



### Original Research Article

## Perception and attitude of medical students towards their career choices and speciality of Psychiatry

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### Abstract

**Background:** *To evaluate students' perception and attitude towards psychiatry in comparison with other specialities like medicine, surgery, paediatrics, obstetrics & gynaecology, orthopaedics, radio diagnosis and dermatology seems to be a global issue and is an essential part of programs to improve the status of the profession.*

**Methods:** *Perception of 98 1st year and 90 final year medical students from the Indira Gandhi Medical College, Shimla was recorded using a semi-structured questionnaire. Students provided their opinion about future career choices and perspective of these specialties in terms of work-life balance, challenging aspect, ability to help patients effectively, financial reward, reputation, and emotional stability; their preferences in life and interaction with psychiatrist and its impact.*

**Results:** *Psychiatry was ranked less attractive among majority of the specialities under study, but was found more attractive than dermatology. Surgery was a high priority for 40 (41%) students while psychiatry was a high priority in only 8 (8.2%) first year students, while in final year, medicine was a high priority for 29 (32.2%) while psychiatry was a high priority in only 12 (18.8%) students. Psychiatry had higher emotional stability but the reputation was lower among all the specialities in both groups. Those who like psychiatry attributed more importance to an interesting and challenging job than to prestige and financial reward.*

**Conclusion:** *Our study points out the fact that prejudices toward patients with mental dysfunctions and lack of confidence in the efficacy of psychiatric treatment should be specially targeted by the curriculum in the later part of undergraduate education.*

**Keywords:** *Attitude, psychiatry, medical students.*

## Introduction

Mental health is an essential component of human health. Mental disorders can affect not only individual's quality of life but also a nation's productivity, since the burden of mental illnesses has been increasing in all regions of the world.<sup>(1)</sup> It can partly be understood as a consequence of rapid social changes in the recent decades. Unfortunately, mental health services in India are not enough to respond to the extensive mental disorders prevalent in the country.<sup>(2-3)</sup> The shortage of skilled mental health professionals is a major problem. The number of mental health institutions and doctors lags far behind the need for mental health services in our country. Most general hospitals do not have clinics specializing in mental illnesses, and many clinicians, other than psychiatrists and psychologists, lack awareness and fail to effectively identify symptoms of mental disorders.

Previous studies have consistently shown that psychiatry was not the top specialty choice for vocation among medical students in different countries.<sup>(4-6)</sup> The medical education system in India is different from that in foreign countries. Psychiatry is taught in the final year of medical college, consisting of 30-40 hours of theoretical lectures and 40-50 hours of group sessions at clinical wards. Although many factors influence a medical student's career choice of psychiatry and other specialties, attitudes about psychiatrists can play a key role in the declining interest in psychiatry among medical students.<sup>(5-8)</sup>

World Health Organisation has identified a worldwide shortage of psychiatrists.<sup>(9)</sup> In developing countries like India, brain drain, that is migration of psychiatrist from developing to developed countries, further complicates the condition.<sup>(10)</sup> In India, average national deficit of psychiatrists is 77%, and nine states have a deficit of more than 90%.<sup>(11)</sup> If the factors that influence students to choose a specialty can be identified, it may be possible to encourage more students to the specialty. In our country, selection of a specialty depends on the complex interplay of various

factors that can be broadly divided into two parts; first, before exposure to a specialty and second, during or after exposure to a specialty. Some Indian studies have reported 2 - 21% preference for psychiatry specialty.<sup>(12)</sup>

There are many Indian studies which analysed perception of medical students, but most of these included students who were studying in first year. None of them explored the comparison between 1st year and final year medical students' perception of psychiatry as a career.<sup>(13)</sup> So, we have planned this study to explore medical students' attitudes toward psychiatry in comparison to other specialities in the pre-clinical and clinical years ( i.e. first year vs final year) and to observe which factors influence the creation of these attitudes.

## Material and Methods

The study was conducted among the 98 1st year and 90 final year medical students from the Indira Gandhi Medical College, Shimla. All questions and options were explained in detail to all the students using a semi-structured questionnaire. First two questions addressed their opinion about eight clinical specialties as a prospective career using a 5-point rating scale ('high priority' to 'no way'); and reasons for their choices. The next question required grading the students' perspective of these eight specialties from +2 (very good) to -2 (very poor) in terms of financial reward, reputation, work-life balance, challenging aspect, ability to help patients effectively and emotional stability. These eight specialties were medicine, surgery, obstetrics and gynaecology (OBG), paediatrics, orthopaedics, dermatology, psychiatry and radiology. In one question, students ranked their preferences in life for a relaxed lifestyle, social service opportunities, high payment, and reputation. One question was about any interaction with a psychiatrist and its impact on the inclination for psychiatry; students were required to mark 'increased inclination', 'decreased inclination', or 'no effect'. In the final question, students were asked to compare

psychiatrists with other specialists in terms of attractive personality, intelligence, emotional stability, sensitivity to patients and being social. However, ‘other specialists’ were not specified and students were supposed to mark their response in terms of ‘more’, ‘less’, or ‘don’t know’. Only the common clinical specialties were chosen because of feasibility limitations.

