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### Attitude of health care workers towards mental illness

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**Conflicts of Interest:** Nil

### **Abstract**

**Introduction:** Globally, people with mental illness frequently encounter stigma and discrimination not only by the public, but also by the health care workers. Negative attitudes toward psychiatric disorders lead to compromised patient care toward mentally ill persons. The problem of stigma related to mental illness within healthcare is an area receiving increased attention and concern.

**Objectives:** To study the attitude of health care workers towards mental illness and study the socio-demographic factors related to the attitude towards mental illness.

Material & method: A descriptive cross-sectional study was conducted in Dr. V.M. govt. medical college& Shri Chhatrapati Shivaji Maharaj sarvopcharrugnalay Solapur during 1<sup>st</sup> November 2021 to 31<sup>st</sup> December 2021. All the residents and interns working at Dr. V. M. Govt. Medical college and SCSMSR Solapur who were willing to take part in study are included in study. Mental Illness Clinicians Attitudes (MICA) Scale is use to study the attitudes.

**Results:** The study included total 220 residents and interns working at Dr. V.M. Govt medical college & CSMSR Solapur. Most of the study participants i.e. 94.56% were from age group of 20-29 years, out of

which 48.19% study participants were male and 51.18% were females. Respondent have the most favorable attitude while answering the questions related to importance of physical health in mental health care(86.8%), respectability being mental health care professional (86.4%),respect for the person(82.7%) & colleague(78.2%) having mental illness.

Conclusion: nearly half respondents had negative attitude towards mental illness. No association seen between family history of mental illness and personal experience of mental illness with attitude towards mental illness.

**Keywords:** attitudes, health care worker, mental illness, mental illness clinicians' attitudes (mica) scale.

### Introduction

Globally, people with mental illness frequently encounter stigma and discrimination not only by the public, but also by the health care workers. According to world health organization, it was estimated that there are 450 million people in the globally, currently suffering from some or other kind of mental illness and constitutes 14% of the global burden of disease. [1,2]psychiatric patients, especially vagrant psychotics, are seen as worthless, dirty, senseless, dangerous and unpredictable section of society which are the reasons for unfavorable attitudes. [3]

Adverse attitudes towards the mental illness are found in all societies in world. The belief that mental illness is incurable can also be damaging, leading to patients not being referred for appropriate mental health services.<sup>[4]</sup> Negative attitudes toward psychiatric disorders lead to compromised patient care toward mentally ill persons. Unfavourable attitudes toward psychiatric disorders have an impact on the lives of not only the patients but also their caregivers. This stigma can

Obstruct The Provision Of Adequate And Appropriate Services To Persons With Mental Illness.<sup>[5,6]</sup>

The problem of stigma related to mental illness within healthcare is an area receiving increased attention and concern. A great effort has been made around the world to decrease mental-illness-related stigma among health care workers. Education Not Discrimination (END) is one of the components of the Time to Change program, which aims to reduce mental health stigma among healthcare professionals and professional students. [7-9] In India, there are only some studies related to attitude toward mental illness. Further research is essential to study the attitude toward mental illness among health care workers for reducing the stigma. The present study was undertaken to find out the attitude of health care workers toward mental illness.

## **Objectives**

- To study the attitude of health care workers towards mental illness.
- To study the socio-demographic factors related to the attitude towards mental illness.

#### Material & method

A descriptive cross-sectional study was conducted in Dr. V.M. govt. medical college& Shri Chhatrapati Shivaji maharaj sarvopcharrugnalay Solapur during 1<sup>st</sup> November 2021 to 31<sup>st</sup> December 2021.

### **Study population**

All the residents and interns working at Dr. V. M. Govt. Medical college and SCSMSR Solapur who were willing to take part in study are included in study.

#### **Exclusion criteria**

Residents and interns not willing to participate in study.

Out of 130 resident and 137 interns working in Dr. V.

M. Govt. Medical College and SCSMSR Solapur 100

residents and 120 interns gave consent for participation in study, so they are were included in study.

### **Study method**

Institutional ethics committee approval was obtained before start of study. Respondents were explained the nature of the study and its purpose. Informed consent was taken and anonymity was preserved. Online Google forms were sent to all respondents by WhatsApp.

#### **Data collection tool**

A well-structured self- administrate questionnaire was used to collect the data from the respondents. It included demographic characteristics and the sixteen items Mental Illness Clinicians Attitudes (MICA) Scale (version 4.0).<sup>[14]</sup>This scale was used to measure the health care professional attitude towards mental illness with answers ranging on a six-point Likert scale. Question number 3,9,10,11,12and 16, were scored as follows:

Strongly agree = 1,

Agree = 2,

Somewhat agree =3,

Somewhat disagree = 4

Disagree = 5

Strongly disagree = 6.

All the other questions were reverse-scored. Scores on individual question were summed to obtain the overall score for each participant within a range of 16-96 points. A higher global score indicates a more negative perception of mental illness and the field of mental health. The scale had low rates of missing data, good readability and took less than 4 minutes to complete.

### **Data analysis**

The descriptive and inferential data analysis was done by using Microsoft excel software after proper coding of collected data. Chi square test of independence is used to find association between socio-demographic variables and attitude toward mental illness.

#### Results

The study included total 220 residents and interns working at Dr. V.M. Govt medical college &CSMSR Solapur.Most of the study participants i.e., 94.56% were from age group of 20-29 years. The mean age of participants was 26.65 years, with standard deviation of 2.95, out of which 48.19% study participants were male and 51.18% were females. Majority of study participants were Hindu by religion i.e., 89.54%.91.81% study participants were unmarried. No significant association found between any socio-demographic characteristics and attitude towards mental illness. (Table 1)

Table 1: Distribution of study participants according to socio-demographic characteristics.

