To study the impact of psychiatry posting on attitude towards psychiatry and estimated likelihood of psychiatry as a career choice in female interns in North India



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ABSTRACT

Background: Psychiatric disorders have been rising in last few years and emerging as leading cause of disease burden. Psychiatry as a discipline of medicine carry a lot of stigma due to which there is a lack of young medical students or professionals in choosing psychiatry as a career. Aims and Objectives: To study the impact of psychiatry posting on attitude towards psychiatry and estimation of likelihood of Psychiatry as a career choice in female interns. Materials and Methods: A cross sectional observational study of 112 female interns who met the Inclusion criteria. A written informed consent was obtained from the interns. A selfassessable ATP-30 scale was used to assess the attitude of the interns, this questionnaire was filled by the interns on the first day and after the two weeks of their posting in psychiatry department. The data collected was analysed with the help of SPSS version (21.0) info. Results: Ninety-eight interns were considered for further analysis because 14 female interns fulfilled the exclusion criteria. More than 95% interns reported to have positive attitude towards psychiatry throughout the posting. Results showed a statistically significant (<0.01) positive attitude towards major areas in psychiatry except only psychiatric hospitals and treatment. Only 33 female interns chose psychiatry as a career choice after the posting of two weeks which is not statistically significant, while around 40% interns denied for it. Conclusion: Interns showed highly positive attitude towards psychiatry. The positive attitude of interns towards psychiatry would go a long way towards reducing the stigma attached to people with mental illness and mental health professionals.

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INTRODUCTION

Mental illness is a major public health problem which affects around 10 % of the adults and 25 % of people at some time during their lives. The occurrence and prevalence of mental illnesses are predicted to rise in coming years. The WHO has estimated that unipolar depression will rank first as the leading cause of disease burden around the globe

by year 2030.¹ Mental illnesses cause worldwide burden in terms of disability–adjusted life years (DALYs) and years lived with disability (YLD) mainly due to the stigmatisation, marginalisation and discrimination in the society.²

Even medical students, doctors, medical teachers and especially mental health professionals are not immune to social preconception, stigma and abhor remarks.³

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They used to face these challenges in everyday practices. These factors contribute to negative attitude in health professionals. Customary negative attitude in the mental health professionals leads to great hindrance in providing mental health care to psychiatric patients.⁴ It also contributes to inattention to required mental health care needs, gratuitous referrals, indecent treatment and social support.5 Due to which very low number of medical students choose psychiatry as a career which contributes to the dearth of psychiatrists. In developed countries 12 psychiatrists per one lac people are available while India has 0.75 psychiatrists per one lac people but the desirable number is three psychiatrists per one lakh people. In India, out of 9000 psychiatrists only 15-20% are female which is very low as compared to other medicine disciplines where about 40-50% are female health professionals.7

Medical students are future care providers directly or indirectly. They, mainly interns, are the budding population stepping into the field of medical practice and bearing interest towards various specialities and illnesses. ^{8,9} Attitude of intern towards psychiatry is determined by various factors like personality, past experiences like training in medicine and other specialities, social climate within medical colleges, and most importantly on the attitude of other teaching faculty members towards psychiatry which can be assessed during their posting in psychiatry. ¹⁰

Their attitude towards psychiatry forms the stepping stone for making their decisions to pursue it as a career. This makes the attempt to study the current attitude of intern towards psychiatry and psychiatrists. These types of study might help in improving and making the positive attitude of the interns. Mental health professionals with positive attitude might help in reducing the stigma and discrimination across the globe in interns by changing their outlook. 11 If positive attitude is built during their internship or training period, it may lead to more students opting for psychiatry as their career choice to fill the gap between high prevalence of mental illnesses and low availability of psychological treatment. 12 So, in order to ensure the mental health and integration of people to get better treatment and referral timely, young and enthusiastic psychiatrists with positive attitude are needed.¹¹

There are several Indian studies on the medical students or interns' attitude towards psychiatry. The novelty of this study is that this is the first of its kind being conducted to study the attitude towards psychiatry as well as psychiatry as a career choice in female interns only. It is needed in order to generate a greater interest in choosing this field for these young doctors and to overcome the shortage of female psychiatrists because they are noted to be more empathic in their approach and

their patients report better satisfaction level as compared to their male counterparts.¹³

In view of the above-mentioned facts, this study aimed at studying the current attitude and aftermath of clinical posting in psychiatry on attitude of female interns towards psychiatry and estimated likelihood of psychiatry as a career choice among female intern.

