

**Internship in Community Medicine: Challenges and the Way Ahead****Donald S. Christian<sup>1</sup>, Purushottam A. Giri<sup>2</sup>****Affiliation:**<sup>1</sup>Assistant Professor, Department of Community Medicine, GCS Medical College, Ahmadabad, Gujarat, India<sup>2</sup>Professor & Head, Department of Community Medicine, IIMSR Medical College, Badnapur, Jalna, Maharashtra, India**Date of Submission** : 01-04-2018**Date of online Publication** : 07-07-2018**Date of Acceptance** : 18-06-2018**Date of Print Publication** : 30-09-2018**\*Author for correspondence:** Dr. Purushottam A. Giri, Professor & Head, Department of Community Medicine, IIMSR Medical College, Badnapur, Jalna, Maharashtra, India. E-mail: [drpgiri14@gmail.com](mailto:drpgiri14@gmail.com)**Dear Sir,**

Internship, a transition from a medical student to a doctor, is a period of one year after passing the final year exam of MBBS, where an intern works in various departments in a hospital. The medical education system in India is one of the largest in the world. It has a five and half year curriculum with the three-phase framework of pre-clinical (12 months), para-clinical (18 months) and clinical (24 months), plus an internship (12 months). Interns are expected to assume significant responsibility for patients care during their clinical postings, including being able to confidently communicate with patients and their family members.<sup>[1]</sup>

The Medical Council of India describes internship as “a phase of training wherein a graduate is expected to conduct actual practice of medical and health care and acquire skills under supervision so that he/she may become capable of functioning independently”<sup>[2]</sup>

Over the past three decades, Community Medicine has emerged as an important discipline in medical science across the Indian Medical Education. The Medical Council of India has recognized the importance and the prospects of the subject in more contemporary way. The necessity of the exposure to community as well as public health at large is foreseen by the council to make a medical graduate complete.<sup>[2]</sup> The knowledge and skills required by the basic medical graduate comes not only from the clinical skills but also the managerial skills that is needed to run a health department/clinic or a public health center (Primary Health Center). Though many of the theoretical concepts are taught during the undergraduate teaching, imparting the applications of the concepts of primary health care as well as the community health care are required during the internship phase.<sup>[3]</sup> Some of the institutions are also asking on scoring of the skills learned during the internship programs. The focus of the internship is to overcome the insufficient experience as well as to raise the morale of the fresh medical graduates who might be having only the theoretical knowledge.<sup>[4]</sup>

The focus of the internship training thus holds so much during the 2 months rotation in the Community Medicine department. The specific objectives of the internship training program have been defined by the Medical Council of India for each speciality. For example, Preparation of ORS, morbidity survey proforma, dietary advice, health check up, tabulation and presentation of had given data, health education, immunization and cold chain maintainance etc. These are the criteria set by MCI for the 2 months of internship in Community Medicine Department. It asks every intern to have a posting at both Rural and Urban Health Training Centers.

The objectives of the internship at Community Medicine/RHTC/UHTC/PHC could be summarized as below:

- ❖ To provide preventive, promotive, curative and rehabilitative service to rural / urban population.
- ❖ To acquire competence in diagnosis and treatment of medical conditions like malaria, tuberculosis, hepatitis, meningitis etc. in the relevant set up.
- ❖ To acquire proficiency for Family Welfare Programs (antenatal care, normal delivery, contraception care etc.)
- ❖ To implement National Health Programs in Rural / Urban field practice area.
- ❖ To prepare and implement the short term research projects in the community.
- ❖ To initiate or participate in family composite health care (birth to death), Inventory of events;
- ❖ Participation in all of the modules on field practice for community health e.g. safe motherhood, nutrition surveillance and rehabilitation, diarrhea disorders etc.

The common activities done to achieve these objectives are through diagnosis and treatment of common ailments, promoting RCH services, involvement in school health programs, involvement in advocacy through various health programs and observance of national health days.

**Challenges:**

Despite of the constant emphasis on the objectives, the interns posted often lack the required commitment to the postings. The following reasons could be listed for the possible shortfall in terms of the active involvement:-

- ❖ Inconsistent formulations, supervision and monitoring of the activities by the faculty/staff of the department/college.<sup>[5,6]</sup>
- ❖ Lack of interest of the respective Medical Officer posted at the health center as they often consider it as “unpaid additional work” not the part of their regular duties.<sup>[6]</sup>
- ❖ Inadequate willingness and motivation to reach out for the respective field areas and health centers by the interns. (Transportation relies on the interns by and large)<sup>[5]</sup>
- ❖ Much focus on alternate issues such as preparation of competitive examinations and attending coaching classes.<sup>[5,6]</sup>
- ❖ Not able to identify the timeframe for achieving the objectives with proper plan.<sup>[7]</sup>
- ❖ Not able to identify the practicality of the opportunity to learn public health management and health systems.<sup>[7,8]</sup>

**Possible Solutions:**

- ❖ Adequate orientation on the core objectives of the internship training for both interns as well as the field staff.
- ❖ Optimal liaison with the in-charge / officers of health centers so that they cooperate in achieving objectives.
- ❖ Periodic physical verification of the attendance records into field areas.
- ❖ Adequate recognition with awards/certificate/incentives to provide motivations for activities performed.
- ❖ Brain-storming and training of the staff for teaching and training interns.
- ❖ Identifying specific skills and working out feasible plans to achieve the same with checklists and logbooks.
- ❖ Knowledge sharing, problem analysis and feedbacks through combined meetings of department and field staff on periodic basis.

Here, the main aim of internship is to gain clinical experience and expertise and not to pass entrance exams. Finally, internship is the most important period of the medical career, it is the year when the fresh minds are moulded and prepared to enter the world of healers.

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