

vestigation_of_Attitude_toward _mental_illness_Sri_Padma_Sari .pdf

by Megah Andriany

Submission date: 07-Jun-2024 01:49PM (UTC+0700)

Submission ID: 2220101263

File name: vestigation_of_Attitude_toward_mental_illness_Sri_Padma_Sari.pdf (405.8K)

Word count: 5161

Character count: 29191

HOSTED BY



ELSEVIER

22

Contents lists available at ScienceDirect

International Journal of Nursing Sciences

journal homepage: <http://www.elsevier.com/journals/international-journal-of-nursing-sciences/2352-0132>

Original Article

Investigation of attitudes toward mental illness among nursing students in Indonesia

Sri Padma Sari*, Estin Yuliastuti

School of Nursing, Faculty of Medicine, Diponegoro University, Indonesia

9

ARTICLE INFO

Article history:

Received 9 November 2017

Received in revised form

1 August 2018

Accepted 14 September 2018

Available online 19 September 2018

Keywords:

Attitude

Knowledge

Psychotic disorders

Students

Nursing

ABSTRACT

Objective: People with mental illness (PMI) are often stigmatized or experience negative attitudes from society. In particular, nursing students' attitudes toward PMI will influence the quality of care these patients receive. Some factors influencing attitudes toward PMI among nursing students have been identified. The present study aimed to examine factors influencing attitudes toward mental illness among nursing students in Indonesia.

Methods: Nursing students ($n = 317$) were assessed for attitudes toward mental illness using the Community Attitude toward the Mentally Ill questionnaire. Details regarding sociodemographic variables (age, gender, ethnicity, year of study, monthly family income, personal experience with mental illness, family history of mental illness, and knowing or having direct contact with PMI) and knowledge about mental illness by using Mental Health Knowledge Schedule questionnaire were also obtained.

Results: The mean Community Attitude toward the Mentally Ill questionnaire score was 103.75 ± 9.15 , with the highest mean of the four subscales being that of authoritarianism 27.97 ± 2.87 followed by social restrictiveness, community mental health ideology, and benevolence 27.52 ± 3.68 , 24.38 ± 3.80 , and 23.89 ± 3.27 , respectively. The factors significantly associated with nursing students' attitudes toward mental illness were age ($r = -0.18$, $P = 0.001$), year of study ($H = 16.65$, $P < 0.001$), knowing or having direct contact with PMI ($Z = -2.35$, $P = 0.019$), and knowledge of mental illness ($r = -0.22$, $P < 0.001$).

Conclusions: Several demographic variables, direct contact with PMI, and level of knowledge about mental illness can contribute to variations in attitudes toward PMI among nursing students in Indonesia. Education and direct contact with PMI serve as intervention strategies to reduce negative attitudes and stigma associated with mental illness among nursing students.

© 2018 Chinese Nursing Association. Production and hosting by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

45

1. Introduction

Mental illness is a serious problem in many countries around the world [1], with the most common mental illnesses being depression and anxiety [2]. The Indonesian Health Ministry (2013) reported the prevalence of mental illnesses, such as schizophrenia, is approximately 1%, and emotional disorders affect approximately 6% of the total population [3]. Mental illness is a maladaptive response to stressors from the internal or external environment, manifested by thoughts, feelings, and behavioral disturbances [4]. Consequently, people with mental illness (PMI) are often seen to be aggressive, dangerous, violent, unpredictable in their behavior,

16

unable to handle too much responsibility, and more likely to commit offenses or crimes. These perceptions understandably cause fear and social distance [5–8]. According to a survey of mentally healthy people from 21 countries, as many as 7–8% of respondents in developed countries and 15–16% in developing countries believe that PMI are more violent than the average person [9]. Moreover, approximately 90% of PMI admitted to experiencing stigma, and 86% of PMI had experienced discrimination [10]. That study showed that PMI experienced stigma or suffered negative attitudes from society [11].

Stigma has several impacts on PMI. It gives rise to negative psychological outcomes [5,12–14], such as withdrawal behavior [15], increases the levels of depressive symptoms [11,13–16], lowers self-esteem [13–15,17–19], and reduces the self-efficacy of PMI [12–14]. Furthermore, stigma leads to higher somatic complaints [16], a decrease in quality of life [15,16,19–21], delays in treatment seeking and continuation, worse treatment outcomes,

41

* Corresponding author.

E-mail address: sripadmasari@fk.undip.ac.id (S.P. Sari).

Peer review under responsibility of Chinese Nursing Association.

