## **Psychiatry and Behavioural Sciences**

### **BEHAVIOURAL SCIENCES**

Learning Objectives

At the end of the course, the student should be able to:

1. Understand the nature and development of different aspects of normal human behaviour like learning, memory, motivation, emotion, personality and intelligence.

2. Recognise differences between normal and abnormal behaviour

3. Understand how psychological and social factors influence human behaviour throughout his life cycle, and how they affect his response to health and illness.

4. Conduct psychosocial evaluation of the patient in respect to attributes like socio-economic status; attitude to health and disease and health services.

5. Establish harmonious doctor-patient relationship and create a therapeutic environment

6. Communicate effectively with patient, his family and community, rural and/or urban.

7. Possess and utilise the knowledge and skills of behavioural sciences/techniques for adoption of health practices.

8. To sensitise the medical student regarding human behaviour normal and abnormal and have the ability to observe and understand the same, a process which is continuous and life long in his profession.

Topics	Must	Desirable
	know	to know
1. Introduction to types of behavioural sciences: sociology,	$\checkmark$	
psychology, anthropology relevant to health and disease.		
2.Family studies : role of family in health and disease	$\checkmark$	
3. Illness and health: Mores about health and illness.	$\checkmark$	
4. Socio-economic status: Relationship of socio-economic status		
with health and mental illness.	$\checkmark$	
5. Communication skills: interview techniques, methods of		
communication with patients and their relatives, role of		
communication in interpersonal relationship. Doctor- patient	$\checkmark$	
relationship. Empathy. Emotional Intelligence. Psychological	,	
methods of treatment: counselling		
	. [	
6. Methods of social work: social case work;role of social worker in	N	
Psychiatry.Role of clinical psychologist in Psychiatry; concept of	1	
psychiatric team work.	$\gamma$	

#### **COURSE CONTENT**

T	1	
7. Introduction to psychology – Basis of human behaviour,		
application of psychology to medicine.	$\checkmark$	
8. Human development: Infancy to adolescence: Stages of		
development and individual differences.		
9. Human development: adulthood to old age – development tasks	$\checkmark$	
of adulthood and old age; adjustment problems of old age.		
10. Personality development : types of personality and pre-morbid	,	
personality and its relationship with illness and behaviour	1	
11. Death and dying: Reactions of terminally ill patient and family;	$\checkmark$	
breaking news of fatal illness /death to the family.		
12. Learning and conditioning: Nature of learning; performance	$\checkmark$	
role of motivation in learning and methods to make learning	1	
effective.	N	
	N	
13. Cognitive process: Sensory process- attention, perception,		
sensation and thinking; sensory process ;problem solving decision		
making and communication in thinking process.		
14. Emotion: relationship of emotion to illness.		
15. Intelligence: Nature of intelligence; role of genetic and	$\checkmark$	`
environmental influences in intelligence.		
16. Behavioural medicine: behavioural aspects applied to illness.		
Sick role; .Illness behaviour;role of socio- cultural background in	,	
illness behaviour.	$\checkmark$	
17. Stress and Coping : different stressors and their effects.		
18.Attitudes : Nature and development of attitudes		
19. To be aware of the security aspects as per the demands of the		
situation, region: Security of the person, the citizen; physical		
trauma; Psychological trauma; 'psychological support and first aid-		
psychological support during disasters.		
<b>BIO-PSYCHO-SOCIAL CONCEPT :</b>		
The following items to be covered by the multidisciplinary team in		
the dept of psychiatry		
During the first and second terms –		
		. /
20. Family studies: Types of families: structure and functions of		N
families .		
21. Illness and health: Beliefs, customs, norms.		
22 Socio-economic status: Measurement of socio-economic status.		
23.Mass Communication : Communication with patients in		N I
community and use of medias in health education and preventive		N I
mental health programmes and life style change of citizens Eg.		
Smoking behaviour and its relation to cancer.		$\checkmark$
24. Methods of social work: social group work and community		$\checkmark$
organisation.		

	$\checkmark$	
25. Introduction to psychology – Role of nature vs. nurture in		
shaping human behaviour		
26. Human development: Infancy to adolescence: Behavioural		
expectancies and problems.		v
27. Human development: adulthood to old age – adjustment in old		
age to old age diseases.		v
28Learning and conditioning: Learning of adaptive and		1
maladaptive behaviours; Various learning methods like association,		
cognitive, verbal, motor and social.		,
28. Cognitive process: Methods of improving memory; forgetting		,
and its determinants; thinking process- concept formation; role of		
language.		
29. Emotion: Development of emotive behaviour and its		
physiological basis.		
30. Intelligence: Assessment of intelligence in clinical setting;		
growth of intelligence from birth to old age.		
31. Behavioural medicine: Methods of behavioural treatment for		
psychosomatic diseases.		
32. Coping and stress: Methods of adaptive and maladaptive coping		
and stress management.		Y
33Attitudes and motivation to treat and achieve health.		
34. Optimal Communication with one another in team and with		N
patients and their families, regarding security of the citizen, as per		
the demands of the region and situation.		
35. Social security: Social assistance and social insurance; social		
security schemes.		
36. To be aware of the disasters man-made or natural and the		
preparedness to disaster and management of disasters in team -		
work paradigm.		
37. Mock-drill participation in disaster, in team work paradigm,		
behavioural aspects.		

# **BEHAVIOURAL SCIENCES – SKILLS** (To be acquired after integrated teaching in preclinical years-phase I

To be of use to clinical psychiatry during the clinical exposure)

Skill	Able to do independently	Able to do under	Assist	Observe
		supervision		
1. Understanding Normal and abnormal behaviour, recognising abnormal behaviour		+		
2. Unconscious, Subconscious, Conscious mind ; Id, Ego Superego; transference and counter-tarnsference . humanistic therapies ; Rational Emotive		+		
Therapy; Transcendental meditation; Spiritual health;Spirituality practice for personal and interpersonal well being .		+		
3. Behavioural Analysis	+			
4.Behavioural changes in Anxiety; Normal Anxiety and Generalised Anxiety Disorder	+			
5. Detection of unhappiness, hopelessness, helplessness, worthlessness.	+			
6. Meaning of Bio-psycho-social in Causation and in Interventional Approaches	+			

## **PSYCHIATRY**

### Learning Objectives

Able to student to deliver mental health services at the primary care level: