

An Experimental Study to Assess Effectiveness of Anti-Stigma Sensitization Programme on Attitude and Perception towards Mental Health and Mental Illness among College Students in Selected Institutions of the City

Akshata Sandip Tendulkar, L. Bijayalakshmi Devi

Abstract: An experimental study conducted to assess effectiveness of anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students in selected institutions of the city. A pretest-post-test control group design was used. The samples were selected through simple random sampling method. After pretesting the sessions along with activity was taken on mental health, mental illness, misconceptions about mental illness and prevention of stigma for the experimental group. For the control group, standard instructions as per institution policy were administered. A post-test was conducted for both the control and experimental group. The data of the present study was collected by a self-structured questionnaire. Based on the findings it was verified that the program promoted a significant improvement in the attitude and perception levels towards mental health and mental illness in college students with a p -value of $0.000 < 0.05$ which was highly significant.

Keywords: Anti-Stigma Sensitization Programme, Attitude, Perception, Mental Health, Mental Illness, College Students

1. Introduction

Mental health is an integral part of total health. But, because of the lack of knowledge and negative attitude, the mental illness and mentally ill person got stigmatized. Various factors are contributing to the stigmatized approach towards a mentally ill person. Stigma is a major cause of discrimination and exclusion of the mentally ill person from the community. It affects people's self-esteem, disrupts their family relationships, limits their ability to socialize and obtain housing and job. It hampers the prevention of mental health disorders, the promotion of mental well-being and the provision of effective treatment and care. It also contributes to the abuse of human rights. A positive attitude and a good perception of mental illness can help to reduce stigma around mental illness.

The purpose of the study was to assess the effectiveness of the anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students in selected institutions of the city.

Primary objectives

- 1) To assess the baseline level of attitude and perception towards mental health and mental illness among college students.
- 2) To assess the effectiveness of anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students.

Secondary objective

To associate the baseline level of attitude and perception towards mental health and mental illness among college students with selected background variables.

Research questions

Primary research question

What is the effect of anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students?

Secondary research question

Is there any association between baseline level of attitude and perception towards mental health and mental illness among college students with selected background variables?

Primary hypothesis

H01: There is no significant effectiveness of the anti-stigma sensitization programme on attitude towards mental health and mental illness among college students at 5% level of significance.

H02: There is no significant effectiveness of the anti-stigma sensitization programme on perception towards mental health and mental illness among college students at 5% level of significance.

Secondary hypothesis

H03: There is no significant association between baseline level of attitude and perception towards mental health and mental illness among college students with selected background variables at 5% level of significance.

2. Research Methodology

Research approach

This research used a quantitative research approach that aims to find out the effectiveness of the anti-stigma sensitization programme.

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Research Design

In this research experimental design, a pretest-post-test control group design was used. The samples were selected through simple random sampling method.

The setting of the study

For the present study, the research was conducted in selected institutions of the city. The setting was selected based on, the availability of the samples, feasibility for conducting the study, ethical clearance and accessibility of setting to the investigator.

Research variables

1) Independent variables

The anti-stigma sensitization programme is the independent variable in the study.

2) Dependent variables

There were two variables in this study,

- Attitude towards mental health and mental illness among college students.
- Perception towards mental health and mental illness among college students.

Population

In this study population is college students above 18 years from selected institutions of the city.

Sample size

Sample size calculated on the pilot study. The calculated sample size was 26 samples in each group. Added 10% sample more as an attrition rate hence 30 samples taken in each group. The total sample size was 60 samples.

Reliability of the tool

The reliability of the tool analysis was done by Cronbach's alpha test. The tool was administered to 20 college students of selected institutions of the city; the correlation coefficient of self-structured attitude scale was 0.74 for 35 items. The correlation coefficient of self-structured perception scales 0.77 for 40 items and thus found the tool reliable and valid.

Data gathering process:

- The permission letter from the college and the investigator including the study details sent to institutions of the city.
- The investigator then approached to the administrative department of the institution and Principal to seek permission to conduct the study.
- The study was introduced to subjects and the topic was explained to them before starting with the data collection process.
- Informed written consent was obtained from the subjects.

- The tool was distributed to the subjects and any difficulties while filling the tool were addressed by the investigator.
- The average time required for filling the tool was 30 min. After pretesting the sessions along with activity was taken on mental health, mental illness, misconceptions about mental illness and prevention of stigma for the experimental group. For the control group, standard instructions as per institution policy were administered.
- A post-test was conducted for both the control and experimental group.

