A KING’S COLLEGE LONDON GLOBAL HEALTH SOCIETY EVENT DISCUSSING GLOBAL MENTAL HEALTH TO INCREASE INTEREST IN PSYCHIATRY AS A CAREER: A PILOT STUDY

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SUMMARY

Introduction: Despite the launching of multiple initiatives to increase recruitment into psychiatry, the profession continues to remain undersubscribed. Studies have shown that teaching on global mental health can improve attitudes toward psychiatry in medical students. To the best of our knowledge, no studies have been published hitherto that evaluate if a brief teaching session (i.e. 60 minutes in duration) on global mental health improves perceptions of psychiatry and increases interest in this specialty as a career.

Subjects and methods: We conducted a single-arm, pre- post- comparison study on participants who attended a King’s College London Global Health Society event on Global Mental Health. Participants completed a survey before and after exposure to the event. Our aims were to detect and measure if there were any changes in perceptions of psychiatry and if a brief teaching session on global mental health would increase interest in pursuing psychiatry as a career.

Results: 71 out of 90 participants responded (77.8% response rate). Following exposure to the event, there were statistically significant improvements in the scores for, “Psychiatry is interesting” (pre-event score 4.41, post-event score 4.66 p value <0.001), “I would talk positively about psychiatry to other people” (pre-event score 4.02, post-event score 4.48 p value <0.00001), and, “I would consider psychiatry as a career” (pre-event score 3.24, post-event score 3.72 p value <0.001).

Conclusion: The results of our pilot study suggest that a brief lecture on global mental health may improve perceptions of psychiatry and increase interest in this specialty as a career. We recommend that global mental health be introduced into the medical school curriculum since this may help to increase recruitment into psychiatry.

Key words: psychiatry – recruitment – global mental health

INTRODUCTION

The World Health Organization (WHO) has identified a chronic shortage of psychiatrists on a global scale (Hankir et al. 2015). In order to address the, ‘Recruitment crisis’ in psychiatry several initiatives have been launched i.e. the Royal College of Psychiatrist’s Choose Psychiatry campaign in the United Kingdom (https://www.rcpsych.ac.uk/become-a-psychiatrist/choose-psychiatry/choose-psychiatry-a-career-that-makes-a-difference). However, although there has been an increase in the number of psychiatry posts filled in the UK, the profession continues to remain undersubscribed (https://www.rcpsych.ac.uk/news-and-features/latest-news/detail/2019/07/11/number-of-junior-doctors-choosing-psychiatry-at-all-time-high).

There are multiple factors that contribute to the ‘recruitment crisis’ in psychiatry (Zaman et al. 2018). For example, Weisenfeld and colleagues revealed that negative comments from friends and family can deter Canadian medical students from choosing psychiatry as a career (Weisenfeld et al. 2014). Unfortunately, derogatory remarks about psychiatry are not limited to the general public; indeed, the medical community itself is also complicit. Recent research has revealed that psychiatry was the specialty that was ‘badmouthed and bashed’ the most and in the medical community and that the stigmatisation of psychiatry was negatively influencing recruitment into the profession (Ajaz et al. 2016). Finally, “self-stigma” amongst some psychiatry practitioners does not help either (Zaman et al. 2018)

With all of these forces seemingly colluding and conspiring to deter medical students from choosing psychiatry as a career, we must consider and embrace all options to improve the image of this profession.

Global mental health is a field in psychiatry that has generated much interest among medical students and will be discussed further.
SUBJECTS AND METHODS

Global Mental Health Review

Global mental health (GMH) is grounded on four basic principles:
- Mental health is global public good: “All countries can be thought of as developing countries in the context of mental health”.
- Health problems exist on a continuum.
- Health is individual and a unique product of social and environmental influences.
- Mental health is a fundamental human right that requires a rights-based approach (Chavan & Aneja 2016; Koplan et al. 2009).

GMH has significantly contributed to the inclusion of mental health into the United Nations Sustainable Development Goals (SDGs) (Patel et al. 2018).

Although progress has been made in reducing the treatment gap, the global burden of mental illness continues to increase (Collins et al. 2013). Moreover, abuse and human rights violations of people with mental illnesses occur globally (Patel et al. 2018) and the available mental health treatments are usually of a lower quality than treatments for physical illnesses (Patel et al. 2018).

