Reviewer’s report

Title: Assessment of an Undergraduate Psychiatry Course in an African Setting

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Reviewer: Adamson Muula

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Assessment of an undergraduate psychiatry course in an African setting
Authors: Baig, Beaglehole, Stewart, Boeing, Blackwood, Leuvennink and Kauye

Reviewer: Adamson S. Muula

Comments

This is an interesting manuscript that is not just descriptive but also attempts to assess how a psychiatric training program in Africa (Malawi) compares with a program in Scotland; at least in as far as examination results are concerned.

Major compulsory revisions

There are however several comments that I wish to raise and invite the authors to respond to:

1. Firstly of course, the authors need to be commended for the work that they have done and are reported. However in the analysis, there is an implicit assumption that the medical students in Malawi and Scotland are the same and differ only in the way the training program was offered. The fact is likely to be that these students are different in many ways. Just because they are similar in age may not fully explain their similarities. I do not feel that the authors have gave serious considerations on the alternative explanations as to why the examination scores were different; possible reasons are:

a) Although the authors suggest that both groups were familiar with multiple choice testing; the familiarity may be different.

b) To what extent are the examination scores a reflection of the teaching staff and not the students per se?

c) Were the students in Malawi taught by the same students as were taught in Scotland?

d) Is this a comparison between didactic learning versus problem-based learning and not the students’ aptitude per se?

e) Do the authors think that the two week, crammed course in Malawi resulted in lower scores than a much more spread out course laced with clinical attachments in Scotland?

f) My sense is that the 4th year of medical school in Malawi has traditionally been a no-fail year i.e. no one fails the year to repeat. There have been effort to change this such that year 4 is as punitive as the rest of the years. Do the
authors think that such a situation may have resulted in students not really dedicated to psychiatric teaching than if the yearâ##s results were a matter of â##life and deathâ##

g) The distribution of males versus females is different between Scotland and Malawi. Does this matter?

Minor revisions

The formatting of the references do not follow the journal instructions and so do author affiliation

References are also not accurate. Specifically, names of authors like in reference 5 (should be Kirigia); 6 (should be Muula) and Panulo Jr. B (Ben Panulo Jr).

Formatting of references are in both Vancouver and Harvard Style; in some cases volume and issue number including month of publication are shown.

In the Background of the Abstract, the authors talk of the â##effectiveness of an undergraduate psychiatry courseâ##; I guess it may be less appropriate to refer to effectiveness when there are many variables that were unmeasured that could have explained the differences in scores.

In the Methodology section of abstract, there is no mention of the Scotland exam that student up there did that Malawi students did not take.

Sections of the manuscripts are sub-titled contrary to journal guidelines.

The first sentence of the Introduction section may inadvertently suggest that mental health issues are well recognized or appreciated in the developed nations. This is certainly not the case in the United States where I have stayed for the past several years. The medical literature is also replete with reports of a general lack of appreciation for mental health across the world.

The author say that; â##Before 2005 the undergraduate psychiatry module was delivered by a single lectures and provided limited clinical experience to the students.â## There is some truth in this statement but also some error. I know this was not the case when I took the course way back more than a decade ago at the College of Medicine in Malawi.

In the subtitle, the authors suggest that the examination â##emphasized the cultural context of clinical psychiatry in Malawiâ##; is it possible for the author to put up a supplementary file for the reader to make judgments about this or not. This should not unduly compromise the examination question bank at all as some of the questions were said to be adapted from the MRCP Psychiatry questions anyway.

Ethical approval

I find the ethical approval statement problematic especially when one notices that the Chief Government Psychiatrist who gave permission is a co-author. However, I am also familiar with the ethical guidelines within the medical school. The authors would not be required to submit for ethical review if this were an audit or a review of an ongoing program. My sense though is that the authors can explain this a little different rather than highlighting the fact that the study was approved
by one of the co-authors.

How did the authors collect student’s ages? Did the examination paper have a question on age?

In the discussion, the authors write: As Malawi is unlikely to increase resources for undergraduate teaching. In fact Malawi is current increasing its resources year by year.

The authors also state that it would not have been possible for Malawian students to write the Scotland exam. Why was this a problem?

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests