

KNOWLEDGE AND ATTITUDE TOWARDS PERSON
WITH MENTAL ILLNESS AMONG COMMUNITY IN
TANJUNG SEPAT, SELANGOR

by

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Dissertation submitted in partial fulfilment of the
requirements for the degree
of Bachelor of Nursing (Honours)

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CERTIFICATE

This is to certify that the dissertation entitled “Knowledge and Attitude towards Person with Mental Illness among Community in Tanjung Sepat, Selangor” is the bona fide record of research work done by Ms Yasheni A/P Sambanthan during the period from September 2019 to June 2020 under my supervision. I have read this dissertation and that in my opinion it conforms to acceptable standards of scholarly presentation and is fully adequate, in scope and quality, as a dissertation to be submitted in partial fulfillment for the degree of Bachelor of Nursing (Honours).

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DECLARATION

I hereby declare that this dissertation is the result of my own investigations, except where otherwise stated and duly acknowledged. I also declare that it has not been previously or concurrently submitted as a whole for any other degrees at Universiti Sains Malaysia or other institutions. I grant Universiti Sains Malaysia the right to use the dissertation for teaching, research and promotional purposes.

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LIST OF ABBREVIATION

CDC	Centers for Disease Control and Prevention
WHO	World Health Organization
MAKS	Mental Health Knowledge Schedule
CAMI	Community Attitudes toward Mental Illness
TPB	Theory of Planned Behaviour

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ABSTRACT

Mental illnesses are health conditions that involve changes in emotion, thinking, behaviour or combination of these. It can affect anyone regardless of age, gender, income, social status, race, religion or background. It is important for the community to have positive attitude towards person with mental illness so that they would seek early treatment without any fear of stigma. A cross sectional study was conducted on 140 respondents recruited by using a simple random sampling method. A validated questionnaire was given to all respondents that fit the inclusion criteria. The general objective of the study was to assess the knowledge and attitude towards person with mental illness among community in Tanjung Sepat. Demographic data of the respondents was analysed by using descriptive statistic. Descriptive statistic was also used to assess the level of knowledge and level of attitude of community in Tanjung Sepat towards person with mental illness. Spearman's correlation test was applied to determine the relationship between the knowledge and attitude towards person with mental illness. The findings revealed that majority of community in Tanjung Sepat have good knowledge on mental illness and positive attitude towards person with mental illness. In this study, there is no statistically significant association between selected socio-demographic data (gender, age and level of education) with knowledge and attitude towards person with mental illness. There is a very weak positive correlation between knowledge and attitude towards person with mental illness. The finding shows that those with good knowledge on mental illness have favourable attitude towards the person with mental illness.

PENGETAHUAN DAN SIKAP TERHADAP PESAKIT MENTAL DALAM KALANGAN KOMUNITI DI TANJUNG SEPAT, SELANGOR

ABSTRAK

Penyakit mental adalah keadaan kesihatan yang melibatkan perubahan emosi, pemikiran, tingkah laku atau gabungannya. Ia boleh mempengaruhi sesiapa sahaja tanpa mengira usia, jantina, pendapatan, status sosial, bangsa, agama atau latar belakang. Ia adalah sangat penting bagi komuniti untuk memiliki sikap positif terhadap pesakit mental supaya mereka akan segera mendapatkan rawatan tanpa rasa takut terhadap stigma. Kajian keratan rentas dilakukan pada 140 responden yang direkrut menggunakan kaedah persampelan rawak. Soal selidik yang telah disahkan diberi kepada semua responden yang memenuhi kriteria inklusi kajian ini. Objektif umum kajian ini adalah menilai pengetahuan dan sikap terhadap pesakit mental dalam kalangan komuniti di Tanjung Sepat. Data demografi responden dianalisis menggunakan statistik deskriptif. Statistik deskriptif juga digunakan untuk menilai tahap pengetahuan dan sikap komuniti di Tanjung Sepat terhadap pesakit mental. Ujian korelasi Spearman digunakan untuk menentukan hubungan antara pengetahuan dan sikap terhadap pesakit mental. Penemuan kajian ini menunjukkan bahawa majoriti komuniti di Tanjung Sepat mempunyai pengetahuan yang baik dan sikap positif terhadap pesakit mental. Dalam kajian ini, tidak terdapat hubungan yang signifikan antara data sosio-demografi terpilih (jantina, umur dan tahap pendidikan) dengan pengetahuan dan sikap terhadap pesakit mental. Terdapat korelasi positif yang sangat lemah antara pengetahuan dan sikap terhadap pesakit mental. Hasil kajian menunjukkan bahawa mereka yang mempunyai pengetahuan yang baik tentang penyakit mental mempunyai sikap yang baik terhadap pesakit mental.

CHAPTER 1

INTRODUCTION

1.1 Background of Study

World Mental Health Day is celebrated annually on 10th October with different theme each year. World Mental Health Day on 2019 was celebrated with the theme of “Suicide Prevention”. This celebration is one of the initiatives of World Federal of Mental Health to raise awareness of community in an emphatic way on mental health issues worldwide.

Mental health is defined as a state of well-being in which an individual realises his or her own capacity, can cope with the normal stresses of life, can work productively and is in a position to make a contribution to his or her community (World Health Organization, 2013). Although mental health is very essential for quality of living, people tend to take it for granted and only consider it when problems arise (Mental Health America, n.d).

Mental illness is health conditions that is characterized by dysfunction of mood, thoughts and/or behaviours resulting in distress and/or impaired functioning (Centre for Disease Control and Prevention, 2012). Mental illness refers to a diagnosable illness based on the standardised criteria for diagnosis listed in International Classification Diseases (ICD-10) (WHO, 1992 as cited by Yeap & Low, 2009) or the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) (American Psychiatric Association, 1994 as cited by Yeap & Low, 2009).

According to Patron of the Malaysian Psychiatric Association (MPA), Tan Sri Lee Lam in his statement in the Star online, August 2018 stated that based on the National Health and Morbidity Survey 2017, 29% of Malaysians had depression and anxiety disorder compared to 12% in 2011. The concern towards mental illness has been increased in modern society. Life become more complex and problems related to social, cultural and economic changes arise

when a country develops. Malaysia is a developing country and the population often strives to cope with the fast pace of change and high stress in order to raise their quality of life.

Many studies revealed that the knowledge of society about the causal factors of mental illness is poor and this can lead to stigma. They believe that substance abuse, possession of evil spirits, trauma, stress, heredity, brain disease, punishment from God and poverty are the factors that cause mental illness (Gureje, Lasebikan, Oluwanuga, Olley & Kola, 2005; Chikomo, 2011; Ganesh, 2011). People with mental illness are highly stigmatised and discriminated because they occupy a different space in public perception from those hospitalized for physical conditions. The cause of mental illness is the component which differentiates it from other illness as it was attributed to emotional difficulties rather than to specific physiological pathology.

Community has negative attitude towards people with mental illness. This can be clearly seen from the occurrence of harassment events. The prevalence of harassment towards people with mental health problems in this community is significantly high and absolutely has a great effect on mental health (Berzins, Petch & Atkinson, 2003). Harassment in community was found to be twice as common for individuals with mental problems than for those in the general population (Berzins *et al.*, 2003). In a study conducted by Berzins *et al.* (2003) the respondents reported that teenagers and neighbours are the main group that commit the harassment which involved verbal abuse about the individual's mental health problems. Thus, this study will be conducted to determine the level of knowledge and attitude of community towards person with mental illness.

1.2 Problem Statement

The prevalence of mental health problems among adults increased from 10.7 percent in 1996 to 11.2 percent in 2006 and to 29.2 percent in 2015 in Malaysia. The prevalent increase

in Kuala Lumpur which is at 39.8 percent. Mental health problems are found to be more common in females, younger adults, and those from low income families (Norliza, 2018). According to Malaysian Health minister, Dr Dzulkefly Ahmad in his statement in the Star online, July 2018 stated that based on the National Health and Morbidity Survey 2015 study by the ministry, the prevalence of mental health issues among adults above 16 years old is 29.2%, or 4.2 million Malaysians (Carvalho, Sivanandam & Shagar, 2018).

Mental health disorders can be treated but less than 25 percent of those affected seek treatment. A large number of patients from rural areas are still under the care of religious leaders and may never receive any medical treatment. Stigma, a negative perception that creates prejudice which leads to stereotype and discrimination among a group of people is a barrier for them to seek treatment (Norliza, 2018).

Stigma is originated from negative attitude towards person with mental illness. Society has negative opinions that person diagnosed with mental illness are mentally retarded, public nuisance and dangerous. Thus, they are afraid and unwilling to have social interactions and like to distant themselves from person with mental illness. Stigma leads to increased psychiatric symptoms, stress and reduced self-esteem in individual with mental illness. Individual with mental illness fear to disclose their problem with others and tend to ignore or avoid treatment seeking. Therefore, stigma reduces chances of a patient seeking treatment and delayed recovery.

Community members operate as reinforcing agents for preventive, illness, treatment-seeking and drug compliance behaviours and also as special rehabilitation agents because of the chronic nature of mental illnesses (Girma, Tesfaye, Froeschi, Moller-Leimkuhler, Muller & Dehning, 2013). Therefore, knowledge about mental illness and their attitude towards person with mental illness play a paramount role in mental health. Studies to explore the knowledge and attitude of community towards person with mental illness is very important

because the results of these study can be used to plan health education programmes, create awareness about mental health and to form environment without labelling and stigma towards person with mental illness.

Along the process of searching previous literatures, it was noted that there are more research about the attitude of community towards person with mental illness than knowledge regarding mental illness. Some local studies were done in Penang, Perak, Selangor and Sarawak and these studies emphasizes more on stigmatisation and attitude of community towards person with mental illness (Chang & Horrocks, 2006; Yeap & Low, 2009; Ng, Zaidun, Hong, Tahrin, Yong & Khan, 2010; Shan & Jia, 2015). The study in Selangor was conducted to determine the knowledge on mental health, mental illness and also attitudes towards mental health and help seeking behaviour among adults residing in the urban and rural areas in Klang Valley (Yeap & Low, 2009). In contrast, this study was conducted to determine the level of knowledge regarding mental illness and attitude towards person with mental illness among community in Tanjung Sepat, a rural area (village) in district of Kuala Langat, Selangor.

1.3 Significance of Study

In this era, mental health problems turned to be one of the main public health concern throughout the world. It was highlighted that the number of people with mental illness is rapidly increasing and this creates a global alarming situation. Individual with mental illness refuse or delayed in seeking treatment due to negative perception and stigma of the people around them. Negative perception often caused by lack of knowledge on factors that cause mental illness. They have the fear that they will not equally treated by the society if they are diagnosed with mental illness.

Discrimination can happen in society such as unemployment when the individuals disclose that they are diagnosed with mental illness (Thornicroft *et al.*, 2010). Other than this,

discrimination can also happen in aspects of friendship and social interaction. So, a study which explore the community's knowledge and attitude towards person with mental illness is necessary so that it will be useful to mitigate this problem. As many of the previously published studies were conducted in West, it is important for a local study to be conducted. Thus, this study was conducted to explore the knowledge and attitude of community in a rural area in Tanjung Sepat, Selangor, Malaysia. This study chose community as the target population because they are less likely to receive precise and adequate information about mental health and mental illness. It is important for community to have enough knowledge about mental illness and positive attitude towards person with mental illness to promote anti-stigma and anti-discrimination towards person with mental illness.

According to Girma *et al.*, (2013), the rural community showed significantly higher levels of stigma against person with mental illness than people living in an urban area. Since this study was carried out in a rural area, the result can be useful in planning education programmes and campaigns for the community to increase knowledge level and positive attitude towards person with mental illness. Moreover, this study provides the baseline data for healthcare professionals to empower the community members regarding knowledge about mental illness in order to change the attitudes of the community towards person with mental illness.

