

Medical and Non-Medical Female Students' Attitudes toward Mental Illness and Psychiatric Patients at Umm Al Qura University

Manal H Abo El magd¹ and Luma Al Zamil²

¹Psychiatric & mental health nursing Faculty of Nursing – El Minia university – Egypt , Umm AL- Qura University K S A*

²Speech Language Pathologist, Bachelor's Degree Faculty of Nursing – Jordan University Scientific & technology – Jordan , Umm AL -Qura University K S A**
Manalh2002@yahoo.com

Abstract: Mental illness is a term used for a group of disorders causing severe disturbance in thinking, feeling and relating. Certainty, negative attitudes toward mental illness appear to worsen the overall quality of life of individuals with mental disorders. **Aim:** This study aimed to compare the attitudes of medical and nonmedical undergraduate female university students' toward mental illness and psychiatric patients. **Subjects & Methods:** this study was a descriptive comparative design. A convenient sample composed of 200 undergraduate female students from medical & nonmedical faculties at Umm Qura. University were selected and interviewed to collect the data through using the following two tools, a Structured Interviewing Questionnaire and Attitude Scale for mental illness. **Results:** The results revealed that, 39% & 38% of medical and non- medical undergraduate female students respectively, gained their information about mental illness through mass media. Most of medical students (81%) compared with 53% of non-medical students their attitudes toward psychiatric patients were trying to help them. While, 13% & 28% of medical and non- medical students respectively, consider psychiatric patients as a source of danger. There were a statistically significant differences between medical and non- medical students regarding attitude scale for mental illness domains; Separatism and Restrictiveness, at (p –value 0.013, and 0.017 respectively) the high mean score was reported by the medical students. **Conclusion:** The medical students had more positive attitude toward mental illness and psychiatric patients than non-medical students. **Recommendation:** Projects and programs for decreasing stigma include symposiums on mental health policy, mental health forums, and public outreach (Conversations) are recommended.

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1.Introduction

It is believed that, mental health is a successful performance of mental functions, resulting in the ability to engage in productive activities, enjoy fulfilling relationships and change or cope with adversity. Mental health provides people with the capacity for rational thinking, communication skills, learning, emotional growth, resilience and self-esteem.^[1] Mental illness is a term used for a group of disorders causing severe disturbance in thinking, feeling, and relating. They result insubstantially diminished capacity for coping with the ordinary demands of life. Mental illness can affect persons of any age (children, adolescents, adults, and the elderly) and it can occur at any family. However, patients those with mental illness are usually of normal intelligence although they may have difficult performing at normal level due to their illness.^[2]

A universal concept of mental illness is difficult to define because of the culture factors that influence such as concept. However, certain elements are associated with individuals perceptions of mental illness, regardless of cultural origin such as incomprehensibility and cultural

relativity. Whereas, incomprehensibility relates to the inability of the general population to understand the motivation behind a behavior. When the observers are unable to find meaning or comprehensibility in behavior, they are likely to label that behavior as mental illness. Meanwhile, the element of cultural relativity considers that these rules, conventions, and understandings are conceived within an individual's own particular culture. Behavior is categorized as "normal" or "abnormal" according to one's cultural or societal norms.^[3]

The word "stigma" originated in ancient Greece as the marking or 'branding' of slaves. It has come to mean the labeling, discrimination and rejection of people who are socially and behaviorally different.^[4] Attitudes are developed in various ways. They may be the result of interaction with the environment; assimilation of others' attitudes; life experiences; intellectual processes; or a traumatic experience. Attitudes can be described as accepting, caring, prejudiced, judgmental, and open or closed minded.^[5]

Understanding the attitudes and beliefs towards different medical conditions amongst

undergraduate students is a fundamental step in addressing the issue of negative attitudes so often reported in studies. Once these students graduate they will be expected to treat a wide range of people presenting with various medical conditions without bias throughout their professional careers. It is therefore important to understand these attitudes.^[6,7,8]

According to the **American Psychological Association**, support the contention that strong attitude-behavior relations are obtained only under high correspondence between at least the target and action elements of the attitudinal and behavioral entities.^[9] However, the nursing students frequently hold inaccurate, negative beliefs about individuals experiencing mental illness.^[10,11] Meanwhile, attitudes of pharmacy students toward mental illness are generally positive and are relatively unaffected by their year in the curriculum, moreover, the attitudes of third-year students toward mental illness are unchanged by psychiatric therapeutics.^[12]