Aims and objectives

To study and compare the current attitude and impact of psychiatry posting on attitude towards psychiatry in female interns.

To estimate the likelihood of Psychiatry as a career choice in female interns.

MATERIALS AND METHODS

Ethical approval

The study was initiated on the female interns in one of the tertiary care hospital in north India after getting through the Ethical Committee approval. Ethical consideration considered in concordance with the Helinski Declaration with the approval of the study from Ethical committee of our institution. A written informed consent form which explained the nature of study was obtained from all the interns prior to the study.

Study design and setting

It is a cross-sectional observational study in a women medical college in North India from January 2019 to December 2019. A total of 112 interns attending posting in psychiatry during their internship were included in the study. These interns have attended 2 weeks of clinical posting in 2nd year and around 20 theory lectures on psychiatry during 3rd year of their MBBS curriculum.

Inclusion criteria

Those interns who had not been exposed to psychiatry posting during their internship.

Exclusion criteria

Those interns whose relatives were psychiatrist, currently on treatment for any psychiatric disorders or having past and/or family history of psychiatric illness were excluded from the study.

Procedure

The purpose of the study was explained to the interns and written informed consent was taken. A self-assessable ATP-30 questionnaire was filled by the interns after studying it properly on the first day of their posting and after 15 days or on the last day of their posting in psychiatry department. We emphasised

the confidentiality as names were not requested. Students were not allowed to discuss their answers among themselves to avoid the group influence. We emphasised anonymity to overcome the possible tendency of the students to give answers perceived as acceptable to the investigators rather than representative of the respondents' attitude. The responses on the Likert scale were grouped together for simplifying the analysis, for example, "strongly agree" and "agree" were combined into "agreed" response, and "strongly disagree" and "disagree" were combined into "disagreed" response.

Tools

Attitude towards psychiatry (ATP) - 30 scale

The 30 item standardized and structured questionnaire ATP-30 was developed by Burra and colleagues to study the attitude towards various aspects of psychiatry on the basis of a 5 – point Likert scale (1-strongly agree, 2-agree, 3-neutral, 4-disagree and 5-strongly disagree). This scale has multiple dimensions and measures, so this scale is divided into 4 groups containing similar questions clustering around a similar theme. These groups are-attitude towards psychiatric patients and illness, psychiatrists and psychiatry, psychiatric knowledge and teaching, psychiatric treatment and hospitals. Out of 30 items, 15 items are directed at the positive attitude and remaining 15 items at the negative attitude towards psychiatry. To calculate a sum score, scores of positively phrased items were subtracted from 6 resulting in higher values for a more positive attitude and finally item scores of positively and negatively phrased items were summed up. The sum score ranged between 30 and 150 points. The higher the score, more favourable the attitude. The sum score of 90 would represent the logical neutral point of the scale. The score below this logical neutral point or 90, implies negative attitude and above 90 implies positive attitude towards psychiatry. The ATP-30 has shown good validity and reliability and has been used in various international and Indian studies with a Cronbach's alpha of 0.831.14

Statistical analysis

Descriptive data was analyzed by using mean and standard deviation. For continuous variables Student t-test was used for normally distributed data where p value <0.05 was taken as statistically significant. Data was analyzed using latest version of statistical software SPSS (21.0) Info.

RESULTS

Responses were obtained from 112 female interns, out of which 98 were considered for further analysis because 14 female interns fulfilled the exclusion criteria. 11 interns were currently under psychiatric treatment or having past/family history of psychiatric illness and three interns had a relative or family member as a psychiatrist.

Attitude of the interns towards psychiatry on ATP-30 Scale was positive before posting in 95% interns and after posting in 97% interns as shown in (Table 1).

The total ATP mean score after posting was higher than before the posting which was statistically significant (p value < 0.001) and score of positive domains was also statistically significant (p value < 0.001) as shown in (Table 2).

Table 3 shows the mean, standard deviation and range of all the four groups of ATP-30 Scale before and after the posting. Attitude towards psychiatric patients and illness, psychiatry and psychiatrists, psychiatric knowledge and teaching shows statistically significant improvement except the attitude towards psychiatric hospitals and treatment after the posting of two weeks.

