Medical Students' Attitudes towards Profession of Psychiatry- A Cross-Sectional Survey from Medical Colleges of Sindh, Pakistan

Rakesh Kumar, Riaz-ul-Haque, Haresh Kumar, Khalid Mustafa

ABSTRACT

Objectives: To Evaluate Students' Attitudes Towards the Profession of Psychiatry.

Study Design And Setting: This cross-sectional study was conducted at the Department of Psychiatry, Hamdard College of Medicine and Dentistry, Hamdard University, Karachi, Pakistan, from March 2020 to August 2020. All undergraduate students of different medical colleges and universities in Sindh were included in the study

Methodology: A total of 512 undergraduate students were registered in the study. Multiple email invitations with links to Google Forms were sent to all undergraduate participants. The study comprised 2 sections: (1) The Demographics Questionnaire and (2) Mental Illness Clinicians Attitude Scale (MICA), version-2 specific for medical students, a self-administered scale, requiring about 5 minutes to complete it. Data was analyzed using SPSS Version 20.

Results: Out of 512 medical students surveyed from various medical colleges in the Sindh province of Pakistan, 279(54.5%) were male and 233(45.5%) were female. According to the survey, 65% of students learn psychiatry because it is in exams. Dow University of Health Sciences students had the lowest MICA score (41.06), indicating a positive attitude. whereas students from Hamdard College of Medicine & Dentistry had the highest MICA score (57.12), indicating a negative stigmatizing attitude.

Conclusion: Our findings suggest that undergraduates have a negative attitude toward mental health. In Pakistan, the subject of psychiatry is not tested as an individual subject, so students pay little attention. It is necessary that this subject be examined separately like medicine and surgery.

Keywords: Attitude, Medical Students, Psychiatry

How to cite this Article:

Kumar R, Haque R, Kumar H, Mustafa K. Medical Students' Attitudes towards Profession of Psychiatry- A Cross-Sectional Survey from Medical Colleges of Sindh, Pakistan. J Bahria Uni Med Dental Coll. 2023;13(3):187-91 DOI: https://doi.org/10.51985/JBUMDC2022159

This is an Open Access article distributed under the terms of the Creative Commons Attribution Non Commercial License (http:// creativecommons/org/licences/by-nc/4.0) which permits unrestricted non commercial use, distribution and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION:

According to the Diagnostic and Statistical Manual of Mental Disorders, Version 5, a mental disorder is defined as "a syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological,

Rakesh Kumar

Assistant Professor, Department of Psychiatry Hamdard College of Medicine & Dentistry, Hamdard University Karachi Email: rakesh.kumar@hamdard.edu
Riaz-ul-Haque Assistant Professor, Department of Community Medicine Hamdard College of Medicine & Dentistry, Hamdard University Karachi Email: riazhaque27@gmail.com
Haresh Kumar: Associate Professor, Department of Psychiatry Khairpur Medical College, Khairpur Mirs. Email: hareshmakhija@gmail.com
Khalid Mustafa: Professor, Department of Pharmacology Bahria University Medical and Dental College Email: drkhalidmm@yahoo.com
Received: 27 Dec 2022 Accepted: 20 Jun 2023

or developmental processes underlying mental functioning".1 There is significant impairment in social, occupational, or other important activities. There are various types of mental disorders like depressive disorder, anxiety disorder, bipolar disorder, and schizophrenia, dementia, substance use disorder.² In 2018, Hannah Ritchie and Max Roser published a paper that estimated that 792 million people had a mental disorder by the year 2017. 264 million people were having depression, 284 million persons having an anxiety disorder, 46 million people having bipolar disorder, 20 million having schizophrenia, 107 million people having alcohol use disorder, and 71 million had substance use disorder other than alcohol.³ According to Goffman in 1963, stigma means "an attribute that is deeply discrediting" and that reduces the bearer "from a whole and usual person to a tainted discounted one".⁴ Mental health-related stigma is a lack of awareness and prejudiced behavior towards people with mental health problems. A person with a mental disorder pays a heavy price because of stigma, which is the sum of ignorance, prejudice, and discrimination.5 Our society due to lack of knowledge, negative attitudes and avoidant behaviour creates a stigma for people with mental disorders.⁶ This lack of knowledge and biased behaviour is present among health Medical Students' Attitudes towards Profession of Psychiatry- A Cross-Sectional Survey from Medical Colleges of Sindh, Pakistan

