

Myths about Mental illness among the care givers of mentally ill clients

Ritu Kumari¹, Annamaa Abraham², Amita Kumari³, Gayatri Kumari⁴,
Hira Kumari⁵, Meena Kumari⁶, Rekha Kumari⁷, Shiba Mathew.S⁸,
Usha Kumari Singh⁹
Anjana Williams*

^{1,2,3,4,5,6,7,8,9} Students Himalayan College of Nursing, SRH University Dehradun, Uttarakhand

*Faculty Mental Health Dept. Himalayan College of Nursing, SRH University, Dehradun, Uttarakhand

Abstract: A study was conducted to explore the myths about mental illness among caregivers of mentally ill clients, in selected hospital Dehradun, Uttarakhand. The aim of the study was to assess the attitude of people regarding mentally ill and mental illness. The present study aims at exploring the myths and facts about mental illness among the care givers of mentally ill clients and will help to bring more awareness among people. Non-experimental, Exploratory Survey design was used in the psychiatric O. P. D of selected Hospital Dehradun, Uttarakhand. The Sample was 100 caregivers of mentally ill clients, and convenient sampling technique was used to select the samples. Major findings of the study suggest that out of total samples, 65% subjects fell in the age group of 18 – 38 years. Based on the responses of the participants in the study maximum number of caregiver had positive opinion towards mental illness. People know that mental illness is not God's punishment for past sins and only visiting holy shrines will not cure the person from mental illness. Therefore mental illness no longer carries a stigma, and it can be treated with positive results.

Keywords: Myths, Care givers, Mental illness

I. Introduction

Mental disorders are common in the United States, estimating 22 percent of American between ages of 18 and older and about 1 in 5 adults suffer from a diagnosable mental disorder in a year, and 44.3 million people get sick annually¹. Epidemiological studies report prevalence rates for psychiatric disorders from 9.5 to 370 per 1000 population in India.² Mental health illness has become the fourth leading causes of disability in the America. Unfortunately with the increase in statistics, the wrong public perception of the mentally ill is also increasing, leading to stigmatization of the people suffering from mental illness. The concept of the stigma of mental illness is passed from generation to generation, and the negative view of it, expressed by the media has made it more difficult for people to accept mental illness as a treatable condition like any other physical illness.

Culture, society and education play a pivotal role in shaping and perceiving the concept about mental illness among society, and mental illness is no exception to this rule. Confinement was the only method of handing mentally ill individuals in dark ages, mainly because of wrong perception of people.

Those individuals who behave abnormally, who are aggressive, unpredictable, and epileptic, etc. were kept away from society. It was a common thought that mental illness were due to witchcraft and curse of God, and patients were brutally treated, locked up, and often died as a result of ignorance, infection and hunger.

Misconceptions about mental illness are very prevalent, and the lack of understanding about the disease can have serious consequences for millions of people. The humiliation of having mental illness leads many people to feel ashamed and prevents them from seeking medical help.³

Mental illness has good prognosis if diagnosed early, but most of the people think that once the person is affected with mental illness, it can't be cured. This thinking is a highly prevailing stigma in the society, even when persons are treated and become normal, they are not accepted by society as a healthy human being.⁴ Thus, the present study aims at exploring the myths and facts about mental illness among the care givers of mentally ill clients which will help to bring more awareness among people.

1.2 Statement

A study was conducted to explore the myths about mental illness among the care givers of mentally ill clients, in selected hospital Dehradun, Uttarakhand. India 2013

1.3 Objective of the study

- To determine the myths about mental illness among the care givers of mentally ill client

II. Methodology

A Non- experimental, Exploratory Survey design was adopted for the study. The study was conducted in a psychiatric O. P. D of selected Hospital Dehradun, Uttarakhand. A sample comprising of 100 caregivers of mentally ill clients was selected through convenient sampling technique, who met the inclusion criteria of the study.

Data was collected through a Socio-Demographic profile and a Likert scale questionnaire about the myths regarding mental illness. The questionnaire was developed by researchers. The questionnaire was administered after getting hundred percent agreements from the expert validators in the field of nursing. After taking necessary administrative permission, the data was collected in the month of July, 2013.

III. Analysis And Interpretation

3.1 Socio-demographic data of the caregivers

Table no.1:- Frequency Percentage Distribution of the Participants

n = 100			
S.N	VARIABLES	FREQUENCY (f)	PERCENTAGE (%)
1.	AGE IN YEARS		
	18-38	65	65
	39 - 59	27	27
2.	GENDER	83	
	Male	17	83
	Female		17
3.	RELIGION		
	Hindu	85	85
	Muslim	13	13
4.	EDUCATIONAL STATUS		
	Below 5 th standard	04	04
	Below 12 th	50	50
5.	OCCUPATION		
	Graduate	32	32
	Post Graduate	14	14
6.	TYPE OF FAMILY		
	Private Service	56	56
	Govt. Service	18	18
7.	LIVING AREA		
	Other	26	26
	Nuclear	24	24
	Joint	76	76
	Rural	66	66
	Urban	34	34

Table no.1:- It can be inferred from the above table, that the majority of caregivers were males between the ages of 18-38 years, most of the respondents were literate, and Hindu, had at least primary education and lived in joint families in rural areas.

