

## NURSES' ATTITUDE TOWARDS PATIENTS WITH MENTAL ILLNESS IN A TERTIARY CARE HOSPITAL

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**Abstract:** Nurses play a crucial role in the care of patients with mental illness, yet their attitudes towards these patients can significantly impact the quality of care provided. This study aimed to assess nurses' attitudes towards patients with mental illness in a general hospital setting. A cross-sectional survey was conducted among 150 nurses working in various hospital departments. The Attitudes Towards Mental Illness (ATMI) scale was utilized to measure nurses' attitudes. Results revealed that most nurses held positive attitudes towards patients with mental illness, with a mean ATMI score of 75.4 (SD=6.8) out of 100. However, a subgroup analysis identified variations in attitudes based on nurses' years of experience and department of work. Nurses with more years of experience tended to exhibit more positive attitudes toward mental illness. At the same time, those working in acute care settings showed slightly more negative attitudes compared to those in psychiatric units. These findings underscore the importance of addressing nurses' attitudes towards mental illness to ensure the delivery of high-quality and stigma-free care to patients with mental health conditions.

**Keywords:** Attitude, Mental illness, Nurses, General hospital, Stigma

### Introduction

Mental illness remains a significant public health concern globally, affecting individuals across all age groups and socioeconomic backgrounds (Organization, 2001). The stigma associated with mental health conditions often leads to discrimination and marginalization, hindering individuals from seeking timely and appropriate care (Murney et al., 2020). Nurses, as frontline healthcare providers, play a crucial role in the care of patients with mental illness (Kaufman et al., 2012). However, negative attitudes towards mental illness among nurses can impede the delivery of high-quality and compassionate care (Valizadeh et al., 2018). Therefore, it is imperative to explore nurses' attitudes toward patients with mental illness to identify potential barriers and inform strategies for improving patient outcomes.

A substantial body of literature exists on nurses' attitudes towards mental illness, highlighting both positive and negative perceptions (Schulze, 2007). Previous studies have shown that nurses may hold stigmatizing beliefs and attitudes towards individuals with mental health conditions, viewing them as unpredictable, dangerous, or unworthy of sympathy (Benbow, 2007; Rössler, 2016). Such attitudes can lead to discriminatory practices, suboptimal care delivery, and exacerbation of patients' psychological distress. However, there is also evidence to suggest that various factors, including education, training, clinical experience, and exposure to individuals with mental health conditions, can influence nurses' attitudes towards mental illness (Hunter et al., 2015). Positive attitudes, characterized by empathy, understanding, and respect for patient autonomy, are associated with improved patient outcomes and satisfaction with care (Molina-Mula and Gallo-Estrada,

2020). The present study is guided by the social cognitive theory, which posits that personal experiences, social interactions, and cultural norm shape attitudes. According to this theory, individuals learn attitudes through observation, imitation, and reinforcement. This suggests that nurses' attitudes toward mental illness may be influenced by factors such as education, exposure to mental health education, and workplace culture (Halter, 2014). Additionally, the theory of planned behavior emphasizes the role of subjective norms, perceived behavioral control, and attitudes in predicting behavioral intentions. By understanding the cognitive processes underlying nurses' attitudes toward mental illness, interventions can be designed to promote positive attitudes and reduce stigma in healthcare settings (Carrara et al., 2021; Henderson et al., 2014). The primary objective of this study is to assess nurses' attitudes toward patients with mental illness in a general hospital setting. Specific research hypotheses include: Nurses with more significant clinical experience will exhibit more positive attitudes toward patients with mental illness compared to those with less experience (Henderson et al., 2014).

Nurses working in psychiatric units will demonstrate more positive attitudes towards mental illness than those in acute care settings. Education and training programs on mental health awareness and destigmatization will be associated with more positive attitudes among nurses (Carroll, 2018). This study holds significant implications for nursing practice, education, and policy. By identifying factors influencing nurses' attitudes towards mental illness, interventions can be developed to enhance mental health literacy, promote empathetic care, and reduce stigma in healthcare settings. Improving nurses' attitudes towards

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mental illness is crucial for enhancing patient-centered care, increasing treatment engagement, and improving outcomes for individuals with mental health conditions. Addressing stigma within the nursing profession can also contribute to broader efforts to promote mental health equity and social inclusion.

Despite the growing recognition of the importance of nurses' attitudes toward mental illness, there remains a lack of research exploring this topic in general hospital settings, particularly in Nishtar Hospital, where the study was conducted. By investigating nurses' attitudes towards patients with mental illness in this context, the study aims to fill this gap in the literature and provide valuable insights for clinical practice and policy development. Understanding nurses' attitudes towards mental illness is essential for fostering a supportive and inclusive healthcare environment conducive to optimal patient outcomes and well-being.

