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A comparative study of active versus passive learning methods in the modification of attitude towards psychiatry

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Abstract

There is a dearth of psychiatrists in India to tackle the growing mental health issues in the population in an effective manner with only about 0.3 psychiatrists per 100,000 population in the country. Primary care doctors and also specialists and super-specialists of other medical fields often fail to detect psychiatric symptoms and refer for treatment appropriately. Also, communication skills and ability to form empathy are essential tools for all doctors which can be learnt best while learning psychiatry. Keeping these things in mind, in this study, an attempt was made to understand the attitudes held by students towards mental illness and the field of psychiatry. The different teaching methods were evaluated in ensuring active participation of all students and in correcting the attitudes towards psychiatry in the medical students.

Keywords: Active learning, passive learning, psychiatry

Introduction

There is a dearth of psychiatrists in India to tackle the growing mental health issues in the population in an effective manner with only about 0.3 psychiatrists per 100,000 population in the country ^[1, 2]. Primary care doctors and also specialists and super-specialists of other medical fields often fail to detect psychiatric symptoms and refer for treatment appropriately. Also, communication skills and ability to form empathy are essential tools for all doctors which can be learnt best while learning psychiatry.

But unfortunately, the medical students do not feel the motivation to learn psychiatry, do not actively participate in the postings and may harbour prejudices against mentally ill people and the field of psychiatry which persist even after they become practising doctors. Absenteeism, inattention and a lack of participation is often observed in bedside clinics and lectures alike. To correct this, newer teaching methods with integrated teaching have been advocated to make postings more interesting and enhance interest in psychiatry ^[3]. But further research is needed to establish the effectiveness of the teaching methods in modifying the attitude towards psychiatry in medical students.

Keeping these things in mind, in this study, an attempt was made to understand the attitudes held by students towards mental illness and the field of psychiatry. The different teaching methods were evaluated in ensuring active participation of all students and in correcting the attitudes towards psychiatry in the medical students.

Aims and Objectives

To compare didactic and peer learning methods and their effectiveness in changing the attitude towards the field of Psychiatry in 4th year MBBS students.

Methodology

Design: Quasi-experimental design.

The study was done from Oct 2016 to Sept 2018 in the general medicine Department, Azeezia Institute of Medical Research and Sciences.

Study population and setting: 50 students of 4th year MBBS posted in the Department of Psychiatry, for 2 weeks clinical posting.

Sampling method: Purposive sampling.

Study duration: 2 years.

Attitude to Psychiatry scale (ATP-30) [10]: 30 item validated and reliable scale devised by Burra *et al.* in 1982 to measure medical students' attitudes towards psychiatry. The scale consists of 4 sub-domains measuring attitude towards: psychiatric patients and psychiatric illness, psychiatrists and psychiatry, psychiatric treatment and

hospitals, psychiatry knowledge and teaching.

Statistical analysis

Descriptive analysis was carried out using mean and standard deviation for the mean total feedback score and the mean total scores of the ATP-30 scale and its subgroups pre and post test.

Results

Table 1: Comparison of the change in attitude scores at the end of the study in the experimental and control group

Difference between the groups post study and at baseline	Groups	Mean rank	U value (p value)	Z value
ATP-30 subgroup 1	Experimental group	26.07	163.50 (0.062)	-1.866
	Control group	18.93		
ATP-30 subgroup 2	Experimental group	27.05	142.00 (0.019)*	-2.353
	Control group	17.95		
ATP-30 subgroup 3	Experimental group	25.14	184.00 (0.172)	-1.366
	Control group	19.86		
ATP-30 subgroup 4	Experimental group	28.89	101.50 (0.001)**	-3.313
	Control group	16.11		
ATP-30 total score	Experimental group	27.75	126.50 (0.007)**	-2.714
	Control group	17.25		

*Difference significant at the <0.05 level

**Difference significant at the <0.01 level

***Difference significant at the <0.001 level

Discussion:

Numerous studies have been done, both in India and abroad, to assess the attitudes of medical students and professionals towards the field of Psychiatry and the impact of Psychiatry training on these attitudes with conflicting results. Many studies reported negative to neutral attitude towards psychiatry and mental illness in medical students and interns [4-6] and multiple lacunae in knowledge of psychiatry, patients and psychiatric treatment was reported [7]. In a study of 480 undergraduate medical students and interns, psychiatry was also not a popular career choice and was considered unscientific with psychiatrists being poor role models [4].

Majority of the studies have shown that after exposure to psychiatry in postings, the overall attitude towards psychiatry and mental illness improved [8-12]. In a study of 135 participants consisting of 1st and 2nd MBBS students and interns, there was a better outlook of interns towards patients with mental illness and psychiatry [8]. In another study comparing 108 students not exposed to psychiatry with 135 final year students and interns who had undergone psychiatry training, greater proportion of the latter group endorsed positive attitudes towards patients with mental illness. Women students were found to be more likely to consider psychiatry as a career choice, but the proportion of students of either gender opting for psychiatry as a career option did not differ significantly with psychiatric training [9]. Experts have suggested that techniques like role plays, asking questions, giving opportunities to question, micro-seminars, problem based learning and collective feedback can be useful. Assessment of the attitudes towards psychiatry using Attitude to Psychiatry scale (ATP-30) at the beginning and the end of the posting routinely has also been proposed to help plan the syllabus better and to improve the training methods [13].

One of the methods suggested to enhance students' participation in the psychiatry training has been peer learning and teaching. Peer learning and teaching has been

shown to be effective in increasing the students' confidence in clinical practice and improves learning in the psychomotor and cognitive domains. Some pitfalls include incompatible personality and learning styles of the students who may benefit from didactic methods rather than active peer learning [14]. Feedback taken from the students to study their preferences indicated that the students' response to peer teaching was positive and they found it to be interactive and beneficial [15].

Conclusion

More positive change in attitude towards psychiatry, measured using the ATP-30 scale, was observed with use of newer, active teaching learning methods compared to traditional lectures.

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