3.2 Percentage wise distribution of disease condition

Figure no. 1 Shows percentage wise distribution of disease condition

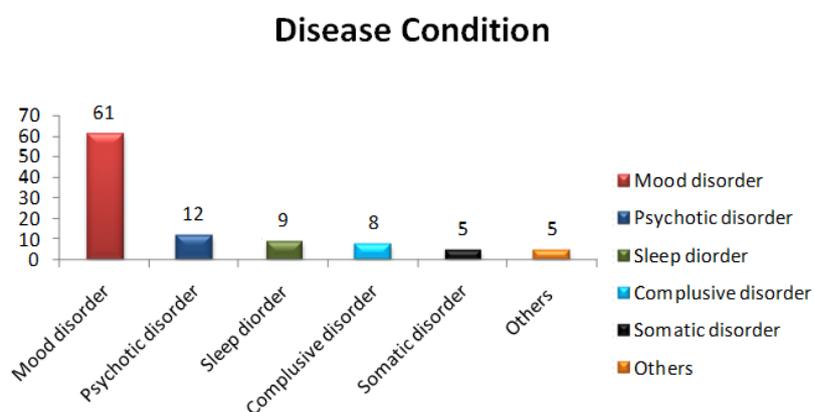


Figure no. 1 depicts that from last 5 years the prevalence of mental illness has increased, and people are suffering more with mood disorders comparing to other mental illness.

3.3 Percentage wise distribution of relation with the client

Figure no. 2 Shows percentage wise distribution of relation with the client

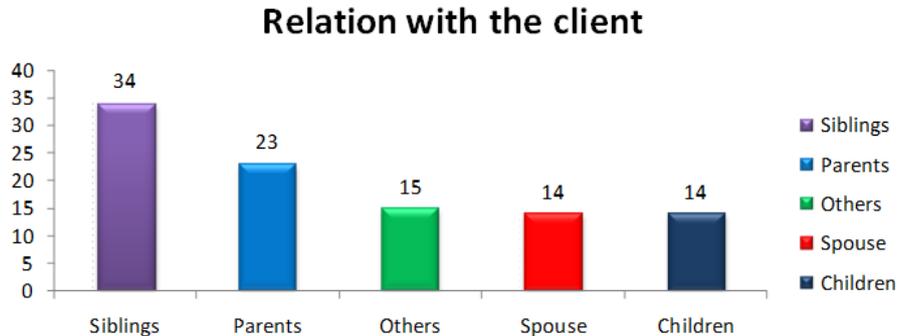


Figure no. 2. It could be inferred from the above table that family members are usually taking care of the mentally ill clients, as most of the caregivers were siblings. This can be a positive sign of acceptance of mental illness in society.

3.4 Percentage distribution of Duration of Disease

Figure no. 3 Shows percentage wise distribution of Duration of Disease

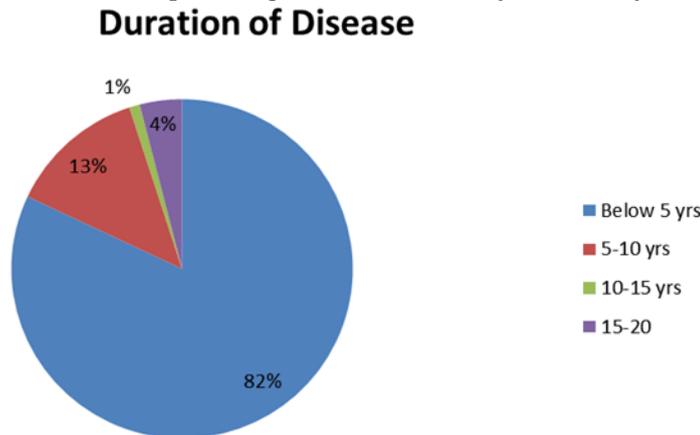


Figure no. 3 shows that 82 % of clients were suffering from mental illness for the past five years or less, and very less percentage of mental illness can be seen in past 10 to 15 years. It could be inferred that either with the advancing year, the incidence of mental illness have increased, or people are becoming more aware and taking treatment rather making it a stigma and treating mentally ill at home with other home remedies.