40

<https://doi.org/10.1016/j.ijnss.2018.09.005>2352-0132/© 2018 Chinese Nursing Association. Production and hosting by Elsevier B.V. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

and lower psychological resilience [8,22–24]. Therefore, PMI find it difficult to recover and often relapse [25]. In addition, stigmatized individuals showed lower levels of social functioning [12] and experienced discrimination when searching for housing and employment opportunities, loss of income, frequent isolation, inadequate social lives, and incestuous family relationships [11,19]; they also felt desperate [26], worthless, and fearful of rejection [27].

The stigma of mental illness also has implications for psychiatric nursing, especially for nursing students. Nursing students provide nursing care to PMI, and their attitudes toward PMI become the main determinants of the quality and outcomes of care that these patients receive [28]. Hence, psychiatric nursing is not the preferred career option for most nursing students [5,6,18,29–36]. Nursing students, in general, display varied attitudes toward mental illness. One study showed that a total of 148 undergraduate nursing students at Bangalore University (Bengaluru, India) had a significantly positive attitude in the domains of restrictiveness, benevolence, and stigmatization but displayed highly negative attitudes in separatism, stereotypes, and pessimistic prediction domains [37]. Other studies have also revealed negative attitudes toward mental illness among nursing students [6,36,38]. These findings provide evidence that nursing students stigmatize and fear PMI, lack understanding of PMI in their environment, and do not want to interact with them. Furthermore, most nursing students also have little interest in being mental health workers in their future careers [35].

Some studies have examined the factors influencing attitudes toward mental illness among nursing students and report that age, gender, ethnicity [29], level of education, and family income [29,39] correlated with attitudes toward mental illness [40], while age, gender, level of education [41,42], and family income [37,38] did not. Other research regarding factors associated with nursing students' attitudes toward PMI are contradictory. While experiencing a mental illness, a family history of mental illness, knowing or having direct contact with PMI, and knowledge of mental illness [11,33,35,36,42–47] have been related to attitudes toward mental illness in some studies, others reported that having experienced a mental illness, having a family history of mental illness, or knowing or having direct contact with PMI had no significant relationship with attitudes toward mental illness [44]. In addition, some studies have found that having experienced a mental illness did not correlate with nursing students' attitudes toward mental illness [41,42]. Unfortunately, the causes of these different attitudes are unclear, and there are no studies about the factors influencing attitudes toward mental illness among nursing students in Indonesia. Therefore, the present study examined factors influencing attitudes toward mental illness among nursing students in Indonesia.

23

2. Methods

2.1. Study design and participants

This study had a correlational design with a cross-sectional approach and was conducted at one state university in Indonesia. Participants were recruited through purposive sampling. Selection criteria were nursing students in their first, second, or fourth year of study who were willing to participate. A total of 348 respondents were invited to participate. During the investigation, 31 respondents were excluded and 317 respondents returned questionnaires. The study received approval from the Research Ethics Committee of the Faculty of Medicine at Diponegoro University in Semarang, Indonesia (157/EC/FK-RSDK/IV/2017). The objectives, procedures, potential risks and benefits, protection of confidentiality, and right to withdraw during the study were explained to participants. Participants were assured of confidentiality and

anonymity. In addition, all participants provided written consent to participate.

2.2. Data collection

The data were collected from April to May 2017 using a socio-demographic, Community Attitude toward the Mentally Ill (CAMI), and Mental Health Knowledge Schedule (MAKS) questionnaires. If a questionnaire was missing items, respondents were asked to complete those items when feasible. Of the 348 respondents, 317 completed the questionnaire, yielding a completion rate of 91.09%. The sociodemographic questionnaire collected background information, such as age, gender, ethnicity, year of study, monthly family income, personal experience with mental illness (meaning they have/have had a mental illness), family history of mental illness, and knowing or having direct contact with PMI.

The CAMI questionnaire was developed by Taylor & Dear and was got permission from the author to use in this study [39]. Additional questions were also devised to elicit informants' experiences with mental illness and discrimination. The CAMI scale rates a total of 40 items on a 5-point Likert scale (1 = strongly agree, 5 = strongly disagree) and has four subscales (authoritarianism, benevolence, social restrictiveness, and community mental health ideology), each with 10 items. Overall stigma against PMI was computed by summing the scores across all subscales. Negatively-stated items were reverse-coded for analysis. Higher numerical scores indicated greater stigma against PMI; a total CAMI score greater than the mean meant an overall negative attitude, and vice versa. The internal consistency of the CAMI was assessed by using Cronbach's α , which was 0.813.

The MAKS questionnaire, developed by Evans-lacko et al., was administered to assess stigma-related mental health knowledge and got permission from Graham Thornicroft [43]. MAKS items are scored on an ordinal scale (1 = strong disagreement, 5 = strong agreement); "don't know" was coded as a neutral response and given a score of 3. Items 6, 8, and 12 were reverse-coded to reflect the direction of the correct response. Part A was comprised of six items (1–6), covering stigma-related mental health knowledge areas (help-seeking, recognition, support, employment, treatment, and recovery) and is used to determine the total score. Part B consisted of six items (7–12) inquiring about the classification of various conditions as mental illnesses. Total scores were calculated so that higher numerical scores indicated greater knowledge; a total MAKS score greater than the mean indicated good knowledge, and vice versa. The overall internal consistency among items (Cronbach's α) was 0.763.

2.3. Statistical analysis

Sociodemographic characteristics and knowledge about mental illness of respondents were analyzed and described using frequency, percentage, and means \pm standard deviations. The Spearman's rho, Wilcoxon, and Kruskal-Wallis statistical tests were applied to examine the correlation between attitudes toward mental illness and sociodemographic characteristics and knowledge about mental illness.

3. Results

The final sample consisted of 317 respondents whose ages ranged from 18 to 21 years (19.80 ± 1.40). The majority of students were female (90.9%), of Javanese ethnicity (88.8%), in their second year of study (34.4%), had a monthly family income greater than IDR1,909,000.00 (60.6%, 1 IDR=0.000066 US\$), have never experienced mental illness (97.5%), have no family history of mental

illness (93.7%), and knew or had direct contact with PMI (69.4%) (Table 1). Mean total scores for the MAKS and CAMI questionnaires were 20.55 ± 2.07 and 103.75 ± 9.15 , respectively. In addition, the mean total score for the CAMI subscales of authoritarianism, benevolence, social restrictiveness, and community mental health ideology were 27.97 ± 2.87 , 23.89 ± 3.27 , 27.52 ± 3.68 , and 24.38 ± 3.80 , respectively.

The factors significantly associated with nursing students' attitudes toward mental illness were age ($r = -0.18$, $P = 0.001$), year of study, knowing or having direct contact with PMI, and knowledge about mental illness ($r = -0.22$, $P < 0.001$). On the other hand, gender, ethnicity, monthly family income, having experienced a mental illness, and family history of mental illness were not correlated with attitudes toward mental illness in Indonesian nursing students (Table 1).

4. Discussion

The present study showed that student age correlated with attitudes toward mental illness ($r = -0.18$, $P = 0.001$) among nursing students in Indonesia. These findings were similar to those of previous studies. Numerous studies have shown that older people are more likely to have positive attitudes toward mental illness [38,39,48–50], while others have reported that older people had more negative attitudes than younger ones [29,35,40]. However, one study found that as age increased, total authoritarianism and social restrictiveness decreased. Nonetheless, older age is still likely to be a significant factor in reducing negative attitudes toward PMI [38] because older age is associated with maturity of thought and behavior [50].

The current findings also indicate that year of study is related to attitudes toward mental illness among Indonesian nursing students. Year of study is related to education level, a demographic factor that has been previously related to attitudes toward mental illness [6,11,29,37–40,51–53]. Year of study also determines if students have already been exposed to psychiatric nursing [54]. In the first year, nursing students in Indonesia are not typically exposed to psychiatric nursing in theory or practice, whereas

second year students are exposed to the theory. Nursing students in their fourth year have been exposed to both the theory of psychiatric nursing and practice in the care of PMI.

Current and previous studies have revealed that nursing students who have studied the theory of and have had clinical experience in psychiatric nursing have positive attitudes toward mental illness [30]. In particular, clinical experiences alone have been found to promote positive attitudes toward mental health nursing. Theoretical components presented before clinical placement play an important role in cultivating a positive attitude toward PMI and psychiatric nursing. Moreover, clinical experience enables students to develop professional competencies to meet the needs of PMI by providing a variety of learning opportunities [31].

Hence, it is clear that education is one approach to reducing stigma associated with mental illness, among other things [55]. In general, knowledge is expected to increase with increasing education level [49]. Knowledge is an important component of stigma and may affect attitudes toward mental illness because knowledge is an important component in the evaluation of anti-stigma [43]. Many studies have assessed knowledge and its association with attitudes toward mental illness and have revealed a correlation between knowledge and attitudes toward mental illness [6,11,33,35,36,42–47,49,56–58]. In line with previous studies, the present results showed that knowledge about mental illness was related to Indonesian nursing students' attitudes toward mental illness ($P = 0.000$, $r = -0.22$) in that lack of knowledge has a negative influence on attitudes toward PMI [44].

Besides education, contact is another approach to reducing stigma associated with mental illness [55]. Current findings showed that knowing or having direct contact with PMI was associated with attitudes toward mental illness. Numerous studies have shown that knowing or having direct contact with PMI increases the likelihood of having a positive attitude toward mental illness [11,29,39–42,59–67]. One study in particular showed that those who knew someone with a mental health problem had more positive attitudes to mental illness and attributed this to attitudinal change fostered by contact with PMI [41].

