Education

EV583

"Reflective learning" in psychiatric education: Does it have any merit? D. Adamis*, G. McCarthy

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Introduction Nowadays "reflection" and "reflective practice" is nearly in every curriculum for psychiatric training. Trainees are asked to keep reflection diaries, journals, and participate in "reflection workshops".

Aims To prove that reflection on or in action does not lead to learning.

Methods Using epistemological notation.

Results/proofs Because sciences including psychiatry are approximate, evolving and inexact, the classical definition of propositional knowledge becomes: A knows that p if:

- (a) A believes that p is an approximate true;

- (b) p is approximate truth;

- (c) A has reason to claim that p is a better approximation than its rivals on available evidence.

Condition (c) implies that A is not possible at the same time to have two mutually contradictive approximate truths.

In reflective learning we need to add two more conditions:

- (d) A knows the outcome of p;

- (e) A is satisfied in believing that p.

In cases of reflection in-action, the (e) remains even the outcome is not favourable. Similarly, in reflection on-action the condition (e) remains unchanged since this happened in the past. This leads to controversy. Is p better or worse approximation of truth than its' rival p? However, p has passed rigorous and different scientific tests and has proved scientifically superior to its rival p. Therefore subject A cannot change his knowledge despite the unfavourable outcome, but A can tests further the p. Within the former reflecting learning does not occur, within the latter "critical thinking" occurred.

Conclusions Reflection does not lead to learning but critical thinking does.

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Differences in the attitudes of clinical and pre-clinical medical students to mental illness

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Background The quality of care provided to psychiatry patients by doctors can be influenced by attitudes towards mental illness. Equally important is the attitude of medical students as future treating doctors towards mental illness. This survey compares the differences in the attitudes of pre-clinical and clinical years student to mental illness.

Aims To compare attitudes of pre-clinical and clinical medical students' to mental illness.

Methods A cross-sectional survey of 212 clinical students (CS) and pre-clinical students (PS) at Newcastle University. Each responded anonymously to an electronic questionnaire. The responses take the form of: Yes/No, free text, order of preference,

and Likert scale. Results were analysed based on basic statistical analysis.

Results Little differences exist between the 2 groups in their beliefs that psychiatric patients are not difficult to like, mental illness can be a result of social adversity, psychiatry patients often recover and that people with mental illness should be offered a job with responsibility. However, 54% PS disagreed that mental illness often leads to violence, compared to 66% CS and 87% of PS identified that mental illness can be genetic in origin compared with CS of 91%.

Conclusion This survey did not identify any significant difference between the attitudes of pre-clinical and clinical students in most of the domains. However, a higher percentage of clinical students associate violence with mental illness and are unwilling to consider an elective period in psychiatry.

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EV585

Comparison of attitudes of pre-clinical and clinical medical students to psychiatry as a career choice: A cross sectional study

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Background Psychiatry recruitment is currently insufficient to meet the targeted mental health service needs in the UK. Psychiatry is unpopular amongst medical students and in 2011, only 61% of junior training posts were filled by the first recruitment. RCPsych is currently working to promote psychiatry as a career choice for medical students.

Aims To compare preclinical and clinical medical students' attitudes towards psychiatry as a career choice.

Methods A cross-sectional survey of 212 clinical students (CS) and pre-clinical students (PS) at Newcastle University. Each student responded anonymously to an electronic questionnaire. The responses take the form of: Yes/No, free text, order of preference, and Likert scale. Results were analysed based on basic statistical analysis.

Results A total of 29% PS rated psychiatry in their top 3 career choices compared with 16% CS. Fifty-seven percent PS believe that psychiatry is a respected branch of medicine and 70% believes it makes good use of medical training, while CS rated these at 50% and 52% respectively. Sixty-nine percent PS believe that psychiatry is scientific evidence based compared with 63% CS. Eighty-one percent PS disagreed with the statement that they feel negative about psychiatry compared with 61% CS.

Conclusions The outcome shows increase in negative attitude to psychiatry between pre-clinical and clinical years at the medical school. This makes psychiatry an unpopular speciality among final year students. Further research is required to ascertain the reason for this decline in interest and negative attitude.

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