Eighteen interns chose psychiatry as a career of choice before the posting. After the posting, 33 female interns chose psychiatry as a career choice. But five interns dropped the idea of choosing psychiatry as a career choice after the posting who were "agreed" to it before posting. Forty-five interns were of "neutral" opinion before posting which changed to 24 interns choosing psychiatry as a career choice. Interns who "disagreed" in choosing psychiatry as a career choice increased from 35 to 41 after the posting as shown in (Table 3) under the statement "I would like to be a psychiatrist".

Most of the interns (65-97 %) were "agreed" with each statement in group 1. It was a statistically significant improvement in all the statements included under this group as shown in (Table 4).

Most of the statements were not statistically significant under the group 2, 3 and 4 except the three statements in group 2, two statements in group 3 and three statements in group 4 as shown in (Tables 5-7) respectively.

DISCUSSION

Attitude is a mature way of thinking or feeling about situations compelling people to respond in some manner as per their preferences. It has behavioral, affective and cognitive components.¹⁴ The present study is a

Table 1: Attitude towards psychiatry on ATP scale							
Attitude	Before posting No. of interns (%)	After posting No. of interns (%)					
Positive attitude Negative attitude	93 (95) 5 (5)	95 (97) 3 (3)					
Neutral attitude							

Number and percentage of interns showing different types of attitude on ATP -30 Scale

Table 2: Comparisons of scores Domains Mean SD Range P value After posting Before posting After posting Before posting After posting Before posting ATP - 30 scale < 0.001** 108.02 113.26 9.63 11.33 85-131 < 0.001** 5.96 42-70 Positive Domain 56.48 60.21 5.41 49-73 51.69 32-67 29-68 **Negative Domain** 53.28 5.76 8.19 0.110

Comparison of Total ATP -30 Scale score, Positive domain score and Negative domain score before and after posting with their mean, standard deviation (SD), range and p value (significance < 0.05 represented by **)

Table 3: Comparison of four groups in ATP 30 scale								
Sr.No.	Groups		Mean		SD		Range	
		Before posting	After posting	Before posting	After posting	Before posting	After posting	
1.	Attitude towards psychiatric patients and illness	16.34	17.56	1.92	2.20	11-20	13-20	0.001**
2.	Attitude towards psychiatry and psychiatrists	37.92	39.49	4.34	5.34	26-49	27-52	0.015**
3.	Attitude towards psychiatric knowledge and teaching	23.95	25.51	3.46	3.61	20-36	18-40	0.003 **
4.	Attitude towards psychiatric hospitals and treatment	29.65	30.43	3.13	3.98	17-34	18-35	0.155

Comparison of ATP -30 Scale's four groups before and after posting with their mean, standard deviation (SD), range and p value (significance < 0.05 represented by **)

Sr.No.	Statements	Postings	Agreed (No. of interns)	Rest (neutral + disagreed) (No. of Interns)	Mean	SD	P-value
1	If we listen to them patients are just	Before Posting	84	14 (12+2)	4.23	0.79	0.001**
	as humans as other people.	After Posting	93	5 (4+1)	4.60	0.62	
2	Psychiatric illness deserves at least	Before Posting	93	5 (2+3)	4.52	0.74	0.034**
	as much attention as physical illness	After Posting	97	1 (0+1)	4.71	0.51	
3	Psychiatric patients are more often	Before Posting	51	47 (37+10)	3.58	0.94	0.007**
	interesting to work with than other patients	After Posting	66	32 (24+8)	3.97	0.97	
4	It is interesting to try unravel the	Before Posting	75	23 (19+4)	4.00	0.79	0.019**
	cause of psychiatric illness	After Posting	85	13 (10+3)	4.28	0.78	

Comparison of each statement under group psychiatric patients and illness in terms of their responses (agreed and rest) along with their mean, standard deviation (SD) and p value (significant <0.05 represented by **). All statements are under positive domain

modest attempt at assessing the current attitude and aftermath of 2 weeks' clinical posting of female interns in psychiatry. Exposure of interns during the posting includes the supervised assessment of the patients under the consultants/residents, involvement in the management and clinical discussions during ward rounds and one seminar by each intern during their postings.