Previous studies have reported that females were less likely to stigmatize PMI and had fewer negative attitudes toward them than males. This was attributed to females being more empathetic [39], open-minded, and prepared to integrate PMI relative to males [48]. In contrast, however, the present study showed that gender does not affect attitudes toward mental illness among nursing students in Indonesia [37,41,42].

Regarding socioeconomic status, some studies have revealed a correlation between monthly family income and attitudes toward mental illness [29,39,40,63,68]. People with a high income were more likely to have a positive attitude because individual attitudes are influenced by sociocultural factors [29]. However, the present study found that monthly family income was not related to Indonesian nursing students' attitudes toward mental illness, in line with previous studies [37,38].

Personal experience with a mental illness refers to individuals who have or have had a mental illness themselves. Such experience with mental illness is obviously associated with attitudes toward mental illness [59–61,65]. While personal experience with mental illness has been shown to positively impact attitudes toward mental illness, these individuals are often excluded from correlative studies [60]. Interestingly, the present study found that personal experience with mental illness did not correlate with attitudes toward mental illness among nursing students in Indonesia [35,41,42,44,61].

Several previous studies have shown a correlation between a family history of mental illness and attitudes toward mental illness [29,38,39,61,63,65]. They reported that people who have a family

Table 1
Sociodemographic characteristics and attitude toward mental illness of students ($n = 317$).

Variables	n	%	Attitude (Mean \pm SD)	Statistic value	P value
Gender					
Male	29	9.1	103.50 \pm 9.50	-0.31	0.756 ^a
Female	28	90.9	103.80 \pm 9.10		
Ethnicity					
Javanese	279	88.0	103.70 \pm 8.90	-0.06	0.953 ^a
Non-Javanese	38	12.0	103.80 \pm 10.60		
Year of study					
First	100	31.5	104.10 \pm 8.50	16.65	<0.001 ^b
Second	109	34.4	106.00 \pm 8.90		
Fourth	108	34.1	101.20 \pm 9.40		
Monthly family income (IDR)					
$\leq 1,909,000.00$	125	39.4	103.95 \pm 9.65	1.34	0.513 ^b
$> 1,909,000.00$	192	60.6	103.40 \pm 9.10		
Experienced a mental illness					
Yes	79	2.5	99.50 \pm 10.00	-1.19	0.232 ^a
No	238	97.5	103.90 \pm 9.10		
Family history of mental illness					
Yes	20	6.3	101.90 \pm 9.90	-0.73	0.468 ^a
No	297	93.7	103.90 \pm 9.10		
Knowing or have direct contact with PMI					
Yes	220	69.4	103.90 \pm 9.30	-2.35	0.019 ^a
No	97	30.6	105.60 \pm 8.50		

Note: ^aWilcoxon test.

^bKruskal–Wallis test.

history of mental illness had fewer negative attitudes toward mental illness compared with those who did not have a family history of mental illness because direct socialization with PMI reduced stigma or negative beliefs. In contrast, the present study showed that a family history of mental illness was not related to attitudes toward mental illness in Indonesian nursing students, in line with other studies [35,44].

5. Conclusions

The present study revealed that age, year of study, knowing or having direct contact with PMI, and knowledge about mental illness were significantly associated with attitudes toward mental illness among nursing students in Indonesia, while gender, ethnicity, monthly family income, personal experience with mental illness, and family history of mental illness were not. These findings have important implications for academic education. Strategies, including education about mental illness and direct contact with PMI, should be implemented to foster development of more positive attitudes towards mental illness and reduce stigma. There were some limitations to the current study. The present study only included nursing students from one university in Indonesia, which likely reduced the generalizability of the data.

Conflicts of interest

None declared.

Funding

The author(s) disclosed receipt of financial support for publication of this article which was supported by Diponegoro University.

Acknowledgments

We are grateful to the nursing students who participated in our study.

Appendix A. Supplementary data

Supplementary data to this article can be found online at <https://doi.org/10.1016/j.ijnss.2018.09.005>.

References

- [1] Kessler RC, Aguilar-gaxiola S, Alonso J, Chatterji S, Lee S, Ormel J, et al. The global burden of mental disorders: an update from the WHO World Mental Health (WMH) surveys. *Epidemiol Psychiatr Soc* 2009;18(1):23–33.
- [2] WHO. Suicide[Internet]. 2016. Available from: http://www.who.int/gho/publications/world_health_statistics/2016/whs2016_AnnexA_Suicide.pdf?ua=1&ua=1.
- [3] Indonesian Health Ministry. Riset kesehatan dasar [internet]. 2013. Available from: <http://www.depkes.go.id/resources/download/general/HasilRiskasdas2013.pdf>.
- [4] Townsend MC. Essentials of psychiatric mental health nursing: concepts of care in evidence-based practice. fifth ed. Philadelphia: F.A. Davis Company; 2011.
- [5] Bennett J, Stennett R. Attitudes towards mental illness of nursing students in a Baccalaureate programme in Jamaica: a questionnaire. *J Psychiatr Ment Health Nurs* 2015;22(8):599–605.
- [6] Poreddi V, Thimmaiah R, Chandra R, BadaMath S. Bachelor of nursing students' attitude towards people with mental illness and career choices in psychiatric nursing. An Indian perspective. *Invest Educ Enfermeria* 2015;33(1):138–54.
- [7] Ross CA, Goldner EM. Stigma, negative attitudes and discrimination towards mental illness within the nursing profession: a review of the literature. *J Psychiatr Ment Health Nurs* 2009;16(6):558–67.
- [8] Zartaloudi A, Madianos M. Stigma related to help-seeking from a mental health professional. *Health Sci J* 2010;4(2):77–83.
- [9] Seeman N, Tang S, Brown AD, Ing A. World survey of mental illness stigma. *J Affect Disord* 2016;190(2016):115–21.
- [10] Pawar AA, Peters A, Rathod J. Stigma of mental illness: a study in the Indian armed forces. *Med J Armed Forces India* 2014;70(4):354–9.
- [11] Rüschen N, Angermeyer MC, Corrigan PW. Mental illness stigma: concepts, consequences, and initiatives to reduce stigma. *Eur Psychiatr* 2005;20(8):529–39.
- [12] Hill K, Startup M. The relationship between internalized stigma, negative symptoms and social functioning in schizophrenia: the mediating role of self-efficacy. *Psychiatr Res* 2012;206(2–3):151–7.
- [13] Livingston JD, Boyd JE. Correlates and consequences of internalized stigma for people living with mental illness: a systematic review and meta-analysis. *Soc Sci Med* 2010;71(12):2150–61.
- [14] Świtaj P, Wciórka J, Smolarska-Świtaj J, Grygiel P. Extent and predictors of stigma experienced by patients with schizophrenia. *Eur Psychiatr* 2009;24(8):513–20.
- [15] Ow C-Y, Lee B-O. Relationships between perceived stigma, coping orientations, self-esteem, and quality of life in patients with schizophrenia. *Asia Pac J Publ Health* 2012;27(2):1932–41.
- [16] Lin C-Y, Chang C-C, Wu T-H, Wang J-D. Dynamic changes of self-stigma, quality of life, somatic complaints, and depression among people with schizophrenia: a pilot study applying kernel smoothers. *Stigma Heal* 2016;1(1):29–43.
- [17] Karakaş SA, Okanlı A, Yılmaz E. Archives of psychiatric nursing the effect of internalized stigma on the self-esteem in patients with schizophrenia. *Arch Psychiatr Nurs* 2016;30(6):648–52.
- [18] Link BG, Struening EL, Neese-Todd S, Asmussen S, Phelan JC. The consequences of stigma for the self-esteem of people with mental illnesses. *Psychiatr Serv* 2001;52(12):1–6.
- [19] Picco L, Pang S, Lau YW, Jeyagurunathan A, Satghare P, Abdin E, et al. Internalized stigma among psychiatric outpatients: associations with quality of life, functioning, hope and self-esteem. *Psychiatr Res* 2016;246(2016):500–6.