The Lancet Commission on global mental health and sustainable development highlighted that despite recent research discoveries on actions that could be taken to prevent and treat mental illness and to strengthen and support mental health systems, real-world applications of these recommendations have been lacking (Patel et al. 2018). This has had a profoundly negative impact on population well-being and productivity (Vigo et al. 2016).

There is a sizeable mental health treatment gap between low-income and middle-income countries (LMICs) and high-income countries (HICs). Approximately 80% of people experiencing severe mental illnesses in LMICs receive no treatment (Murphy et al. 2017, Vigo et al. 2016).

LMICs are challenged by a significantly lower numbers of psychiatrists and mental health care professionals compared to HMICs (Kakuma et al. 2011, Nortje & Seedat 2013, Rathod et al. 2017). For example, the global average of psychiatrists per 100 000 people is 3.96, however, there are 1.55 psychiatrists per 100,000 people in China (Jacob et al. 2007).

In comparison, HMICs are challenged by a lack of interest in psychiatry by medical students (Murphy et al. 2017). For example, in 2017, only 69% of psychiatry vacancies were filled in the United Kingdom (NHS Health Education England 2017).

As enumerated above, misperceptions of psychiatry and negative stereotypes of psychiatrists may deter medical students from choosing psychiatry as a career. However, teaching methods, quality and length of clinical exposure and electives in mental health are some of the factors that can improve the ‘image’ of psychiatry (Farooq et al. 2013).

Although there are teaching programmes dedicated to global health education (GHE) in HICs (Mitchell et al. 2013, Peluso et al. 2017), high quality GHE remains limited (Liu et al. 2015). Furthermore, in LMICs there have also been an increased number of students partaking in GHE in their home country, other HICs or other LMICs (Abedini et al. 2014, Liu et al. 2015). This presents a unique opportunity to expand GHE and the potential to increase the number of trained mental health care professionals and ultimately narrow the global mental health treatment gap. Thus, there is a pressing need to develop a cost-effective, long-term and mutually beneficial education programmes that partners HICs and LMICs to reduce the treatment gap (Murphy et al. 2017).

A recent study evaluated the effectiveness of utilizing digital problem-based learning (PBL) between paired United Kingdom and Somaliland medical students in facilitating cross-cultural understanding and increasing factual knowledge of mental health (Murphy et al. 2017). The qualitative results showed that a peer-to-peer digital PBL education programme between medical students in a high-income country and a low- and middle-income country positively improved attitudes towards psychiatry. Students were motivated towards GHE and they also enjoyed connecting with peers and learning about cultural and psychosocial variances in global mental health. This suggests that peer-to-peer digital platforms and PBL could be a valuable and cost-effective tool to reduce barriers in resource limitations in LMICs and motivate students in HICs to understand cultural and psychosocial differences in global mental health (Murphy et al. 2017). It also suggests that global mental health can increase interest in psychiatry as a career in medical students.

Anecdotally, global mental health has been highly popular among medical students. We wanted to ascertain if a global mental health event would improve the perception of psychiatry and encourage students to consider pursuing this specialty as a career.

Study design

King’s College London (KCL) Global Health Society (GHS) organized an event on Global Mental Health to improve the image of psychiatry and increase interest in pursuing this specialty as a career. We designed a survey (see below) and administered it on participants before and after exposure to the KCL GHS global mental health event. Informed written consent was obtained from all participants.

Measures

The survey aimed to detect and measure any changes in the views towards psychiatry in the participants before and after exposure to the event and if there was an increase in interest in pursuing this medical specialty as a career. Responses to statements were on a five-point Likert scale:
The statements were as follows:

- “Psychiatry is interesting.”
- “Psychiatry has a positive impact on people’s lives.”
- “I would talk positively about psychiatry to other people.”
- “I would consider psychiatry as a career.”
- “Psychiatry is a respectable profession.”

**Statistical Analysis**

Descriptive and inferential statistics were carried out on the data obtained. Paired, two-tailed t-tests were computed to compare the participants’ responses to statements before and after exposure to the event. Results were considered statistically significant at p<0.05 with a confidence interval of 95%.