**Ethics:** The study was conducted after due approval from the institutional ethics committee.

**Statistics:** Data was entered in the excel sheet and analysed by using appropriate statistical methods.

Data were expressed as proportions and means. Data was analysed using statistical software Epi Info version 7.2.0.1. 2-tailed value of  $p < 0.05$  was taken as statistically significant.

**Results**

Age of respondents ranged from 17 - 23 years with a mean of 20.6 and standard deviation of 0.57; sample consisted of 98 1st year students (55 males and 43 females) and 90 final year students (48 males and 42 females).

**Table 1:** Priority of subjects as future career choices (First year-98; Final year- 90)

Sr. No	Speciality	1- High Priority		2- Priority		3-Neutral		4-Unlikely		5- No way	
		1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year
1	Medicine	22	29	43	33	20	12	10	11	3	5
2	Surgery	40	24	22	28	16	28	12	7	8	3
3	OBG	36	20	34	32	19	18	7	19	2	5
4	Paediatrics	21	16	33	36	30	28	10	11	4	5
5	Orthopaedics	14	22	30	34	37	21	14	7	3	6
6	Radio diagnosis	12	18	31	39	29	26	21	5	5	2
7	Psychiatry	8	17	27	36	23	22	18	4	25	8
8	Dermatology	6	18	24	33	22	20	24	12	20	7

Table 1 shows the students’ opinion about the various specialties as a career choice. In first year students, surgery was considered as a high-priority by 40 (41%) students, followed by OBG, which was a high-priority for 36 (37%) of the students, while in final year, medicine was considered as a high-priority by 29 (32.2%) students, followed by surgery, which was a high-priority for 24 (26.7%) of the students.

Psychiatry was considered as a high-priority only by 8 (8.2%) in first year and 17 (18.9%) of the students in final year, and it ranked second last among the given options. Though, clubbing ‘high-priority’ and ‘priority’ placed psychiatry 35

(35.7%) and 53 (58.9%) ahead of dermatology 30 (30.6%) and 51 (56.7%) in first year versus final year students.

Psychiatry was dismissed (‘no way’) as a prospective career by 25 (25.5%) and 8 (8.9%) of the students (first year versus final year), second only to dermatology which was dismissed by 20 (20.4%) and 7 (7.8%) of the students. Gender analysis of ‘high-priority’ subjects in Table 2 revealed that females opted for OBG and males opted for surgery with a significant statistical differences ( $P < 0.01$ ), in both the groups. Other subjects, including psychiatry, were comparable by the students’ gender in both the groups.

**Table 2:** Gender analysis of high priority subject

Speciality	Male		Female		P
	1 <sup>st</sup> year (55)	Final year (48)	1 <sup>st</sup> year (43)	Final year (42)	
Medicine	12	11	10	18	0.24
Surgery	32	22	8	2	0.04*
OBG	10	4	26	16	0.03*
Paediatrics	9	9	12	7	0.6
Orthopaedics	14	22	0	0	0.001*
Radio diagnosis	5	8	7	10	0.2
Psychiatry	5	10	3	7	0.05
Dermatology	2	5	4	13	0.07

(\*= $p < 0.05$ , statistically significant)

**Table 3:** Ratings of strength of subjects

Subject aspect	Medicine		Surgery		OBG		Paediatrics		Orthopaedics		Radio diagnosis		Psychiatry		Dermatology		P
	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	1 <sup>st</sup> year	Final year	
	2: Very high,		1: High,		0: Neutral,		-1: Poor,		-2: Very Poor								
Financial reward	1.3	1.6	1.7	1.4	1.4	1.5	1.1	1.3	1.2	1.4	1.3	1.5	0.8	0.9	0.8	0.9	<0.01
Reputation	1.5	1.4	1.7	1.5	1.5	1.7	1.2	1.3	1.1	1.0	1.1	1.3	0.7	0.8	0.9	0.9	<0.01
Work-life balance	1.1	1.3	0.2	0.3	0.3	0.4	0.7	0.8	0.7	0.8	1.0	1.1	0.8	0.9	1.3	1.1	<0.02
Challenging	1.2	1.2	1.5	1.6	1.4	1.6	1.0	1.2	0.8	0.9	0.6	0.7	1.2	1.1	0.5	0.7	<0.03
Helps patients effectively	1.2	1.3	1.4	1.6	1.3	1.1	1.2	1.1	1.1	1.2	0.8	1.0	1.3	1.2	0.8	0.9	<0.01
Emotional stability	0.7	0.8	0.5	0.7	0.7	0.8	0.7	0.7	0.5	0.7	0.7	0.8	0.8	0.9	0.4	0.5	0.03
Average	1.2	1.3	1.3	1.5	1.2	1.4	1.0	1.0	0.8	0.9	0.9	1.1	1.0	1.1	0.8	1.0	

\*= p<0.05, statistically significant

Table 3 shows the students’ opinion about each subject’s strength for various aspects. Surgery was the strongest, and dermatology was the weakest subject in terms of financial reward, reputation, challenging subject and ability to help patients effectively. Work-life balance was considered worst for surgery and OBG and best for medicine and dermatology in both the groups.

