

Research Report

ATTITUDE AMONG MEDICAL GRADUATES TOWARDS MENTAL ILLNESS AND PSYCHIATRY AS A FIELD OF SPECIALIZATION: A CROSS-SECTIONAL STUDY

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ABSTRACT

Background: In India, where the burden of mental disorders is substantial, the shortage of trained psychiatrists is alarming; psychiatry remains one of the least chosen specialties among medical graduates. This study assesses medical graduates' attitudes toward psychiatry and mental illness. The study also aims to identify critical barriers that deter students from choosing psychiatry as a career, focusing on gender-based differences in attitudes. **Materials and Methods:** A cross-sectional survey was conducted among medical graduates using the Attitude Towards Psychiatry-30 (ATP-30) scale. Data were analyzed using independent t-tests. **Results:** Both male and female participants demonstrated positive attitudes toward psychiatric patients and the significance of psychiatric illness. However, significant gender differences were observed in critical areas, with females more likely to question psychiatry's scientific rigor ($p = 0.025$) and job satisfaction in psychiatry ($p = 0.008$). Despite positive overall attitudes toward psychiatry, only 26% of participants expressed an interest in pursuing psychiatry as a career, with females showing a higher reluctance, though not statistically significant ($p = 0.708$). **Conclusion:** While medical graduates generally hold favorable attitudes toward psychiatry, gender differences in perceptions regarding the scientific rigor of psychiatry and concerns about job satisfaction act as barriers.

Keywords: Medical graduates, Attitude to Psychiatry, Attitude to Mental Illness, Career choice, Gender differences.

INTRODUCTION

Psychiatry has long been perceived as a stigmatized field, which has led to its limited acceptance as modern medical care for mental disorders.¹ This is particularly concerning in countries like India, where the mental health burden is immense, and the deficit of trained psychiatrists is critical. According to the Global Burden of Disease Study 1990–2017, 14.3% of India's population is affected by mental health disorders. Yet, the country faces a psychiatrist deficit of 77%.² Despite the universal health coverage proposed by the Planning Commission of India in 2011, the number of psychiatrists in India remains insufficient.³ Furthermore, the distribution of psychiatrists

is disproportionately concentrated in urban areas, leading to significant regional imbalances and limited access to mental health care in rural regions.⁴

Limited exposure to psychiatry during undergraduate studies and prevailing societal attitudes contribute to graduates' reluctance to choose psychiatry as a specialization.⁵ Research has shown that factors such as societal stigma, misconceptions about psychiatry, and the belief that psychiatry makes limited use of medical training contribute to the disinterest among medical graduates.^{6,7} These attitudes, in turn, impact the recruitment of psychiatrists, further exacerbating the mental health crisis. A cross-sectional survey conducted across 20 countries highlighted similar barriers, where



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misconceptions about psychiatry and the stigma associated with mental illness were significant deterrents.⁸

Moreover, medical students' attitudes toward psychiatry and mental illness have been shaped by negative portrayals of psychiatric work, often seen as unscientific or less relevant compared to other medical fields.⁷ A study of medical interns in South India demonstrated that although many students recognized the importance of mental health, psychiatry was still considered a less attractive career due to concerns about career satisfaction and societal perceptions.⁹

Given these challenges, understanding the attitudes of medical graduates toward psychiatry is essential for shaping medical education and addressing the shortage of psychiatrists. Gender specific differences play a critical role in these perceptions. Studies such as Farooq et al. and Balon et al. have demonstrated gender-based differences in career motivations, perceived job satisfaction, and the acceptance of psychiatry as a scientific field.^{7,8} Sociocultural factors in Indian society further impact career choices, making exploring these differences critical for identifying barriers and guiding targeted interventions to improve recruitment into psychiatry.¹² This study aims to assess the attitudes of medical graduates toward mental illness and psychiatry as a field of specialization while also identifying barriers that deter students from pursuing psychiatry as a career, focussing on gender-based differences.

MATERIALS AND METHODS

The study was conducted as a cross-sectional survey involving medical graduates from Chamarajanagara Institute of Medical Sciences, Chamarajanagara, Karnataka, **and** Mandya Institute of Medical Sciences, Mandya, Karnataka. Both institutions participated as study centres for data collection. Institutional

Ethics Committee Clearance was obtained before the commencement of the study. The recruitment period spanned from 12th to 20th December 2023. Participants were invited through digital platforms, specifically via WhatsApp messages containing a link to the survey hosted on Google Forms, ensuring voluntary participation. Informed consent was obtained from all participants before the survey.

