

Original Article

Knowledge and attitude of nurses to Community Psychiatry services in Edo state, Nigeria

Amiegheme F.E¹, Adeyemo F.O^{2*}

¹Department of Nursing Sciences, School of Basic Medical Sciences, University of Benin, Benin City. ²Department of Nursing, College of Health Sciences, Ladoke Akintola University of Technology, Osogbo, Osun state

*Corresponding author: doctoradeyemo@yahoo.com

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ABSTRACT

Background: Community Psychiatry involves support and treatment of people with mental disorder in a domiciliary setting instead of mental hospital. The attitude of the public towards mental illness and mentally ill person is generally negative. Knowledge and attitude of nurses towards this topic is important because they deal directly patients, families and the community as negative attitude will hinder quality service. **Aim:** The purpose of this study was to determine the knowledge and attitude of Registered Nurses (RNs) towards Community Psychiatric services. **Methods:** A descriptive survey design was used for this study. A systematic random sampling method was used to select one hundred and fifty respondents. The research instrument for this study was self-developed structured questionnaire design in line with the variables to be measured. Descriptive statistics of frequencies and percentages, independent t-test and Pearson Moment Correlation Coefficient analysis were used to analyze all data. **Results:** The study revealed that RNs with positive attitude have a higher mean value than Registered Nurses with negative attitude towards Community Psychiatric services. There is also a significant relationship between the knowledge and attitude of RNs and their participation in community psychiatric services. **Conclusion:** RNs disseminate information and care for mentally ill people and their relations, signifying a need for a positive knowledge and attitude that will enable the RNs to enter a personal relationship with the patient which is necessary for rehabilitation.

Key Words: Knowledge, attitude, community psychiatry, services, registered nurses

INTRODUCTION

Mental illness is on the increase due to economic crises, psychosocial problems in

the country and the number of people needing psychiatric care has also increased.^[1] This denotes that there may also be an increase in the number of



mentally ill patients in the community. The increase in the incidence of mental illness in the community may be as a result of the non-availability of community based psychiatry services and the inability of people to utilize the available ones.^[2] There is evidence in the literature to suggest that mental health care staffs' attitudes towards clients with borderline personality disorder (BPD) are less than favorable.^[3]

Psychiatric nursing or mental health nursing is the specialty of nursing that cares with mental illness or mental distress, such as schizophrenia, bipolar disorder, psychosis, depression or dementia for people of all ages.^[4] Nurses in this area of specialty are trained in dealing with challenging behavior of clients, psychological therapies, and the administration of drugs.^[4] Harris and Happel explained that there is a shift focus from institutional based care to community care, hence the need for psychiatric nurse with appropriate skills.^[5] Community psychiatric nursing is an aspect of psychiatric nursing and it is the treatment of any psychiatric disorders in a manner which a living-learning situation is created through group processes usually emphasizing social, environmental and personal interactions.^[6] It enhances client strength in the same environment as the patient's daily life creating an individually tailored care for the patient.^[7] Community psychiatry nursing is concerned with the prevention and treatment of psychiatry disorder and rehabilitation of former psychiatric patients through the use of organized community programs; it approaches patients through the resources of the community.^[8] It serves to meet the needs of the entire community rather than that of a single service, services provide include emergency services, education for children, follow-up for previously institutionalized patients, alcohol and drug abusers and out patients services. Community psychiatry nursing is the network of services which offer continuing treatment, accommodation, occupation and social support which together help people with mental health problems to regain their normal social roles.^[9] There are three key characteristics of community psychiatry services, they are; network of service—via the joint planning and care groups in multi-disciplinary teams liaising with primary care nurses. Accessible services—the services are locally based with clear and rapid

referrals and user-responsive services—offers choice, flexibility and accountability to the patients.^[10]

In the colonial era of the United States, some settlers adapted community health nursing practices.^[4] Individuals with mental defects that were deemed as dangerous were incarcerated or kept in cages, maintained and paid fully by community attendants. Wealthier colonists kept their insane relatives either in their attics or cellars and hired attendants, or nurses, to care for them.^[4,5] Gournay stated that community psychiatric nursing started in 1954 at Warlingham Park Hospital, Croydon, when ward-based nurses were sent out into the community to follow up patients who had received treatment for schizophrenia from that time, community psychiatric nursing evolved rapidly, and specific training courses for CPNs were set up in the 1970s.^[11] Their main tasks then were administering medication and monitoring patients' progress.^[11] CPN roles began to change by working more independently in the 1980s.^[11] By 1990, they were taking as many referrals from general practice as from consultant psychiatrists,^[12] cited in Gournay.^[11]

Murray further opined that the growth of community psychiatry practices must continue by helping people develop a positive attitude towards the practice early enough.^[13] The importance of sound knowledge to developing a right attitude cannot be overemphasized as revealed by a study that people should acquire some basic knowledge of community psychiatry services as a requisite for the growth of the practice and also for community psychiatry to be used as a tool for reducing stigmatization and institutional neurosis, adequate knowledge and practice of the service is necessary.^[14] It was stated that the attitude of people to community psychiatry services is nothing but discouraging emphasized by the overcrowding of the psychiatric institution,^[15] however, some people still have a positive attitude towards community psychiatry service. There is need for nurses to have adequate knowledge of community based psychiatry service to enable them effectively employ its practices and reduce stigmatization and institutional neurosis experienced by patients.^[14] Most people lack the minimal knowledge required to effectively enhance

the practice of community psychiatry practices^[16] and sufficient knowledge of community based psychiatry practices has to be acquired by health care professionals in order to generate an informed attitude to the practice.^[13] Due to the low knowledge of what community psychiatry practices entails, an erroneous belief that the practice aids stigmatization has been propagated by people.^[17] However, the management of psychiatry patients using community psychiatry practices is significant because the emotional health of the patient is usually catered for by the community^[16] and all nurses should have sufficient knowledge of the practice to effectively care for the patients and educate the family of the patients on the practices best suited for the patient.^[10]

A study on community psychiatric nursing in St James's Hospital, Leeds, England found CPN practice to be lacking in any research or theory base, and in effect suggested therapeutic incompetence in dealing with neurotic clients and he suggested a need for more specialized training.^[18] Another study on Community Mental Health nurses' perspectives of recovery-oriented practice revealed the high levels of nurses' confidence in their understanding and ability to apply the recovery model and suggest a gap in the nurses' perceived ability and confidence in recovery-oriented practice with what is taught academically.^[19] Hence, nursing education needs to be more explicitly focused on the recovery model and its application to care delivery.^[19] European mental health nurses' attitudes to mental illness and people with mental health problems differ significantly across some countries, they are largely similar.^[20]

In essence, all healthcare professionals and nurses in particular need to possess sufficient knowledge on community psychiatry services in order effectively harness the benefits of patient management via this method.^[21] Also attainment of sufficient knowledge of the practice enables people to develop the right attitude to this practice.^[14] Therefore, a community psychiatry service is an important aspect of nursing practice that should be given sufficient attention to enable the effective management of patients in the community. This study sought to determine the knowledge and

attitude of psychiatric nurses towards Community Psychiatry Nursing services, and also to determine whether or not there is a relationship between the knowledge of RNs and participation in community psychiatry services?

This study would help identify problems associated with the quality of care given to mentally ill patients in the community and also providing accurate information about nurses' attitude towards community psychiatry services. The study will assist in creating awareness amongst healthcare providers and promoting greater understanding of the dynamics in nurses' attitude towards their patients.

METHODOLOGY

Study area/study population

The UBTH is located at Ugbowo Benin City, on latitude 6.40 and latitude 5.614. It is the main referral hospital for the population of over 2million citizens of Edo state. All RNs were working in a tertiary hospital in Edo state. The total number is two hundred and fifty (250).

Theoretical framework

The theoretical framework for this study is defined from Pepleau interpersonal relationship model. Central to Pepleau's theory involves the use of therapeutic relationship between the nurse and the client. Nurses enter into a personal relationship with an individual as the need arises. Therefore, four phases evolve in the nurse-client relationship:

ORIENTATION – client seeks help from the nurses and necessary to alleviate the problem.

IDENTIFICATION – the use of dependence, interdependence and interrelation.

EXPLOITATION – client uses available services based on the interest.

RESOLUTION – old views are set aside, new needs are adopted as others are not. Consequently, to help the client fulfill their needs, nurses assume many roles. Pepleau's model continues to be used for clients by clinicians when working with individuals who have psychological problems.

Sampling method

A systematic random sampling technique was used to select 150 (one hundred and fifty). RNs used for this study out of a total of 250 (two hundred and fifty). Criteria for selection included staff nurses with Midwifery and Psychiatric Nursing certificates.

Research design

This study is a descriptive survey design, in which the knowledge and attitude of RN to community psychiatry services was explored. The study took place in April 2012.

Instrument

The research instrument for this study was self-developed structured questionnaire design in line with the variables to be measured. The questionnaire had two parts. Part I contains demographic information and Part II contains questions about the knowledge, attitude and participation of RNs towards community psychiatric services. Experts and colleagues were given for validation and the reliability instrument used was test retest method and a reliability of 0.95 was obtained.

Data collection

The questionnaire was distributed to the RNs and they were duly filled as instructed.

Ethical consideration

An informed consent was obtained from each participant. Ethical clearance was obtained from the institution ethics committee.

Data analysis

All data were entered into the statistical package for social sciences (SPSS). Independent t-test, and Pearson product moment correlation coefficient analysis were used to analyze all the data.

RESULTS

Research question 1

Is the attitude of RNs community psychiatry services significant? To answer this research question independent t-test analysis was used, this is because the independent variable (attitude of RNs) was categorized into two: positive and negative while the dependent variable is Community

Psychiatry services. The result is presented in table 2. Result from table 2 reveals that the critical t-value of 4.86 at $p < 0.05$, and $df = 148$ is greater than the tabulated t-value of 1.96. This implies that, there is a significant difference between the attitudes of RNs towards community psychiatric services in the study area. A close look at the result reveals that, RNs with positive attitude have a higher mean value ($M = 15.33$) than RNs with negative attitude ($M = 11.21$).

