

Evaluation of Psychiatric Training Programmes For General Medical Officers

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Abstract: *Diatrict Mental Health Programme envisages integerating mental health care with the primary health care. So the medical officers of the taluk hospitals and primary health centres are trained to identify and diagnose common mental disorders and treat.Two training programmes were conducted and the efficiency of these programmes are evaluated objectively.Assessments were made before and after the training programmes with the help semi structured questionnaire testing their theoritical and clinical knowledge.When the results were analysed there was significant gain in knowledge compared to the pre-test score. Distinction was made between theoritical and clinical knowledge, improvement in clinical knowledge was more.Results are discussed with those of other studies.To conclude, the medical officers were having a basic theoritical knowledge in psychiatry and their clinicla skills much improved with the training programme. Limitaions are indeed short duration of the training programmes, medical officers interest and aptitude to learn psychiatry and reliability of the assessment methods.*

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I. Introduction:

National Mental Health Programme provides a broad framework for the development of mental health services in the country. Essential feature of the program is utilization of the resources available in the community for mental health care. Now the importance is towards a shift from hospital to the community and from exclusive specialist care to integrated care. Hence a greater emphasis is given to the primary health sector as an avenue for provision of mental health care (Srinivasamurthy, R editorial,IJP 1989) The primary health care doctors and workers can be trained to deliver basic mental health care(Carstairs, 1973; WHO,1975; Giel & Harding, 1976; Carstairs & Kapur, 1976) District mental health program envisages training the medical officers in the Primary health centers so that they can diagnose and manage most of the psychiatric diseases and epilepsy(DGHSa).

Aim of the study

Dept. of Psychaitry, Govt.Mohan Kumaramangalam Medical College, Salem is the nodal center for the District Mental Health Program in the district of Dharmapuri. We have conducted two training programs for the medical officers working in the district. Evaluation of any training program is an absolute necessity not only to improve our training methods and also to assess the possible impact of the training on the progress of the District Mental Health Program.

Aim of the study is to find out the efficacy of the training program, in terms of gain in knowledge and clinical skills of the trainees in dealing with the psychiatric patients.

II. Material and methods:

Two training programs were conducted for the medical officers, working in the Government hospitals and primary health centers in the district of Dharmapuri.

Each group was planned to be of 15 medical officers. Joint director of medical services and deputy director of health services deputed medical officers.

First group consisted of 14 doctors and second group 15 doctors. First training programme was conducted from 24.4.2006 to 29.4.2006 and the second from 5.6.2006 to 10.6.2006. Each training programme was for 6 days from Monday to Saturday. It consisted of 4 hours of lectures in the mornings. After noon sessions were devoted for clinical demonstrations. The trainees were encouraged to examine the patients and discuss. Afternoon sessions were more of interactive sessions with special emphasis on clinical issues. Both the training programmes had the same schedule and the trainers were also the same.

The assessment tool consisted of a questionnaire with 14 items constructed on multiple-choice format. There were 8 questions with clinical orientation and the remaining 6 on theoretical issues. Each of the trainees were individually asked to choose the single best possible answer from 4 choices. Questionnaire was administered before the onset of the training and immediately after the training program. The data were analyzed using descriptive statistics and inferential statistics.

III. Results:

Socio demographic details of the trainees are given in the table. One candidate was a psychiatrist with D.P.M. There were 2 females in the first group and 4 females in the second group. About 40 % of them were postgraduates.

Qualification	First group		Second Group		Total	
	Number	Percentage	Number	Percentage	Number	Percentage
M.B.B.S	8	57	9	60	17	59
M.D. / M.S.	5	36	2	13	7	25
Diploma	1	7	4	27	5	17
Total	14		15		29	

Table 1: Sociodemographic data

The means and standard deviations of the pre and post training scores of groups are tabulated. Mean pre-training score was 10.65 out of 21 (50.7 %) and the mean post training score was 13.91 (66 %)

Pre-training Score		Post-training Score		T-test
Mean	SD	Mean	SD	
10.65	3.73	13.91	3.70	2.29
Significant				

Table2: Comparison of pre and post traing score.

When a distinction is made between the questions oriented towards theoretical and clinical knowledge, improvement in clinical knowledge is more, compared to theoretical knowledge.

	Pre-training Score			Post-training Score			T-test	Significance level
	Mean	SD	%	Mean	SD	%		
Theory	6.5	2.54	50	7	2.12	53.8	2.091	Significant
Clinical	3.5	1.21	43.7	6	1.69	75	4.898	Significant

Table 3: Comparison of scores in theory and clinical issues.

IV. Discussion:

The importance of the evaluation of the mental health training programs can not be undermined. It gives insights to the trainers about the strengths and weaknesses of the training as well as the methodology of the short training programs.

The advantages and limitations of psychiatric training programs have already been discussed (Small and Regan, 1974 and Small, 1975). Sriram et al (1990) have found that multiple-choice questionnaire to be sensitive in assessing the gain in knowledge in mental health delivery.

The doctors who were deputed for the training were heterogeneous in terms of age, specialization, experience and qualification. There were both medical graduates and postgraduates. All of them would have been exposed to a minimum of 12 hours of psychiatric theory classes and a month of clinical training in psychiatry during their undergraduate period. Notwithstanding the fact, that the post graduates of medical and allied specialties could have had further chances of improving their knowledge, the group as such was able to score a mean of 51%, even before the training, indicating that the medical officers were already having a reasonable knowledge in psychiatry The training improved their knowledge by another 15 %.

Similar findings were reported in an ICMR multi-centre study, recording a gain in score of 12.4 % from a baseline score of 73.8 % (Shamasundar.C, et al 1989), (Satyavati Devi, 1993). The author attributes the high pre-training score to multiple-choice nature of questionnaire instead of an open type of questions. We have also used the same pattern of Multiple Choice Questions. Similar findings have been observed by Issac et al (1982), Goutham, (1985), and Sharma et al (1987).

We do feel that their knowledge in psychiatry cannot be underestimated given the fact that 40 % of them were postgraduates and quite a good number of others are perhaps preparing for postgraduate entrance examination.

To explore further, distinction is made between scores in multiple-choice questions pertaining to theoretical and clinical issues. As reported in the tabular column, their base line score is more on theoretical issues than on clinical issues. The gain in score on clinical items is 32 % as against just 4 % on items covering

theory. This is perhaps due to the fact that the content of the program is more clinically oriented given the purpose of the training.

Studies have also reported that the training programs for the multipurpose health workers also result in significant gain in knowledge (Nagarajaiah, et al, 1994). Our training of the health workers will be started shortly.

V. Conclusion and limitations:

The main inferences of the study are that the medical officers are having a basic knowledge in Psychiatry and a weeks training program further refines their knowledge, especially on clinical issues. A number of factors are likely to influence the observed performance of the trainees in a training program. The ability and competence of the trainers to make the lectures interesting, methods adopted to impart training like lectures, discussions, case demonstrations, baseline knowledge and interest of the trainees and lastly the assessment procedures and their validity and reliability all go to influence the observed performance of the trainees (Nagarajaiah, et al, 1994). It is worthwhile noting that most of the trainees (80%), in their feedback, had reported their preferences for an interesting lecture studded with anecdotes and humor rather than a dry theoretical lecture. There can be no doubt about the fact that the duration of our training program is really too short to learn clinical psychiatry. As far as the test materials are concerned, multiple choice questions specifically constructed on the program content do have an influence on the scores both before and after the training. Instead, using clinical vignettes could have brought out the actual clinical skills indeed. More over the assessment is made immediately after the end of the training. Follow up assessment for consistency in knowledge gained is also necessary.

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