Knowledge And Attitude Towards Mental Illness Among Caregivers Of Mentally Ill Client Attending Out Patient Department (Opd) In Selected Psychiatry Hospital, Goa, With A View To Develop An Information Booklet.

1. Mr. Sangam Sakharam Sawant, M.Sc. (N), IPHB, Goa

INTRODUCTION

Mental health is a continuous ongoing process the way a person think about something has a great influence on his/her mental health. It is seen that when things go right individual look at the positive thoughts but when things go wrong it is easy for a person to develop a negative thoughts and ignore the positive aspects of life. Worrying about the problems in life is normal but feeling very sad, worthless or hopeless might be a signal of impending mental health problem. WHO defines mental health as “A state of well-being in which every individual realises his/her own potentials, can cope with normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his/her own community”. Caregivers play a key role in caring for the mentally ill patient. Caregivers handle day-to-day needs of the patients, monitoring their mental state, identifying the early signs of illness, relapse and deterioration, and helping patients to access health care services. The caregiver also supervises treatment and provides emotional support to the patient. When meeting needs of the client caregivers may face the behavioural disturbances of the ill client and can also be a target of the patient's abusive or violent behaviour.
OBJECTIVES OF THE STUDY

1. To assess the level of knowledge regarding mental illness among caregivers of mentally ill client.

2. To assess the attitude towards mental illness among caregivers of mentally ill client.

3. To find the relationship between level of knowledge and attitude score among caregivers of mentally ill client.

4. To find the relationship between level of knowledge and selected sociodemographic variables.

5. To find the relationship between attitude score and selected sociodemographic variables.

MATERIALS AND METHOD

Based on the objectives of the study a descriptive survey approach was adopted. The study was conducted at Institute of Psychiatry and Human Behaviour, Bambolim, Goa. In this study samples chosen were caregivers accompanying mentally ill client to out patient department of institute of Psychiatry and Human Behaviour, Bambolim Goa and who fulfils the selected criteria of the study.

Inclusion criteria:

a) Caregivers accompanying mentally ill client to out patient department

b) Caregivers who are willing to participate in the study

c) Both male and female caregivers

d) Caregivers who can read and understand English and Konkani language

Exclusion criteria:

a) Caregivers who are not willing to participate in the study.

b) Caregivers who do not understand English and Konkani language

The sample size for the study comprised of 100 caregivers accompanying the mentally ill client to the out patient department of Institute of Psychiatry and Human Behaviour, Bambolim Goa fulfilling the set criteria. A non-probability convenience sampling technique was used to identify and select the samples. Structured questionnaire was used to assess the knowledge and standardised tool used to assess attitude towards mental illness. The scale was
a modified version of the questionnaire, Opinion about Mental illness in the Chinese Community (OMICC). Tool was developed by Ng and Chan. Scale has 34 items broken up into six factors or subscales. Descriptive and inferential statistics were used.

**FINDINGS**

**Section I: Description of demographic variables**

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Sociodemographic variables</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gender</td>
<td>a) Male</td>
<td>76</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Female</td>
<td>24</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) Other</td>
<td>00</td>
</tr>
<tr>
<td>2</td>
<td>Relationship with the client</td>
<td>a) Father</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) mother</td>
<td>7</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) Brother</td>
<td>28</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d) Sister</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>e) Spouse</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td></td>
<td>f) Other (specify)</td>
<td>00</td>
</tr>
<tr>
<td>3</td>
<td>Age in years</td>
<td>a) 18-40</td>
<td>44</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) 41-60</td>
<td>40</td>
</tr>
<tr>
<td></td>
<td></td>
<td>c) 61-80</td>
<td>16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d) &gt;80 years</td>
<td>00</td>
</tr>
<tr>
<td>4</td>
<td>Religion</td>
<td>a) Hindu</td>
<td>68</td>
</tr>
<tr>
<td></td>
<td></td>
<td>b) Muslim</td>
<td>6</td>
</tr>
</tbody>
</table>
Section II- Description of level of knowledge among caregivers of mentally ill client

The level of knowledge about mental illness was assessed by administering the structured questionnaire. The scoring for knowledge was categorized as good knowledge (score 15-21), average knowledge (score 8-14), poor
knowledge (score 1-7). The description of frequency and percentage of the same has been illustrated below

![Level of Knowledge](image)

The data shows that 16(16%) of subjects had good knowledge, 79(79%) had average knowledge and 5(05%) had poor knowledge about mental illness. It can be interpreted from above result that there is dearth of information about mental illness among caregivers accompanying mentally ill client.

### Section III: Attitude of caregivers towards mental illness

In order to assess attitude towards mental illness standardised scale Attitude towards Mental Illness (ASMI) was used. The scale consists of 34 statements assessing the attitude of caregivers in various domains such as separatism, stereotyping, restrictiveness, benevolence, pessimistic predictions and stigmatisation.

<table>
<thead>
<tr>
<th>Attitude</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive attitude</td>
<td>11</td>
<td>11%</td>
</tr>
<tr>
<td>Negative attitude</td>
<td>89</td>
<td>89%</td>
</tr>
</tbody>
</table>
Indicates that majority 89 (89%) of the respondent had negative attitude towards mental illness while 11 (11%) had positive attitude towards mental illness.

**Percentage distribution of attitude towards mental illness according to various domains**

![Percentage Distribution Chart]

Respondents have significant negative attitude towards mental illness on all six domains in attitude scale: Separatism (58%), stereotyping (60%), restrictiveness (55.2%), benevolence (57.2%), pessimistic prediction (59.7%), and stigmatization (58%) all six domains were rated high on attitude scale.

**Conclusion**

Knowledge about mental illness is found to be average among subjects in the present study and majority of the subjects had negative attitude towards mental illness. Present study revealed that majority of respondents had average knowledge about mental illness and attitude towards mental illness was found to be negative among 89% of the respondents which implies need for strong emphasis on public education to improve the mental health literacy among general public. Nurses and other health care providers play a key role in improving public knowledge about mental illness. Nurses need to provide psychoeducation to caregivers of mentally ill client and by creating awareness about mental illness change in attitude can be brought. Study implies that people don’t give much attention to their mental health as there is dearth of information about knowledge on mental illness.
REFERENCES


Author information:

Mr. Sangam Sakharam Sawant, RN, RM, Msc(N), having broad exposure and experience in both academic and clinical. Also member of professional bodies GNC, TNAI, etc. Participated in national level conferences, Research activities.