The data of the present study was collected by a self-structured questionnaire that contains three sections.

Section I was a demographic profile that consists of 6 questions concerning the background variables of the study subjects. The questions included factors like age, gender, educational qualification, family type, family income and exposure to a person with mental illness.

Section II was self-structured mental health and mental illness attitude scale. This section consisted of 35 self-structured attitude questionnaires related to mental health and mental illness. The scale ranges from 1-175.

Section III was self-structured mental health and mental illness perception scale. This section consisted of 40 self-structured attitude questionnaires related to mental health and mental illness. The scale ranges from 1-200.

3. Significant Findings of the Study

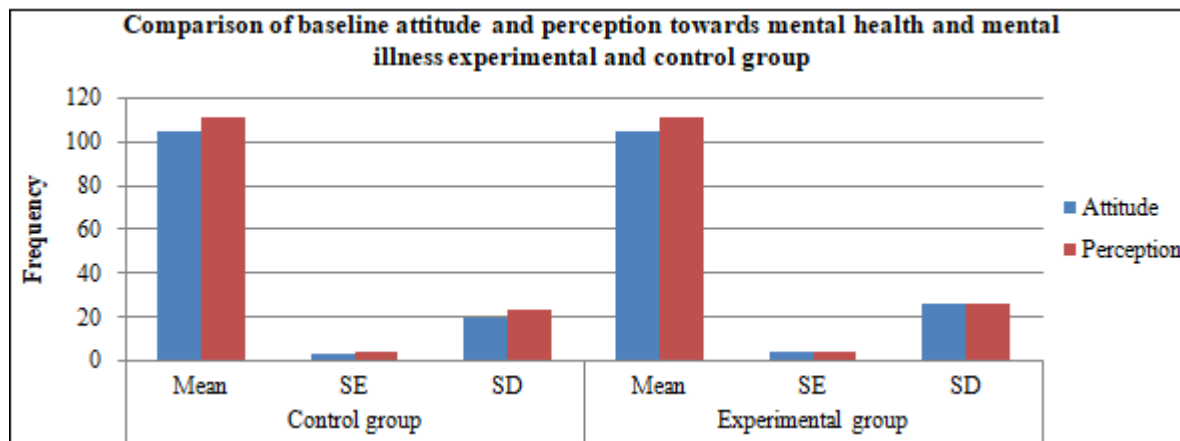
Section I

This section dealt with the distribution of subjects according to their demographic variables. Findings showed that the majority of subjects (90.00% in the control group and 86.66% in the experimental group) were in the age of 18-20 years. All subjects from control and experimental groups were female and studying in 1st year of under-graduation. 43.33% of subjects in the control group and 43.33% of the experimental group were from a joint family. 56.66% of subjects in the control group and 56.66% of the experimental group were from a nuclear family. 53.33% of subjects in the control group and 26.66% of subjects in the experimental group parent's monthly income were below 10, 000 Indian Rupees. 20.0% of subjects in the control group and 20.0% of the subject's in the experimental group parent's monthly income was 10, 001-20, 000 Indian Rupees. 23.33% of subjects in the control group and 26.66% of subjects in the experimental group parent's monthly income were 20, 001-30, 000 Indian Rupees. 3.33% of subjects in the control group and 26.66% of subjects in the experimental group parent's monthly income were above 30, 001 Indian Rupees. The majority of subjects in both groups (80% in the control group and 73.33% in the experimental group) were not exposed to a person with mental illness. The subjects exposed to various disorders like depressive disorder (10% in control group and 16.66% in the experimental group), mental retardation (10% in control group and 10% in the experimental group), and autism (3.33% in the experimental group). No subject from

the control group and experimental group was exposed to disorders like schizophrenia, bipolar disorder, dementia, alcoholism.

Section II

This section assessed the baseline level of attitude and perception towards mental health and mental illness among college students in the selected institute of the city.



The level of baseline attitude of control and experimental group towards mental health and mental illness showed that 1 (3.33%) of subjects in the control group and 4 (13%) of subjects in the experimental group were having a negative attitude towards mental health and illness. The majority of subjects 24 (80.0%) in the control group and 13 (43%) of subjects in the experimental group were having normal/neutral attitude. 5 (16.66%) of subjects in control group and 13 (43%) of subjects in the experimental group were having a positive attitude.

