REASONS FOR THE CHOICE TO SPECIALIZE IN PSYCHIATRY – A RETROSPECTIVE STUDY

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SUMMARY
Background: Providing the mental health service is one of the main tasks of every state. Its implementation obviously depends on the number of professionally active psychiatrists. The aim of the study was to analyze the motives in the choice of the specialization in psychiatry from the perspective of physicians-practitioners.

Subjects and methods: An original questionnaire, containing 22 questions, was implemented. The study group was created by recruiting 132 psychiatrists participating in the International Scientific-Training Conference in Wisła, Poland in 2011. The obtained results were analyzed statistically.

Results: The majority of the respondents decided to become psychiatrists during their university studies (43.61%) and just after their studies (37.59%). Only 9.02% knew before starting university, which field of medicine to select, and 8.27% were originally of the place of living (Pawló). The results, surprisingly, had following perspective of the profession (9%) and family tradition (58.64%), practical classes in college and the experience of special types of work with a patient (the percentage for both factors was 33.83%). Prestige (3%) and media influence (3.76%) seem to be the least important factors. 81% of respondents admitted that it was their own independent decision. In the group of those who were influenced by others, the strongest source of advice was the opinion of a partner (4.51%), while the opinion of the family and a well-known specialist in the field turned out to be much less important (the percentage for both factors was 1.5%). 94.73% participants said that they would choose the same specialization once again.

Conclusions: Public perception of psychiatry is still not satisfactory and may have little impact on the popularity of this specialization. The form of teaching at universities is important in the selection process of the specialization. The results of our questionnaire may be a helpful tool to improve the image of psychiatry as an attractive path of professional career, and become an essential argument during the discussion about current problems in psychiatry.

Key words: choice of medical specialty – motivation - professional satisfaction

INTRODUCTION
There are many reasons for the choice of medical profession and they vary depending on age, sex and place of living (Pawełczyk et al. 2007). The most frequently claimed motive for choosing medical studies was the need to help others (39%), then a chance for finding employment after graduation (21%), high prestige of the profession (13%), good economical perspective of the profession (9%) and family tradition (7%) (Waszkiewicz et al. 2012). There are many differences between female and male students. Men are primarily interested in achieving a high social status and achieve a higher income. Women are interested in helping others (Neititamaki et al. 1993). In 2009 a survey was conducted, in which randomly selected respondents out of Polish citizens, were asked, what medical specialty doctors they had the greatest confidence in. The results, surprisingly, had following results: surgeon 32.90%, general practitioner 30.60%, 28.40% for cardiologist, internist 16.90%, 16.80% for dentist, anesthesiologist 15.80%, endocrinologist 10.30%, neurologist 10.60%, oncologist 10.40%, orthopedist 9.40%, ophthalmologist - 8.90%, urologist 6.40%, gynecologist 5.20%, otolaryngologist 4.80%, dermatologist- 4.20%, 3.20% for gastroenterologist, and psychiatrist - 1.00% followed by radiologist 0.90% (Homo Homini Opinion Research Institute 2009). Psychiatry is a difficult area of medicine, which often meets with unfair evaluation, and at the same time has to fight against stereotypes, which have little to do with real science. In the assessment of students psychiatry differs significantly from the rest of medical specializations such as internal medicine, surgery, pediatrics and gynecology, particularly because of the specificity of the relationship with the patient. Students also emphasized differences in the effectiveness of treatment associated with less observed spectacular effects of psychiatric work. This suggested a lower utility of this specialty and its lower intellectual status (Yellowless et al. 1990). In case of future medical specialization, a questionnaire among the final-year students of the Medical University in Wroclaw, Poland showed that the most popular were: pediatrics (14%), internal diseases (13%) and surgery (8%), the rarely chosen specializations were: pediatric hematology, intensive therapy, orthopedics, vascular surgery, laryngology, allergology and endocrinology, each one accounted for 1% of all choices made by the students. Psychiatry was chosen by 2% of students (Waszkiewicz et al. 2012).
SUBJECTS AND METHODS

Subjects

The study group was created by recruiting 132 psychiatrists (including 33 men and 99 women), participating in an International Scientific-Training Conference entitled “Optimization of treatment in psychiatry” that took place in Wisła, Poland in December 2011. The average age of respondents was 43 years (SD=9.7), and their length of professional experience in psychiatry was 15 years (SD=9.8). All of them were Polish and practiced within the borders of the country (except for 2).

Methods

An original questionnaire was prepared in Polish and contained 22 questions. In addition to basic questions about age, gender, location or time of work experience as a specialist, there were also questions exploring the reasons for the decision to become a psychiatrist and its possible substrate. The questionnaire included multiple choice questions regarding the factors having the greatest influence on the choice of the specialization. The survey respondents were also asked, who encouraged or discouraged them to choose psychiatry. The presence of physicians in family and contact with mentally ill people before the choice of specialization was also evaluated.