Attitude of the interns did not change much after the clinical posting in psychiatry as most of the interns (> 95%) had positive attitude towards psychiatry itself throughout the posting. It was highly surprising to us that no interns had an overall negative attitude towards psychiatry. Positive attitude was also observed in some previous studies^{3,9,15-18} where 48% to 88% female interns showed positive attitude. Few studies¹⁹⁻²¹ revealed have revealed that 9% to 65% interns showed negative attitude towards psychiatry after the posting, which is contrary to the present study where we did not observe any blantly negative attitude. Mean standard deviation score in our study was very high as compared to a study done by

Jilowa et al¹⁸ and other studies. ^{10,22} Attitude of the interns increased significantly on the positive domain of ATP-30 Scale (p< 0.001). However, the attitude of the intern improved even on the negative domains but it was not statistically significant. These findings were consistent with studies done in last few years. ^{22,23,24} On comparison of the ATP-30 scale's four groups, it was found that attitude of the interns in three groups towards psychiatry significantly (statistically) increased after the posting of 15 days except the attitude towards psychiatric hospitals and treatment. Our findings were much better than a study done by Sarhan et al²³ in which attitude towards only psychiatric patients and illness, and psychiatry and psychiatrists were statistically significant.

This highly positive attitude even at the beginning of the posting may be because of interns think that psychiatry as a discipline of medicine is of prime importance in the current stressful era and the psychiatric illnesses run rampant across the globe. Main reason behind the positive attitude of the interns in our study were the well-established

Sr.No	Statements	Postings	Agreed (No. of interns)	Rest(neutral +disagreed) (No. of Interns)	Mean	SD	P-value
1	Psychiatrists talk a lot but do very	Before Posting	19	79 (26+53)	3.42	1.04	0.012**
	little.†	After Posting	12	86 (16+70)	3.79	0.95	
2	Psychiatrists seem to talk nothing but	Before Posting	1	97 (14+83)	4.19	0.69	0.040**
	sex.†	After Posting	2	96 (4+92)	4.41	0.76	
3	At times it's hard to think of psychiatrists	Before Posting	15	83 (18+65)	3.63	1.14	0.268
	as equal to other doctors.†	After Posting	13	85 (21+64)	3.83	1.23	
4	I would like to be a psychiatrist.#	Before Posting	18	80 (45+35)	2.85	0.89	0.544
		After Posting	33	65 (24+41)	2.94	1.23	
5	Psychiatrists tend to be least as stable	Before Posting	56	42 (24+18)	2.58	0.93	0.158
	as average doctors. [†]	After Posting	64	34 (17+17)	2.38	1.16	
6	Psychiatrists get less satisfaction from	Before Posting	13	85 (39+46)	3.44	0.86	0.277
	their work than other specialists.†	After Posting	10	88 (24+64)	3.59	1.10	
7	If I were asked what I considered to	Before Posting	38	60 (16+44)	3.03	1.15	0.106
	be three most exciting specialties, psychiatry would be excluded. [†]	After Posting	30	68 (19+49)	3.30	1.16	
8	Practice of psychiatry allowsthe	Before Posting	69	29 (25+4)	3.91	0.76	0.929
	development of really rewarding relationship with people.#	After Posting	79	19 (14+5)	3.90	0.81	
9	Psychiatry is unappealing because it	Before Posting	18	80 (20+60)	3.52	0.94	0.230
	makes so little use of medical training.†	After Posting	13	85 (19+66)	3.69	0.92	
10	Psychiatry is a respected branch of	Before Posting	71	27 (18+9)	3.91	0.95	0.032**
	medicine.#	After Posting	84	14 (10+4)	4.17	0.76	
11	People taking up psychiatry are	Before Posting	66	32 (21+11)	2.48	0.86	0.186
	running away from participation in real medicine.†	After Posting	54	44 (28+16)	2.32	1.08	

Comparison of each statement under group psychiatry and psychiatrists in terms of their responses (agreed and rest) along with their mean, standard deviation (SD) and p value (significant <0.05 represented by **). (*) represents the statements under the positive domain. (†) represents the statements under the negative domain