Additionally, Anand (2010) studied the Psychiatric curriculum and its impact on the attitude of Indian undergraduate medical students and concluded that, the undergraduate medical students have a very unfavorable attitudes toward psychiatry and mentally ill patients.^[13]

Significance of study

Gaining insight into the perceptions and attitudes of female university students about mental illness is useful because patients with mental health concerns present for care in every aspect of healthcare. Data generated from this study may be helpful in identifying misperception held by university students and investigate their attitudes toward mental illness for developing programs decrease the stigma associated with mental illness.

Research question

What is a university student 'attitudes toward mental illness and psychiatric patients?

Aim of the study

This study aimed to:

- Assess medical and nonmedical female university students' attitudes toward mental illness and psychiatric patients.
- Compare between medical and nonmedical female university students' attitudes toward mental illness and psychiatric patients.

2. Subjects and Methods:

Research Design:

A descriptive comparative design was utilized for the study; such design fits the nature of the problem under investigation.

Sample size and characteristics:

A convenient sample composed of 200 medical and non-medical students, 100 medical students from faculties of (Pharmacy and Nursing) & 100 non-

medical students from faculties of (Mathematic and Applied Social Sciences).

Research Settings :

The study was conducted at Umm Al- Qura University (AL Abdiahand&AL Zaher) female section.

Inclusion criteria:

- Female Saudi undergraduate students.
- Their age ranged from 19-25 years old.
- Accept to participate in the study.

Tools of the study:

Data were collected through the following tools:

a. A structured Interviewing questionnaire :

It was designed by the researchers after reviewing the literature. It composed from **two** parts as the following:

- **First Part:** It was concerned with the socio-demographic characteristics personal data of the subjects such as age, name of the faculty, and their source of information about mental illness as lecture, Mass media, internet & special reading.

- **Second Part:** It was concerned with the students' general concept toward psychiatric patients. It includes three variables namely; (students' concept about psychiatric patients, students' daring to visit psychiatrist and When students relatives suffer from emotional problem from whom seek help).

b. Attitude scale for mental illness:

It was adopted from (Ng & Chan, 2000).^[14] The scale is a modified version of the questionnaire, opinions about mental illness in Chinese community (OMICC). This modified version included six factors or subscales presented into 34 items.

- **Separatism** which includes 10 items, (1-9& 24) identified by items, that emphasize the uniqueness of people with mental illness and keeping them away at safe distance.
- **Stereotyping** which includes 4 items (10-13) that define people with mental illness in a certain behavioral pattern and mental ability.
- **Restrictiveness** which composed of 4 items (14-17), that hold an uncertain view on the rights of people with mental illness.
- **Benevolence** which includes 8 items (18-23, 25&26) related to kindness towards people with a mental illness.
- **Pessimistic prediction** which composed of 4 items (27-30) identified as the view that people with mental illness are unlikely to improve and how society treats them is not optimistic.
- **Stigmatization** which includes 4 items (31-34) that people perceive mental illness as shameful, and it should be hidden.

All statements were scored on a scale from (1 - 3), whereas, students' responses with strongly agree scored (3), Sometimes agree scored (2) and strongly disagree scored (1). Whereas, the total attitudes score was 102 scores that divided into two categories as the following: (Scores from (62 -102) referred to positive attitudes while Scores from (<62) referred to negative attitudes). The time required to complete the study questionnaires about 15 minutes. The attitudes scale was translated to the Arabic language and back translation to English language was performed. Validity and reliability of the scale was tested. By testing reliability for each subscales (benevolence, separatism, stereotyping, restrictiveness, pessimistic prediction and stigmatization) it was founded that Cronbach alpha values as following (0.64, 0.74, 0.73, 0.79, 0.58 & 0.39,) respectively.

Fieldwork:

An official permission was obtained from the dean of each colleges where the data were collected to conduct the study before embarking on the study. After the finalization of the study tool, the actual data collection was started at January 2013 and ended in March 2013. The researchers meet with students in their faculties explained to them the purpose of the study, and asked for their oral consent to participate. Those who agreed to participate were given the tool and asked to fill it out and return it anonymously in the same setting. The researchers were available for any clarifications.

