

# Impact of clinical posting in psychiatry on the attitude of medical students of GMC Jammu towards mental illness and psychiatry

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## ARTICLE CYCLE

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## ABSTRACT

**Background:** Undergraduate's attitude towards psychaitric patient is very crucial to maintain the treatment gap due to mental illness. Psychiatry is still the neglected subject and there is a huge deficit of psychiatrists and mental health professionals particularly in J&K . **Aims & objectives:** To compare medical student's and intern's attitude towards mental illness and psychiatry and to assess the impact of psychiatric training on attitude of students towards the mental illness. **Methodology:** This longitudinal study was conducted for a period of six months among Phase II MBBS, Phase III part I MBBS students and interns of Government Medical College Hospital Jammu. The participating students were assessed by using the Questionnaires – 1. Attitude Towards Psychiatry -30 (ATP-30) scale and 2. Mental Illness Clinician's Attitude (MICA) scale. The statistical test was done using SPSS version (20.0) . A p-value of < 0.05 was considered statistically significant. **Results:** Most of questions in ATP-30 scale showed significant improvement in post clinical postings with a statistically significant p-value less than 0.05. While few questions on MICA scale showed improvement. After the clinical posting, 15 (13.6%) of students opted psychiatry as a speciality, which is not statistically significant. **Conclusion:** The positive attitude of the students towards psychiatric patients would help in reducing the stigma attached to people with mental illness and mental health professionals.

## KEYWORDS

ATP, MICA, Psychiatry, Attitude

## INTRODUCTION

Mental illnesses remains a major public health problem worldwide(1). More than 1 billion people are living with mental, neurological and substance use disorder(2). In order to ensure the well-being and integration of people with mental illness, young, enthusiastic and open-minded doctors are the need of the hour. However, a systemic review revealed that while medical students' attitudes towards psychiatry are generally positive, psychiatry as a potential career choice is unpopular.(3)A number of studies have reported undergraduate training to be a critical period for

changing the attitudes of medical students toward mental illness(4-5,).Toward mental illness, medical student's attitude is an important concern contributing to the fact that these are the individuals who are very often likely to encounter and thereafter take care of mentally-ill patients, directly or indirectly, as future doctors (6). Their attitude would affect the quality of service they serve to these patients and their respective families and may also influence how an individual would seek professional ist's help for the problems related to psychiatric disorders.

### Aim & Objectives

- To compare medical student's and intern's attitude towards mental illness and psychiatry.
- To assess the impact of psychiatric training on attitude of students towards the mental illness.

### MATERIAL & METHODS

**Study setting:** The present study was conducted in the Psychiatric Diseases Hospital, Jammu. Psychiatric diseases Hospital is a part of GMC Jammu which is a tertiary care teaching and training hospital in Jammu province. This hospital provides the preventive, promotive and curative services in entire Jammu region and its adjoining districts in the disciplines of psychiatric diseases and deaddiction. This is the only psychiatric disease hospital in the entire Jammu division.

**Study type & study design:** This was a longitudinal study conducted among the students pursuing MBBS at GMC Jammu.

**Study duration:** 6 months.

**Study population:** The study population consisted of students of GMC Jammu who were in the Phase II MBBS, Phase III part I MBBS and Interns attending psychiatry posting at psychiatric diseases hospital, Jammu during the study period.

#### Inclusion Criteria:

1. Students of Phase II MBBS, Phase III part I MBBS and Interns attending psychiatry posting at psychiatric diseases hospital Jammu during the study period.
2. Students who were willing to participate in the study and gave written informed consent.

#### Exclusion Criteria:

1. Students of respective phases who were absent at the time of study.
2. Students who were not willing to participate in the study.

**Ethical Consideration:** The approval was sought from the Institutional Ethics Committee (IEC), Government Medical College, Jammu vide order no. IEC/GMC/CatC /2021/516 Dated:17/04/2021 before the commencement of study. Informed written consent was also taken from the participants who were willing to participate.