- [20] Kao YC, Lien YJ, Chang HA, Wang SC, Tzeng NS, Loh CH. Evidence for the indirect effects of perceived public stigma on psychosocial outcomes: the mediating role of self-stigma. *Psychiatr Res* 2016;240(2016):187–95.
- [21] Shimotsu S, Horikawa N. Self-stigma in depressive patients: association of cognitive schemata, depression, and self-esteem. *Asian J Psychiatr* 2016;24(2016):125–9.
- [22] Clement S, Schauman O, Graham T, Magsion F, Evans-Lacko S, Bezborodovs N, et al. What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychol Med* 2015;45(1):11–27.
- [23] Corrigan PW, Druss BG, Perlick DA. The impact of mental illness stigma on seeking and participating in mental health care. *Psychol Sci Publ Interest* 2014;15(2):37–70.
- [24] Crowe A, Averett P, Glass JS. Mental illness stigma, psychological resilience, and help seeking: what are the relationships? *Ment Heal Prev* 2016;4(2):63–8.
- [25] Shrivastava A, Johnston M, Bureau Y. Stigma of mental illness-1: clinical reflections. *Mens Sana Monogr* 2012;10(1):70–84.
- [26] Olçun Z, Şahin Altun Ö. The correlation between schizophrenic patients' level of internalized stigma and their level of hope. *Arch Psychiatr Nurs* 2017;1–6. Available from: <https://doi.org/10.1016/j.apnu.2017.03.001>.
- [27] Sirey JA, Bruce ML, Alexopoulos GS, Perlick DA, Friedman SJ, Meyers BS. Stigma as a barrier to recovery: perceived stigma and patient-rated severity of illness as predictors of antidepressant drug adherence. *Psychiatr Serv* 2001;52(12):1615–20.
- [28] Lawrence D, Kisely S. Inequalities in healthcare provision for people with severe mental illness. *J Psychopharmacol* 2010;24(4):61–8.
- [29] Bedaso A, Yeneabat T, Yohannis Z, Bedasso K, Feyera F. Community attitude and associated factors towards people with mental illness among residents of worabe town, silte zone, southern nations nationalities and peoples region, Ethiopia. *PLoS One* 2016;11(3):1–12.
- [30] Happell B, Gough K. Nursing students' attitudes to mental health nursing: psychometric properties of a self-report scale. *Arch Psychiatr Nurs [Internet]* 2009;23(5):376–86. Available from: <https://doi.org/10.1016/j.apnu.2008.10.005>.
- [31] Happell B, Gaskin CJ. The attitudes of undergraduate nursing students towards mental health nursing: a systematic review. *J Clin Nurs* 2012;22(1):148–58.
- [32] Hayman-White K, Happell B. Nursing students' attitudes toward mental health nursing and consumers: psychometric properties of a self-report scale. *Arch Psychiatr Nurs* 2005;19(4):184–93.
- [33] Hunter L, Weber T, Shattell M, Harris BA. Nursing students' attitudes about psychiatric mental health nursing. *Issues Ment Health Nurs* 2015;36(1):29–34. Available from: <http://www.tandfonline.com/doi/full/10.3109/01612840.2014.935901>.
- [34] Jack-ide IO, Amiegheme FE, Ongutubor KE. Undergraduate nursing students' mental health and psychiatric clinical experience and their career choice in Nursing: perspectives from the Niger delta region of Nigeria. *J Ment Disord Treat* 2016;2(2):116–21.
- [35] Markström U, Gyllenstein AL, Bejerholm U, Björkman T, Brunt D, Hansson L, et al. Attitudes towards mental illness among health care students at Swedish universities—a follow-up study after completed clinical placement. *Nurse Educ Today* 2009;29(6):660–5.
- [36] Hastings T. Nursing student attitudes toward mental illness: a quantitative