Ethical Considerations and Human rights:

All the relevant principles of ethics in research were followed. The study protocol was approved by the pertinent authority. Participants' consent to participate was obtained after informing them about their rights to participate, refuse, or withdraw at any time. Total confidentiality of any obtained information was ensured. The study maneuver could not entail any harmful effects on participants.

A pilot study:

The pilot study also served to test the feasibility of the study and the clarity and practicability of the data collection tool. It was carried out on 10 students from different faculties at Umm al Qura University female section. The pilot study sample was excluded from the total sample. Data collected from the pilot study were reviewed and used in making the necessary modifications prior to the finalization of the data collection tool.

Statistical Analysis:

The data were analyzed by using SPSS for Windows, Version 16.0 SPSS. (2007). Descriptive statistics were calculated as frequencies

,percentage comparison between groups of variables was done by ANOVA-Test(F), T-Test (for parametric data) and Chi-Square test (for non-parametric data) P-value is considered significant at or less than 0.05.

3.Results

Nearly two thirds (62%), of the medical students and (38%) of non-medical students in age group 20-<22 years. (Table 1)

More than one third of students (39% & 38%) from medical and non-medical students respectively, gained their information about mental illness through mass media. While only (16% , 18%) of medical and non-medical students gained their information about mental illness from general lecture. (Figure 1)

Most of medical students (81%) compared with 53% of non-medical students their attitudes toward psychiatric patients were trying to help them. While, 13% & 28% of medical and non-medical students respectively, consider psychiatric patients as a source of danger. (Figure 2).

Only 5% and 13% from medical and non-medical students respectively had not the daring to visit psychiatrist. Meanwhile 75% of medical compared with 48% non-medical students they visits psychiatrist. (Table 2)

There were statistically significant differences between medical and non-medical students' attitudes subscale (Separatism, Restrictiveness). (p-value 0.013*, and 0.017) with the highest mean score for medical students that means more positive attitudes toward mental illness. The medical students reported a decrease in mean score of (Pessimistic prediction) domains than non-medical students. That statistically significant at p-value (0.013). (Table 3)

The higher mean score of separatism subscale (21.36, 18.13) were reported by Nursing & Mathematic students respectively. As for Benevolence subscale, the higher mean score (13.76, 12.80) were reported by Mathematic & Pharmacy students respectively. While, the higher mean score of stigmatization subscale (10.38, 9.7) were reported by Nursing & Pharmacy students respectively. (Table 4)

As for the total score of the studied students attitudes toward mental illness, There were a statistically significant differences between medical and non-medical students attitudes toward mental illness at p-value (0.002). The highest percentage of positive attitude (76%) was reported by medical student compared with (55%) for non-medical student. (Table 5)

Table (1): Distribution of the studied students according to their socio-demographic data

Demographic data	Medical students (n= 100)		Non-medical (n=100)	
	No.	%	No.	%
Faculties :				
• Nursing	50	50%		
• Pharmacy	50	50%	50	50%
• Mathematics			50	50%
• Applied social science				
Age in years :				
- 18- < 20	14	14%	30	30
- 20- < 22	62	62%	38	38
- 22- < 24	23	23%	29	29
- 24+	1	1%	3	3

