Innovative ways and customizing psychiatry training for undergraduates

Sir,

Psychiatry training of medical undergraduates and enhancing their skills is considered the most important issue in addressing mental health concerns at every stage of care in the society.[1] Indian Psychiatry society is playing an important role in appraising Medical Council of India (MCI) about the urgent need to bring psychiatry as an essential subject to be incorporated in examination and evaluation of medical student to become a doctor.[2] Unfortunately, there are no definitive steps from MCI in that direction, in the current medical curriculum for undergraduates 20 h of theory, 20 h of clinical and 2 weeks internship is what has been allotted for psychiatry. Most students do not utilize even this training as psychiatry is not a subject for exams. Considering these ground realities the concept of psychiatry training boils down to individual intuitions, Departments and Faculty in Psychiatry to do the maximum possible in imparting training.

In this context, we would like to bring list of initiatives and outcome that was tried to maximize the undergraduate's training in psychiatry. This may be beneficial for other faculty/departments to replicate these strategies. Adichunchanagiri Institution of Medical Sciences (AIMS), BG Nagar, Mandya District, Karnataka, is truly a rural institution as the nearest district is about 100 km away. In 2009, as new faculty with
enthusiasm, we started first with scheduled psychiatry theory classes. This was notified at all places where students gather, and open invitation was given to any interested student, irrespective of term/year of under graduation could attend along with others students in regular psychiatry classes. This helped us to spread the message to all, even when there was no “Whatsapp,” then. To make learning interesting and interactive, the theory topic would begin with a case scenario/MCQs/famed personalities/recent event and then carried forward with inclusion of student-led brief seminar on the subheadings, the conclusion was with either questions to ponder or interesting infotainment task, for example “watch the movie - a beautiful mind,” after a class on Schizophrenia. Even students had options to give their names and phone number for further intimation when there are patients who were willing for examination in relation to the theory learnt earlier. This made an initial positive impact and kindled students’ interest, which was utilized for further enhancement of knowledge and skill. Even in clinical sessions and internship, the first session always began by knowing individual students hobbies and interest or about specialty they like. This understanding helped us to customize the teaching session to make it appealing in the background of their interest (panic disorder for those interested in cardiology) and gradually incorporating all the essentials of psychiatry. Student’s hobbies and interest were appropriately channelized, for example, a student who was talented writer won the Kannada Medical Literature award for a story about depression, another received honorary money for writing an article in a magazine on suicide. If student’s interest was in research, then they were encouraged to do so in their area of interest but in relation to psychiatry, students presented papers as early as in Annual National Conference of Indian Psychiatric Society 2012.[3] The Department of Psychiatry was literally converted and perceived as “students' add a for extracurricular activities” that greatly enhanced regards for psychiatry. Indian Psychiatry Society Quiz and Prize Exams were widely publicized, and interested students were trained, also rewarded at institution level at Behest of Department. This led to the amazing consecutive success of AIMS students in Psychiatry quiz from 2009 onwards at the state level and above, even when there are 40 other Medical Colleges in Karnataka, AIMS still dominates bagging 2015, first prize at state psychiatry conference. Similar inputs at JSS Medical College has recently yielded first place in South Zone Psychiatry conference. The student’s immediate interest also lies in the expected contribution of psychiatry learning for their scores in the examination, this was tackled by approaching the medicine department to provide at least 10% of questions to Psychiatry in all internals, which was incorporated. The next concern of students was their preparation for PG entrance exams. The “after college hours - PG test series” was tried involving other faculties, which ensured students interest. Considering the real challenge of psychiatry in any institution is in providing a diverse section of readers like students-PGs-Faculty of various specialty an “a al-carte” platform to create awareness and enhancing knowledge about Psychiatry. A monthly newsletter “MINDS” was initiated in 2011, this was free e-copy sent to all, and limited hardcopies were initially printed. This 4 page newsletter has seven brief sections; (1) editorial (2) down the memory lane by senior psychiatrist (3) invited article by a psychiatrist (4) consultation-liaison psychiatry by any other specialist (5) myths and facts (6) MCQs (7) crosswords. The last three sections were a contribution from students. This became popular and is currently in 5th year of publication, available as free download from website www.mindsnewsletter.com/www.psychiatry4u. com, which was initiated by like-minded friends in 2012 for easy accessibility from anywhere. From then, an editorial board from various institutions across India takes up the newsletter task “in the rotation.” A compilation book on MINDS issues “Glimpses of Psychiatry for Doctors and Medical Students” was published in 2013, and distributed as a complimentary copy to every Medical College in India.

In conclusion, there is a need for more discussion on various approaches in undergraduate training of psychiatry from across India. However, it is the innovative, customized and consistent approach that is the need of the hour in Indian Scenario until Medical Council of India, mandates psychiatry as “not an optional subject” for any medical student to become a doctor.

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