

EDITORIAL

IMPORTANCE OF UNDERGRADUATE PSYCHIATRIC TRAINING

The basic purpose of teaching and training at undergraduate level is to prepare medical graduates to serve better at primary health care level. The patients with physical illness have concomitant emotional problems requiring professional handling, therefore teaching of psychiatry at undergraduate level becomes even more relevant and essential.

The main aim of primary health care is to de-professionalize and decentralize the medical care, so that basic health care as per WHO's definition, can reach all the countrymen. The Medical Council of India therefore recommends for an obligatory two weeks psychiatry training, however there exists vast variation regarding the duration of posting and quantum of teaching from one medical college to another.

Whatever may be the nature of the illness, the approach should be holistic i.e. to pay attention to the patients as a human being and treat his problems in totality. Thus it is vital that medical students should be trained such that they develop a clinical acumen that views the patient from an emotional as well as a somatic perspective.

Medical students awareness about mental illness becomes more important, if viewed in the context of various researches which have conclusively shown that nearly 30% of the patients seeking help in general health services, in fact suffer from emotional, psychosocial problems and psychiatric symptoms.

Moreover, the literature supports the idea that undergraduate psychiatry teaching enhance the students positive attitudes towards understanding psychiatric illness. These doctors have more acceptance of psychiatric illness, make differential diagnosis in which psychiatric problem are also considered and have less anxiety in dealing with such patients.

We have to face the fact that India a developing country is still nursing the paediatric phase of psychiatry speciality. It is in this context

that a medical student, who is both the subject and consumer of our efforts to teach psychiatry, becomes all the more important. We know that our manpower in terms of trained psychiatrists is too less so as to meet the mental health demands of the nation. Therefore for many decades to come general practitioners and other health professionals will have to be the main providers of psychiatric care. It is in this view that our undergraduate training of psychiatry is expected to go a long way and may compensate for the deficient manpower.

Another important issue before we talk about the need for psychiatry undergraduate teaching or the need for change in the existing teaching is the perception of medical students about this speciality.

Western literature shows that in late seventies and early eighties at a time when there was a sharp decline in recruitment at postgraduate psychiatry level, medical students viewed psychiatry as low in status, low in efficacy, high in potential for inducing anxiety, practised by generally well meaning, intellectual, kind, but somewhat fuzzy mind and at times down right neurotic practitioners. It has also been observed that there was social pressure placed on medical students to avoid psychiatry and the stigmatization of those who asserted their interest in this field (Light, 1975).

It was also seen that undergraduate student appeared to be negatively influenced by the antipsychiatric views of non psychiatric faculty, house staff and peers. It was viewed as of low prestige and low precision.

Lau et al. (1976) found that after undergraduate teaching in psychiatry, majority of students had a positive improvement in the attitudes of students towards psychiatry. In a similar study using an "opinion about mental illness" questionnaire the authors found a positive change in attitudes during the internship which was maintained even after graduation from medical school.

The study conducted in India (Rajgopal and Kuruville, 1987) to assess the undergraduate medical students attitudes towards the psychiatry observed that the students did not seem to realize the magnitude of suffering felt by the mentally ill, and recommended that we should help them appreciate the full dimensions of mental suffering.

A third world study on medical students change in perceptions of mental illness following psychiatric exposure was conducted by Khandelwal and Workneh (1987) in the department of psychiatry, Addis Ababa University, Ethiopia. The over all conclusion of the authors was that the students clearly benefited from their 6 weeks posting and developed quite realistic appraisal of psychiatric illnesses.

It was two decade ago that Sethi (1978) in his editorial in this very journal had pleaded a better dealing for training in psychiatry at undergraduate level. According to the recommendations accompanying the draft of "National Mental Health Programme for India" (NMHP, 1982) currently the amount and type of mental health training to medical undergraduates in our country is grossly inadequate. The working committee for NMHP for India mentions the potential of using these future medical doctors as agents of a new and better mental health service system for our country. In view of about 13,000 new doctors learning at the portals of our medical colleges every year the working committee also stressed that the amount and content of under graduate psychiatric training be quickly altered in such a manner that a newly qualified doctor is able to discharge his or her responsibilities for better mental health care of the community.

A workshop on mental health training of undergraduates held in 1988, at NIMHANS Bangalore, identified the necessary steps to improve the undergraduate medical education and put forward certain recommendations to MCI of which the most important was giving psychiatry a status of full fledged subject at MBBS level.

The importance of psychiatry training in rotatory intership was summarized by Kaufman (1968 quoted by Eatson & Goldsetin, 1977) and he critically stated " of all these subjects to which the intern has been exposed as a medical student he

shows the greatest ignorance in the field of psychiatry he may know the lyrics but can not carry the tune" and this perhaps holds true with regard to present status of psychiatry in our country.

It is still not very late that comprehensive training of psychiatry be provided to as many as 13000 medical undergraduates who are passing out every year from our medical colleges so as to make them better doctors.

The health administrators should realize that time is ripe, not only to investigate new ideas and strategies regarding undergraduate psychiatry teaching curriculum, but also to give psychiatry its due, in the direction of shaping the undergraduates of today into the basic mental health providers of tomorrow.

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