Research question 2

Is there any significant relationship between attitude and participation of RNs towards community psychiatry services? To answer this research question Pearson product moment correlation coefficient analysis was used. This is because the researcher is interested in the relationship that between the variables. The result is presented in table 3. Table 3 presents the result of Pearson product moment correlation of attitude and participation of registered nurses toward community psychiatric services. The table reveals that the calculated r-value of 0.38, $df = 148$, is greater than the tabulated r-value of 0.195. This implies that, there is a significant relationship between attitude of RNs and participation of registered nurses in community psychiatric services in the study area.

Research question 3

Is there any significant relationship between knowledge of RNs and participation in community psychiatry services? To answer this research question Pearson product moment correlation coefficient analysis was used. This is because the researcher is interested in the relationship that between the variables. The result is presented in table 4. Table 4 presents the result of Pearson product moment correlation of perception of registered nurses and participation in community psychiatric services. The table reveals that the calculated r-value of 0.43: $df = 148$, is greater than the tabulated r-value of 0.195. This implies that, there is a significant relationship between knowledge of RNs and participation of registered nurses in community psychiatric services in the study area.

Table 1: Socio demographic analysis of respondents

Sampling Procedure	Population from which sample was chosen	Sex	N	Marital status	N	Age Range	N
Simple Random Sampling	150 staff nurses with midwifery and psychiatry certificates	Male	45(30%)	Single	26(17%)	20-29yrs	84(56%)
		Female	105(70%)	Married	114(76%)	30-39 yrs	44(29%)
				Divorce	3(2%)	40-49yrs	20(14%)
		Total	150	Widow	7(5%)	> 50yrs	2(1%)

Table 2: Independent t-test of differences in attitude (awareness and knowledge of community psychiatry) of registered nurses and Community Psychiatry services

Variables	N	Mean	STD	t-value	Sig.
Attitude: Positive	86	15.33	3.34	4.86	0.02
Negative	64	11.21	5.44		

Significant at 0.05; df = 148; tabulated t-value = 1.96

Table 3: Pearson product moment correlation coefficient analysis of attitude and participation of registered nurses

Variable	N	Mean	Std	r-value	Sig.
Attitude of RNs	150	14.11	3.22	0.38	0.01
Participation of RNs	150	11.15	4.53		

Significant at 0.05; df = 148; critical r-value = 0.195

Table 4: Pearson product moment correlation coefficient analysis of perception and participation of registered nurses in Community Psychiatry services

Variable	N	Mean	Std	r-value	Sig.
knowledge of RNs	150	17.01	4.32	0.43	0.03
Participation in community psychiatry services	150	13.56	5.55		

Significant at 0.05; df = 148; critical r-value = 0.195

DISCUSSION

The socio-demographic analysis of the respondents revealed that 45(30%) of the respondents were males and 105(70%) females. 84(56%) of the respondents were within the age range of 20-29 years, 44(29%) 30-39years, 20(14%) 40-49 years and 2(1%) of them were above 50 years. The demographic analysis also revealed that 26(17%) were single, 114(76%) married, 3(2%) divorced and 7(5%) widowed.

The study revealed that RNs with positive attitude (knowledge and awareness) have

a higher mean value than RNs with negative attitude towards community psychiatric services. As a result of this positive attitude, it is expected that the RNs will be more incline to community psychiatric services in Edo state. Our findings are not in consonant with that of Ademola^[15] which reported that the attitude of people to community psychiatry services is nothing but discouraging emphasized by the overcrowding of the psychiatric institution.

Our study also revealed that there is a significant relationship between attitude of RNs and participation in community

psychiatric services in the study area. These results are in agreement with the findings of Varcolis^[7] which stated that community based psychiatry practices enhances client strength in the same environment as daily life hence creating an individually tailored care for each patient.

Lastly our study showed that there is a significant relationship between knowledge of RNs and participation in community psychiatric services. However, this is not in agreement with the study of Howells^[16] that documented that most people lack the minimal knowledge required to effectively enhance the practice of community psychiatry practices and that of Simpson^[19] who found out that community psychiatric nursing (CPN) practice in England is lacking in research or theory base, and in effect suggested therapeutic incompetence among the CPN in dealing with neurotic clients. Appleby stated that all nurses should have sufficient knowledge of community based psychiatry practices in order to enhance the service.^[10] Murray also opined that there should be sufficient knowledge of community psychiatry practices in order to generate positive attitude to practice.^[13]

CONCLUSION

It was observed in our study, that the nurses had knowledge and positive attitude towards the community psychiatric services. This attitude will enable the RNs to enter a personal relationship with the patient which is necessary for rehabilitation. RNs need to be motivated and encouraged to attend seminars and workshops in order to maintain the positive attitude towards community psychiatric services. The hospital and academic institution libraries should provide journals with latest literature on recent developments on community psychiatric services.

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