This study aimed to determine the knowledge level and attitude of the community towards person with mental illness. Furthermore, it helps to understand the relationship between the socio-demographic data and the knowledge level. The effect of gender, age and educational level of community on knowledge and attitude towards person with mental illness was studied in this study. The association between the knowledge and attitude of community towards person with mental illness was determined in this study.

1.4 Research Questions

1. What is the level of knowledge regarding mental illness among community in Tanjung Sepat?
2. What is the level of attitude towards person with mental illness among community in Tanjung Sepat?
3. Is there any association between the socio-demographic data (gender, age and level of education) and knowledge regarding mental illness among community in Tanjung Sepat?
4. Is there any association between the socio-demographic data (gender, age and level of education) and attitude towards person with mental illness among community in Tanjung Sepat?
5. Is there any correlation between the total score of knowledge regarding mental illness and total score of attitude towards person with mental illness among community in Tanjung Sepat?

1.5 Research Objectives

1.5.1 General Objective

To study the knowledge and attitude of community towards person with mental illness.

1.5.2 Specific Objectives

1. To determine the level of knowledge regarding mental illness among community in Tanjung Sepat.
2. To determine the level of attitude towards person with mental illness among community in Tanjung Sepat.

3. To determine the association between socio-demographic data (gender, age and level of education) and knowledge regarding mental illness among community in Tanjung Sepat.
4. To determine the association between socio-demographic data (gender, age and level of education) and attitude towards person with mental illness among community in Tanjung Sepat.
5. To determine the correlation between the total score of knowledge regarding mental illness and total score of attitude towards person with mental illness among community in Tanjung Sepat.

1.6 Research Hypotheses

1. H_0 : There is no association between the socio-demographic data (gender, age and level of education) and knowledge regarding mental illness among community in Tanjung Sepat.
 H_1 : There is an association between the socio-demographic data (gender, age and level of education) and knowledge regarding mental illness among community in Tanjung Sepat.
2. H_0 : There is no association between the socio-demographic data (gender, age and level of education) and attitude towards person with mental illness among community in Tanjung Sepat.
 H_1 : There is an association between the socio-demographic data (gender, age and level of education) and attitude towards person with mental illness among community in Tanjung Sepat.
3. H_0 : There is no correlation between the total score of knowledge regarding mental illness and total score of attitude towards person with mental illness among community in Tanjung Sepat.

H₁: There is correlation between the total score of knowledge regarding mental illness and total score of attitude towards person with mental illness among community in Tanjung Sepat.

1.7 Conceptual and Operational Definition

Knowledge: Awareness, understanding or information that has been obtained by experience or study and that is either in a person's mind or possessed by people generally (Cambridge Dictionary, n.d). In this study, it refers to understanding on mental illness was measured using a standardized questionnaire.

Attitude: Mental position with regard of fact or state/ feeling or emotion toward a fact or state (Merriam-Webster, n.d). In this study, it refers to behaviour towards person with mental illness which was measured using a standardized questionnaire.

Community: The people living in one particular area or people who are considered as a unit because of their common interests, social group or nationality (Cambridge Dictionary, n.d). In this study, it refers to people living in a village in rural area in Tanjung Sepat.

**Mental Illness/
Person with mental
illness:** Mental disorders or health conditions that are characterized by dysfunction of mood, thoughts and or behaviours resulting in distress and or impaired functioning (CDC, 2012). In this study, it refers to any individuals suffering from mental illness.

CHAPTER 2

LITERATURE REVIEW

2.1 Introduction

This chapter review the previous studies regarding mental illness and knowledge and attitude of community towards person with mental illness. Conceptual framework used in this study also discussed in this chapter.