professionals.7 Even medical students are deprived of correct knowledge about the mental health field. Criticism about the field of psychiatry and mental health experts is common among health professionals.8 There are orthodox views about doctors belonging to different subjects like pediatricians have always friendly and warm smiles on their faces. Surgeons keep dynamic and dominant personalities, and psychiatrists with awkward appearances remain deeply absorbed in their thoughts. These stereotypes affect the minds of medical students.9 The common misconceptions about psychiatry as a specialty held by culture influences family members. They then discourage students to pursue psychiatry as a profession. In Pakistan, there are around four hundred certified psychiatrists. The majority of people do not consult psychiatrists. In the medical curriculum, students do not pay importance to psychiatry as it is integrated with medicine paper in the final year professional examination and there is no isolated examination like pediatrics, surgery, obstetrics and gynecology, etc.¹⁰ Rather than addressing stigma with graduated doctors in primary care, it is best to start educating undergraduate students earlier in medical schools or colleges. There is limited research on the attitudes of medical students towards psychiatry in Pakistan compared to other countries. Studies are specific to colleges in urban cities only. This study determined the attitude of medical students toward mental health in various medical colleges in the Province of Sindh. In Pakistan, the subject of psychiatry is not tested as an individual subject, so students pay little attention. It is a need of hour that this subject is examined separately like medicine, surgery, pediatrics, and ophthalmology.

METHODOLOGY:

A cross-sectional study was designed at Hamdard College of Medicine & Dentistry in March 2020. Google forms were developed and disseminated to medical students of different colleges in the Sindh province of Pakistan through the social network. The online survey was fully confidential and anonymous. Consent to participate in the study was taken. All details of the survey including purpose, methodology, and time to complete the survey were explained. The study was approved by the Ethical Review Committee of Hamdard College of Medicine & Dentistry (ERC/MBBS/013/2020). The study comprised two sections: (1) Demographics; (2) Mental Illness Clinicians Attitude Scale Version-2 (medical students' version). House Officers, Post Graduate trainees, Consultants, and General Public were excluded. The demographic section included information about medical students' age, gender, marital status, medical college or university, medical year, currently living, and birthplace. Aliya Kassam developed Mental Illness Clinician's Attitudes Scale as part of her Ph.D. work at the Institute of Psychiatry, Kings College London. It is a self-administered and psychometrically validated scale. It takes 5 minutes to complete. It is used after the approval of the Institutional

Review Board. Modifications in scale cannot be done without the author's permission. There are four versions of the scale. Version 2 is recommended for medical students, trainee psychiatrists, and psychiatrists. There are 16 items on scale and questions are based on a 6-point Likert scale. Items 3,9,10, 11, and 12 are scored as: Strongly agree = 1, Agree = 2, Somewhat agree = 3, Somewhat disagree = 4, Disagree = 5, Strongly disagree = 6. All other items (1, 2, 4, 5, 6, 7, 8, 13, 14, 15) are reverse scored as: Strongly agree = 6, Agree = 5, Somewhat agree = 4, Somewhat disagree = 3, Disagree = 2, Strongly disagree = 1. Scores from all items are added to yield a final score. There is no cut-off in scale. There are 16 items based on a 6-point Likert scale, so the score range ranges from sixteen to ninety-six. An upper score shows a more negatively inclined attitude towards the mental health field and mentally ill patients.

Data were analyzed using IBM SPSS Statistics v20. Continuous and categorical variables were presented as frequencies (%). The independent t-test and one-way ANOVA were used to correlate between scale and different continuous and categorical variables. The Chi-square test was used to correlate different variables with scale. The significance level was set at p<0.05.

