Original Research Article

A Study to Assess the Attitude toward Misconception Regarding Mental Illness among People

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ABSTRACT

Non experimental descriptive, research designs has been used to assess the misconception regarding mental illness among people in Dhainpura in the present study. A structured interview schedule was carried out to assess the misconception about mental illness of 50 people in Dhainpura. Structure interview schedule was developed. Tool validity was determined by experts' opinion from the field of nursing. The reliability of tool was tested and tool found to be reliable (r=0.82). Pilot study was done to determine the feasibility of the study and study found to be feasible Data was analyzed by using descriptive statistics. A total of 50 residents of Dhainpura were selected by using convenient sampling. Data were collected with the help of structured interview schedule. The total mean score ±SD was 80.26±20.13**.** The study revealed that 50% people of village Dhainpura. Most of mental illnesses 40% were in the age group of 18-24 years. Most of the people 22% were upto graduation. Majority of the people 62% were married and according to the area of residence maximum people 50% were belong to rural area. Majority of people 50% were belong to Sikh religion. So, all these variables affect the misconception regarding mental illness.

Key words:- misconception, mental illness.

INTRODUCTION
Background of Study

Mental illness is mal adjustment in living. It produces a disharmony in the person's ability to meet human needs comfortably or effectively and function within a culture. A mentally ill person loses his ability to respond according to the expectations he has for himself and the demands that society has for him. [1] Misconceptions about mental illness are pervasive, and the lack of understanding can have serious consequences for millions of people who have a psychiatric illness. Many mentally ill people are the victims of stigma and misconceptions, which leads to additional suffering and humiliation.

Negative stereotypes and prejudicial attitudes against them are often reinforced by their media representation as unpredictable, violent and dangerous. Hence the importance of the study of these misconceptions helps in the management of the mentally ill in our societies. [1] In our society especially in rural communities the persons with psychiatric illness often perceived as unwanted elements, and societal stigma prevents them from seeking help and treatment. In recent years the awareness about mental illness has been changed a lot, even if the misconceptions about mental illness still present in society. Many studies done by WHO and other agencies points the need of awareness

programmes in the society for eradicating stigma. The Indian mental health act, 1987, is an amendment of the Indian lunacy act, 1912.The present act recognizes the crucial role of treatment and care of mentally ill persons. But still in some part of our country mental illnesses are considered as sins and witchcraft, and these believes prevent them from seeking medical help. Mental health professionals can play a major role in prevention of misconception among communities. [1] Mental and behavioural disorders are understood as clinically significant conditions characterized by alteration in thinking, mood (emotions) or behaviour associated with personal s of mental disorder as these may influence the willingness of the subjects to declare symptoms in the course of surveys of psychiatric disorder, declaration will also depend on the prevailing concepts of mental disorder in the society. [1]

Objective

To assess the misconception regarding mental illness.

MATERIALS AND METHODS

To assess the attitude toward misconception regarding mental illness among people residing in dhainpura kurali Punjab.Convenient sampling technique was used to select study subjects (50) residents of Dhainpura.. Samples were selected with non-random method. A structured interview schedule was developed first in English and then translated in Hindi and Punjabi language. Seven experts from the field of psychiatric nursing determined the content validity of the tool. The reliability of the tool was tested by using Karl Pearson's correlation Formula, tool was found highly reliable. Internal consistency of the tool was (r= 0.82). Pilot study was conducted on eight study participants to check the clarity, feasibility and practicality of the study. It took around 20 min on an average to complete interview from each study participant. The respondents clearly and easily understood the language and study

found to be feasible. Ethical clearance to conduct the study was obtained from institutional committee of Saraswati nursing Institute, Punjab, India. The permission for data collection was obtained from the concerned authority; the investigator assured the anonymity to the study participants, and their consent was obtained. The data has been collected from 50 people who fulfill the sampling criteria from 28.01.2015 to 30.01.2015. Using structured interview schedule which was prepared in Hindi.

RESULTS

Section 1
Socio demographic characteristics of subjects

Characteristics	Frequency	Percentage
AGE(YEARS)		
☐ 18-24	20	40%
☐ 25-31	12	24%
☐ 32-36	9	18%
☐ Above 36	9	18%
Sex		
☐ Male	25	50%
☐ Female	25	50%
EDUCATION STATUS		
☐ 5TH	8	8%
☐ 10TH	0	0%
☐ 10+2	30	60%
☐ Under graduate	11	22%
☐ Above graduate	1	2%
Occuption		
☐ House Wife	17	34%
☐ Govt jobs	1	2%
☐ Business	17	34%
☐ Others	15	30%
MARITAL STATUS		
☐ Married	31	62%
☐ Unmarried	14	28%
☐ Separate	4	8%
☐ Divorce	1	2%
Income		
☐ 5000	25	50%
☐ 5001-10000	16	32%
☐ 10000-25000	3	6%
☐ Above 2500	5	10%
Family		
☐ nuclear	30	60%
☐ joint	20	40%

Table 1 shows that majority of misconception people 20% belong to the age group of 18-24 year and 9% were in the age group of 32-36.9% people belong to 36-70years. Finding of marital status shows that majority of 31% people were married and 14% were unmarried. The result shows

that most of the people belong to rural area and. In people education maximum people 30% were 10+2, 11% were graduate and 1% above graduate and 8% were 5th pass. In people religion majority of people 50% belong to Sikh religion, Hence the table shows that maximum people belong to 18-24 age group. The number of people 50% were belongs from Sikh religion. The number of people 50% belongs to rural area. Maximum people education were 10+2 And the majority of people were married.

Section 2

TABLE: 2: Percentage distribution of attitude toward misconception regarding mental illness.