The level of baseline perception of control and experimental group towards mental health and mental illness showed that no subjects in the control group and experimental group were having poor perception and very good perception towards mental health and illness. 7 (23%) of subjects in the control group and 10 (33.33%) of subjects in the experimental group were having fair perception. The majority of subjects 23 (77%), in the control group, and 20 (66.66%) of subjects in the experimental group were having good perception.

The comparison of baseline scoring of attitude and perception towards mental health and mental illness for experimental and control group showed that in control group mean of attitude test mean = 104.20 with SD = 20.45 and in experimental group mean of attitude test mean = 104.40 with SD = 26.67. To find out the difference between control and experimental group *t*-test was applied ($t = -0.033$). The *p*-

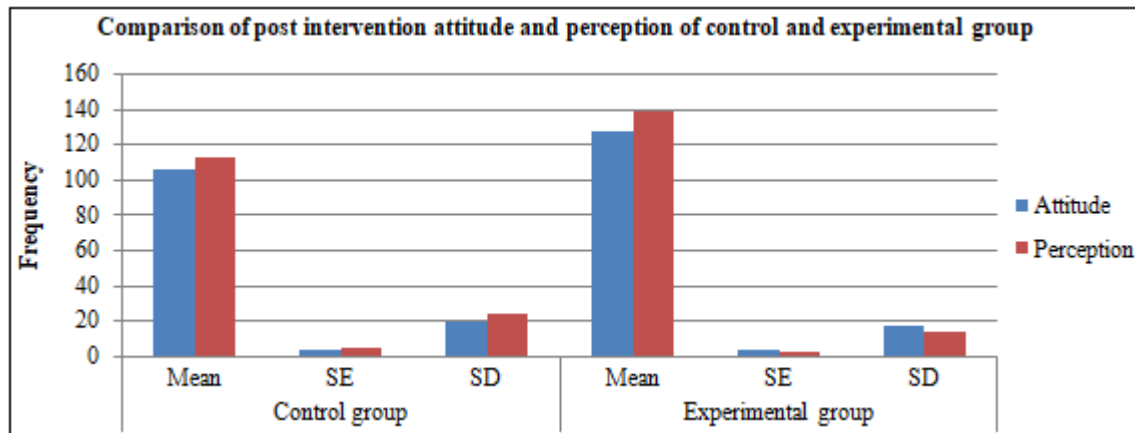
value for attitude level towards mental health and mental illness in college students was 0.97. Hence there was no significant difference found in pre-intervention control and experimental group for the level of attitude towards mental health and mental illness.

In control group mean of perception test mean = 111.23 with SD = 24.01 and in experimental group mean of perception test mean = 111.26 with SD = 26.56. To find out the difference between control and experimental group *t*-test was applied ($t = -0.005$). The *p*-value for perception levels towards mental health and mental illness in college students was 0.99. Hence there was no significant difference found in pre-intervention control and experimental group for the level of perception towards mental health and mental illness at 0.05 level of significance.

The comparison of pre-intervention scoring of attitude and perception towards mental health and mental illness of experimental and control group suggested that before intervention, both groups had approximately same level attitude and perception towards mental health and mental illness.

Section III

This section was assessed / analyzed the effectiveness of the anti-stigma sensitization programme on attitude and perception among college students in the selected institute of the city.



The post-intervention level of attitude towards mental health and mental illness showed that no subjects in the control group and experimental group were having a negative attitude towards mental health and illness. The majority of subjects 22 (73.33%) in the control group were having normal / neutral attitude. 5 (16%) of subjects in the experimental group were having normal /neutral attitude. 8 (26.6%) of subjects in the control group were having a positive attitude. The majority of subjects 25 (83%) in the experimental group were having a positive attitude.

The level of post-intervention perception of control and experimental group towards mental health and mental illness showed that no subjects in the control group and experimental group were having a poor perception of mental health and illness. 6 (20%) of subjects in the control group and 0.00% of subjects in the experimental group were having fair perception. The majority of subjects, 24 (80%) in control and 23 (76.66%) in experimental group were having good perception towards mental health and mental illness. 0.00% of subjects in the control group and 7 (23.33%) of subjects in the experimental group were having and very good perception.

