

Attitudes towards psychiatry as a prospective career among medical interns

Ivan Netto¹, Manjeet Santre^{2*}, Smita Panse³

Dept. of Psychiatry, B. J. Government Medical College, Pune, Maharashtra, India

*Corresponding Author:

Email: drmanjitsantre@rediffmail.com

Abstract

Introduction: In India there is a great shortage of psychiatrists unable to respond to the demands of providing good quality mental health care. More women worldwide are taking up psychiatry as a career. Medical interns are the future doctors on the threshold of making a choice regarding their post-graduation which will influence the future quality of mental health care.

Materials and Methods: The attitudes to psychiatry of 148 medical interns (93 – male and 55 – female) were studied using the 29 item Balon's questionnaire.

Results: The overall mean attitudes scores to psychiatry was 88.40 for males and 85.25 for females ($P > 0.001$). The mean attitude scores in (Area 6 -Specific medical college factors) was 19 for males and 17.56 for female ($p < 0.005$). Low scores were seen on Q11 (psychiatrists being apologetic about psychiatry), Q23 (Being uncomfortable with mentally ill) & Q 29 (Encouragement to become a Psychiatrist). 3.2% of male & none of the female interns wish to definitely take up a life-long career in psychiatry and 10.7% males and 12.7 % female were undecided.

Conclusions: There were overall positive attitudes scores to psychiatry in both male and female medical interns with higher scores in males as compared to females. There were positive attitude scores in both male and female interns to the teaching of psychiatry at the medical college. Interns have negative attitude to psychiatric patients which suggest stigmatization. Interns need to be encouraged to take up psychiatry as a life- long career.

Keywords: Attitudes, Medical interns, Career, Psychiatry.

Introduction

According to the National Mental Health Survey of India 2015–2016 the overall weighted prevalence for any mental morbidity was 13.7% lifetime and 10.6% current mental morbidity.¹ The burden of mental disorders is of a great magnitude and this has an impact not only on the individual but on the society at large. Unfortunately there is a great shortage of psychiatrists in the country who are unable to respond to the great demands of providing good quality mental health care. More than one third of the population has a more than 90% shortage of psychiatrists.²

In keeping with international trends, there has been a rise in the number of women psychiatrists in the last two decades in India. The Indian Psychiatric Society which is about 60 years old has 14.6% (2829) women psychiatrists enrolled as members. About 10% are fellows (after 5 year period of membership) and 20% are ordinary members which indicate that there are fewer senior women psychiatrists. It appears that women choose psychiatry as a career as they are able to balance both professional and family responsibilities in a better manner.³

Attitudes are defined as a relative enduring organization of emotionally linked learnt beliefs around an object or situation predisposing one to respond in some preferential manner.⁴

Medical students' attitudes to psychiatry are influenced by a number of factors such as personality, quality of psychiatric education at medical school, perceived social rewards, career prospects and other socio-cultural factors.^{5,6} However positive attitudes to

psychiatry may not always guarantee a choice for a lifelong career in psychiatry.⁷ Medical interns are the future doctors of the country and are in the process of deciding their future medical career.

One study suggests that new entrants into medical college have a negative attitude towards psychiatry, which has not changed over the last three to four decades.⁸ A special effort needs to be undertaken to make psychiatry an active and interesting component of medical education. An improved portrayal of this field in society with efforts to reduce stigma associated with it would help in generating interest in this field among newly entrant medical students.

Psychiatry as a career option, has been negatively rated by medical students There is a large amount of literature on attitudes of students and the factors that attract them to and detract from psychiatry. One systematic review evaluated 32 papers from 22 different countries using 12,144 students from 74 medical schools. Both positive and negative attitudes toward psychiatry were identified, however overall attitudes were found to be positive.⁹ In order to encourage more students to consider psychiatry as a career, attention needs to focus more closely on the psychiatry curriculum and the development of innovative teaching strategies. This may overcome the negativity and put psychiatry on a more positive foundation for the future.

