

## Qualities of a Good Psychiatrist: A Comparison of Opinions Between Psychiatrists and General Practitioners

**To the Editor:** The provision of mental health care around the world is uneven and insufficient.<sup>1</sup> The solution is generally agreed to be a systems approach that would shift responsibility for diagnosis and initial management of psychiatric cases from specialist mental health providers to general practitioners (GPs), with only complex cases being referred to mental health specialists.<sup>2</sup> In Singapore, the close relationship between primary care doctors and psychiatrists is especially important because the primary care doctors manage the bulk of mental health problems in the country. However, in this new partnership, it is not clear what GPs expect of mental health specialists in Singapore and if mental health specialists share these expectations. We sought to answer this question by comparing the opinions of GPs and psychiatrists on the qualities of a good Singaporean psychiatrist.

**Method.** Details of the original study methodology have been previously published.<sup>3</sup> In summary, a focus group of senior psychiatrists developed a survey with 40 qualities, and this was sent to all Singaporean psychiatrists. Factor analysis of the qualities delineated 4 themes in descending importance (professional, personal values, relationship, academic-executive) for a good Singaporean psychiatrist.

A voluntary, anonymous study using the same survey form was subsequently conducted for all GPs in a government polyclinic group that covered half of Singapore's population (approximately 2 million people). The survey form asked participants to rate each quality on a Likert scale. All analyses were done using Statistical Package for the Social Sciences (SPSS) version 14 (SPSS, Inc, Chicago, Illinois). The relative ranking of the themes for GPs was evaluated using Friedman's  $\chi^2$  test. Comparisons between psychiatrists and GPs were performed using multiple independent *t* tests. Two-tailed tests of significance were used and statistical significance was set at  $P < .05$ .

**Results.** A total of 107 (of 168) GPs participated in the survey, giving a response rate of 63.7%. In contrast with psychiatrists, GPs ranked personal values as the most important theme, followed by professional, relationship, and academic-executive themes. GPs rated the professional theme significantly lower than psychiatrists ( $P = .047$ ,  $t = 2.00$ ,  $df = 171.6$ ).

Thirteen of 40 individual qualities were scored significantly differently. GPs rated 3 qualities higher than psychiatrists (provides effective explanations/discusses values and attitudes/challenges junior staff, stretches their abilities, actively involves them). The 10 remaining qualities were ranked higher by psychiatrists, with the majority from the professional and academic-executive themes.

Our survey showed that psychiatrists and GPs have different views on what the qualities of a good psychiatrist are. GPs in Singapore understandably valued psychiatrists that could communicate well, were open about their approach

toward cases, and were able to enhance the GPs' ability to manage psychiatric patients. This is very much in line with findings in the West,<sup>4</sup> where the psychiatrist (as opposed to the multidisciplinary team) is still seen as the access point to specialist knowledge. However, psychiatrists in Singapore do not seem to share the same priorities, possibly because of the low referral rate by GPs to psychiatrists.<sup>5</sup> (Patients can access specialist services without a GP referral.) This in turn could be related to the lack of a consultation-liaison relationship between mental health services and primary care services in Asia.<sup>6</sup>

Equally interesting is the lack of emphasis by GPs on technical skills of psychiatrists, as seen by the significantly lower ratings for the professional theme. It is possible that GPs feel that psychiatry is unscientific<sup>7</sup> and that the "technical" skills do not matter very much in the management of psychiatric patients. This is a new finding and will require further research.

In conclusion, there is a disconnect between the expectations of psychiatrists by GPs and what psychiatrists themselves feel is important for Singaporean psychiatrists. It is important to resolve this disparity by either changing the way our psychiatrists are trained or reviewing the expectations of GPs for psychiatry to progress in Singapore.

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