**RESULTS**

Out of 90 attendees, 71 completed the surveys pre- and post-event (77.8% response rate). The majority of respondents were female and were in the 18-30 age group (84.48%). The ethnic make-up of the respondents was diverse as illustrated in Figure 1. Most of the respondents were in the healthcare sector (medical and dental students and professionals).

The mean score for the first question, “Psychiatry is interesting” prior to the talk was 4.41 (Standard Deviation (SD)=0.68), and after the talk 4.66 (SD=0.53) with a statistically significant p-value (p<0.001) (see Figure 2).

The scores for the second question, “Psychiatry has a positive impact on people’s lives” also showed statistically significant changes (p<0.01) when the means of the pre- and post-event were compared (pre-event mean 4.15 (SD=0.82), post-event mean 4.56 (SD=0.73) (see Figure 2)).

The third question, “I would talk positively about psychiatry to other people” showed statistically significant improvement when the pre-event and post-event scores were compared and analysed (pre-event mean score 4.02 (Standard Deviation = 0.934) and the post-event mean was 4.48 (SD=0.71), p<0.00001 (see Figure 2)).

The fourth question, “I would consider psychiatry as a career” also showed statistically significant changes (p<0.001) (pre-event average 3.24 (SD=1.18), post-event average 3.72 (SD=1.16) (see Figure 2)).

Finally, the fifth question, “Psychiatry is a respectable profession” also showed statistically significant changes (p<0.05) (pre-event average 4.45 (SD=0.67), post-event average was 4.61 (SD=0.54) (see Figure 2)).

**Free-text comments**

Below are some free-text comments that participants provided that also reveal how positively received the event on global mental health was:
“My experience of psychiatry in the UK has been underwhelming but this event has renewed interest!”

“This topic should be incorporated into the medical school curriculum.”

“An interesting topic that urgently needs to be addressed.”

“Super!”

“It definitely needs to be discussed about in more depth and breadth. Different countries have different issues yet they share similar characteristics such as people with mental health being stigmatized. It’s important to raise awareness within the community and to embrace and treat the people with mental health needs.”

“Very powerful presentation.”

“Wonderful lecture, extremely informative.”

**DISCUSSION**

This study aimed to ascertain if a brief event on Global Mental Health may improve the overall perception of psychiatry by healthcare students and increase interest in pursuing this medical specialty as a career. The findings of this study are promising, with statistically significant improvements in scores being obtained for all 5 statements after exposure to the event. The results for question 4, “I would consider psychiatry as a career” were perhaps the most encouraging since the aim of this event was to increase interest in psychiatry as a career. Moreover, as enumerated above, psychiatry is the medical specialty that is ‘bashed and badmouthed’ the most. The fact that there were statistically significant improvements in the scores for the statements, “I would talk positively about psychiatry to other people” and “Psychiatry is a respectable profession” may indicate that a brief event on global mental health may help to make conversations about psychiatry more positive.

There are several limitations to this study. The survey that we administered on participants in this study was not validated. There was a small sample size and no longitudinal data (i.e. participants were not followed up). There was no control group and there was also a selection bias since participants were ‘self-selecting’ i.e. they decided to attend the event on their own volition. Therefore, the results of this pilot study may not be generalizable or representative.

**CONCLUSION**

In summary, an event on global mental health had a positive impact on the respondents’ perception of psychiatry and increased interest in psychiatry as a career. Pre- and post-questionnaire comparisons yielded statistically significant improvements in scores. Although there are several limitations to the study, the results are nonetheless promising. Further research in this area is needed.

**Contribution of individual authors:**

Ahmed Hankir, Frederick R. Carrick & Rashid Zaman conceived the idea for the study and contributed to the literature review and revised the manuscript.

Deyl Djama & Ho Yi Lo collected the data and analysed it.

Deyl Djama wrote the manuscript and contributed to the design of the study.

Ho Yi Lo contributed to the manuscript and review of the paper.
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Conflict of interest: None to declare.

References


10. Murphy R, Clissold E & Keynejad R: Problem-based, peer-to-peer global mental health e-learning between the UK and Somaliland: a pilot study. Evidence Based Mental Health 2017; 20:142-146


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