In one study from two medical colleges in South India, beliefs about mental illness continue to be negative.¹⁰ Though the attitude towards psychiatry, psychiatrist and treatment efficacy is good, the social

and reward aspects of psychiatry are not encouraging. Steps for changes in undergraduate medical education policies are required.

There are various studies on attitudes to psychiatry using different subjects and study designs. This study will evaluate the attitudes of both male and female medical interns to psychiatry attending the medical internship program on a well designed questionnaire by Balon et al.¹¹ This will help us in studying the attitudes of medical interns to psychiatry and their choice for a life- long career in psychiatry so that suitable interventions can be planned.

Materials and Methods

A total of 148 medical interns ((Male - 93 and Female - 55) attending the medical internship program at a government medical college were taken for the study. The total number of interns on the register was 156. Eight medical interns did not fill the questionnaire properly and hence were excluded from the study.

Inclusion criteria:

1. Medical interns attending the one year medical internship program at the government medical college
2. Medical interns who gave consent to participate in the study

Exclusion criteria:

1. Externs from other government medical colleges
2. Externs from other private medical colleges
3. Externs from overseas medical colleges
4. Medical interns from the current batch who are externs at other medical colleges

The study was conducted on 148 medical interns attending the compulsory medical internship program at a tertiary referral hospital attached to a government medical college. The study protocol was approved by the Institutional Ethics Committee. 156 medical interns on register who met inclusion-exclusion criteria were recruited for the study. They were given information about the nature of study and were taken for the study after taking written informed consent. The interns were assessed only once during the psychiatric posting and not before or after the psychiatry posting. No personal questions were asked regarding their past or family history of mental illness. Each intern filled the self administered questionnaire designed by Balon et al.¹¹ They also answered questions on their future choice of psychiatry as a career. The medical interns did not disclose their identity while filling the questionnaire nor did they receive any special incentive for filling in the questionnaire. They answered the questionnaire in

English which is the medium of instructions at the medical college. Eight interns who did not fill the questionnaire properly or incompletely were excluded from the study. Hence the total number of interns finally included in the study was 148. The results obtained were tabulated and statistical analysis was done.

Scales used:

The questionnaire designed by Balon et al¹¹ which is a 29 point questionnaire with a 4 point Likert scale was used which to assess the attitudes of medical interns. The permission to use the questionnaire in the present study was granted by Balon et al.¹¹ The minimum score was 29 and the maximum score was 116. Scores > or = to 58 were positive and scores < than 58 were negative.

Statistical Analysis

Statistical analysis was done using SPSS version 11. To compare the attitude scores in male and female interns drawn from the same sample the scores were analysed using the Mann Whitney test.

Results

A total number of 148 medical interns (93 male and 55 females) attitudes to psychiatry were studied. The average age of the medical interns was 23 years. The overall mean attitudes scores to psychiatry in all 6 areas in male and female interns was 88.40 for males and 85.25 for females (P<0.001). The mean attitude scores on Area 1- Overall benefits of psychiatry was 10.43 males & 10 for females (P<0.05), Area 6 - Specific medical college factors was 19 for males & 17.56 for females (p<0.005). The mean attitude scores on Area 2 – efficacy was 10.08 males & 9.87 females (p>0.05), Area 3- Role definition & functioning of a Psychiatrist was 20.46 males & 20.15 females (p>0.05), area 4 - possible cause and social criticism was 6.01males & 6.07 females (p>0.05), area 5 – career and personal reward was 22.42 males & 21.60 females (p>0.05). Low scores were seen on Q 11, Q23 and Q29. Q 11Psychiatrists are too frequently apologetic when teaching psychiatry. Q23I feel uncomfortable with mentally ill patients and Q29. Although I am interested in psychiatry, no effort was made to encourage my becoming a psychiatrist at my medical school.3.2% of male and none of the female interns wish to definitely take up a life-long career in psychiatry. 10.7% males and 12.7 % female were undecided to take up a career in psychiatry. (Table 1, 2) and Fig. 1