- quasi-experimental study. 2015. Available from, <http://gradworks.umi.com/37/36/3736711.html>.
- [37] Poreddi V, Thimmaiah R, Pashupu DR, Ramachandra Badamath S. Undergraduate nursing students' attitudes towards mental illness: implications for specific academic education. *Indian J Psychol Med* 2014;36(4):368–72.
- [38] Morrison R. Nursing students' attitudes toward people with mental illness: do they change after instruction and clinical exposure?. Available from, <https://honors.usf.edu/documents/Thesis/U00977266.pdf>; 2011.
- [39] Taylor SM, Dear MJ. Scaling community attitudes toward the mentally ill. *Schizophr Bull* 1981;7(2):225–40.
- [40] Alexander LA, Link BG. The impact of contact on stigmatizing attitudes toward people with mental illness. *J Ment Health* 2003;12(3):271–89.
- [41] Schafer T, Wood S, Williams R. A survey into student nurses' attitudes towards mental illness: implications for nurse training. *Nurse Educ Today* 2011;31(4):328–32.
- [42] Thongpriwan V, Leuck SE, Powell RL, Young S, Schuler SG, Hughes RG. Undergraduate nursing students' attitudes toward mental health nursing. *Nurse Educ Today* 2015;35(8):948–53.
- [43] Evans-lacko S, Little K, Meltzer H, Rose D, Rhydderch D, Henderson C, Thornicroft G. Development and psychometric properties of the mental health knowledge schedule. *Can J Psychiatr* 2010;55(7):440–8.
- [44] Gyllenstein AL, Bengt S, Björkman T, Hansson L, Leufstadius C, Bejerholm U, et al. Attitudes in healthcare students towards mental illness - a pre- and post multicenter university program survey. *Internet J Allied Health Sci Pract* 2011;9(3):1–8.
- [45] Karimollahi M. An investigation of nursing students' experiences in an Iranian psychiatric unit. *J Psychiatr Ment Health Nurs* 2012;19(8):738–45.
- [46] Locke CR. Public attitudes toward mental illness: an experimental design examining the Media's impact of crime on stigma. The Ohio State University; 2010.
- [47] Vijayalakshmi P, Reddy D, Math SB, Thimmaiah R. Attitudes of undergraduates towards mental illness: a comparison between nursing and business management students in India. *S Afr J Psychiatr* 2013;19(3):66–73.
- [48] Ewalds-Kvist B, Högberg T, Lützn K. Impact of gender and age on attitudes towards mental illness in Sweden. *Nord J Psychiatr* 2013;67(5):360–8.
- [49] Van Der Kluit MJ, Goossens PJJ. Factors influencing attitudes of nurses in general health care toward patients with comorbid mental illness: an integrative literature review. *Issues Ment Health Nurs* 2011;32(2005):519–27.
- [50] Hsiao C-Y, Lu H-L, Tsai Y-F. Factors influencing mental health nurses' attitudes towards people with mental illness. *Int J Ment Health Nurs* 2015;24(3):272–80.
- [51] Chiles C, Stefanovics E, Rosenheck R. Attitudes of students at a US medical school toward mental illness and its causes. *Acad Psychiatr* 2016;41(3):320–5.
- [52] Günay S, Bekitkol T, Beycan Ekitil G, Yildirim S. Determination of the mental disorder beliefs of students in a nursing faculty. *J Psychiatr Nurs* 2016;7(3):129–34.
- [53] Kosyluk KA, Al-Khouja M, Bink A, Buchholz B, Ellefson S, Fokou K, et al. Challenging the stigma of mental illness among college students. *J Adolesc Health* 2016;59(3):325–31.
- [54] Garg R, Shah S, Kataria L, Sharma D. Impact of psychiatry postings on attitudes towards mental illnesses and psychiatry - a comparative study done on medical and nursing students. *Eur J Patient Diagnosis Clin Res* 2013;2(2013):140–4.
- [55] Penn DL, Couture SM. Strategies for reducing stigma toward persons with mental illness. *World Psychiatr* 2002;1(1):20–1.
- [56] Martensson G, Jacobsson JW, Engström M. Mental health nursing staff's attitudes towards mental illness: an analysis of related factors. *J Psychiatr Ment Health Nurs* 2014;21(9):782–8.
- [57] Santos S da S, Soares MH, Hirata AGP. Attitudes, knowledge, and opinions regarding mental health among undergraduate nursing students. *Rev Esc Enferm USP* 2013;47(5):1195–202.
- [58] Tork HMM, Abdel-fattah AES. Female students' attitude toward mental illness in qassim. *Am J Nurs Sci* 2015;4(3):50–6.
- [59] Angermeyer MC, Matschinger H, Corrigan PW. Familiarity with mental illness and social distance from people with schizophrenia and major depression: testing a model using data from a representative population survey. *Schizophr Res* 2004;69(2–3):175–82.
- [60] Angermeyer MC, Matschinger H. The effect of personal experience with mental illness on the attitude towards individuals suffering from mental disorders. *Soc Psychiatr Psychiatr Epidemiol* 1996;31(6):321–6.
- [61] Corrigan PW, Edwards AB, Green A, Thwart SL, Perm DL. Prejudice, social distance, and familiarity with mental illness. *Schizophr Bull* 2001;27(2):219–26.
- [62] Couture SM, Penn DL. Interpersonal contact and the stigma of mental illness: a review of the literature. *J Ment Health* 2003;12(June):291–305.
- [63] Evans-lacko S, Henderson C, Thornicroft G. Public knowledge, attitudes and behaviour regarding people with mental illness in England 2009 – 2012. *Br J Psychiatry* 2013;202(5):51–7.
- [64] Kelly C. College students attitudes towards mental illness in relation to gender, empathy, agreeableness and exposure. DBS School of Arts; 2014.
- [65] Phelan JE, Basow SA. College students' attitudes toward mental illness: an examination of the stigma. *J Appl Soc Psychol* 2007;37(12):2877–902.
- [66] Radhakanth C, Vijayalakshmi D, Rahul P, Reddy KTR. A comparative study of attitudes towards mental illness among nursing students. *Indian J Psychiatr* 2016;15(9):8–11.
- [67] Rogge J. Changes in nursing student attitudes toward mental illness. Western Michigan University; 2005.
- [68] Girma E, Tesfaye M, Froeschl G, Möller-Leimkühler, Anna Maria Müller N, Dehning S. Public stigma against people with mental illness in the gilgel gibe field research center (GGFRC) in southwest. *PLoS One* 2013;8(12), e82116.

