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A Study to Assess the Level of Knowledge Regarding Mental Illness Among Student in Selected Nursing Institute

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ABSTRACT

Mental illness is one of the leading health problems worldwide. It affects the person in physiological and psychological response, Majority of the population struggles from mental disorder every year. The aim of the study is to assess the knowledge of mental illness among I year B.Sc. (N) students in selected nursing colleges of Kanyakumari District. Materials and Methods: Descriptive survey design was adopted for this study. The sample consisted of 30 students. The conceptual framework utilized for the study is Roys Adaptation Model. The investigators gave a brief introduction and detailed explanation regarding the purpose of the study. The tool consists of two sections. Section A consists of demographic variables and section B consisted of structured questionnaire with 25 questions with having 4 alternatives regarding Mental illness. Knowledge was assessed using the structured questionnaire through interview schedule. Conclusion: The finding shows that 56.66% of subjects are with adequate knowledge, 43.33% of subjects are with moderate knowledge and none of subjects are with adequate knowledge. Also, it was found that there is a significant association between the knowledge and demographic variables such as age, gender, religion, family history of mental illness, socio economic background and sources of previous knowledge and no association between marital status and type of family.

KEY WORDS: knowledge, mental illness, nursing students

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INTRODUCTION

Mentally stable means when an individual is known about themselves, free of stress and tension, without unwanted thoughts, identifies the positive and negative aspects of life, aware of the surroundings etc. These individuals be good to the society, they are acceptable by the peers and have greater satisfaction for their life. There are various criteria of mental health, those criteria are adequate contact with reality, control of thought and imagination, efficiency in work and play, social acceptance, positive self-concept, a healthy emotional life. If the individuals cannot fulfil these criteria will lead to mental illness. Mental health is an ability to cope, manage changes, life's events and

transition such as bereavement or retirement. All human being has natural mental health needs, no matter what the state of their psyche. Mental illness is a condition that disturbed a person's thinking, mood, ability to relate to other and daily functioning. Mental illness is very common. One fifth of Americans suffer from mental disorder in a year and one fifth of school age children are also affected by these diseases. Mental illness maybe manifested in various ways such as ineffective problem solving, poor reality testing and impaired cognitive functioning. Mental illness affects one in four people in the world-by-world Health report. There is still no cure because of stigma. Thus, mental health problem constitutes one of the major health

problems in community. These were a general belief that clients with mental health problem were potentially dangerous. For mental health care to become accessible within existing resource they are constraints, it must be provided through primary health services. Geographical closer to user increasing likelihood that people seek help early in the illness. Finally, mental health care through primary health services is less expansive and make cost effective both for service providers and recipients. Community health nurses should work with families at all levels of functioning, Individuals have been members of family system. Thus, past and present family system, family relationship affects a patient's self-concept, behaviour expectations, values and beliefs, understanding, principles of family dynamics and interventions is important. It helps a community health nurse make more acute observations of the individual as well as family.

NEED FOR THE STUDY

A mentally ill person loses his ability to respond according to the expectation he has for himself and the demands that society has for him. World Health Organization reported the prevalence of psychiatric disorders is 582 per thousands and which means that there are about 5.7 crore people suffering from some sort of psychiatric disturbance. Out of this, 4 lakh-people have organic psychosis, 26 lakh people have schizophrenia, and 1.2 crore people have effective psychosis. Thus, there are about 1.5 crore people suffering from severe mental disorders, besides 12,000 patients in government mental hospital. According to National Institute of Mental Health and Neuroscience (2015), the number of cases reported due to mental illness are 1-2% neurosis, psychosomatic diseases 2-3% mental retardation 0.5-1%, psychiatric disorder in children 1- 2.1%. outpatient department attended in government hospital 3.63 million for year. The general trend of studies carried out so far in India, indicated lack of knowledge on mental illness and a tendency to maintain social distance from the mentally ill and to reject them makes its existence felt. A cross sectional survey was conducted among 254 Qatari's, in which 49.6% were Qatari's 50.4% were Arab expatriates they responded through that substance abuse, alcohol and drugs result in mental illness.

In Scotland it was widely accepted by militant nurses that mental illness occurred commonly, can be effectively treated in the community and the main risk of harm is to patient themselves. In Nepal, a study revealed some findings that's around 37.5% people thought mentally ill

people are insane. About 3/4th was ready to work together (71.8%) and chat with them (91.8%). In Tamil Nadu, the age group between 40 and 49 years was predominantly affected. The prevalence of substance use disorders was highest in 50 - 59 years of age (29.4%). The gender prevalence of psychotic disorder was nearly similar, male 1.5% and female 1.3%. The prevalence of anxiety disorders was 3.6% and depressive disorders 0.8%. In TamilNadu, a total of 7908 mental disorder cases reported. Most cases occurred in the age group of 30-44 years. They are more among females than males of the case, most of them were mood disorders. The prevalence of anxiety is about 10%, 2-3% suffers from psychoclaromatic disorders and neurosis, 30% were Alzheimer disease and 4 other cases. These above experiences, thoughts and different studies provoked the investigator to assess the knowledge of nursing students on mental illness. However, nursing students have the adequate knowledge regarding mental illness. Misconceptions about mental illness should be removed form nursing students.

STATEMENT OF THE PROBLEM

A study to assess the level of knowledge regarding mental illness among I year B.Sc. (N) student in selected nursing colleges at Kanyakumari District.

OBJECTIVES

To assess the level of knowledge regarding mental illness among I year B.Sc. Nursing students.

To find out the association between the knowledge of mental illness with their demographic variables like age, gender, religion, type of family, family history of mental illness and source of information.

MATERIALS AND METHODS

The present study was aiming at assessing level of knowledge regarding mental illness among I year B.Sc. (N) students in selected nursing colleges at Kanyakumari District. Quantitative approach was adopted for the study. The research design used for this study was descriptive survey design. The study was conducted in Thasiah College of Nursing at Marthandam. Based on the objective's questionnaire was prepared to assess the level of knowledge. The tool was formulated on the basis of review of literature and discussion with the experts in the field of nursing. The tool consisted of structured knowledge questionnaire to assess the knowledge regarding mental illness. It consisted of two sections. Section I consisted of

demographic data of the students which includes age, gender, religion, type of family, family history of mental illness and previous knowledge. Section II consisted of structured questions to assess the level of knowledge regarding mental illness among 1 year B.Sc. Nursing students. It consists of 25 questions. Scoring Procedures, A score of "one" was allotted for every correct answer and score "zero" was allotted for every wrong answer according to the category. The total score was calculated and converted into percentage and resulting score rank as follows.

Scoring Interpretation

Table 1 Scoring Interpretation

Level of Knowledge	Score
Inadequate Knowledge	0-49
Moderate Knowledge	50 - 74
Adequate Knowledge	75 - 100

Table 2 Frequency and Percentage Distribution of subjects based on Demographic Variables

S.No	Demographic Variables	Frequency	%
1.	Age		
	a) 16 - 18 years	17	56.67
	b) 19 – 21 years	13	43.33
2.	Sex		
	a) Male	0	0
	b) Female	30	100
3.	Religion		
	a) Hindu	14	46.67
	b) Christian	16	53.33
	c) Muslim	0	0
	d) Others	0	0
4.	Marital status		
	a) Married	0	0
	b) Single	30	100
5.	Type of family		
	a) Nuclear family	8	26.67
	b) Joint family	22	73.33
6.	Family History of Mental illness		
	a) Yes	3	10
	b) No	27	90
7.	Socio Economic Background		
	a) Low	3	10
	b) Middle	26	86.66
	c) High	1	3.33
8.	Source of information		
	a) Mass media	13	43.33
	b) Health workers	13	43.33
	c) Others	4	13.34

The data presented in table 1 shows that the age of subjects 56.66% belongs to 16 - 18 years and 43.33% belongs to 19 - 21 years. All 100% subjects were females and unmarried. According to religion 46.66% belongs to Hindu, 53.33% belonged to Christianity and none of the subjects belonged to Muslim. 26.66% belong to joint family and 73.33% belongs to nuclear family. 86.66% of the students were from middle socio-economic background whereas only 3.33% belongs to high socio-economic background. According to the sources of information 43.33% got information through mass media, < 13.33% got through health professionals and 13.33% got information for others.