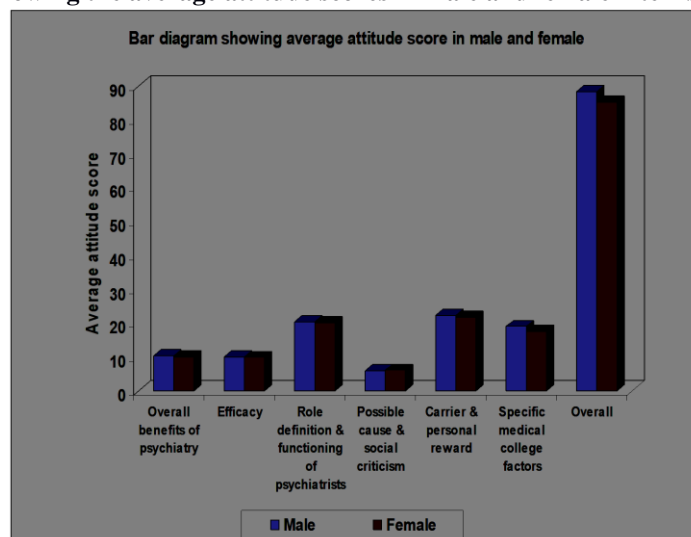
Table 1: Attitudes of interns to psychiatry according to gender

1.strongly disagree 2- moderately disagree 3- moderately agree 4 – strongly agree	Gender	Strongly disagree	Moderately disagree	Moderately agree	Strongly agree
1)Overall Benefits of Psychiatry					
1. Psychiatric research has made good strides in advancing care of the major mental disorders.	M	0	8	27	58
	F	1	7	14	33
2. Psychiatry is a rapidly expanding frontier of medicine.	M	4	10	26	53
	F	1	3	28	23
3. Psychiatry is unscientific and imprecise.	M	67	14	5	7
	F	35	7	4	9
2)Efficacy					
4. If someone in my family was very emotionally upset and the situation did not seem to be improving, I would recommend a psychiatrist consultation.	M	5	5	19	64
	F	3	3	14	35
5. Psychiatric consultation for medical or surgical patients is often helpful.	M	4	11	33	43
	F	3	3	28	21
6. Psychiatric treatment is helpful to most people who receive it.	M	3	11	37	42
	F	3	9	18	25
3)Role Definition and Functioning of Psychiatrists	Gender	Strongly disagree	Moderately disagree	Moderately agree	Strongly agree
7. Psychiatry is not a genuine and valid branch of medicine.	M	60	6	8	19
	F	36	7	3	9
8. Most psychiatrists are clear, logical thinkers.	M	6	10	32	45
	F	5	8	28	14
9. With few exceptions, clinical psychologists and social workers are just as qualified as psychiatrists to diagnose and treat emotionally disturbed persons.	M	22	26	28	17
	F	17	16	16	6
10. Among mental health professionals, psychiatrists have the most authority and influence.	M	4	19	34	36
	F	2	8	24	21
11. Psychiatrists are too frequently apologetic when teaching psychiatry.	M	13	25	35	20
	F	7	17	19	12
12. Psychiatry is too “biologically” minded and not attentive enough to the patient’s personal life and psychological problems.	M	44	24	12	13
	F	16	19	11	9
13. Psychiatry is too analytical, theoretical, and psychodynamic, and not attentive enough to patient’s physiology.	M	39	27	15	12
	F	19	17	12	7
4)Possible Cause and Social Criticism	Gender	Strongly disagree	Moderately disagree	Moderately agree	Strongly agree
14. Psychiatrists frequently abuse their legal power to hospitalize patients against their will.	M	54	19	9	11
	F	24	18	10	9
15. On average, psychiatrists make as much money as most other doctors.	M	12	26	27	28
	F	5	8	28	14