vestigation_of_Attitude_toward_mental_illness_Sri_Padma...

ORIGINALITY REPORT

18%

SIMILARITY INDEX

13%

INTERNET SOURCES

8%

PUBLICATIONS

6%

STUDENT PAPERS

PRIMARY SOURCES

1	open.library.ubc.ca Internet Source	1%
2	www.fx361.cc Internet Source	1%
3	www.kyoto2.org Internet Source	1%
4	Submitted to Staffordshire University Student Paper	1%
5	Submitted to University of Cape Town Student Paper	1%
6	listens.online Internet Source	1%
7	Submitted to AUT University Student Paper	1%
8	Submitted to University of Gloucestershire Student Paper	1%
9	aizenberglab.seas.harvard.edu Internet Source	1%

10	erepository.uonbi.ac.ke Internet Source	1 %
11	Vijayalakshmi Poreddi, Rohini Thimmaiah, Dharma Reddy Pashupu, Ramachandra, Suresh Badamath. "Undergraduate Nursing Students' Attitudes towards Mental Illness: Implications for Specific Academic Education", Indian Journal of Psychological Medicine, 2014 Publication	1 %
12	bmcmmededuc.biomedcentral.com Internet Source	1 %
13	archive.org Internet Source	<1 %
14	"The Stigma of Mental Illness - End of the Story?", Springer Science and Business Media LLC, 2017 Publication	<1 %
15	etflin.com Internet Source	<1 %
16	Submitted to Middlesex University Student Paper	<1 %
17	Cori L. Tergesen, Dristy Gurung, Saraswati Dhungana, Ajay Risal et al. "Impact of Service User Video Presentations on Explicit and Implicit Stigma toward Mental Illness among	<1 %

Medical Students in Nepal: A Randomized Controlled Trial", International Journal of Environmental Research and Public Health, 2021

Publication

18

Submitted to Development Academy of the Philippines

Student Paper

<1 %

19

Sailaxmi Gandhi, Vijayalakshmi Poreddi, Radhakrishnan Govindan, Jothimani G et al. "Knowledge and perceptions of Indian primary care nurses towards mental illness", Investigación y Educación en Enfermería, 2019

Publication

<1 %

20

cpc2020.sched.com

Internet Source

<1 %

21

hrcak.srce.hr

Internet Source

<1 %

22

isiarticles.com

Internet Source

<1 %

23

Ling Shen, Xiao Zhang, Jingyi Chen, Yidan Yang, Rong Hu. "Exploring the Experience of Undergraduate Nursing Students following Placement at Psychiatric Units in China: A Phenomenological Study", Nurse Education in Practice, 2023

Publication

<1 %

24

www.hscic.gov.uk

Internet Source

<1 %

25

Amy L. Shearer, Elizabeth Roth, Mathew S. Cefalu, Joshua Breslau et al. "Contact With Persons With Mental Illness and Willingness to Live Next Door to Them: Two Waves of a California Survey of Adults", *Psychiatric Services*, 2021

Publication

<1 %

26

Takashi Yamauchi, Tsuneo Semba, Anju Sudo, Nobuko Takahashi et al. "Effects of psychiatric training on nursing students' attitudes towards people with mental illness in Japan", *International Journal of Social Psychiatry*, 2010

Publication

<1 %

27

bmcp psychology.biomedcentral.com

Internet Source

<1 %

28

ijahsp.nova.edu

Internet Source

<1 %

29

www.dovepress.com

Internet Source

<1 %

30

meddocsonline.org

Internet Source

<1 %

31

www.grafiati.com

Internet Source

<1 %

32

www.journaljpri.com

Internet Source

<1 %

33

www.ojpas.com

Internet Source

<1 %

34

Eduardo Adrian Leiderman, Gustavo Vazquez, Candela Berizzo, Ana Bonifacio et al. "Public knowledge, beliefs and attitudes towards patients with schizophrenia: Buenos Aires", *Social Psychiatry and Psychiatric Epidemiology*, 2010

Publication

<1 %

35

Figen Şengün İnan, Neslihan Günüşen, Zekiye Çetinkaya Duman, Melike Yönder Ertem. "The Impact of Mental Health Nursing Module, Clinical Practice and an Anti-Stigma Program on Nursing Students' Attitudes toward Mental Illness: A Quasi-Experimental Study", *Journal of Professional Nursing*, 2019

Publication

<1 %

36

ajph.aphapublications.org

Internet Source

<1 %

37

docs.neu.edu.tr

Internet Source

<1 %

38

esource.dbs.ie

Internet Source

<1 %

39

idoc.pub

Internet Source

<1 %

40

s9423e139345e2186.jimcontent.com

Internet Source

<1 %

41

semarakilmu.com.my

Internet Source

<1 %

42

www.healio.com

Internet Source

<1 %

43

www.scielo.org.za

Internet Source

<1 %

44

www.springermedizin.de

Internet Source

<1 %

45

Kerim Munir, Ozgur Oner, Coskun Kerala, Ikram Rustamov et al. "Social distance and stigma towards persons with serious mental illness among medical students in five European Central Asia countries", Psychiatry Research, 2022

Publication

<1 %

Exclude quotes On

Exclude matches Off

Exclude bibliography On