RESULTS:

Out of 512 medical students surveyed from various medical colleges in Sindh province of Pakistan, 279(54.5%) were male and 233(45.5%) were female. Among them, 306(59.8%) were aged between 17 to 22 years whereas 206(40.2%) were aged between 22 to 25 years. The majority of students; 501(97.9%) were single. 386(75.4%) students belonged to Hamdard College of Medicine & Dentistry, 48(9.4%) to Jinnah Sindh Medical University, 33(6.4%) to Dow University of Health Sciences, 25(4.9%) to Chandka Medical College, 14(2.7%) to Khairpur Medical College and 6(1.2%) to Ziauddin University. Medical students from third year 125(24.4%), fourth-year 124(24.2%), second-year 120(23.4%), first-year 91(17.8%), and fifth-year 52(10.2%) participated respectively in the study. 236(46.1%) medical students were living with family, 232(45.3%) with friends, and 33(6.4%) lived individually. See Table 1

Item-wise details of the MICA-2 scale are shown in Table 2. According to it, 65% of students learn psychiatry because it is in exam. 60.8% think that mentally ill persons can never recover enough to live a qualitative life. 65.6% of students would never disclose their mental illness to friends if they had suffered due to stigma. 62.7 % of students think psychiatric patients are violent. 64.7% of students thought of never disclosing their mental illness to colleagues had they suffered due to fear of being treated differently. 46.9% of students think that being a psychiatrist is not like being a genuine doctor. 47.9% of students thought to use words like crazy for people with severe mental illnesses.

According to descriptive analysis, the mean MICA-2 score

surveyed in all 512 medical students was 54.22 (min. 16 and max. 86; SD 8.94). The significant correlation of MICA score was seen with gender, medical college to which students belonged and with whom they were living. Female students had significantly lower mean MICA score than male students (51.72 vs 56.32). Throughout the world, same results have been obtained that is female students had higher levels of stigmatization than their male counterparts.¹¹⁻¹⁵

Students from Dow University of Health Sciences had lowest MICA score (41.06) whereas students from Hamdard College of Medicine & Dentistry had highest MICA score (57.12), indicating highest stigmatizing attitude. Mean MICA score of Khyber Medical College (52.00), Chandka Medical College (49.52), Ziauddin University (48.33) and Jinnah Sindh Medical University (43.77) revealed different stigmatizing attitudes across medical universities. Students living with family had lower MICA score (50.61) as compared to those who were living alone (58.30).

DISCUSSION

The present study evaluated students' attitudes towards field of mental health in Sindh, which is one of five provinces of Pakistan. Students from six medical colleges participated, which has never been done before. This study indicated different results as obtained across the world. In our study, we obtained mean MICA score of 54.22, which is higher than studies done in Poland (41.05)¹¹, Spain (38.16)¹², Egypt (42.16)¹³, Thailand (43.16)¹⁴ and India (46.56).¹⁴ On the other hand, our students' score (54.22) was lower as compared to the study done in the US state of Georgia (68.44)¹⁵. Poland, Spain, Egypt and Thailand are advanced countries, so it is obvious that they had low stigmatization rate. On the contrary, study done in US state of Georgia displayed high stigmatization score. It is notable that studies done in Poland, Spain, Egypt and Thailand were done on greater number of students where as study conducted in US state of Georgia was done on sample of only 62 students and study examined the attitude towards people with mental illness and people who were homeless. So, it is clear cut that results from US state of Georgia cannot be generalized and the study aim was not specific. Pakistan is country in which health system, knowledge and practice are not as advanced as countries like Poland, Spain, Egypt and Thailand, therefore, it can be said that a lot of knowledge and awareness among medical students of Pakistan regarding mental health is needed.

Students from Dow University of Health Sciences (MICA score= 41.06) had the least negative attitude towards the field of mental health followed by Jinnah Sindh Medical University (MICA score= 43.77). On the other hand, students from Hamdard College of Medicine & Dentistry (MICA score= 57.12), Khairpur Medical College (MICA score= 52.00) and Chandka Medical College (MICA score= 49.52) showed more negative attitudes towards field of mental health. This can be concluded that students from two of top

medical universities in province of Sindh had better knowledge and attitudes towards psychiatry. It should be noted that Dow University of Health Sciences and Jinnah Sindh Medical University are top two public sector medical colleges in Sindh. Students with higher score and knowledge are selected in these colleges, so it can be concluded that they had better basic knowledge about medical field and more motivated to learn and grow in the scientific field related to mental health. However, the greater number of faculty can be another factor in these public sector universities. Private Medical College and Universities do not hire greater number of employees in psychiatry profession owing to factor that these universities had to pay more.

