

Psychiatry as Compulsory Subject in Undergraduate Discipline in MBBS Curriculum

India has one-fifth of the world's population with approximately 140 crore people is living in our country. As per National Mental Health Survey (NMHS) 2015-16, approximately 10.6% of adults are suffering from a diagnosable mental disorder with a lifetime prevalence of 13.7%. One in every seventh citizen of our country is suffering from mental illnesses and our country has doubled the contribution of mental health burden in the Global burden of diseases since 1990. Among the one third patients attending general medical clinics are suffering from common mental disorders like Depression, Anxiety, Somatization disorder and at least half of them remain undiagnosed and undertreated. There are approximately 14 crore and 1 crore fellow citizens who are suffering from Common Mental Disorders (CMDs) and Severe Mental disorders (SMDs) respectively. It's not only the 15-crore population merely, the impact is much bigger, around 15 crore families are suffering from mental, emotional and behavioural disorders including substance use disorders. The treatment gap in mental health in our country ranges from 70-92% and we have fewer than one Psychiatrist per 1,00,000 population^{1,2}.

Unfortunately, Psychiatry as a subject in Undergraduate and Postgraduate curriculum has not received sufficient attention which was deserved in our country. The mental health is an integral part of overall health and well-being, still as a subject of course study in National Medical Commission (NMC) curriculum has not evolved accordingly. It's still being considered as an allied and peripheral discipline under the big umbrella of Medicine and not considered as a principal discipline of study. It was not studied as a compulsory subject in the UG curriculum which a MBBS student may easily skip during his career. Moreover, the journey from being a 'pseudo-science' to become a 'true science' was ever challenging. The science and art of Psychiatry have not been integrated in the overall science and art of medicine. Psychiatry derives itself its origin from brain and marks its signature as function of brain with manifestations of behavioural and emotional symptoms. The brain is the master organ of the body which controls and regulates all body functions. The lack of emphasis on mind body interface and integration with the discipline with medical and allied disciplines has made Undergraduate students less competent to become an efficient Indian Medical Graduate (IMG). The limited number of teaching hours, not having a separate examination and minimal weightage given for assessments have led to the situation where medical students often consider Psychiatry not essential to learn as a subject in the mainstream discipline of Medicine³.

This overall neglect has far-reaching implications. This is high time to reconsider and realign medical education in current scenario and emerging demand of day-to-day clinical practice. The introduction of Psychiatry as a compulsory subject with a separate

theory and practical subject has now become a reality demanding a curricular reform and essential for public health intervention strategy. In this scenario, the only sustainable approach is to ensure quality teaching focusing Psychiatry as a principal discipline in the UG curriculum. NMC has ensured compulsory Rural posting and District Residency Programme (DRP) for Indian Medical Graduate (IMG). The NMC curriculum has highlighted the importance of key competencies to become equipped to identify, manage and refer psychiatric conditions. More importantly, these competencies must be cultivated during the formative Undergraduate years, when this will be integrated at examination level, this will ensure the students to work on and engage themselves seriously in the field of Psychiatry. This will boost up the clinical confidence and will robustly help to bridge the learning gap and treatment gap.

Globally as a discipline Psychiatry occupies a core place in medical education, In the United States, the medical students have to undergo at least eight weeks of structured Psychiatry clerkship. In the United Kingdom, students receive around 80 hours of training in behavioural sciences followed by a three months rotation in Psychiatry, Denmark recognized Psychiatry as a major clinical discipline as early as the 1950s, dedicating about 7% of total curriculum time to the discipline. In Asian countries like Sri Lanka and Malaysia, Psychiatry is an examinable subject at the Undergraduate level. Several Indian Medical institutions have already demonstrated the feasibility and potential benefits of independent Psychiatry examinations. AIIMS Rishikesh and AIIMS Deogarh are ahead of other institutions and have introduced Psychiatry as an independent examined subject, The results are encouraging, outcome is inspiring; students here showed higher motivation, improved knowledge, attitude and skills⁴.