5) Career and Personal Reward					
16. Psychiatry has a low prestige among the general public.	M	35	22	24	12
	F	17	14	9	15
17. Psychiatry has a high status among other medical disciplines.	M	8	29	39	17
	F	8	17	21	12
18. Many people who would not obtain a residency position in other specialists eventually enter psychiatry.	M	30	28	21	14
	F	14	17	18	6
19. Psychiatry is a discipline filled with international medical graduates whose skills are of low quality.	M	50	21	11	11
	F	29	9	11	6
20. My family discouraged me from entering psychiatry.	M	42	16	13	22
	F	19	13	17	6
21. Friends and fellow students discouraged me from entering psychiatry.	M	32	25	16	20
	F	18	13	18	6
22. If a student expresses interest in psychiatry, he or she risks being associated with a group of other would-be psychiatrists who are often seen by others as odd, peculiar, or neurotic.	M	28	23	25	17
	F	17	12	14	12
23. I feel uncomfortable with mentally ill patients.	M	27	24	23	19
	F	8	11	22	14
6) Specific Medical College Factors	Gender	Strongly disagree	Moderately disagree	Moderately agree	Strongly agree
24. Teaching of psychiatry at my medical school is interesting and of good quality.	M	3	8	20	62
	F	2	5	15	33
25. During my psychiatry rotation, psychiatry residents were good role models.	M	5	18	27	43
	F	6	5	23	21
26. Attending psychiatrists, during my psychiatry rotation, were good role models.	M	5	10	34	44
	F	9	7	22	17
27. Most psychiatrists at my medical school are clear, logical thinkers.	M	4	4	35	50
	F	5	5	22	23
28. Most non-psychiatry and house staff at my medical school are respectful of psychiatry	M	7	17	34	35
	F	10	8	24	13
29. Although I am interested in psychiatry, no effort was made to encourage my becoming a psychiatrist at my medical school.	M	28	23	20	22
	F	8	16	17	14

Table 2: A comparison of attitude scores of male and female interns using the Mann Witney test

Parameter	Max score	Male		Female		MW test Z Value
		Mean	Sd	Mean	Sd	
1. Overall benefits of psychiatry	12	10.43	1.38	10	1.14	2.20
2. Efficacy	12	10.08	2.36	9.87	2.41	0.72
3. Role definition & functioning of psychiatrists	28	20.46	3.82	20.15	3.62	0.92
4. Possible cause & social criticism	8	6.01	0.72	6.07	0.60	0.51
5. Career & personal reward	32	22.42	6.78	21.60	6.38	1.13
6. Specific medical college factors	24	19	3.15	17.56	3.64	2.87
Overall	116	88.40	8.89	85.25	7.10	3.31

Fig. 1: A bar diagram showing the average attitude scores in male and female interns

Discussion

The study evaluated the attitudes of 148 medical interns (93 male and 55 females) to psychiatry, attending the medical internship programme at a large tertiary referral hospital attached to a medical college, on six major areas of the questionnaire designed by Balon et al.¹¹

The overall attitudes of both male and female medical interns have been positive. Positive attitudes have been also reported by studies in Spain, Saudi Arabia, Ghana and Pakistan.¹²⁻¹⁵ Some studies have reported negative attitudes and possible reasons for them.¹⁶⁻¹⁸ One US study reports about erosion of attitudes from previously positive attitudes and had suggested remedial measures for the same.¹⁹

Although there was overall positive attitudes to psychiatry on all areas in our study, higher positive scores were seen in males as compared to females. A study conducted in Pakistan on medical students found females more positive than males in their attitudes.¹⁵

One study observed that males are influenced more by external factors such as work hours and career structure whereas females were more influenced by internal factors such as knowing oneself.²⁰ One study from Saudi Arabia reported that female psychiatrists are fewer than male psychiatrists and women mostly choose a career in academic teaching of psychiatry.¹³