Table	6: Attitude of interns toward	s Psychiatric	knowledge and	l teaching (Group 3)			
Sr.No.	Statements	Postings	Agreed (No. of interns)	Rest (neutral+ disagreed) (No. of Interns)	Mean	SD	P-value
1	Most of the so-called facts in	Before Posting	17	81 (28+53)	3.41	0.88	0.302
	psychiatry are really just vague speculations.†	After Posting	18	80 (20+60)	3.55	0.99	
2	Psychiatry has very little scientific	Before Posting	16	82 (23+59)	3.55	0.92	0.530
	information to go on.†	After Posting	13	85 (23+62)	3.63	0.89	
3	It is so unscientific that even the	Before Posting	8	90 (29+61)	3.67	0.85	0.073
	psychiatristscan't agree as to what its basic applied science are. [†]	After Posting	7	91 (19+72)	3.89	0.83	
4	Psychiatric teaching increases	Before Posting	42	56 (32+24)	3.22	0.99	0.001**
	our under-standing of medical & surgical patients.#	After Posting	57	41 (30+11)	3.71	0.91	
5	These days psychiatry is most	Before Posting	65	33 (19+14)	3.71	0.91	0.078
	important part of curriculum in medical school.#	After Posting	73	25 (16+9)	3.94	0.94	
6	Majority of students report that their	Before Posting	46	52 (31+21)	3.33	0.89	0.001**
	undergraduate training has been valuable.#	After Posting	58	40 (26+14)	3.77	0.98	
7	Psychiatry is so amorphous that it	Before Posting	30	68 (33+35)	3.05	0.89	0.847
	cannot taught effectively.†	After Posting	35	63 (31+32)	3.02	1.10	

Comparison of each statement under group psychiatric knowledge and teaching in terms of their responses (agreed and rest) along with their mean, standard deviation (SD) and p value (significant <0.05 represented by **). (*) represents the statements under the positive domain. (') represents the statements under the negative domain

department of psychiatry, community based mental health programmes and well-organized celebrations of every particular day related to mental health and the participation of interns during their under-graduation in our institution. Interns attended their UG psychiatry lectures and clinical

postings with more than 60% attendance which has helped in enhancement of their general awareness and attitude towards psychiatry. This positive attitude is essential for ensuring better care for patients as well as reduction of stigma for psychiatric disorders.

Sr.No.	Statements	Postings	Agree (No. of interns)	Rest (neutral + disagreed) (No. of Interns)	Mean	SD	P-value
1	It is quite easy for me to accept the	Before Posting	52	46 (35+11)	3.48	0.92	0.008**
	efficacy of psychotherapy	After Posting	71	27 (19+8)	3.82	0.81	
2	Practice of psychotherapy basically	Before Posting	14	84 (30+54)	3.46	0.87	0.233
	fraudulent since there is no strong evidence that it is effective †	After Posting	10	88 (24+64)	3.61	0.85	
3	With the forms of therapy now at hand,	Before Posting	70	28 (24+4)	3.77	0.70	0.010**
	most psychiatric patients improve	After Posting	84	14 (12+2)	4.04	0.68	
4	Psychiatric treatment causes patients to	Before Posting	32	66 (29+37)	3.09	0.88	0.886
	worry too much about symptoms.†	After Posting	35	63 (26+37)	3.11	1.04	
5	There is very little that psychiatrists can	Before Posting	10	88 (9+79)	3.86	0.76	0.942
	do for their patients.†	After Posting	15	83 (9+74)	3.85	1.06	
6	In recent years, psychiatric treatment has	Before Posting	87	11 (8+3)	4.08	0.58	0.026**
	become quite effective	After Posting	92	6 (5+1)	4.29	0.61	
7	Psychiatric hospitals little more than	Before Posting	12	86 (14+72)	3.79	0.89	0.341
	prisons.†	After Posting	16	82 (19+63)	3.64	1.14	
8	Psychiatric hospitals have specific	Before Posting	86	12 (9+3)	4.13	0.71	0.624
	contribution to make to the treatment of mentally ill.	After Posting	81	17 (11+6)	4.07	0.96	

Comparison of each statement under group psychiatric hospitals and treatment in terms of their responses (agreed and rest) along with their mean, standard deviation (SD) and p value (significant <0.05 represented by **). (*) represents the statements under the positive domain. (*) represents the statements under the negative domain

Group 1 (Attitude towards psychiatric patients and illness)

Table 4 shows the responses to the statements that represent the attitude towards psychiatric patients and illnesses which were statistically significant after the posting. 67-97 % of the interns were "agreed" to all the statements after the posting which depict positive attitude towards psychiatric patients and illnesses. They agreed that psychiatric patients are not only human but they are also interesting and need great attention. Only 3-33% interns expressed discriminatory views about psychiatric patients and illnesses following the completion of posting. Similar results were shown by previous studies. 10,18 A few studies revealed that only one or two statements show positive attitude and others were neutral to negative. 23,25,26 This great improvement in attitude towards psychiatric patients and illnesses after the training has been found explained by coming in contact with psychiatric patients while history-taking and their involvement in patients' care, which led to the interns feeling comfortable and increasingly confident in interviewing the patients.¹⁵ These types of approaches towards psychiatric patients and illnesses among interns were the key factors in determining the positive attitude in our study.