2.2 Review of Literature

2.2.1 Mental illness

Mental illness is the spectrum of cognitions, emotions and behaviours that interfere with interpersonal relationships and also in functions required for work, at home, and in school (Johnstone, 2001). The example of serious mental illness include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder, post-traumatic stress disorder and borderline personality disorder. According to the National Health and Morbidity Survey 2015, it is indicated that mental illness is expected to be the second highest health problem affecting Malaysians after heart diseases by 2020 and every 3 in 10 adults aged 16 years and above (29.2%) have some sort of mental health problems. Individual who suffers from mental illness can recover if the treatment is received before the disease become severe and compliant to pharmacological treatment. Pharmacological treatment, psychological treatment such as cognitive behavioural therapy, interpersonal therapy and peer support groups are the treatments for mental illnesses (National Alliance of Mental Illness, 2013).

There are some non-governmental organization in Malaysia such as Malaysian Mental Health Association (MMHA) which works to improve the life of person with mental illness in Malaysia. Movement to Incorporate New Development and Actions (MINDA) Johor had

actively run a few programmes such as regular public talks to increase awareness on mental illness and dispel stigma and discrimination towards patient with mental illness.

2.2.2 Knowledge of community on mental illness

Mental health literacy is the knowledge and beliefs about mental disorders which help their recognition, management or prevention. Many studies about mental illness had been conducted in community setting to determine their knowledge about mental illness. The outcomes of these researchers showed that the community have poor knowledge about mental illness (Yeap, 2008; Chikomo, 2011; Ganesh, 2011) especially regarding the causal factors on mental illness (Yeap, 2008).

Most of the community members who are selected as respondents thought that substance abuse (alcohol or drugs) was the main factor that cause mental illness (Crab, Stewart, Kokota, Masson, Chabunya, Krishnadas, 2012) while substance abuse is only accountable for a very limited number of mental disorders. This kind of views can create more misunderstanding that mental illness is self-inflicted because the public always views the misuse of substances as immoral activity.

Possession by evil spirits, witches and punishment by God is reported to be the second most respond. The respondents believe that mental illness is being caused by supernatural forces and often it is viewed as a consequence of moral weakness (Commonwealth Health Online, 2013). This clearly showed their poor knowledge about the causes of mental illness (Crab *et al.*, 2012). The person with mental illness tends to seek treatment in traditional way rather than going to the mental health facility when the symptoms appear (Ganesh, 2011). The other causes commonly reported by the respondents are traumatic event or shock, stress, genetic inheritance, physical abuse, biological factors, brain disease, poverty, financial or marital stress, brain injury and infection of brain.

From the review of previous literature, the community had insufficient knowledge on mental illness especially the factors that cause mental illness.

2.2.3 Socio-demographic data and knowledge of community on mental illness

Socio-demographic data such as respondent's age, educational level, areas of residence, sources of information about mental disorders, and level of contact with mentally ill people have significant effect on knowledge regarding mental illness (Li, Zhang, Zhao, Li, Mu, Zhang, 2018). The findings showed that those aged 25–44 years had significantly higher knowledge than those above 45 years old. Participants with higher education levels had higher scores. Moreover, urban residents had higher knowledge scores than rural residents (Li *et al.*, 2018).

A study which was conducted in Dodoma Municipality, Tanzania includes 41.1% of the respondents who have secondary education, which implies that one would expect that they could have sufficient knowledge and good perceptions about mental illness and have positive attitude towards people with mental health problems. However, the findings revealed that the knowledge on mental illness was poor among people with secondary education (Benedicto, Mndeme, Mwakagile, Mwansisya, 2016).

The findings of study conducted by Bener and Ghuloum (2011) showed that women had poor knowledge on mental illness especially, on the causal factors. They held more to the cultural beliefs as causal factor of mental illness. For example, more women has belief that mental illness is due to possession by evil spirits more than man. Moreover, nearly half of the women thought traditional healers can treat mental illness (Bener & Ghuloum, 2011). However, it is interesting that the findings of the study by Wagner in 2012 which targeted college students as respondents concluded that there was no gender differences in knowledge and perception towards person with mental illness.