**Method Of Data Collection:** The study was conducted among the students who were in Phase II MBBS, Phase III part I MBBS and Interns of Government Medical College Hospital Jammu, who were attending psychiatry hospital for their clinical posting during the study period and gave informed consent. The clinical posting in psychiatry was for a duration of 15 days. Everyday session was for 3 hours which included a 1 hour theory lecture on various topics of psychiatry as per curriculum suggested by the NMC.15 Topics were divided

among the faculty of the Department of Psychiatry including professors, associate professors and senior doctors. The participants were recruited at the beginning of their clinical posting in psychiatry i.e, first day of the posting. These participants were assessed using a proforma containing sociodemographic details and the questionnaires comprising of pretested and validated scales – Attitude Towards Psychiatry -30 (ATP-30) scale and Mental Illness Clinician's Attitude (MICA) scale. These scales were presented to the students at the beginning (first day of posting) and again the same scales were presented to the respective students at the end(last day) of the clinical psychiatry posting.

**Study Instrument:** Attitude Towards Psychiatry -30 (ATP-30) scale **(7):** This questionnaire was developed by Burra and colleagues to assess the attitude towards various aspects of psychiatry on the basis of a 5-point Likert scale. The ATP-30 consists of 30 items out of which 15 items are directed towards the positive attitude for psychiatry and the remaining 15 items are directed towards the negative attitude. The higher the score, the more favourable the attitude(minimum score 30=negative attitude; maximum score150=positive attitude; score of 90=computed neutral attitude value). The ATP-30 has presented good validity and reliability and was being used for various international studies with a Cronbach's alpha of 0.831.

Mental Illness Clinician's Attitude (MICA) scale **(8):**This version of the MICA ( medical student ) was developed and validated in 2010. It consists of 16 items and is ranked on a 6-point Likert scale—strongly agree, agree, somewhat agree, somewhat disagree, disagree, and strongly disagree. A minimum total score of 16 and the maximum 96 is recorded using this scale. The lower score indicates lesser of stigmatising attitude towards mental illness and psychiatry. This scale has a good internal consistency with Cronbach's alpha = 0.79

**Statistical Analysis:** . Data collected was entered into Microsoft Excel sheet. Qualitative data was reported as proportions while mean ( $\pm$  SD) were used to report quantitative variables. Analysis of data was done using IBM SPSS 20.0. Student's T-test was used to find the differences in the mean of scores before and after the clinical posting. A p-value of <0.05 was taken as significant and all p-values reported were two tailed.

### RESULTS

A total of 109 students were interviewed, 30 were Phase II MBBS students, 20 were Phase III Part I MBBS students and 59 were interns, among whom 46 were males and 63 were females. The mean age of students was 21 years. As per religion, 80.9%

were hindus, 12.7% were muslim, 3.6% were sikhs and 2.7% constitute others. Only three students have history of mental illness in their second degree relatives .Mean attendance of students at psychiatry posting is 12 days .We recorded answers on questionnaire ATP-30 and MICA Scales both at the first and last day of posting . The total score on ATP-30 scale and MICA scale both before and after clinical posting is depicted in the Table 1. There was a significant improvement in Total ATP score after clinical postings, Negative domain of ATP-30 also showed a significant improvement, the Positive domain also showed some improvement but the difference was not statistically significant . The

Total score on MICA scale showed some improvement but the difference is not statistically significant . Answers to most of questions in ATP-30 scale which showed statistically significant improvement in post clinical postings (p-value less than 0.05) are depicted in Table 2. While some of the questions on MICA scale which showed some improvement are given in Table 3. Whereas, when asked for opting psychiatry as career, before clinical posting only 8 (7.2%) showed willingness to choose psychiatry and after clinical posting 15(13.6%) of the students were prepared to opt psychiatry as a speciality but this difference is not statistically significant.

**Table 1. Scores of ATP-30 and MICA scale (n=109)**

	Preclinical posting	Postclinical posting	p-value
<b>ATP – 30</b>			
<b>Total score</b>	114.97(10.96)	117.6(10.47)	0.012
<b>Positive domain score</b>	58.77(6.31)	59.89(5.14)	0.080
<b>Negative domain score</b>	56.2(6.89)	57.7((6.53)	0.014
<b>MICA score</b>	44.54(6.85)	42.74(6.92)	0.071

**Table 2:-Individual items of ATP-30 questionnaire which showed significant improvement following psychiatry clinical posting(n=109)**

Question	Response Students	Of	Preclinical Posting(%)	Postclinical Posting(%)	P value ( < 0.05 as significant)
Psychiatry is unappealing because it makes so little Use of medical training.	Agree	7.3	6.4		0.001
	Neutral	8.3	3.7		
	Disagree	48.6	45.9		
I would like to be a psychiatrist	Agree	11.9	21.1		0.001
	Neutral	53.2	54.1		
	Disagree	18.3	7.3		
On the whole, people taking up psychiatric training are running away from participation in real me	Agree	6.4	8.3		0.001
	Neutral	11.9	11.0		
	Disagree	36.7	31.1		
Psychiatric teaching increases our understanding of medical and surgical patients.	Agree	42.2	50.5		0.001
	Neutral	21.1	22.9		
	Disagree	2.8	1.8		
The majority of students report that their psychiatric undergraduate training has been valuable	Agree	44.0	50.5		0.001
	Neutral	27.5	27.5		
	Disagree	2.8	.9		
Psychiatry is a respected branch of medicine	Agree	47.7	41.3		0.001
	Neutral	7.3	9.2		
	Disagree	0.9	1.8		
Psychiatrists tend to be at least as stable as the average doctor	Agree	49.5	56.9		0.001
	Neutral	17.4	11.9		
	Disagree	4.6	.9		
Psychiatric treatment causes patients to worry too much about their symptoms	Agree	12.8	28.4		0.001
	Neutral	21.1	31.2		
	Disagree	15.6	5.5		
There is very little that psychiatrists can do for their patients	Agree	5.5	2.8		0.001
	Neutral	9.2	10.1		
	Disagree	34.9	33.1		
If I were asked what I considered to be the three most exciting medical	Agree	12.8	23.9		0.002
	Neutral	25.7	22.9		

Question	Response Students	Of	Preclinical Posting(%)	Postclinical Posting(%)	P value ( < 0.05 as significant)
specialties, psychiatry would be excluded	Disagree		11.0	6.4	
These days psychiatry is the most important part of the curriculum in medical schools	Agree		33.9	33.9	0.001
	Neutral		14.7	22.0	
	Disagree		12.8	2.8	
Psychiatry is so unscientific that even psychiatrists can't agree as to what its basic applied sciences are	Agree		1.8	5.5	0.001
	Neutral		28.4	14.7	
	Disagree		21.1	22.8	
In recent years psychiatric treatment has become quite effective..	Agree		53.2	51.4	0.001
	Neutral		9.2	4.6	
	Disagree		2.8	4.6	
If we listen to them, psychiatric patients are just as human as other people.	Agree		33.0	28.4	0.001
	Neutral		2.8	5.5	
	Disagree		2.8	0.9	
Psychiatric patients are often more interesting to work with than other patients	Agree		33.9	41.3	0.001
	Neutral		36.7	30.3	
	Disagree		2.8	7.3	
Psychiatry is so amorphous that it cannot really be taught effectively.	Agree		17.4	17.4	0.001
	Neutral		33.9	34.9	
	Disagree		6.4	8.3	

**Table 3:- Individual items of MICA questionnaire which showed significant improvement following psychiatry clinical posting (n=109)**

Questions	Response of students	Preclinical posting (%)	Postclinical posting (%)	p-value (<0.05 as significant)
I just learn psychiatry because it is in the exam	Agree	6.36	0	0.001
	Disagree	12.7	35.45	
Psychiatry is just as scientific as other fields of medicine	Agree	49.0	27.7	0.004
	Disagree	5.4	2.72	
Psychiatrist know more about the lives of people treated for a mental illness than do family members and others	Agree	20.9	40.9	0.001
	Disagree	3.63	8.18	
If a consultant psychiatrist instructed me to treat people with a mental illness ,I would not follow his instructions	Agree	26.3	17.27	0.005
	Disagree	1.8	3.63	
It is important that any doctor supporting a person with mental illness also assess their physical health	Agree	23.6	21.8	0.001
	Disagree	0.9	0.9	
If a college told me they had a mental illness, I would still want to work with them	Agree	22.7	19.09	0.001
	Disagree	5.4	3.6	

## DISCUSSION

The results of the present study have revealed that attitude of the respondents towards psychiatry had shown significant improvement in negative domain of ATP-30 as compared to positive domain .These results are in agreement with studies conducted previously .However, Rajagopalan et al reported discordant results (9).Psychiatry as a career, has risen from 7.2% to 13.6% among the respondents after the clinical posting . These results are consistent with those reported by Desai R et al(10) but are in contrast to those underlined by Lee

Seng(11). Since the duration of posting was a mere two weeks, it is likely that a bit more time in the posting could have shown an improved results in positive domain too. Rajagopalan M et al noted no change in attitude among students in a 15 day term. But other studies have reported that more time spent in psychiatry posting helps in the desired outcome. Thus it would be pertinent to conclude that an adequate time spent in psychiatry clinical posting is likely to result in doctors having positive attitude towards psychiatry subject in general and psychiatric patients in particular.

On application of MICA Scale ,the authors found that the end posting score showed some improvement but it was statistically not significant ( $p > 0.05$ ) These findings are congruent with those reported by Desai R *et al* but in contrast with the results reported by Lyons Z *et al* .

Among the reasons cited by various authors for not interested in psychiatry as a future career include lack of patience, empathy and compassion for a patient, teachers not able to inculcate these attributes to students, negative views of family members about mental illnesses, psychiatry considered as a low prestige stream and interest of student in other disciplines . in this context, Desai R *et al* has suggested to delve into factors like role of good mentors which might be useful in inculcating a positive attitude leading to serious consideration about psychiatry as a career choice.

The results underlined the positive views of the respondents towards psychiatry at end posting with statistically significant changes noticed in domains of ATP-30 questionnaire like 'Psychiatry is a respected branch of medicine in recent years. Psychiatric treatment has become quite effective. These findings are consistent with those reported by Desai R *et al* ,Sarkar MR *et al* and Bulbena A *et al*(10,12,13). However Parikh NC reported results which were contradictory(14). Wiriyaosol P *et al* in a comparative study among medical students conducted in 1996 and 2019 regarding attitudes to psychiatry outlined that overall attitude towards psychiatry was significantly higher at present(in 2019) with that in the past(15).

Samari E *et al* noted that majority of the respondents endorsed favourable attitude towards importance of psychiatry and its skills, challenges within psychiatry but had generally unfavourable attitude towards psychiatric patients(16).

As prospective health care providers who are at forefront for the people in the community, medical students have a key role in identifying mental health issues and delivering quality care in future. It is pertinent to foster positive attitudes towards psychiatry and mental illness among medical students doing their preclinical years since attitudes tend to be more amenable to change in early years of training.

## CONCLUSION

There is a significant improvement in the student's attitude towards psychiatry after attending clinical posting of Psychiatry. The positive attitude of the students and interns towards psychiatric patients would help in reducing the stigma attached to people with mental illness and mental health professionals. There is also increase in the

percentage of students who wanted to choose psychiatry as a career option in future.

## RECOMMENDATION

The study highlights the need to encourage undergraduate medical students to choose psychiatry as a career option to overcome the shortage of psychiatrists particularly in J&K and also undergraduate students should be encouraged to reduce the stigma associated with mental illnesses.

## LIMITATION OF THE STUDY

Small sample size and the study being limited to a single medical college result in lack of generalizations of the findings whether the end posting improvements in attitude towards psychiatry would be sustained ahead cannot be assumed. Response bias due to social desirability can't be excluded since the results were self reported.