It was found from MICA score that student living with family had better view of mental health profession as those living alone. It is possible that the students had any family member who would be suffering from mental disorder. But this cannot be concluded here from this study.

It is not surprising to see from results obtained that 65% of students learn psychiatry because it is in exam. It is therefore need of hour to consider psychiatry as separate subject not only by teaching but by taking its exam separately like Pediatrics, Medicine, Surgery, etc. By implementing this policy, we will be able to motivate students to learn psychiatry and advance in profession ahead by being a psychiatrist. There are already few psychiatrists working in Pakistan.

Table 1. Socio-demographic characteristics

Variables	Frequency N=512	Percentage	
Age 17-21 years 22-25 years	306 206	59.8 40.2	
Gender Male Female	279 233	54.5 45.5	
Marital Status Single Married	501 11	97.9 2.1	
Medical College/University Chandka Medical College Dow University of Health Sciences Hamdard College of M&D Jinnah Sindh Medical University Khairpur Medical College Ziauddin University	25 33 386 48 14 6	4.9 6.4 75.4 9.4 2.7 1.2	
Medical Year 1st Year 2nd Year 3rd Year 4th Year 5th Year	91 120 125 124 52	17.8 23.4 24.4 24.2 10.2	
Current Living Alone With Family With Friends Others	33 236 232 11	6.4 46.1 45.3 2.1	

Variables	Strongly agree	Agree	Somewhat agree	Somewhat disagree	Disagree	Strongly disagree
I just learn about psychiatry because it is in the exam and would not bother reading additional material on it.	40 (7.8)	161 (31.4)	133 (26)	84 (16.4)	62 (12.1)	32 (6.3)
People with a severe mental illness can never recover enough to have a good quality of life.	45 (8.8)	129 (25.2)	137 (26.8)	69 (13.5)	79 (15.4)	53 (10.4)
If I had a mental illness, I would never admit this to any of my FRIENDS because I would fear being treated differently	45 (8.8)	128 (25)	163 (31.8)	83 (16.2)	64 (12.5)	29 (5.7)
People with a severe mental illness are dangerous more often than not.	31 (6.1)	118 (23)	172 (33.6)	96 (18.8)	77 (15)	18 (3.5)
Being a psychiatrist is NOT like being a real doctor	19 (3.7)	89 (17.4)	132 (25.8)	112 (21.9)	90 (17.6)	70 (13.7)
The public does NOT need to be protected from people with a severe mental illness.	27 (5.3)	111 (21.7)	158 (30.9)	113 (22.1)	76 (14.8)	27 (5.3)
I would use the terms 'crazy', 'nutter', 'mad' etc. to describe people with a mental illness who I have seen in my work	26 (5.1)	85 (16.6)	134 (26.2)	82 (16)	92 (18)	93 (18.2)

Table 2. Item wise details of MICA Scale (N=512)

Table 3. Significance of Socio-demographic details with MICA Scale overall Score

Variables	N=512	Mean	Std. Deviation	P Value
Age 17-21 years 22-25 years	306 206	53.93 54.65	9.128 8.677	0.375
Gender Male Female	279 233	56.32 51.72	7.857 9.527	< 0.001
Marital Status Single Married	501 11	54.20 55.09	8.934 9.964	0.745
Medical College/University Chandka Medical College Dow University of HS Hamdard College of M&D Jinnah Sindh MU Khairpur Medical College Ziauddin University	25 33 386 48 14 06	49.52 41.06 57.12 43.77 52.00 48.33	7.478 8.503 6.715 7.896 9.654 11.237	< 0.001
Medical Year 1st Year 2nd Year 3rd Year 4th Year 5th Year	91 120 125 124 52	53.10 55.34 53.27 55.52 52.81	8.951 9.893 8.495 8.057 9.316	0.071
Current Living Alone With Family With Friends Others	33 236 232 11	58.30 50.61 57.50 50.36	7.011 10.062 6.138 7.420	< 0.001
Birth Place Sindh Punjab Balochistan KPK Kashmir Gilgit Others	274 134 34 48 9 6 7	51.85 57.73 57.03 55.98 60.33 58.17 42.86	9.739 6.174 6.603 5.629 4.873 5.913 16.896	< 0.001