At present the UG curriculum has been revised by NMC with greater emphasis to the discipline. As there are no theory and practical examinations in Psychiatry as the qualifying competency, the discipline has now been perceived by UG students as a non-essential subject. This neglect has direct consequences on clinical competency. Several Indian studies have shown that more than 50% of Medical Officers in primary health care setting lack the ability or confidence in identifying and treating Psychiatric Disorders. Learning is best achieved during formative years, Medical Educators often assert 'assessment drives learning'. Therefore, unless Psychiatry is meaningfully examined, it will continue to be marginalized in student's learning priorities.

In India, the status of **Psychiatry** as an Undergraduate subject has undergone a massive transformation recently. Historically, it was a minor "appendage" of General Medicine, but new regulations have elevated its importance significantly.

The NMC Shift (CBME 2019) :

With the introduction of the **Competency-based Medical Education (CBME)** by the National Medical Commission (NMC) in 2019, Psychiatry is no longer just a few optional lectures. It is now a **mandatory clinical posting** with defined "certifiable competencies."

- **Clinical Postings** : MBBS students must now complete a mandatory **4-week** clinical posting in Psychiatry (increased from the previous 2-week requirement).
- **Theory** : Approximately **40–45 hours** are dedicated to theoretical teaching.
- **Assessment** : While still technically grouped under "General Medicine" for the final summative (University) University exams, it is now an **independent head of passing** in internal assessments, and questions from Psychiatry are mandatory in Medicine Paper II.

In the traditional University exam structure (Third Professional Part II), Psychiatry is not a standalone paper like Surgery or Pediatrics. However, some **Institutes of National Importance (INIs)** like **AIIMS Rishikesh** and **AIIMS Bhubaneswar** have pioneered making Psychiatry a **separate major subject** with its own independent professional examination.

Key Components of the UG Psychiatry Curriculum :

The focus has shifted from rote memorization of rare disorders to managing common conditions that an Indian Medical Graduate (IMG) will face in primary care:

- **Core Topics** : Depression, Anxiety, Substance Use Disorders (Alcohol/Tobacco), and Psychiatric Emergencies (Suicide/Agitation).
- **AETCOM** : The "Attitude, Ethics, and Communication" module now integrates Psychiatric principles to help students develop empathy and better doctor-patient relationships.
- **Skills** : Students are now required to demonstrate skills in **Mental State Examination (MSE)** and history taking, rather than just "observing."

Current Status Overview :

Feature	Previous Status (Pre-2019)	Current Status (Post-2019 CBME)
Duration	2 Weeks	4 Weeks
Status	Minor part of Medicine	Independent Department/ Core Clinical Posting
Examination	Minimal questions in Medicine	Mandatory questions + Internal Assessment
Focus	Theoretical/ Observational	Skill-based/ Competency-oriented

The Indian Psychiatric Society (IPS), the largest

professional body of Psychiatrists of Indian origin, has been at the forefront of advocating Psychiatry to be a compulsory UG examination subject. Visionary such as Dr Masani, Dube, Bagadia, Bhaskaran and Trivedi emphasized the necessity of formal teaching and examination in Psychiatry. In the presidential address at Annual National Conference of Indian Psychiatric Society (ANCIPS) 2012, Prof Roy Abraham Kallivayalil (former Vice President of IMA as well) argued that Psychiatry should be considered as a separate subject and absence of UG examination in this subject has remained as a critical gap.

India stands at a critical juncture. The burden of mental health is on rise, the treatment gap remains vast, the medical education must evolve to meet up these challenges. The Global models, national policy frameworks and empirical evidence all converge on one final conclusion that Psychiatry must be recognized as an essential subject in medical curriculum, seen as a primary care specialty, accorded essential competency status, and made a separate examinable subject in the MBBS final examination. This is not merely an academic adjustment but a moral and public health imperative as we rise with the slogan, **'there is no health without mental health'**.

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UG Education Subcommittee of IPS

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- 2) Dr Roy Abraham Kallivayalil, Advisor
- 3) Dr Kiran Kumar K & Dr Ranjan Bhattacharyya, Co-Chairpersons
- 4) Dr Snehil Gupta, Member
- 5) Dr Christiana George, Convenor
- 6) Dr Vipul Shah, EC Coordinator

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