Inclusion criteria specified that participants must be medical graduates who had completed at least one psychiatric rotation, i.e., 2 weeks during their education. Socio-demographic data, including age and gender, were collected alongside participants' attitudes toward psychiatry, assessed using the validated Attitudes Toward Psychiatry30 (ATP-30) scale.¹⁰

The ATP-30 scale consists of 30 items measuring attitudes across eight dimensions, with participants rating their agreement on a 5-point Likert scale from 1 (strongly agree) to 5 (strongly disagree). Positive items were reverse-scored, and a total score above 90 indicated a positive attitude, while below 90 suggested a negative attitude; 90 served as a neutral midpoint since most average mean scores of favourable attitude participants during validation of the ATP-30 scale were above 90.¹⁰ The ATP-30 scale has been extensively used in Indian settings, with studies like Chawla et al. and Kodakandla et al. demonstrating its reliability in these contexts.^{5,9} These studies reported high internal consistency and test-retest reliability, confirming the scale's applicability to Indian medical graduates. Although originally developed for international use, its application in Indian studies without modification suggests its cultural adaptability and validity within Indian sociocultural settings.

The sample size was calculated based on the formula: $(Z_{\alpha/2})^2 (\sigma)^2 / (I)^2$ [$Z_{\alpha/2} = 1.96$ (at 95% confidence interval), σ was the standard

deviation of ATP-30, which from an earlier study was

11.8.10, And I was the precision error taken as 2.5% of the mean. The mean of ATP-30 was taken based on an earlier study as 94.55].¹⁰ As per this formula, a sample size of 95.75 was obtained. Descriptive statistics were used to analyze responses across the ATP-30 items. Independent sample t-tests were performed to compare mean attitudes between male and female participants across all domains measured by the ATP-30 scale.

RESULTS

Out of 102 Google Forms distributed, 100 participants completed the survey, resulting in a 98% response rate. Only two individuals did not respond, with no additional non-participants among those contacted. The study included 100 medical graduates from Chamarajanagara Institute of Medical Sciences and Mandya Institute of Medical Sciences, with an almost equal gender distribution with 55 males (55%) and 45 females (45%). The mean age of male participants was 24.26 ± 0.80 years, and for female participants, it was 24.02 ± 0.71 years. The difference in age between males and females was not statistically significant ($p = 0.11$). Only 26% of the students expressed interest in choosing psychiatry as a career, with females showing a higher reluctance, though not statistically significant ($p = 0.708$).

Attitudes toward Psychiatrists

A significant gender-based difference emerged in perceptions of psychiatrists. Participants moderately agreed that psychiatrists derive less satisfaction from their work than other specialists, with females scoring significantly higher (mean \pm SD: 3.87 ± 0.870 vs. 3.39 ± 0.881 ; $t = -2.728$, $p = 0.008$). (Table 1) Other perceptions, such as psychiatrists being as stable as other doctors (mean \pm SD: 3.91 ± 0.725 ; $p = 0.067$) or engaging primarily in conversation without

action (mean \pm SD: 3.26 ± 1.182 ; $p = 0.260$), were non-significant.

Knowledge about Psychiatry

Participants expressed skepticism about psychiatry's scientific rigor, with females showing significantly higher agreement with the statement that psychiatry has little scientific information to rely on (mean \pm SD: 3.91 ± 0.896 vs. 3.46 ± 1.089 ; $t = -2.271$, $p = 0.025$). (Table 1) Other items, such as viewing psychiatric facts as vague speculations, were non-significant ($p = 0.654$).

Attitudes toward Psychiatric Treatments

Concerns regarding psychiatric treatments were significant. Participants moderately agreed that psychiatric treatments cause patients to worry excessively about their symptoms, with females scoring higher (mean \pm SD: 3.35 ± 0.914 vs. 2.83 ± 0.851 ; $t = -2.958$, $p = 0.004$). (Table 1) However, participants accepted the efficacy of psychotherapy (mean \pm SD: 3.76 ± 0.766 ; $p = 0.445$) and agreed that psychiatric treatments have become more effective over time (mean \pm SD: 4.13 ± 0.749 ; $p = 0.904$).