Group 2 (Attitude towards psychiatry and psychiatrists)

Table 5 shows that 55-98% of the interns gave favorable responses to the statements that represent their overall positive attitude towards psychiatry and psychiatrists after the posting.

Eight out of 11 statements showed positive attitude except the three like "Psychiatrists tend to be least stable as average doctors" (66% were "agreed" and think that psychiatrists are not as emotionally stable as average doctors and they are nearly similar to their patients), "I would like to be a psychiatrist" (66% were "disagreed") and "People taking up psychiatry are running away from participation in real medicine" (55% were "agreed" and think that psychiatry is not real medicine due to the absence of strong evidence). Similar results in the past where 45-80% of the interns showed positive attitude. 8,10,18,22 Some studies revealed negative attitude of interns towards psychiatry and psychiatrists. 20,23,25 Viewing psychiatry as an advancing field along with great break-throughs in the last few years, students are maintaining a highly positive attitude towards psychiatry in this study.

Group 3 (Attitude towards psychiatry knowledge and teaching)

Table 6 shows the responses to the statements that represent the overall positive attitude of interns towards psychiatric knowledge and teaching. Most of the statements' response improved but were not statistically significant after the posting, except for these - Psychiatric teaching increases our understanding of medical & surgical patients" and "Majority of students report that their undergraduate training has been valuable" (p<0.001). 80-90% interns think that psychiatry has scientific discipline and not just vague hypothesis. After the completion of posting, most of the interns expressed more accurate beliefs about the etiology of psychiatric disorders. Up to 75% interns think that psychiatry was the most important part of curriculum during their undergraduate training, it was valuable and their psychiatric teaching helps in understanding other patients. Only One facet that shows decline in attitude is,

"Psychiatry is so amorphous that it cannot be taught effectively." Similar results were also found by some previous studies.^{8,10,18,22} Some studies revealed a negative attitude of interns towards psychiatric knowledge and teaching.^{23,25,27} These findings came as a great surprise because psychiatric knowledge ameliorated along the course and psychiatric postings. During the posting, involvement of interns in psychiatric consultation played a pivotal role in their understanding the role of psychiatry in medical and surgical patients. Involving medical students and interns in the study itself generated curiosity and awareness among them towards academic research in general and psychiatry in particular. Demonstration of psychopathology to learn the required skills during the psychiatry posting also played a greater role to enhance the psychiatric knowledge. Interns think that psychiatry is structurally ambiguous might be due to lower number of psychiatry lectures during their MBBS curriculum. Psychiatry internship is not enough to understand the specialty completely. We must build and maintain a strong and sophisticated curriculum throughout the MBBS course. These findings demand to make the attendance compulsory and an independent examination subject so that students may be more attentive and have better understanding of the subject.

Group 4 (Attitude towards psychiatry hospitals and treatment)

Table 7 shows the responses to the statements that represent the overall positive attitude of interns towards psychiatric hospitals and treatment. 86% interns believed that there is a certain role of psychiatric hospitals in the treatment of mentally ill patients and these hospitals are not like prisons. Around 92% interns agreed that psychiatric treatment has become quite effective in recent years. 72-88% interns responded in the favor of psychotherapy. Only 10% were of the opinion that psychotherapy is fraudulent rather than evidence based. Generally positive attitude (89% agreed) was observed regarding the psychiatrists' ability to help their patients. Most of the statements' responses improved but were not statistically significant after the posting except, "It is quite easy for me to accept the efficacy of psychotherapy", "With the forms of therapy now at hand, most psychiatric patients improve", and "In recent years, psychiatric treatment has become quite effective" (p<0.002). 35% of the interns were "agreed" that psychiatric treatment causes patients to worry too much about symptoms. Similar results where interns showed positive attitude were also found in studies done in past.^{3,8,10,18} Some studies^{23,25} revealed a negative attitude of interns towards psychiatric hospitals and treatments. After the posting, most of the interns expressed better appreciation of therapeutic intervention might be due to their involvement in patients' work up and ward rounds. They observed that patients have shown improvement with newer antipsychotics and antidepressants with fewer side effect profiles which resulted in the positive attitude of interns towards psychiatric hospitals and treatment. Interns were more worried about the symptoms or illnesses due to frequent relapse and chronic course of treatment in psychiatric illnesses. High quality teaching and posting containing a variety of clinical experiences including the explanation of nature, prognosis and treatment of psychiatric illnesses, bedside teaching, problem-based learning, should be included in the curriculum to improve their attitude towards psychiatric hospitals and treatment. During the training in psychiatry, students might spend more time at mental health clinic so that they can see the improvement with treatment and better prognosis of patient. These types of approaches could be promising in improving the attitude of the interns towards psychiatric hospitals and treatment.