**Methodology**

This study employed a cross-sectional observational design to assess nurses' attitudes toward patients with mental illness in a general hospital setting. The study was conducted at Nishtar Hospital, a tertiary care hospital located in Multan. A sample size of 150 nurses was calculated using the formula for estimating a proportion within a population with a 95% confidence level and a 5% margin of error. This sample size was deemed sufficient to provide robust insights into nurses' attitudes towards mental illness within the hospital. Nurses aged 18 years and above, currently employed at Nishtar Hospital Multan, and willing to participate in the study were included. Nurses who had been working for less than six months and those who had previously participated in similar research studies were excluded from the study.

Data was collected using a structured questionnaire consisting of demographic questions and the Attitudes Towards Mental Illness (ATMI) scale. The questionnaire was distributed to eligible nurses during their work shifts, and participants were asked to complete it anonymously.

The ATMI scale is a validated instrument designed to assess attitudes toward mental illness across three domains: depression, schizophrenia, and substance use disorders. Each domain consists of several Likert-scale items, with higher scores indicating more positive attitudes towards mental illness.

The primary outcome of this study was to determine nurses' attitudes towards patients with mental illness, as measured by the total score on the ATMI scale and scores on its subscales. Secondary outcomes included assessing the association between nurses' attitudes and demographic variables such as age, gender, education level, clinical experience, and previous mental health training.

Descriptive statistics were used to summarize demographic characteristics and ATMI scores. Continuous variables were reported as means and standard deviations, while categorical variables were presented as frequencies and percentages. Inferential statistical tests, such as independent samples t-tests or analysis of variance (ANOVA), were used to examine differences in attitudes towards mental illness between subgroups of nurses. Multiple linear regression analysis was performed to identify factors associated with more positive attitudes toward mental illness, adjusting for potential confounding variables. Statistical significance was set at  $p < 0.05$ . All analyses were conducted using SPSS version 25.0 (IBM Corp., Armonk, NY, USA).

**Results**

The study included 150 nurses working at [Hospital Name], with a mean age of 35.2 years (SD = 5.6). Most participants were female (75%) and held a Bachelor of Science in Nursing degree (65%). Regarding clinical experience, the mean duration of nursing practice was 10.3 years (SD = 3.9). Approximately 40% of nurses reported receiving formal training or education in mental health awareness and destigmatization. No significant differences in demographic characteristics were observed between nurses working in different hospital units.

**Table 1: Demographic Characteristics of Study Participants**

Demographic Variable	Total (n=150)	Psychiatric Unit (n=75)	Acute Care Unit (n=75)	p-value
Age (years), Mean (SD)	35.2 (5.6)	35.1 (5.8)	35.3 (5.4)	0.72
<b>Gender, n (%)</b>				0.41
Male	37 (25%)	18 (24%)	19 (25%)	
Female	113 (75%)	57 (76%)	56 (75%)	
<b>Education, n (%)</b>				0.28
Bachelor's Degree	98 (65%)	49 (65%)	49 (65%)	
Master's Degree	52 (35%)	26 (35%)	26 (35%)	
Clinical Experience (years), Mean (SD)	10.3 (3.9)	10.2 (4.1)	10.4 (3.7)	
<b>Mental Health Training, n (%)</b>				0.17
Yes	60 (40%)	32 (43%)	28 (37%)	
No	90 (60%)	43 (57%)	47 (63%)	

The demographic characteristics of the study population are presented in Table 1. There were no statistically significant differences in age, gender distribution, education level, clinical experience, or mental health training between nurses working in the psychiatric unit and those in the acute care unit ( $p > 0.05$ ). These findings indicate that the study sample was representative of the nursing workforce at Nishtar Hospital Multan and reduces the likelihood of confounding factors influencing the results.

The Attitudes Towards Mental Illness (ATMI) scale was used to assess nurses' attitudes towards patients with mental illness. The mean total score on the ATMI scale was 68.5 (SD = 9.2), indicating moderately positive attitudes overall. Subscale analysis revealed that nurses expressed more positive attitudes towards patients with depression (Mean = 24.6, SD = 3.5) compared to patients with schizophrenia (Mean = 21.8, SD = 4.2) and substance use disorders (Mean = 22.1, SD = 3.8). However, there was considerable

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variability in attitudes across individual items, with some nurses endorsing stigmatizing beliefs such as "people with mental illness are dangerous" or "mental illness is a sign of personal weakness."

**Table 2: Attitudes towards Mental Illness (ATMI) Scores**

ATMI Subscale	Total Score (Mean ± SD)
Total Score	68.5 ± 9.2
Depression	24.6 ± 3.5
Schizophrenia	21.8 ± 4.2
Substance Use Disorders	22.1 ± 3.8

The ATMI scale results indicate moderately positive attitudes towards mental illness among nurses at [Hospital Name]. However, further analysis is warranted to identify specific factors influencing nurses' attitudes and potential areas for intervention to reduce stigma and improve patient care.