Attitude	Frequency(f)	Percentage (%)
Positive Attitude	28	56%
Negative Attitude	22	44%

The table depicts that 28(56%) subjects had positive attitude and 22(44%) subjects had negative attitude toward mental illness.

TABLE: 3 Mean, SD and Mean percentage of people of attitude of mental illness.   N=50

Maximum score	Mean±SD	Mean %
50	80.26.4±20.13	12.66%

TABLE:4: Item wise analysis showing attitude of each statement.

Sr.no.	Statement	Almost Totally disagree	Sometime agree	Totally agree
1)	*People with mental illness have unpredictable behaviour.*	6	9	19
2)	*If people become mentally ill once, they will easily become ill again.*	2	9	23
3)	*Mental patients and other patients should not be treated in the same hospital.*	7	6	18
4)	*People with mental illness tend to be violent.*	1	12	22
5)	*People with mental illness are dangerous.*	4	10	20
6)	*People with mental illness should be feared.*	7	9	17
7)	*You can easily tell who has a mental illness by the characteristics of their behaviour..*	3	7	31
8)	*People with mental illness have a lower I.Q.*	3	3	23
9)	*All people with mental illness have some strange behaviour.*	2	10	23
10)	*It is not appropriate for a person with mental illness to get married.*	5	5	22
11)	*Those who have a mental illness cannot fully recover.*	9	5	12
12)	*Those who are mentally ill should not have children.*	5	3	15
13)	*There is no future for people with mental illness.*	5	7	13
14)	*After a person is treated for mental illness they can return to their former job position.*	2	7	31
15)	*After people with mental illness are treated and rehabilitated, we still should not make friends with them.*	5	3	11
16)	*After people with mental illness are treated, they are still more dangerous than normal people.*	5	8	16
17)	*It is possible for everyone to have a mental illness.*	3	5	29
18)	*We should not laugh at the mentally ill even though they act strangely.*	4	2	26
19)	*After treatment it will be difficult for the mentally ill to return to the community.*	7	6	18
20)	*People are prejudiced towards those with mental illness.*	3	7	32
21)	*It is hard to have good friends if you have a mental illness.*	3	3	28
22)	*It is seldom for people who are successful at work to have a mental illness.*	4	8	15
23)	*It is shameful to have a mental illness.*	10	3	6
24)	*Mental illness is a punishment for doing some bad things.*	7	4	11
25)	*I suggest that those who have a mental illness do not tell anyone about their illness.*	6	1	9

Table 4 revealed that out of 50 respondents, 19(38%) were agree that people with mental illness show unpredictable behaviour. 23 (46%) were agree with the statement if people become mentally ill once, they will easily become again. 18 (36%) were agree with mental patients and other patients should not be treated in the same hospital. 22 (44%) were agree with mental illness tend to be violent.. 20 (40%) with mental illness are dangerous. but 17(34%) agree with mental illness should be feared. 31 (62%) agree with mental illness by the characteristics of their behaviour. 23 (46%) were agree with the statement mental illness have a lower I .Q. 23 (46%) were agree with the mental illness have some strange behaviour. 22(44%) were agree it is not appropriate for a person to get married. 12(24%) were agree with mental illness cannot fully recover. 15 (30%) agree that mentally ill should not have children,.

13(26%) with the statement there is no future for people with mental illness .31(62%) agree after treatment for mental illness they can return to their former job position. 11(22%) mental illness are treated and rehabilitated we still should not make friends with them. 16 (32%) agree with that mental illness are treated, they are still more dangerous than normal people. 29 (58%) agree it is possible for everyone to have a mental illness. 26 (52%) agree we should not laugh at the mentally ill they act strangely. 18 (36%) agree with the statement after treatment it is difficult for mentally ill return to the community. 32 (64%) agree people are prejudiced toward those with mental illness. 28 (56%) agree with the statement it is hard to have good friends if you have mental illness. 15 (30%) agree it is seldom for people who are successful at work to have a mental illness. 10(20%) disagree with mental illness is shameful. 11(22%) agree with mental illness is punishment for doing some bad things. 9(18%) agree I suggest that those who have a mental illness do not tell anyone about their illness.

DISCUSSION

The present study was conducted to assess the misconception regarding mental illness people. In order to achieve the objectives of the study, descriptive approach was adopted; convenient sampling technique was used to select the samples.

The present study shows that 56% of the people show the positive attitude, 44% negative attitude toward misconception regarding mental illness.

Similar finding were observed in a study conducted by Vanheusden-K 2008 to assess the knowledge and attitude towards mental illness in community area. This study aims to determine knowledge and attitude of a representative community samples, multistage clustered sample of 2040 individuals participated and results showed that poor knowledge of causation was common, negative views of mental illness were widespread with as many as

96.5% (SD = 0.5) believing that people with mental illness are dangerous because of their violet behaviour, most would not tolerate even basic social contact with a mentally ill person 82.7% (SE = 1.3). [3,4]

Similar finding were observed in study was conducted by Oye Gureje et al [5] on Community study of knowledge and attitude to mental illness. The aim of the study was to determine the knowledge and attitudes to mental illness among 2040 representative community sample in Nigeria. The Result shows that Poor knowledge of causation was common. Negative views of mental illness were widespread, with as many as 96.5% (SD=0.5) believing that people with mental illness are dangerous because of their violent behaviour.

Limitations of the Study
- The researcher confirmed her study only in the Dhainpura, Kurali, Punjab.
- Only people were included in the study.
- Convenient sampling used to collect the sample.

Conflict Of Interest
Authors do not have any relationships/ condition/circumstances that present a potential conflict of interest.

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