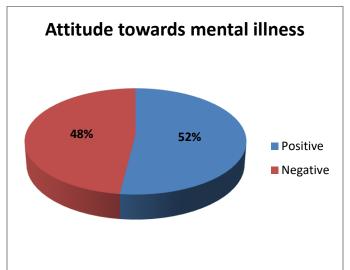
Variables	Category	Frequency (220)	Percentage (%)
Gender	Male	114	48.19
	Female	106	51.81
Age	20-29	208	94.56
	30-39	10	4.54
	40-49	2	0.90
Religion	Hindu	197	89.55
	Muslim	10	4.55
	Buddhist	11	5.00
	Jain	2	0.90
Marital status	Unmarried	202	91.81
	Married	18	8.19
Health care worker	Resident	100	45.46
	Intern	120	54.54

Table 2: Factors associated with attitude towards mental illness.

Variable	Attitude statu	Attitude status	
	Positive	Negative	
Personal expe	rience of mental illi	ness	1
YES	16	14	0.9
NO	99	91	
Family history	of mental illness		
Yes	13	17	0.29
No	102	88	

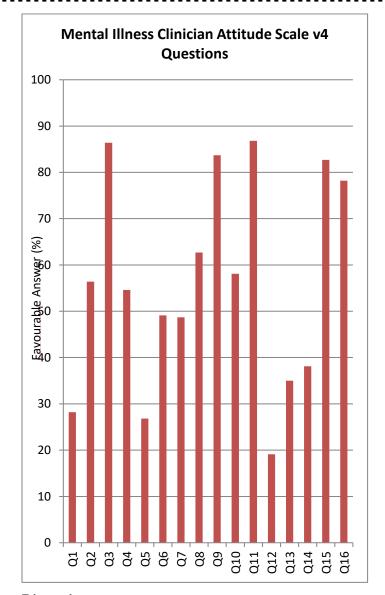
52 % respondents showed the positive attitude towards mental illness. Mean score attitude is 59 with standard deviation of 8.05. (fig.1)

Figure 1: Distribution of study participants according to their attitude towards mental illness.



Study participants have the most favorable attitude while answering the Questions related to importance of physical health in mental health care (86.8%), respectability being mental health care professional (86.4%), respect for the person (82.7%) & colleague (78.2%) having mental illness. Unfavorable attitudes were seen towards need for the protection from people with mental illness (19.1%) dangerousness of people with mental illness (26.8%) gaining knowledge on mental health care (28.2%). Interaction with people with mental health problem in clinical practice (35%) role of health care professionals in accessing the mental health at primary health center (38.1%).(Fig.2)

Fig. 2: Mental Illness Clinician Attitude Scale v4 Questions- percent distribution of favorable answers.



# Discussion

Attitude is determined hypothetically, that represents an individual's like or dislike for questions; which may be positive, negative, or neutral. It originates from his/her judgments and has affective, and cognitive components or from the experiences. Present study includes residents and intern doctors as a immediate health care workers. Hence, the orientation of them toward the management of mental problems in physically ill patients during medical training shapes their attitude to mental illness as a disease. This attitude will help in their perspectives and attitudes in future while dealing such illness.

In present study, 52 % study participants showed the positive attitude towards mental illness which was more than the negative attitude. Study participants have the most favorable attitude while answering the Questions related to importance of physical health in mental health care(86.8%), respectability being mental health care professional (86.4%), respect for the person(82.7%) & colleague(78.2%) having mental illness. Unfavorable attitudes were seen towards need for the protection from people with mental illness (19.1%) dangerousness of people with mental illness (26.8%) gaining knowledge on mental health care (28.2%). Interaction with people with mental health problem in clinical practice (35%) role of health care professionals in accessing the mental health at primary health center (38.1%). No significant association found between any socio-demographic characteristics and attitude towards mental illness.

Various studies on attitude of medical related professionals towards patient with mental illness, found a strong relation between contacts with mental illness and stigmatization attitudes toward mental illness. [1,3,4] Similar to present study Poreddi, *et al* [1] in their study found the positive attitudes among final year medical students. Lim, L *et al* [13] in their study showed that, compared to the other ethnic groups, Indian staff seemed most comfortable in handling patients with psychiatric disorders in addition to those with medical conditions.

In India, like most of the developing countries where priorities are different, mental health has been a largely ignored field; in fact that it is integral component of total health. Our study demands more aspects of attitude towards the patient of mental illness.

### Conclusion

Nearly half respondents had negative attitude towards mental illness. No association seen between family history of mental illness and personal experience of mental illness with attitude towards mental illness. Favorable attitude towards Psychiatry as profession and respect for colleague with mental illness seen. Unfavorable attitude seen towards dangerousness of mentally ill person and acquiring knowledge related to mental health care.

### Recommendation

Educational programs to raise the awareness on mental health may help in improving the attitude of health care worker towards mental illness. Regular training at various levels of health care i.e. Primary, secondary and tertiary in assessment of patient with psychiatric symptoms will improve the quality of care received by mentally ill patients.

#### Limitation

Study inherits all the limitations of cross-sectional study. Subjective variation of the individuals could be possible limiting factor. In health care workers only residents and intern doctors were included in studies. Only one tertiary center is covered so, we cannot generalize the result of the study.

## **Ethical consideration**

Study is ethically approved from institutional ethics committee. Verbal consent was obtained from study participants.

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