Emotional stability was considered best in psychiatry and least in dermatology in both the groups. Reputation of psychiatry was poor compared with medicine, surgery, OBG, paediatrics and radio diagnosis in both the groups. Average strength of psychiatry was considered better than orthopaedics and dermatology, in first year students while, dermatology, orthopaedics and paediatrics in final year students.

Differences of means within each category were statistically significant (P <0.01) in both the groups. The financial reward of all the other specialities except dermatology were significantly higher (P <0.01) than psychiatry in both the groups and comparative with dermatology. Reputation of psychiatry was lower with respect

to all other specialities with a significant difference (P < 0.01) in both the groups. Work-life balance of psychiatry was found significantly better than surgery, OBG, paediatrics and orthopaedics (P < 0.01) in both the groups.

Psychiatry was more challenging than orthopaedics, radio diagnosis and dermatology and less challenging than surgery and OBG and comparative with medicine (P < 0.01) in both the groups. Ability to help patients was significantly higher in psychiatry compared to dermatology and radio diagnosis (P <0.01) in both the groups. Emotional stability in psychiatry was significantly better than other specialities (P < 0.01) in both the groups.

Past interaction with psychiatrist was reported by 9 (9.2%) first year students and 16 (17.8%) final year students. Because of this, 5 (55.6%) had increased inclination towards psychiatry while 4 (44.4%) had no effect among first year students and 11 (68.8%) had increased inclination towards psychiatry while 5 (31.2%) had no effect among final year students.

**Table 4:** Comparison of psychiatrist with other specialists

Personality factor	More (%)		Less (%)		Do Not Know (%)	
	1 <sup>st</sup> year (98)	Final year (90)	1 <sup>st</sup> year (98)	Final year (90)	1 <sup>st</sup> year (98)	Final year (90)
Attractive personality	46	58	22	19	30	13
Intelligence	68	62	8	10	22	18
Emotional stability	54	68	20	13	24	9
Sensitivity to patients	65	70	15	12	18	8
Social	44	53	30	24	24	13

**Discussion**

In previous studies investigating the attitudes of medical students toward psychiatry as their future career have consistently shown that psychiatry

continues to be an extremely unpopular specialty among medical students.<sup>(3,14-18)</sup> Our findings showed that only 8 (8.2%) out of 98 students in first year and 17 (18.9%) out of 90 students of

final year in our study took psychiatry as their first choice or high priority of career. This result was consistent with a survey in the USA that revealed that only 0.5% of medical students considered psychiatry as their top choice, whereas 62% of students expressed a negative perception of psychiatry as a career (unlikely or “no way”).<sup>(3)</sup> In the present study, females preferred OBG in first year and medicine in final year. Males preferred surgery in both the groups. Bhat S et al.,<sup>(19)</sup> reported that females choose OBG and paediatrics while males choose medicine and surgery. In a study by Kumar et al.<sup>(20)</sup> more inclination of females for OBG and males for orthopaedics has also been reported.

Psychiatry was considered as a high-priority subject only by 8.12% and 18.8% of the first and final year students respectively. Earlier studies from India and abroad have shown similar trends. Kumar and Dhaliwal found that only 3% second semester students considered psychiatry as their first choice while it was only 1.5% in the eighth semester students.<sup>(21)</sup> Compared to preferred specialties like surgery, medicine and OBG, psychiatry had less financial rewards, reputation and challenge. Work-life balance in psychiatry was better than surgery and OBG. Emotional stability was better in psychiatry than all of these. Earlier studies have given variable results for these domains. Similarly, Baboolal et al.,<sup>(22)</sup> observed that psychiatry was considered lower than medicine, surgery and paediatrics in all of these aspects and overall lower attractiveness of psychiatry than these specialties. Previously some studies have found that psychiatry is not financially rewarding. Stigma attached to psychiatry is a well-known fact and world psychiatric association established a task force to examine evidence about stigmatization of psychiatry and psychiatrists, and to give recommendations to prevent it.<sup>(23-24)</sup>

### Conclusion

The present study is the first of its kind in Himachal Pradesh which used a precise and

internationally comparable methodological instrument and it shows that pre-clinical medical students have a lesser affinity towards psychiatry when compared to other specialities. Also, the study points out the fact that prejudices toward patients with mental dysfunctions and lack of confidence in the efficacy of psychiatric treatment should be specially targeted by the curriculum in the later part of undergraduate education. How this will affect the attitude of clinical students and graduates is to be examined.

### Limitations

Our study also has few limitations as well. It was a cross sectional one and the sample size also relatively small. As we all know, choice of students for a career keeps on changing over the time, on the basis of their experiences during their graduation period. We recommend that a prospective study should be planned to see the better association of various parameters studied.

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