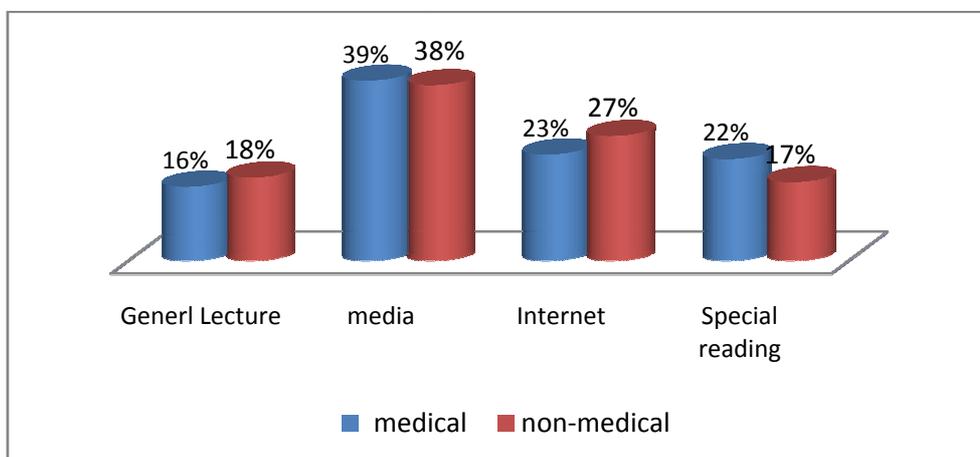
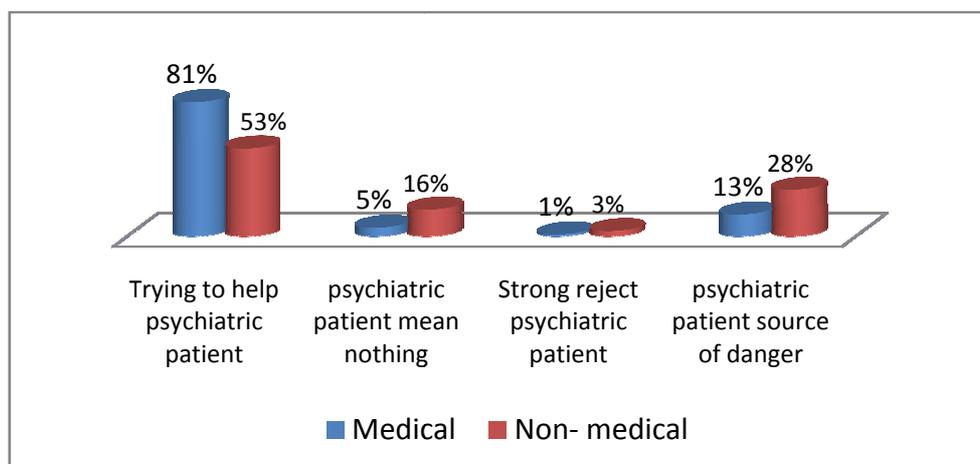
Figure (1): Source of information about mental illness of the studied students**Figure (2): Medical and Non – medical students' general concept toward psychiatric patients**

Table (2): Distribution of the studied students 'general concepts toward psychiatric patients.

General concept items	Medical students (n= 100)		Non-medical (n=100)	
	No.	%	No.	%
Students concept about psychiatric patients				
• Trying to help him.	81	81%	53	53%
• Mean nothing.	5	5%	16	16%
• Strongly reject him.	1	1%	3	3%
• Source of danger.	13	13%	28	28%
Students daring to visit psychiatrist				
• No.	5	5%	13	13%
• Yes	95	95%	87	87
If "yes" which one the following cases:				
• Psychiatrist like physician .	75	75%	48	48%
• Under a pseudonym.	11	11%	18	18%
• With friends.	9	9%	21	21%
When students relatives suffer from emotional problem from whom seek help				
• Alrakah legitimate	1	1%	5	5%
• Psychotherapists or psychiatrist	51	51%	38	38%
• Adult known senior wisdom	43	43%	39	39%
	5	5%	18	18%

Table (3): Comparison between medical and non- medical students regarding scores of attitudes scale for mental illness domains

Variables	Medical (100)	Non – medical (100)	Total (200)	T	P
	Mean	Mean	Mean		
1-Separatism	19.66	17.96	18.81	3.251	0.013*
2-Stereotyping	7.85	7.97	7.91	0.459	0.455
3-Restrictiveness	9.17	8.74	8.95	1.448	0.017*
4- Benevolence	12.29	13.19	12.74	2.727	0.641
5-Pessimistic prediction	4.97	5.4	5.18	2.071	0.013*
6- Stigmatization	10.04	9.08	9.56	3.592	0.126

N.B: The higher scores represent more positive attitudes for all domains except pessimistic prediction

Table (4): Comparison between medical and non- medical students' mean scores of attitudes scale for mental illness domains, according to their faculties:

Variables	Medical		Non – medical		F	P
	S	M	Ph	N		
	Mean	Mean	Mean	Mean		
1-Separatism	17.77	18.13	17.96	21.36	11.8	0.00
2-Stereotyping	8.53	7.43	7.00	8.70	11.7	0.00
3-Restrictiveness	9.18	8.31	8.24	10.10	9.7	0.00
4-Benevolence	12.59	13.76	12.80	11.78	6.4	0.00
5-Pessimistic prediction	5.00	5.78	4.82	5.12	4.2	0.00
6-Stigmatization	9.02	9.13	9.70	10.38	5.4	0.00