3.5 Percentages related to the tool

Table no.2:- Statement Analysis Percentage

n = 100			
S.NO	STATEMENTS	AGREE	DISAGREE
1.	Mental illness is a God's punishment for past sins.		83%
2.	Keeping fast and visiting holy shrines can cure mental illness.		73%
3.	Mental illness can affect anybody at any age in situation and in both genders.	91%	
4.	Mental illness can be transferred from mentally ill to healthy individual through coming in contact with him/her.		76%
5.	Mental illness is something people should hide and be ashamed off		83%
6.	Individual with mental illness can never become normal, once he become mental ill		78%
7.	There is no treatment in science for mental illness		79%
8.	All mentally ill individuals are violent all the time and can cause harm to anyone at any time		55%

9.	Individuals who have character flaws are prone to get mental illness		69%
10.	People with mental illness have lower level of intelligence	59%	
11.	The only place for mentally ill client to stay is in mental hospital, not in community or home		59%
12.	All mentally ill clients shows unusual behavior like using abusive language and muttering to self		55%
13.	Children don't get mental illness		75%
14.	It is safe to maintain a distance from the mentally ill client as they can harm you		70%
15.	Loss of semen can be the cause of mental illness in men		69%
16.	Individual with mental illness have no capacity to understand small things so they should not get a job		56%
17.	People with mental illness have no right to marry and have family		77%
18.	Mental illness can be treated by normal physician who treat other disease like Heart disease, diabetes etc.		70%
19.	Having less/more sexual desire make a person prone to mental illness	55%	
20.	People who get higher education became mentally ill		74%

The most important areas of the table 2 depict the following study results. It shows that people are more aware of mental illness and they don't see mental illness as God's punishment. People know that mental illness can affect any body at any age, in any situation, and in both genders. The caregivers in the sample stated that mental illness is not communicable, and it's not anything to hide and be ashamed off. They also believe that a mentally ill person can become normal again. The majority accepted that science has treatment for mental illness. Half of the caregivers stated that all mentally ill are not dangerous.

Although some respondents disagreed that mentally ill must stay in mental hospital, not in community or home. People are aware that mental illness is not communicated through talking and mentally ill can also have the capacity to pursue job, and have families. Participants knew that to treat mental illness there is a psychiatrist who deals with mental illness.

To conclude, the results show a positive perspective and awareness regarding mental illness among the caregivers. The caregivers do not see mental illness as a disease or stigma and they seek medical help instead of isolating individuals who are suffering with diseases.

IV. Nursing Implications

The nurse plays an imperative role in disease prevention and health promotion. Nurses need to impart health education to caregivers regarding "Mental illness" in order to change the opinion of the caregivers about mental illness to prevent mental health related complications. This study be replicated using a larger sample in different settings like community and hospitals.

V. Conclusion

The following conclusion was drawn based on the findings from present study that maximum number of caregivers has positive opinions towards mental illness. People acknowledge that mental illness is not communicable and can be treated and have good prognosis.

References

- [1]. Narrow we. One-year prevalence of mental disorders, excluding substance use disorders, in the U.S. NIMH ECA prospective data (Unpublished). Available from URL: <http://www.harboroaks.com>
- [2]. Suresh Bada Math, C. R. Chandrashekar & Dinesh Bhugra Psychiatric epidemiology in India. Indian J Med Res 126, September 2007, pp 183-192 cited on may 2012
- [3]. Rohan Ganguli. Understand the weak link between mental illness and violent behavior, 2000 March 18. Available from: URL:<http://www.post-gazette.com>
- [4]. Mental health statistics in India [homepage on internet] cited on march 2013 available from: <http://www.acmiindia.com/ac/mental-health-statistics-in-india>
- [5]. Health diseases conditions in India[homepage on internet] cited on march 2013 available from: <http://health.india.com/disease-conditions/mental-illness-neglected-in-india/>
- [6]. Elder Alexander B. Morrison. Some Myths and Misconceptions about Mental Illness. Salt Lake City UT, First Quorum of the Seventy (Emeritus) 2001 April 21. Available from URL: <http://www.mentalhealthlibrary.info>
- [7]. Joanna Teuton. Conceptualizing Psychosis in Uganda Transcultural Psychiatry, 2007Vol. 44, No. 1, 79-114. available from URL: <http://tps.sagepub.com>
- [8]. Joel D. Sathyaseelan M, Explanatory models of psychosis among community health workers in South India Acta Psychiatr Scand.2003 Jul;108(1): 66-69. Available from: URL:<http://pubmed.com>

- [9]. Saravanan B, Jacob KS, Deepak MG. Perceptions about psychosis and psychiatric services: a qualitative study from Vellore, India. *Social psychiatry and psychiatric epidemiology* 2008 Mar;43(3):231-8. Available from: URL:<http://pubmed.com>
- [10]. Charles H, Manoranjitham SD, Jacob KS. Stigma and explanatory models among people with schizophrenia and their relatives in Vellore, south India. *The International journal of social psychiatry*. 2007 Jul;53(4):325-32 Available from: URL <http://www.ijem.org.in>
- [11]. Saravanan B, Jacob KS, Johnson S. Belief models in first episode schizophrenia in South India. *Social psychiatry and psychiatric epidemiology* 2007 Jun;42(6):446-51. Available from: URL: <http://pubmed.com>
- [12]. Narrow US. One-year prevalence of mental disorders, excluding substance use disorders, in the U.S. NIMH ECA prospective data. Unpublished. Available from URL:<http://www.harboroaks.com>