the end of a clinical posting in psychiatry.

There are limited data available on the impact of medical education and training on the attitude toward psychiatry in the Indian scenario. Gulati et al.^[18] in their study concluded that 2 weeks' exposure to psychiatry as per the current curriculum seems to have a limited influence in bringing a positive change in attitudes toward psychiatry. This disparity in the findings could be attributed to various factors like the extent of engagement of interns in clinical care, orientation provided by the faculty, and the types of patients seen. Even the treatment response of the patients seen by the interns in the short duration of 2 weeks can have a bearing on the young impressionable minds.

Limitations

- Small sample size
- Medical students from single institution

Conclusion

In India, Medical curriculum provides for a very short clinical rotation in the Department of Psychiatry as part of the compulsory rotational internship. This study indicated that even an exposure as short as 2 weeks had significant impact on the attitude of final year students towards psychiatry patients and the specialty as a whole. Future studies should aim at overcoming the limitations of this study by improving the sample size and following them up in order to assess the sustenance of the favorable change in the long run. Also, the internship program in the Department of Psychiatry can be planned and structured, bearing in mind the engraving effect it may have on the future medical students and their attitude toward psychiatry.

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