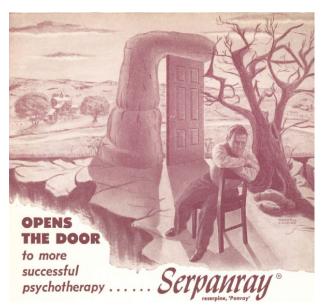
2024 TEACH Education Day: An Analysis of a Psychotherapy Educational Seminar for Psychiatry Trainees

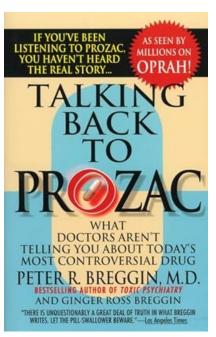
October 17, 2024

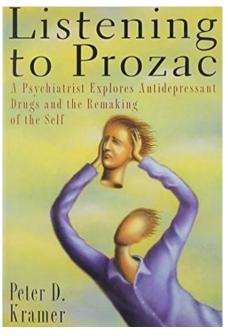


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Background History

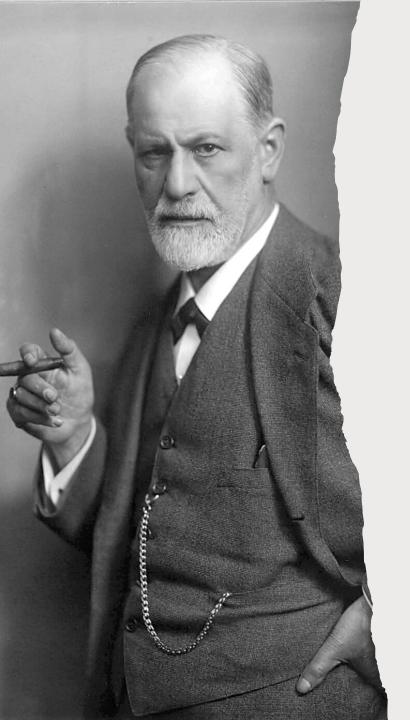
- Psychiatry in the early 20th century was largely focused on sequestration in asylums and psychotherapy
- Starting in the late 1940s, several psychotropic medications were serendipitously discovered
- The development of modern, safer psychotropic medications continued the trajectory of psychiatry towards prescribing and away from therapy
- Within today's mental healthcare landscape, "med checks" are often seen as the most effective use of psychiatry resources
- This trend has significantly affected psychiatry training

Presenting Problem

- According to Tadmon et al. in 2022, psychotherapy use per psychiatry encounter fell from 44.4% to 21.6% from 1997 to 2016. By 2016, over half of psychiatrists no longer provided psychotherapy
- Clemens et al. surveyed 11 residency training directors in 2012 and found significant disparities in training quality provided to psychiatry residents, with highlighted difficulty in finding appropriate patients and supervisors as well as economic pressures to schedule "med checks"
- Salgado et al.'s narrative review of 19 papers in 2024 found psychiatry residents with overall dissatisfaction with the quality of the psychotherapy curricula, lack of support, and low self-perceived competence in psychotherapy by trainees

Our Approach

- Hypothesis: delivering a focused educational intervention to psychiatry trainees will significantly improve interest in learning about psychotherapy and comfort in delivering psychotherapy
- The research team designed and delivered 6 hours of psychotherapy didactics to Carilion PGY-2 and PGY-3 psychiatry residents in three 2-hour sessions
- A ten-question survey was developed and administered before and after the didactics
 - Accreditation Council for Graduate Medical Education psychotherapy milestones
 - Comfort with answering in-service exam psychotherapy questions
 - Comfort with performing psychotherapy
 - Interest in further psychotherapy didactics
- Anonymous narrative feedback was gathered per the psychiatry residency program and shared with the team



Educational Methods

- In-person chalk talk format augmented with video examples, small group activities, and group discussions
- Psychotherapy modalities discussed
 - Motivational interviewing
 - Humanistic
 - Cognitive behavioral
 - Dialectic behavioral
 - Psychoanalytic
 - o Psychodynamic
- Specific focus on comparing schools of psychotherapy



Statistical Methods

- IRB approval was obtained for administration of identical 10 question pre- and post-intervention survey
- Results analyzed with paired t-test using Microsoft Excel and GNU Octave

Psychotherapy Didactics Quality Improvement Survey							
		select the answe		st represents you	ur current perspe	ective with 1 representing "leas	
	How would you rate your knowledge of motivational interviewing (MI) techniques?						
		1	2	3	4	5	
How would you rate your knowledge of cognitive behavior.					ve behavioral the	avioral therapy (CBT) techniques?	
		1	2	3	4	5	
	3. How would you rate your knowledge of dialectic behavioral therapy (DBT					rapy (DBT) techniques?	
		1	2	3	4	5	
	4.	. How would you rate your knowledge of psychodynamic therapy techniques?					
		1	2	3	4	5	
	5.	How would you rate your knowledge of the theoretical principles behind psychodynamic and behaviorally-oriented (CBT, DBT, MI) therapies?					
		1	2	3	4	5	
	6.	. How would you rate your comfort in selecting the appropriate psychotherapeutic modality based on case formulation?					
		1	2	3	4	5	
7. How would you rate your comfort in identifying and reflecting feelings and k during therapy?					eelings and key issues that arise		
		1	2	3	4	5	
	8.	3. How would you rate your comfort in being a patient's primary psychotherapist?					
		1	2	3	4	5	
	9.	How well-prepared do you feel for the psychotherapy questions on the PRITE?					
		1	2	3	4	5	
10. How would you rate your interest in additional psychotherapy education in PGY-1						education in PGY-1 and PGY-2?	

Results



14 initial surveys were completed



10 surveys were able to be matched with post-intervention surveys and were thus included in the analysis



All results were statistically significant



14 narrative responders in three categories shared with the team

Results



Selected Narrative Results

This was very helpful in understanding different psychotherapy modules. It would be constructive for outpatient training and building psychotherapy training for the future

Probably the best lectures I've had since I've been at VTC residency.

10/10 highly recommend

Were very helpful sessions which gave us the basics about the 3 different therapy styles. I appreciate that Ryan had us practice reflective listening every session and had interactive activities. Ryan's lectures were great and I would love more lectures like these if possible especially from Ryan!

This was one of the most valuable lectures we've had.

The greatest lecture of all time

Dr. Ritch had a great mix of presenting/writing on the whiteboard, doing practice exercises, watching videos, and doing small group- based activities. Very well organized with a good combination of different teaching styles.

Discussion

- Conclusion: A relatively brief educational intervention markedly sparked resident interest in and perceived comfort with psychotherapy
- Residents reported significant engagement with eclectic presentation styles
- Follow up needed to ascertain if educational intervention affects in-service exam scores or trainee psychotherapy engagement
- Further work also needed to gauge portability of results across educational settings and instructors

Works Cited

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Questions?