Majority of students refrained from disclosing mental illness to friends and family members if they had due to stigma. This needs to be addressed; mental disorders are as prevalent as physical disorders and even because of greater burden in medical students as compared to general population, the results will be devastating on their overall well-being.

Most of psychiatric patients are not violent and majority of students (62.7%) thought oppositely. It is need of hour to oust this myth that psychiatric patients are dangerous. It is opposite to this. In reality, they are victims of violence. This in turn will create empathy, understanding and love for patients with mental health problem rather than exclusion and stigma.

46.9% of students think that being a psychiatrist is not like being an actual doctor. This is not fact. Psychiatrist go to medical college and then after getting basic medical degree, they choose to do specialization in the field of Psychiatry. So, they have all necessary basic skills, knowledge and attitude which is important for being real professional and this is achieved after a lot of hardworking to get specialization in psychiatry. This reveals the negative attitude towards the profession even by health professionals.¹⁶⁻²⁰ Psychiatrists are already in shortage in Pakistan and this attitude will bring negativity towards the profession itself.

47.9% of students considered using words like crazy for people with severe mental illnesses. These disrespectful words by medical students shows the stigmatization. The words like crazy and nut do not reveal how much mental health problems can be complex. This reveals the biased attitudes of not the general public but medical students, who will then treat them in the future.

CONCLUSION:

The stigma surrounding mental disorders can have an impact

on how medical students perceive psychiatry as a career choice. Proper education plays a vital role in diminishing the extent of stigma within medical students. This stigma is present not in the general public but even among various health professionals. Professionals related to the field of medicine transfer their biased attitudes towards medical students about psychiatrists and the profession of psychiatry. They must be very careful while transferring their own ill knowledge about the profession. Since lack of knowledge is the main reason behind this stigma, it is highly recommended to educate the health professionals and society at the same time as students in medical colleges about the subject of Psychiatry.In Pakistan, subject of psychiatry is taught in final year or fourth year in most of medical colleges and since it is not tested as individual subject, so students pay little attention. It is need of time that this subject be tested individually like medicine, surgery, pediatrics, and ophthalmology.

Authors Contribution:

- Rakesh Kumar: Conceived the study, Manuscript writing, Design of study, Literature review
- **Riaz-ul-Haque:** Supervised the work and final review **Haresh Kumar:** Study design & Methodology writing
- Khalid Mustafa: Statistical Analysis and Results

REFERENCES:

- Kecmanovic D. The DSM-5 definition of mental disorder. Australian & New Zealand Journal of Psychiatry. 2013;47(4):393-394. DOI: https://doi.org/10.1177/0004867413 479410
- 2. Mental disorders [Internet]. Who.int. 2022 [cited 14 January 2022]. Available from: https://www.who.int/news-room/factsheets/detail/mental-disorders
- Dattani S, Ritchie H, Roser M. Mental Health [Internet]. Our 3. World in Data. 2022 [cited 15 January 2022]. Available from: https://ourworldindata.org/mental-health
- Ahmedani BK. Mental health stigma: society, individuals, 4. and the profession. Journal of social work values and ethics. 2011;8(2):4-1. PMCID: PMC3248273 NIHMSID: NIHMS 342711 PMID: 22211117
- Corrigan PW, Bink AB. The Stigma of Mental Illness. In: 5. Friedman H, editor. Encyclopedia of mental health. 2nd Edition. Oxford: Academic Press; 2016; 86:230-4. Available from: http://scitechconnect.elsevier.com/wp-content/uploads /2015/09/The-Stigma-of-Mental-Illness.pdf. PMC1489832
- Rössler W. The stigma of mental disorders: A millennia-long 6. history of social exclusion and prejudices. EMBO reports. 2016 Sep;17(9):1250-3. DOI: 10.15252/embr.201643041
- Kumar N, Rajendra R, Majgi SM, Krishna M, Keenan P, 7. Jones S. Attitudes of general hospital staff toward patients who self-harm in South India: A cross-sectional study. Indian journal of psychological medicine. 2016;38(6):547-52. DOI: https://doi.org/10.4103/0253-7176.194
- Ajaz A, David R, Brown D, Smuk M, Korszun A. BASH: 8. badmouthing, attitudes and stigmatisation in healthcare as experienced by medical students. BJPsych Bulletin. Cambridge University Press; 2016;40(2):97-102. DOI: 10.1192/pb.bp .115.053140