## RELEVANCE OF THE STUDY

The study helps to understand the importance of psychiatric training to develop a positive attitude towards psychiatric patients and psychiatrists. And how this positive attitude would contribute to reduce the stigma associated with psychiatric patients.

## AUTHORS CONTRIBUTION

All authors have contributed equally.

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## CONFLICT OF INTEREST

There is no conflict of interest

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## DECLARATION OF GENERATIVE AI AND AI ASSISTED TECHNOLOGIES IN THE WRITING PROCESS

The author haven't used any generative AI and AI assisted Technologies in the writing process.

## REFERENCES

1. Demyttenaere K, Bruffaerts R, Posada-Villa J, *et al*. Prevalence, severity, and unmet need for treatment of mental disorders in the World Health organization world mental health surveys. JAMA 2004;291:2581–90.
2. World Health Organization, 2023
3. Lyons Z, Hood S. Stigmatisation of mental illness and its impact on recruitment of medical students to a career in psychiatry. ERP. 2011;38(2):20–34.
4. Korszun A, Dinos S, Ahmed K, Bhui K. Medical student attitudes about mental illness: does medical-school

- education reduce stigma? Acad Psychiatry. 2012;36(3):197–204.
5. Kim J, Blum B, Kaushal S, Khan S, Hardigan P, Villalba CA. Impact of psychiatry clerkship rotation in attitudes towards Mental illness and psychiatry as a career among medical students. HCA Healthc j Med.2023 Dec30;4(6):415-420. Doi: 10.36518/2689-0216.1569.PMID: 38223472;PMCID: PMC10783562.
6. Lyons Z. Attitudes of medical students toward psychiatry and psychiatry as a career: a systematic review. Acad Psychiatry 2013;37:150–7. 10.1176/appi.ap.11110204
7. Burra P, Kalin R, Leichner P, et al. The ATP 30-a scale for measuring medical students' attitudes to psychiatry. Med Educ 1982;16:31–8.
8. Kassam A, Glozier N, Leese M, Henderson C, Thornicroft G. Development and responsiveness of a scale to measure clinicians' attitudes to people with mental illness (medical student version). Acta Psychiatr Scand. 2010 Aug;122(2):153-61. doi: 10.1111/j.1600-0447.2010.01562.x. Epub 2010 Apr 26. PMID: 20456286.
9. Rajagopalan M and Kuruvilla K. medical students' Attitudes towards psychiatry: effect of a two week posting. Indian journal of psychiatry.1994 oct-Dec;36(4): 177-182
10. Desai R, Panchal B, Vala A, et al. Impact of clinical posting in psychiatry on the attitudes towards psychiatry and mental illness in undergraduate medical students. General Psychiatry 2019;32:
11. Lee seng Esmond seow ,boon yang chua,Rathi Mahendran, Swapna Verma, Hui lin Ong, Ellaisha Samari ,Siow Ann Chong and mythily subramaniam. sectspsychiatry as a career choice among medical students : a cross sectional study examining school-related and non- school factors .BMJ Open .2018;8(8): e022201
12. Sarker MR, Khan MZR, Jahan N et al. Attitudes towards psychiatry among undergraduate medical students. Bangladesh journal of psychiatry ;28:45-9.
13. Bulbena A, Pailhez G, Coll J, et al. Changes in the attitudes towards psychiatry among Spanish medical students during training in psychiatry. Eur. J. Psychiat. 2005;19:79-87..
14. Parikh.NC,Sharma PS, Chaudhary PJ, et al. Study of attitude of intern toward psychiatry: a survey of a tertiary level hospital in Ahmedabad..Ind Psychiatry J 2014;23.
15. Wiriyaosol P et al . Medical students' attitude towards psychiatry: a comparison of past and present. Scientific reports 2023 May 29;13:8714.
16. Samari E et al .Attitudes towards psychiatry amongst medical and nursing students in Singapore. BMC Med Education. 2019 Mar 27;19(1):91.