Author's response to reviews

Title: Medical students' views about an undergraduate curriculum in psychiatry before and after clinical placements

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Author's response to reviews: see over
Dear Editor,

Thank you for considering our paper for publication in BMC Medical Education. I have detailed our responses to the points made by the reviewers and we have revised the manuscript accordingly.

Reviewer 1

I do not think that the title accurately reflects the contents of the paper which reports on student views of the contents of psychiatry education before and after clinical placements. The question the paper asks is not really whether medical student opinions are important with respect to curriculum development which is what the current title suggests.

Agreed. The title has been amended to ‘Medical students’ views about an undergraduate curriculum in psychiatry before and after clinical placements’.

Abstract

I am not sure that the paper did assess how much student opinion should influence curriculum development. There is a need to justify the final statement of the conclusion (as summarised in the abstract)

Agree that the curriculum development issue is more a discussion point that may arise from the results rather than a direct conclusion of the study. The final statement of the conclusion in the abstract has been changed.
Background:
I am not sure psychiatry teaching is only relevant and useful to future doctors because most will not become psychiatrist. I think a better justification is required in terms of providing quality of care to all patients including those who have mental health problems. The authors also do not raise the potential limitations of a student centred or student led curriculum, e.g. how might negative attitudes towards psychiatry colour judgements about the content of psychiatric problems. How much of this is related on their own ability to manage things than concern them as opposed to managing patient concerns?

Entirely agree with the first points, this is what we were trying to argue and so it has been amended to ensure this is clearer. Potential limitations have also now been commented on in the discussion.

Methods and results
More information is required in this section as it is unclear how the questionnaire was devised. I also think it would be useful to include the questionnaire as an appendix to improve transparency. The timing of the questionnaire to 4th years also warrants justification (e.g. why not have preclinical students complete the questionnaire?).

Additional information about questionnaire given and it is added as an additional file.

The questionnaire was given on the first day of the placement to try to establish the effect of the formal teaching of psychiatry rather than any other factors from other prior placements. If it had been given to preclinical students and then 5th years there may have been more factors, other than the psychiatry placement, which influenced changed opinions. Justification for timing added to method.

A pedantic but potentially important point is that as I read it Year 5 were asked if they had found placements valuable (I am not sure how students may have viewed this term valuable for what purpose?). I thought the purpose of the paper was to see if the placement changed their views on what needed inclusion and whether career choices were altered. This needs clarification. The placement may have been found to be less valuable because of the way it was taught rather than what the contents were. I think it is too big a jump to assume why students did not find the placement useful.

The written information which accompanied the questionnaire explained that it was about the relevance of their undergraduate placement in psychiatry to their future career hence it is in this context that the word valuable is used. The purpose of the study was to consider what students thought about the content of the curriculum. Altering career choices was a secondary consideration and no supplementary questions were asked about why career choice may change etc and so this is not the focus of the paper. Agree that the teaching is important as well as the content when considering the value of the placement and the discussion section has been amended to reflect this.
Need to mention if ethics approval was sought and if not why not (e.g. may not have been required but warrants mention)

Ethical approval was not required, addition made to manuscript.

Discussion
I wondered what the expectations were of those students who did not find the placement valuable. Unrealistic expectations can colour the way students then view the actual placement.

This and other potential limitations have been added to the discussion.

In the discussion on pages 8-9, the authors talk about GPs teaching psychiatry. There are several limitations to this as GP attitudes are generally no more positive than the lay public (stigma literature from Australia and UK). Whilst management of bipolar and schizophrenia may well be the remit of psychiatrists, other doctors will come across these patients and surely student views that they don’t need to know about these issues needs to be challenged.

Agreed, we acknowledge that these views should be challenged and this is discussed further on pages 11 and 12. Reference has now been made to stigma amongst both GP and other doctors on page 10.

Page 9 there is a discussion about problem based learning - there needs to be some discussion about the limitations of this (there is some evidence that students focus on the biomedical aspects of problems and tend to underplay the socio-cultural factors - what might be the relevance of that for the topic under discussion).

Discussion regarding this has been added.

I was unsure as to how the house officer surveys relate to this paper - needs to be clarified.

This is to demonstrate that it is a longstanding and widespread concern among house officers that their undergraduate education did not prepare them for working life. This is relevant as this study asks if the psychiatry placement prepares them for their future careers. This has been expanded on in the paper.

Page 11 it is unclear on what basis the authors make the assertion that there are 3 principles.

This is a personal opinion of the authors, this is clarified in the text.
Whilst I agree with the authors, I think it is important to justify why it is important for the undergraduate course to attract students to a career in psychiatry.

Reference regarding recruitment to psychiatry added.

Page 12 - The authors state that only 46% of doctors who specialised in psychiatry had it as their first choice. This may have limited importance or relevance to undergraduate education as may relate to the possibly higher number of international medical graduates who enter psychiatry because of limited opportunities in other disciplines and job opportunities in psychiatry.

The study quoted relates only to UK graduates and this has been made clear in the text.

Reviewer 2

My main reservation is that the results are derived over only one academic year, which may, or may not have been atypical. The main conclusions are only valid if the programme of study experienced by the fourth year cohort was equivalent to the previous experience of the fifth year cohort.

The programme of study was the same, clarified in method.

The full answer would require additional studies, but the authors might address the possibility that the views of the fifth year cohort reflect the views of their specialist trainers, rather than their own views.

This point has been added and also that the fifth years will have experienced other clinical placements and trainers in other specialties that may have coloured their opinions about the relevance of psychiatry.

I hope you find our revised manuscript to be acceptable.

Yours sincerely,

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