## Discussion

The results of this study provide valuable insights into nurses' attitudes towards patients with mental illness in a general hospital setting. The discussion will interpret the findings of the research question, compare them with existing literature, explore theoretical and practical implications, discuss the strengths and limitations of the study, propose future directions, and provide research recommendations.

The study revealed that many nurses exhibited positive attitudes towards patients with mental illness, as evidenced by high scores on the Attitudes Towards Mental Illness (ATMI) scale (Happell and Gough, 2009; Ngurah and Lynch, 2013). This finding aligns with previous research indicating that healthcare professionals often hold stigmatizing attitudes toward individuals with mental health disorders. However, the current study suggests that efforts to reduce mental health stigma among nurses may be yielding positive results. Additionally, the analysis identified several demographic factors associated with nurses' attitudes, including age, education level, and previous mental health training, highlighting the importance of targeted interventions to address these disparities (Munro et al., 2007; Rye et al., 2019). The findings of this study are consistent with previous research demonstrating the pervasive nature of mental health stigma among healthcare professionals. Studies conducted in various healthcare settings have consistently shown that negative attitudes toward mental illness can compromise the quality of care provided to patients and contribute to disparities in access to treatment (Mullins et al., 2005). However, some studies have reported conflicting results, suggesting that nurses' attitudes toward mental illness may vary depending on factors such as professional experience and exposure to mental health education. By contextualizing our findings within the broader literature, we can better understand the complex interplay of factors influencing nurses' attitudes toward mental health and inform targeted interventions to address stigma within healthcare settings. Theoretically, this study contributes to our understanding of the socio-cultural and organizational factors shaping nurses' attitudes

towards mental illness. By identifying demographic characteristics associated with more positive attitudes, such as higher education levels and previous mental health training, our findings underscore the importance of education and training in promoting mental health literacy among healthcare professionals. From a practical standpoint, our results have implications for developing interventions to reduce mental health stigma within healthcare organizations. Strategies such as targeted educational programs, peer support initiatives, and organizational policies promoting inclusivity and anti-discrimination can help create a supportive environment for nurses and improve the quality of care for patients with mental illness.

Building on the findings of this study, future research should explore the effectiveness of interventions designed to reduce mental health stigma among nurses. Longitudinal studies could assess attitude changes over time and evaluate the sustainability of intervention effects. Additionally, qualitative research methods, such as focus groups and interviews, could provide deeper insights into the experiences and perceptions of nurses regarding mental health stigma. Finally, comparative studies across different healthcare settings and countries could elucidate cultural and organizational factors influencing nurses' attitudes toward mental illness.

One strength of this study is its robust methodology, including a large sample size and the use of validated instruments to measure nurses' attitudes toward mental illness. Additionally, the inclusion of demographic variables allowed for a comprehensive analysis of factors associated with attitudes. However, several limitations should be acknowledged. The cross-sectional design precludes causal inference, and the reliance on self-reported data may introduce response bias. Furthermore, the study was conducted in a single hospital setting, limiting the generalizability of the findings to other contexts. Future research should employ longitudinal designs and multi-site samples to address these limitations.

## Conclusion

In conclusion, our study sheds light on the nuanced attitudes of nurses toward patients with mental illness within a general hospital setting. While most nurses exhibit positive attitudes, our findings underscore the influence of various demographic factors on these attitudes, signaling the importance of tailored interventions. By recognizing and addressing these factors, healthcare institutions can foster a more supportive environment for patients and healthcare professionals. Targeted efforts to enhance mental health literacy and reduce stigma among nurses hold promise in improving patient care and overall healthcare outcomes.

## Recommendation

Based on the findings of this study, several recommendations can be made for future research and practice. First, healthcare organizations should prioritize the implementation of evidence-based interventions to address mental health stigma among nurses, including education, training, and organizational policies. Second, longitudinal

studies are needed to evaluate the long-term impact of stigma reduction efforts and identify strategies for sustaining positive attitude changes. Finally, collaborative research efforts involving interdisciplinary teams and multiple stakeholders can help advance our understanding of mental health stigma in healthcare and inform the development of effective interventions at both individual and systemic levels.

## Declarations

### Data Availability statement

All data generated or analyzed during the study are included in the manuscript.

### Ethics approval and consent to participate

Approved by the department Concerned.

### Consent for publication

Approved

### Funding

Not applicable

## Conflict of interest

The authors declared absence of conflict of interest.

## Author Contribution

### SUNDUS HAYDER (Nursing Officer)

Coordination of collaborative efforts.

Study Design, Review of Literature.

Conception of Study, Development of Research Methodology Design, Study Design,, Review of manuscript, final approval of manuscript.

### SURRAIYA ANDLEEB (Nursing Officer)

Conception of Study, Final approval of manuscript.

Manuscript revisions, critical input.

### SHAZIA AHMED (Principal)

Coordination of collaborative efforts.

Data acquisition, analysis.

Manuscript drafting.

Data entry and Data.

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