Psychiatry as a Career Choice

Interest in psychiatry as a career was limited. Participants moderately agreed that psychiatry makes little use of traditional medical training, with females scoring significantly higher (mean \pm SD: 3.69 ± 0.843 vs. 3.22 ± 0.987 ; $t = -2.557$, $p = 0.012$). (Table 1) However, most participants disagreed with the idea that psychiatry excludes exciting aspects of medicine (mean \pm SD: 2.67 ± 1.012 ; $p = 0.138$). This is reflected by the fact that only 26% chose psychiatry as a career.

Attitudes toward Psychiatric Institutions

Participants strongly recognized the contributions of psychiatric hospitals to

mental health treatment, with males scoring significantly higher (mean \pm SD: 4.43 ± 0.655 vs. 4.15 ± 0.563 ; $t = 2.353$, $p = 0.021$). (Table 1) However, perceptions of psychiatric hospitals as resembling prisons were non-significant (mean \pm SD: 3.83 ± 1.018 ; $p = 0.456$).

Attitudes toward Psychiatric Patients

Participants generally expressed empathy toward psychiatric patients, agreeing that psychiatric patients are "just as human as other people" (mean \pm SD: 4.41 ± 0.777) and often interesting to work with (mean \pm SD: 3.35 ± 1.233). However, these items showed no significant differences ($p = 0.116$ and $p = 0.986$, respectively).

Attitudes toward Psychiatric Illness

There was a broad acknowledgment of the importance of psychiatric illness. Participants strongly agreed that psychiatric illness deserves attention equal to physical illness (mean \pm SD: 4.63 ± 0.741 ; $p = 0.610$) and found investigating the causes of psychiatric illness intellectually engaging (mean \pm SD: 4.20 ± 0.687 ; $p = 0.281$). These findings indicate a consistent appreciation for the relevance of psychiatric illness.

Attitudes toward Psychiatric Teaching

Participants acknowledged the value of psychiatric education in understanding medical patients (mean \pm SD: 3.67 ± 0.967 ; $p = 0.721$). Perceptions of psychiatry as the most important part of the curriculum or its ability to be effectively taught were non-significant ($p = 0.922$ and $p = 0.234$, respectively).

DISCUSSION

The present study provides valuable insights into the attitudes of medical graduates toward psychiatry, highlighting both positive perceptions and significant gender-based differences in critical areas.

Table 1: Gender Difference in ATP 30 Domain Scores

Category	Item	Male (Mean \pm SD)	Female (Mean \pm SD)	t	P
Psychiatrists	Psychiatrists get less satisfaction from their work	3.39 \pm 0.88	3.87 \pm 0.87	-2.728	0.008
Psychiatric Knowledge	Psychiatry has very little scientific information to go on	3.46 \pm 1.08	3.91 \pm 0.89	-2.27	0.02
Psychiatric Treatments	Psychiatric treatment causes patients to worry too much	2.83 \pm 0.85	3.35 \pm 0.91	-2.95	0.004
Psychiatry as a Career	Psychiatry makes little use of medical training	3.22 \pm 0.98	3.69 \pm 0.84	-2.55	0.01
Psychiatric Institutions	Psychiatric hospitals have a specific contribution to treatment	4.43 \pm 0.65	4.15 \pm 0.56	2.35	0.02

Degree of freedom=98

While most participants expressed generally favourable views towards psychiatry, several barriers, particularly gender-related ones, were identified as deterrents to pursuing psychiatry as a career. The similarity in demographic characteristics allowed for a more direct comparison of attitudes between genders without confounding by age.

Perceptions of psychiatrists' job satisfaction and choosing psychiatry as a career: Significantly, more females perceived psychiatrists as experiencing less job satisfaction in our study. This reflects the study by Balon et al., which points out psychiatry's fairly high negative ratings on questions revolving around career and personal rewards.⁷ Interest in psychiatry as a career was found to be low at 26%. This is consistent with an earlier study's findings that

only 13% of interns have psychiatry as their career choice and 40% would "consider" psychiatry if they do not get the specialty of their choice.⁹ Many participants in the present study, especially females, expressed concerns about psychiatry's integration with traditional medical training, suggesting a need to emphasize psychiatry's role in holistic healthcare. Further, a study from South India showed that although there was a good general opinion about psychiatry, psychiatrists, and treatment efficacy, negative opinion about mental illness, discouragement by the family members, and an unfavourable attitude towards the social and reward aspects of psychiatry could be the reasons for fewer students showing interest in psychiatry as a career.⁹

Skepticism about Psychiatry's Scientific Rigor:

Females showed statistically significant skepticism about psychiatry's scientific foundation, consistent with Sartorius et al., who noted that psychiatry is often viewed as less scientific. The study by Chawla et al. found that undergraduates reported presumed etiology of psychiatric illnesses as due to excessive emotions and loneliness.⁵ This highlights the lack of emphasis on psychiatric neuroscience and evidence-based practices in the current undergraduate medical curricula, despite the ever-increasing evidence for the neurologic basis for psychiatric disorders.⁶ However, there is positive from a South Indian study on interns, which found that 70% considered psychiatry a valid branch of medicine and an upcoming field.⁹

Concerns about Psychiatric Treatments:

Significant concerns about psychiatric treatments causing excessive symptom focus were noted in our study, aligning with Chawla et al., who found gaps in students' understanding of psychiatric treatments like Modified Electroconvulsive Therapy (MECT). Their study noted that undergraduate medical students were apprehensive about the MECT,

mainly because of the fear of brain damage. This is despite a large body of evidence that shows that MECT is devoid of any sustained brain damage. Enhanced exposure to clinical evidence may help address these doubts.⁵

Perceptions of Psychiatric Hospitals and Teaching:

Participants in our study recognized the vital role of psychiatric hospitals and teaching in mental health treatment. Males had a significantly better perception of psychiatric hospitals and teaching. These findings align with Kodakandla et al., who reported positive attitudes toward psychiatric teaching and treatment effectiveness.⁹ The attitude towards psychiatry overall, the functioning of a psychiatrist, and the efficacy of psychiatry treatment were found to be good in over 90% of the interns in that study.

Attitudes toward Psychiatric Patients:

Participants generally expressed empathy, agreeing that psychiatric patients are "just as human as others." Farooq et al. reported similar findings globally, emphasizing students' recognition of the humanity of psychiatric patients.⁸ This indicates that, regardless of gender, medical students acknowledge the importance of psychiatric care, although certain misconceptions persist.

Attitudes toward Psychiatric Illness:

Most participants acknowledged that psychiatric disorders deserve attention equal to physical disorders. This finding aligns with Patra and Patro, who emphasized integrating mental health into general medical education to foster comprehensive healthcare understanding.¹¹

The study's strength lies in its comprehensive use of the ATP-30 scale. Additionally, the inclusion of participants from two medical institutions enhances the generalizability of the findings, offering a valuable glimpse into the attitudes of future medical professionals. However, several limitations must be considered. The crosssectional design captures attitudes at a single point, limiting

the ability to assess how these perceptions may evolve with further clinical exposure or psychiatric education. Furthermore, the reliance on self-reported data introduces the potential for response bias, where participants may over-report or under-report certain attitudes due to social desirability. Finally, the study's relatively small sample size, may limit the broader applicability of the results to all medical graduates in India, particularly across diverse geographical regions.

Future research could use longitudinal studies to track attitude changes with increased clinical exposure. Interventions like extended rotations and mentorship programs could foster positive perceptions. Expanding studies across diverse regions would improve generalizability and address cultural variations. Qualitative research, such as focus groups, could provide deeper insights into skepticism and stigma surrounding psychiatry. Highlighting meaningful career opportunities in psychiatry could further improve perceptions.

CONCLUSION

This study provides an essential overview of the attitudes of medical graduates toward psychiatry, revealing both encouraging trends and significant challenges, particularly regarding gender-based differences. Overall, participants displayed positive attitudes toward psychiatric patients and recognized the importance of psychiatric illness, suggesting an increasing appreciation of mental health within the medical community. However, skepticism regarding the scientific rigor of psychiatry and concerns about job satisfaction, particularly among female participants, highlight persistent barriers to considering psychiatry as a career.

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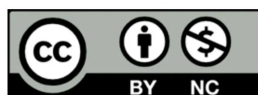
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