Psychiatry as a career choice

Only 33 (34%) female interns chose psychiatry as a career choice and 41 interns were "disagreed" in choosing psychiatry as a career choice after the posting of 15 days. There was an almost 15% surge in interns agreeing to think about being a psychiatrist in future, after the posting. There was not a significant improvement on the level of interest in psychiatry as a career choice (p= 0.544). Similar results in previous studies were found where 25-50% interns were ready to choose psychiatry as a career choice after the posting. 10,17,18,29 In only two recent studies^{8,18} where 60-70 % of the interns were ready to choose and less than 10 % were "disagreed" in choosing psychiatry as a career choice and improvement was statistically significant. Evidence of the aftermath of posting on career preferences is mixed, with some studies³⁰ finding increase in the interest of being a psychiatrist after the posting and other findings no difference.³¹

Despite the highly positive attitude of the interns towards psychiatry, a disparity was found between high interest in psychiatry and low preference to psychiatry as a career choice in the present study. We may set out various reasons for this disparity. Several factors demoralize the interns in pursuing psychiatry, like the perception of it not being a real medicine, imprecise and unscientific. There is also a belief that psychiatrists are emotionally not stable, more vulnerable to develop psychiatric disorders, do nothing more than prescribing sedatives and tranquilizers etc.

Note that some responses had to be handwritten and were not a part of any scale used. Interns think that psychiatry faces challenges like questionable validity of diagnosis, the opposing beliefs of psychiatrists, the unclear role of psychiatrists and financial prospects. Interns felt uncomfortable with patients, had poor prognosis and they felt that interacting with them is stressful, dangerous, emotionally draining, disturbing and overwhelming. 50-60% interns were interested in other specialties. Psychiatry as a career was ranked after medicine, surgery and pediatrics because of low prestige or lower image among society.

Interns think that there is need of great patience, skills and higher intellectual challenges to become a psychiatrists. A possible explanation regarding the dissonance could be the firm and pervasive stigma attached to mental disorders. Interns think that psychiatrists are often subjected to ridiculous stereotypic and stigmatizing comments and remarks from non-psychiatrist medical professionals, from their friends and family members and from society.

Limitations of the study

Like any other study, there are limitations of the present study like, it is a cross-sectional study and the sample size was small. The study was limited to only one medical college, so the findings cannot be generalised to other areas. We concluded that posting improves the attitude towards psychiatry, but we cannot predict that their views will remain constant as students' progress through the course. The study's participants were aware of our area of interest, which could have influenced some of the responses.

CONCLUSION

The attitude of the interns was highly positive during the clinical posting in psychiatry which improved significantly after the posting. Our study supports the hypothesis that as the exposure to psychiatry increases, the attitude towards psychiatry improves and the interns' consideration of psychiatry as a career increase. Interns showed some interest in choosing psychiatry as a future career option. Our study depicted that even after the posting; there were lesser number of interns who chose psychiatry as a career option. So, it has been felt that psychiatry remains a neglected subject during the under graduation.

Future suggestions

There is a need to modify the psychiatry curriculum and there should be a requirement of fully integrated teaching during under graduate (UG) training to develop more interest in the psychiatry discipline itself. So, we need to dive deep so as to understand the relationship between various factors like classroom teaching, clinical rotation, association of interns with consultants/residents and the importance of good role models which we feel might be useful in transforming the positive attitude into serious consideration of psychiatry as a career choice.

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