- 9. Oxtoby K. Do the classic specialty stereotypes still hold true for today's doctors?. BMJ. 2013;347. doi: https://doi.org/ 10.1136/ bmj.f7454
- 10. Javed A, Khan M, Nasar A, Rasheed A. Mental healthcare in Pakistan. Taiwanese Journal of Psychiatry. 2020;34(1):6. DOI: 10.4103/TPSY.TPSY_8_20
- 11. Babicki M, Kowalski K, Bogudziñska B, Piotrowski P. The Assessment of Attitudes of Students at Medical Schools towards Psychiatry and Psychiatric Patients-A Cross-Sectional Online Survey. International Journal of Environmental Research and Public Health. 2021;18(9):4425. DOI: https://doi.org/10.3390/ijerph18094425
- 12. Queirós RP. Stigma towards mental illness among medical students of the Faculty of Medicine of the University of Coimbra (Doctoral dissertation, Universidade de Coimbra). Doi: 10.3390/ijerph18094425
- 13. Eksteen HC, Becker PJ, Lippi G. Stigmatization towards the mentally ill: Perceptions of psychiatrists, pre-clinical and post-clinical rotation medical students. International Journal of Social Psychiatry. 2017;63(8):782-91. DOI: https:// doi.org/10.1177/0020764017735865
- 14. Seera G, Arya S, Sethi S, Nimmawitt N, Ratta-Apha W. Helpseeking behaviors for mental health problems in medical students: studies in Thailand and India. Asian Journal of Psychiatry. 2020 ;54:102453. DOI: https://doi.org/10.1016/ j.ajp.2020.102453
- 15. Foster A, Hilton S, Embry F, Pires C, Ahmed AO. Measuring attitudes towards people with mental illness and people who are homeless: is a joint instrument needed. Homelessness: Prevalence, Impact of Social Factors and Mental Health Challenges; Clark, C., Ed. 2014:223-50.
- 16. Ghodse AH, Ghaffari K, Bhat AV, Galea A, Hayat Qureshi Y. Attitudes of health care professionals towards patients who take overdoses. International journal of social psychiatry. 1986 ;32(4):58-63. DOI: https://doi.org/10.1177 /0020764 08603200407
- 17. Holmes D, Tumiel-Berhalter LM, Zayas LE, Walkins R. " Bashing" of medical specialties: students' experiences and recommendations. Family medicine. 2008;40(6):400. PMID: 18773777
- 18. Choudry A, Farooq S. Systematic review into factors associated with the recruitment crisis in psychiatry in the UK: students', trainees' and consultants' views. BJPsych Bulletin. Cambridge University Press; 2017;41(6):345-52. DOI: https://doi.org/ 10.1192/ pb.bp.116.055269
- 19. Mukherjee K, Maier M, Wessely S. UK crisis in recruitment into psychiatric training. The Psychiatrist. Cambridge University Press; 2013;37(6):210-4.Doi: 10.1192/pb.bp. 116. 055269
- 20. Reichman M, Bakhshaie J, Grunberg VA, Doorley JD, Vranceanu AM. What are orthopedic healthcare professionals' attitudes toward addressing patient psychosocial factors? A mixed-methods investigation. Clinical Orthopaedics and Related Research[®]. 2022 ;480(2):248-62. DOI: 10.1097 /CORR. 00000000002043