Data analysis and statistics

The survey was anonymous, psychiatrists filled the questionnaires voluntarily. The results were analyzed statistically using the Statistica 8.0 application. Using Cochran Q Test for independent groups and correlation analysis between place of origin and factors influencing the decision we have established who and what has the biggest impact on the decision making leading to the decision of becoming a psychiatrist in Poland right now. In this paper a general rule applies, if p <0.001, it stands for statistical significance. All results are significant, difference from this are marked in the text.

RESULTS

The place of work for 8.3% respondents at the moment of the research was rural environment, for the rest (91.7%) resident, it was urban environment (38.4% lived in cities > 500 000 inhabitants, only 1.5% in town <10 000 inhabitants). The largest group of respondents came from following regions: Silesia (17.29%), Lesser Poland (14.04%) and Mazovia. (14.28%), while the smallest number of representatives were from the regions: Warmian- Masurian (1.5%), Świętokrzyskie, Lublin, West Pomerania and Greater Poland Province (3%). The vast majority of respondents worked in their place of birth (43.61%). 34.59% replied that they worked in another region of Poland, 18.05% in the area near their place of birth and 1.5% of the questioned practiced as a psychiatrist overseas at the moment. 54.13% worked in the psychiatric hospital at the time, 18% in a multidisciplinary hospital, 53.39% had a private practice, 20.30% performed home visits and 52.63% admitted working in the clinic. Almost everybody had at least 2 places of work. The replies to the question, why the respondents decided to choose psychiatry as their specialization were the following: According to the survey, the time spent at university has the strongest influence on the process of decision making. The largest group decided to become psychiatrists during their studies (43.61%) and just after their studies (37.59%), only 9.02% knew before their studies which field of medicine to select and 8.27% practiced before in a different specialization.

Among the factors that have the greatest impact on the choices of specialization the respondents chose: self-assessment of their suitability (58.65%), the possibility of a satisfactory development training (34.59%), activities during the study (33.83%), type of work (33.83%), practice (24.81%), personal knowledge of a psychiatrist (21.80%), literature (19.55%) and availability of specialization (16.54%). Prestige (3.00%), media (3.76%), family expectations and aspirations (4.51%), the prospect of professional success (4.51%), finances (5.26%), time (6.02%), scientific development (7.52%), personal knowledge of a mentally ill person (8.27%) seems to exert less influence (Figure 2). There were not many differences in answers between psychiatrists working in villages and big cities. For both the strongest factor was self-assessment of their suitability (village: 71.43% and city >500 000 inhabitants: 67.74%) and weakest media (0% for both), prestige and prospects of professional success (respectively 0% and 3.23%). The biggest difference
can be found in the factor ‘kind of work’, which was more likely to be chosen by psychiatrists working in villages (64.29%) than in big cities (22.58%). 81% admitted it was their own independent decision. In the group of those who were influenced, the strongest influence appeared to be the voice of a partner (4.51%), the weakest turned out to be the voice of family and well-known doctors with different specializations (both 1.5%). 2.25% were influenced by an academic teacher and 3% by friends and a known psychiatrist.

**Figure 2.** Factors influencing the decision of becoming a psychiatrist (%)

Among the incentives to adopt this specialization may be found a psychiatrist friend (21.05%), a university teacher (18.04%), family (18.04%) and a partner (21.05%). In the case of discouragement to take the speciality we find the family (39.09%), friends (17.29%) and other specialty physician friends (18.79%).

**Figure 3.** People influencing the decision of becoming a psychiatrist (amount of respondents saying ‘yes’ to the question)

83.45% of those questioned do not have any doctors in their families. Only 5.26% admitted having somebody mentally ill in the family and taking this into consideration during the process of decision making in specialization 94.73% participants replied that they would choose the same specialization once again.

**Figure 4.** Who encouraged/discouraged respondents (%)

**DISCUSSION**

The research reports indicate that psychiatry is perceived as a discipline which is difficult due to limited capacity of diagnostic and therapeutic options, and restrictions on the availability of reliable scientific data. The future in this specialization is seen as very interesting, obscure and related to unsatisfactory returns (Feifel et al. 1999). Psychiatry seems to be difficult for students and young doctors due to limited capacity of diagnostic, and therapeutic options, and restrictions on the availability of reliable scientific data. Another
CONCLUSIONS

- Public perception of psychiatry is still not satisfactory and may have impact on the popularity of the specialization.
- The form of teaching at universities is important in the selection process of specialization.
- Psychiatry is an attractive professional career path for those who consciously have chosen it.

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REFERENCES