Only 3.2% males expressed a clear choice to take up psychiatry as a profession and 10.8% were undecided. No females wished to definitely take up a career in psychiatry and 12.7% were undecided. This contrasts with one study which reported that more women compared to men wished for a career in psychiatry.²⁰ Though medical students are positive about psychiatry many studies report that it does not translate in to a life-long career in psychiatry.⁷ Undergraduate students have a neutral attitude to psychiatry and mental illness. More efforts are needed to change the attitude to the favourable side.²¹

Although the overall attitudes were positive, on certain individual questions Q11, Q23 and Q 29 the scores were low. Q 11 Psychiatrists are too frequently apologetic when teaching psychiatry. Q23 I feel uncomfortable with mentally ill patients. and Q29. Although I am interested in psychiatry, no effort was made to encourage my becoming a psychiatrist at my medical school. Medical interns seem to have a negative attitude about psychiatric patients and hesitant in choosing a life- long career in psychiatry. These suggest stigmatization of psychiatry. Attitudes were favourable toward patients and psychiatric interventions whereas unfavourable toward psychiatry as a discipline.²²

Stigmatization has also been observed by studies in Sri Lanka, Ghana and Malaysia.²³⁻²⁵ The attitudes of medical interns in our study have been positive to the teaching of psychiatry at the medical college. They have expressed a need for more encouragement to take up a career in psychiatry. The positive attitudes of medical interns to psychiatry need to be strengthened and they also need to be encouraged to take up a career in psychiatry.

Strengths

The study was a well designed study done with a reliable and valid questionnaire which was used in other countries such as Unites States, Spain, Ghana, and Saudi Arabia. All 148 medical interns admitted to medical internship freely participated in the study.

Limitations

The limitation of the study is that the sample was from a medical college from the western region of India and may not be representative of all the medical interns in India. A larger study needs to be conducted which would be representative of the medical interns from India.

Conclusions

There were highly significant overall positive attitudes scores to psychiatry in all (1- 6 areas) in both male and female medical interns. There were significant higher overall positive attitude scores in males as compared to females. There were highly significant positive attitude scores in both male and female interns to the teaching of psychiatry at the medical college. There were significant higher positive attitude scores in males as compared to females in area (1) overall benefits of psychiatry and area (6) specific medical college factors. There was no significant difference in positive attitude scores between males and females on areas (2) efficacy, (3) role definition and functioning of psychiatrists, (4) social criticism and (5) career and personal reward. Medical interns expressed the need to be encouraged to take up psychiatry as a career. Medical interns have negative attitude to psychiatric patients which suggest stigmatization. A few male but

none of the female medical interns wish to definitely take up a life-long career in psychiatry although some were undecided.

Implications

The attitudes of medical interns to psychiatry who are on the threshold choosing their speciality for post graduation have implications for mental health services, training and research.

As there is already a shortage of both male and female psychiatrists in India these findings have a bearing on the mental health services. Suitable interventions need to be taken up to bring about change in stigmatized attitudes to psychiatry. Interns need to be encouraged to take up psychiatry as a life- long career. More women need to join the rising international trends of taking up psychiatry as a career. There is the need for greater manpower development in psychiatry. This will help to improve the quality of mental health services.

Various studies have highlighted the importance of medical education and teaching styles to change negative attitudes to psychiatry which is an already stigmatized profession. Some have even emphasized the role of advocacy groups to bring about eradication of stigmatized attitudes in the society. Offering enrichment programmes such as a one day visit to a forensic psychiatry unit could help in increasing positive attitudes to psychiatry.²⁶ Also updating the medical curriculum and using techniques from medical educational technology will help to bring about an attitudinal change rather than merely imparting knowledge. Various studies have reported the importance of the medical internship program.²⁷⁻³³ and teaching styles in psychiatry.^{34,35}

Further research is needed as to how to bring about positive attitudes to psychiatry and eradicate stigmatization to psychiatry. Also surveys needs to be conducted once corrective interventions have been carried out to find out if corrective interventions and advocacy measures against stigmatization have brought about a positive change in the attitudes to psychiatry. It also needs to be studied how positive attitudes to psychiatry relate to choosing a life- long career in psychiatry in the Indian cultural setting to address the problem of the shortage of psychiatrists in India.

Acknowledgement: Nil

Source of funding: Nil

Conflicts of interest: Nil

References

1. Murthy S R. National Mental Health Survey of India 2015–2016. *Indian J Psychiatry*. 2017;(59):21–6.
2. Thirunavukarasu M, Thirunavukarasu P. Training and National deficit of psychiatrists in India - A critical analysis. *Indian J Psychiatry*. 2010 Jan;52(Suppl 1):S83–8.

3. Sood M, Chadda RK. Women psychiatrists in India: A reflection of their contributions. *Indian J Psychiatry*. 2010 Jan;52(Suppl 1):S396-401.
4. Rezler AG. Methods of attitude assessment for medical teachers. *Med Educ*. 1976 Jan;10(1):43-51.
5. Buchanan A, Bhugra D. Attitudes of the medical profession to psychiatry. *Acta Psychiatrica Scandinavia*. 1992;85:1-5.
6. Eagle PF, Marcos LR. Factors in the medical student's choice of psychiatry. *Am J Psychiatry*. 1980 Apr;137(4):423-27.
7. Al-Adawi S, Dorvlo AS, Bhaya C, Martin RG, Al-Namami A, Al-Hussaini A, et al. Withering before the sowing? A survey of Oman's tomorrow's doctors' interest in psychiatry. *Educ Health (Abingdon)*. 2008 Mar;21(1):117.
8. Srivastava A. Attitude towards psychiatry among medical students. *J Indian Med Assoc*. 2012 Oct;110(10):706-9.
9. Lyons Z. Attitudes of medical students toward psychiatry and psychiatry as a career: a systematic review. *Acad Psychiatry*. 2013 May;37(3):150-7.
10. Kodakandla K, Nasirabadi M, Pasha MS. Attitude of interns towards mental illness and psychiatry: A study from two medical colleges in South India. *Asian J Psychiatr*. 2016 Aug;22:167-73.
11. Balon R, Franchini GR, freeman PS, Hassenfeld IN, Keshavan MS, Yoder E. Medical students attitudes and views on psychiatry. 15 years later *Acad Psychiatry* 1999;23:30-6.
12. Pailhez G, Bulbena A, Coll J, Ros S, Balon R. Attitudes and views on psychiatry: a comparison between Spanish and U.S. medical students. *Acad Psychiatry*. 2005 Spring;29(1):82-91.
13. El-Gilany AH, Amr M, Iqbal R. Students' attitudes toward psychiatry at Al-hassa medical college, Saudi Arabia. *Acad Psychiatry*. 2010 Jan-Feb;34(1):71-4.
14. Laugharne R, Appiah-Poku J, Laugharne J, Shankar R. Attitudes toward psychiatry among final-year medical students in Kumasi, Ghana. *Acad Psychiatry*. 2009 Jan-Feb;33(1):71-5.
15. Khan SA, Yousafzai AU, Mehira RK, Inam-ul-Haq. Attitude of medical students towards psychiatry in NWFP. *J Ayub Med Coll Abbottabad*. 2008 Jul-Sep;20(3):44-6.
16. Soufi HE, Raoof AM. Attitude of medical students towards psychiatry. *Med Educ*. 1992 Jan;26(1):38-41.
17. Zimny GH, Sata LS. Influence of factors before and during medical school on choice of psychiatry as a specialty. *Am J Psychiatry*. 1986 Jan;143(1):77-80.
18. Nielsen AC 3rd, Eaton JS Jr. Medical students' attitudes about psychiatry. Implications for psychiatric recruitment. *Arch Gen Psychiatry*. 1981 Oct;38(10):1144-54.
19. Feifel D, Moutier CY, Swerdlow NR. Attitudes toward psychiatry as a prospective career among students entering medical school. *Am J Psychiatry*. 1999 Sep;156(9):1397-402.