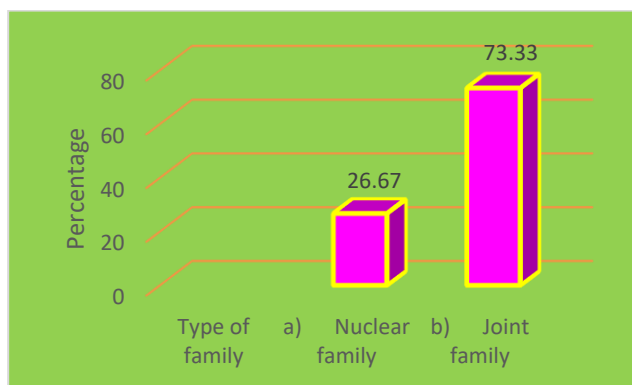


Figure 1 Percentage distribution according to the type of family

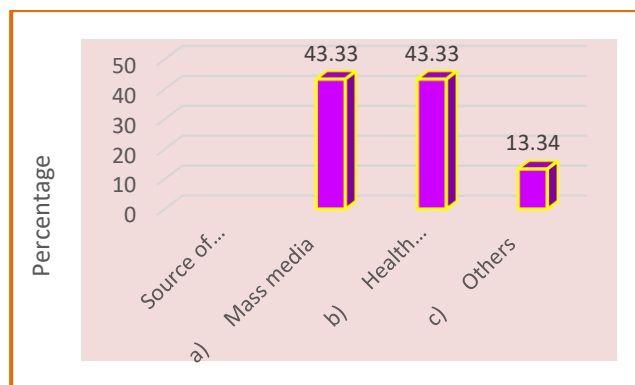


Figure 2 Percentage distribution according to the source of information

Table 3

Level of Knowledge	Frequency	Percentage	Mean	Standard Deviation
Inadequate Knowledge	17	56.67	11.33	3.497
Moderate Knowledge	13	43.33		
Adequate Knowledge	0	0		

The above table shows that 57% had inadequate knowledge, 43% had moderate knowledge. None of them had adequate knowledge.

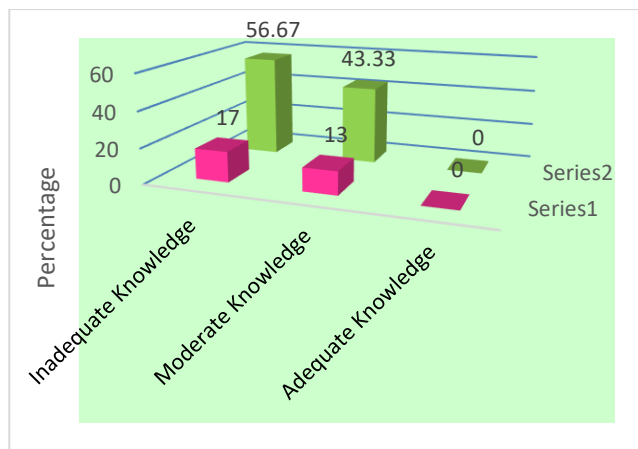


Figure 3 Frequency and percentage distribution of subjects according to the Level of Knowledge

Table 4

S. No	Demographic Variables	Level of Knowledge		Chi square	df
		Inadequate	Moderate		
1.	Age				
	16 - 18 years	11	6	1.02	3
	19 - 21 years	6	7		
2.	Sex				
	Male	0	0	0	1
	Female	17	13		
3.	Religion				
	Hindu	7	7	0.37	3
	Christian	10	6		
	Muslim	0	0		
	Others	0	0		
(3.18)					
4.	Marital status				
	Married	0	0	0	1
	Single	17	13		
5.	Type of family				
	Nuclear family	6	2	1.47	1
	Joint family	11	11		
6.	Family History of Mental illness				
	Yes	0	3	2.63	1
	No	17	10		
7.	Socio Economic Background				
	Low	1	2	1.63	0
	Middle	16	10		
	High	0	1		
(4.30)					
8.	Source of information				
	d) Mass media	7	6	2.57	2
	e) Health workers	1	3		
	f) others			(4.30)	

RESULTS AND DISCUSSION

This chapter gives brief account of the present study including results and discussion. The results and discussion of the study was based on findings obtained from the statistical analysis.

The study findings shows that 56.66% belongs to 16-18 years and 43.33% belongs to 18-20 years. All (100%) the subjects were females & unmarried. The Hindu were 46.66%, 53.33% belongs Christians and none of them belongs to Muslim and others. Majority of the subjects (73.33%) belongs to nuclear family and only 26.66% belongs to joint family. Only few (10%) had the family history of mental illness and 90% had no family history of Mental illness. Most of them were from low socio-economic background and only 3.33% belongs to middle class 43.33% of them received information through mass media and through health professionals. But only 13.33% got information from other sources.

CONCLUSION

Mental illness is considered to be leading problem among the population all over the world. Due to workload, stress, anxiety, loneliness and because of physical illness there is a secondary disorder. So many factors contribute to the illness. Due to nuclear family not having sufficient time for sharing the problems. So, the population is in a situation to expose the things which direct them to mental illness. Spending adequate time with family, moving on to outing at weekend may reduce the risk of mental illness. The young generation should be aware of the stigma regarding mental illness and educate the public to have an early screening of minor disorders.

CONFLICT OF INTEREST

The authors have no conflict of interest.

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