N= Nursing, M= Mathematic, ph.= Pharmacy and S= Applied Social Science students

Table (5): Distribution of studied students according to total score of attitude scale for mental illness

Attitudes / Faculties	Medical students	Non-medical students	Total
Positive	76%	55%	65.5%
Negative	24%	45%	34.5%
	Chi-Square 9.46	p- value	0.002

4. Discussion

Attitudes and beliefs about mental illness are shaped by personal knowledge about mental illness, knowing and interacting with someone living with mental illness, cultural stereotypes about mental illness, media stories, and familiarity with institutional practices and past restrictions (e.g., health insurance restrictions, employment restrictions; adoption restrictions)^[16] The current study demonstrated that, more than one third of students from medical and non- medical gain their information about mental illness and psychiatric patients from mass media. Indeed what presented in media about mental illness affect a large part of population as well as creates major expectations by the university students. This was consistent with (Katherine, 2008) who reported that all forms of media are primary source for fueling the stigma of mental disorders, which create tales of the mentally ill as violent and dangerous^[17].

Regarding the concept of the studied students in both groups about psychiatric patients, it was found that nearly one quarters of them were considered that psychiatric patient is as a source of danger, this can be attributed to the general mental image that held with people with mental illness as violent and aggressive almost of time. That explanation could be supported by the notion that people with mental illness as a whole are portrayed as violent and dangerous people that have severely disturbed thought processes and therefore have unpredictable behavior and should be feared^[18] The mass media and cinema have facilitated this portrayal of the mentally ill by depicting them in various distasteful ways. One series of survey found that, selective media reporting reinforced the public's stereotypes linking violence and mental illness and encouraged people to distance themselves from those with mental disorders. On the other hand, mass media also offers our best hope for eradicating stigma because of its power to educate and influence public opinion (Mental Illness Association, 2008)^[19].

The stigma towards people with mental illness by healthcare providers results in disparities in access, treatment, and outcomes^[20,21,22] In the present study, there is a statistically significant differences between medical and non- medical student attitudes scale for mental illness. Whereas, the mean score for most of mental illness attitudes scale domains' was high in medical students. This indicated that medical university students had positive attitudes toward mental illness than non-medical students. It may attributed to the nature of educational courses that is already teaching in medical faculties may highlighted the patient rights or medical ethics for dealing pattern with patients added to this they may attend lectures about mental health and mental illness. This finding was supported by the **American Nurses Association**

report in (2011)^[23], as for nursing students, educational programs that prepare student nurses for the professional nursing role have the obligation to foster positive attitudes towards people with mental illness

Nonetheless, The findings indicate that medical students have more positive attitude toward mental illness than non-medical students.. This finding could be explained by the fact that medical students have better information about mental illness through mass media and available community services, as well as, valuable psychiatric service which they touched with during clinical training. Indeed, the nature and types of courses that the medical students study may had a positive effect on their opinion and concepts' about individuals with mental illness.

The stigma attached to mental illness is well documented^[24,25,26] It explained the findings that, the about one quarter of the studied students reported they visit psychiatrist under a pseudonym. And nearly half of them asked help from Alrakah legitimate when their relatives suffer from psychological problems. These findings also were supported with previous studies, which demonstrate that the public, including university students, believe that mental illness is related to the persons own failings, such as weakness of character and morals, laziness, and lack of discipline and self-control^[18].

Conclusion

Based on The results of the present study it can be concluded that female undergraduate medical students had more positive attitudes toward mental illness and psychiatric patients than non-medical students. However, these findings should be interpreted taking into consideration the study limitation of possible over-reporting of more positive concept about psychiatric patients in self-administered questionnaires.

Recommendation

Future education programmed for nonmedical student about mental illness and Psychiatric patient .Projects and programs for decreasing stigma and promoting mental health issues include symposiums on mental health policy, mental health forums, public outreach (Conversations), and fellowships for mental health journalism are recommended.

.Further studies should conducted to assess larger samples of Saudi Arabia cultures attitudes toward mental illness.

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