20. Shelley RK, Webb MG. Does clinical clerkship alter students' attitudes to a career choice of psychiatry? *Med Educ*. 1986 Jul;20(4):330-4.
21. Desai ND, Chavda PD. Attitudes of undergraduate medical students toward mental illnesses and psychiatry. *J Educ Health Promot*. 2018 Apr;3:7:50.
22. Patra S, Patro BK, Nebhinani N. Images of psychiatry: Attitude survey of teaching medical specialists of India. *Ind Psychiatry J*. 2017 Jan-Jun;26(1):52-5.
23. Fernando SM, Deane FP, McLeod HJ. Sri Lankan doctors' and medical undergraduates' attitudes towards mental illness. *Soc Psychiatry Psychiatr Epidemiol*. 2010 Jul;45(7):733-9. Epub 2009 Aug 18.
24. Mas A, Hatim A. Stigma in mental illness: attitudes of medical students towards mental illness. *Med J Malaysia*. 2002 Dec;57(4):433-44.
25. Walters K, Raven P, Rosenthal J, Russell J, Humphrey C, Buszewicz M. Teaching undergraduate psychiatry in primary care: the impact on student learning and attitudes. *Med Educ*. 2007 Jan;41(1):100-8.
26. Mortlock AM, Puzzo I, Taylor S, Kumari V, Young S, Sengupta S, et al. Enrichment activities in the medical school psychiatry programme - could this be a key to engaging medical students in psychiatry? A study from a high secure forensic psychiatric UK hospital. *BMC Psychiatry*. 2017 Mar 16;17(1):83.
27. Maxmen JS. Student attitude changes during "psychiatric medicine" clerkships. *Gen Hosp Psychiatry*. 1979 Jul;1(2):98-103.
28. Das MP, Chandrasena RD. Medical students' attitude towards psychiatry. *Can J Psychiatry*. 1988 Dec;33(9):783-7.
29. Gazdag G, Zsargó E, Vukov P, Ungvari GS, Tolna. Change of medical student attitudes toward psychiatry: the impact of the psychiatric clerkship. *Psychiatr Hung*. 2009;24(4):248-54.
30. Wilkinson DG, Toone BK, Greer S. Medical students' attitudes to psychiatry at the end of the clinical curriculum. *Psychol Med*. 1983 Aug;13(3):655-8.
31. Fischel T, Manna H, Krivoy A, Lewis M, Weizman A. Does a clerkship in psychiatry contribute to changing medical students' attitudes towards psychiatry? *Acad Psychiatry*. 2008 Mar-Apr;32(2):147-50.
32. Xavier M, Almeida JC. Impact of clerkship in the attitudes toward psychiatry among Portuguese medical students. *BMC Med Educ*. 2010 Aug 2;10:56.
33. Galka SW, Perkins DV, Butler N, Griffith DA, Schmetzer AD, Avirappattu G, et al. Medical students' attitudes toward mental disorders before and after a psychiatric rotation. *Acad Psychiatry*. 2005 Sep-Oct;29(4):357-61.
34. Alexander DA, Eagles JM. Changes in attitudes towards psychiatry among medical students: correlation of attitude shift with academic performance. *Med Educ*. 1990 Sep;24(5):452-60.
35. McParland M, Noble LM, Livingston G, McManus C. The effect of a psychiatric attachment on students' attitudes to and intention to pursue psychiatry as a career. *Med Educ*. 2003 May;37(5):447-54.