The comparison of post-intervention attitude and perception of control and experimental group showed that in control group mean of attitude test mean = 105.30 with SD = 19.55 and in experimental group mean of attitude test mean = 127.13 with SD = 17.54. To find out the difference between control and experimental group *t*-test was applied ($t = -4.55$). It was verified that the program promoted a significant improvement in the attitude levels towards mental health and mental illness in college students with *p*-value $0.000 < 0.05$ which was highly significant. In control group mean of perception test mean = 112.50 with SD = 23.88 and in experimental group mean of perception test mean = 138.06 with SD = 13.53. To find out the difference between control and experimental group *t*-test was applied ($t = -5.10$). It was verified that the program promoted a significant improvement in the perception levels towards mental health and mental illness in college students with a *p*-value of $0.000 < 0.05$ which was highly significant.

The primary null hypothesis was rejected as there was significant effectiveness of anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students with a *p*-value of

0.000 and it was also highly significant at 0.01 level of significance.

This answered a primary research question that there was an effect of anti-stigma sensitization programme on attitude and perception towards mental health and mental illness among college students as there was a statistically significant difference between the experimental and control group in the level of attitude towards mental health and mental illness.

So it can be concluded that there were changes in attitude and perception towards mental health and mental illness as an effect of the anti-stigma sensitization programme in the experimental group.

Section IV

This section was assessed the association between baselines level of attitude and perception towards mental health and mental illness with selected background variables among adolescents.

The comparison of pre-test scores level of attitude towards mental health and mental illness with selected background variables was done. Gender and educational status of the subjects was constant, so that, the association of pre-test scores level of attitude towards mental health and mental illness was not calculated with both variables. Pre-test scores level of attitude towards mental health and mental illness and variables like age, family type, exposure to a person with mental illness and types of mental illness had no association with each other. The calculation showed the association between attitude towards mental health and mental illness and monthly family income with a *p*-value of 0.009.

Hence secondary null hypothesis was rejected as there was an association between the levels of attitude towards mental health and mental illness with selected background variables, that with monthly family income at 0.05 level of significance with a *p*-value of 0.009 which was highly significant.

For the secondary research question, it was the answer that there was no association between levels of attitude towards mental health and mental illness with selected background variables like age, family type, exposure to a person with mental illness and types of mental illness but attitude

towards mental health and mental illness had association with monthly family income.

Fisher Exact test was used to compare pre-test scores level of perception towards mental health and mental illness with selected background variables (age, family type, family income, exposure to a person with mental illness and types of mental illness). The association of pre-test scores level of perception towards mental health and mental illness with gender and educational status was not calculated as they were constant variables. The result of the calculation showed that there was no association of pre-test scores level of perception towards mental health and mental illness with selected background variables like age, family type, family income, exposure to a person with mental illness and types of mental illness.

Hence secondary null hypothesis was accepted as there was no association between the levels of perception towards mental health and mental illness with selected background variables.

For the secondary research question, it was the answer that there is no association between levels of perception towards mental health and mental illness with selected background variables like age, family type, family income, exposure to a person with mental illness and types of mental illness.

4. Conclusion

Based on the research done and analysis findings it can be concluded that the majority of subjects (90.00% in the control group and 86.66% in the experimental group) were in the age of 18-20 years. All subjects from control and experimental groups were female and studying in 1st year of under-graduation. The majority of subjects were from nuclear families. 80% of subjects in the control group and 73.33% of subjects in the experimental group were not exposed to a person with mental illness. The subjects exposed to disorders like depressive disorder, mental retardation, autism. It was verified that the program promoted a significant improvement in the attitude and perception levels towards mental health and mental illness in college students with a p -value of $0.000 < 0.05$ which was highly significant. There was no association of attitude towards mental health and mental illness with selected background variables like age, family type, exposure to a person with mental illness and types of mental illness but the attitude towards mental health and mental illness having an association with monthly family income with a p -value of 0.009 which was highly significant. There was no association of pre-test scores level of perception towards mental health and mental illness with selected background variables like age, family type, family income, exposure to a person with mental illness and types of mental illness.

5. Recommendations

Further recommendations have been stated for the wider generalization,

- 1) A similar study can be conducted for a larger group and for a longer duration to generalize and validated the research findings.
- 2) The survey can be done in groups, like primary teachers, adolescents, health care workers, and general community peoples to explore knowledge levels about mental illness.
- 3) More qualitative research can be done to explore more on the factors which contribute to negative attitudes and poor perception of people living with mental illness.
- 4) A similar study can be conducted by adding more content and using different educational strategies.
- 5) A similar study can be replicated in different settings and various age groups. Also, a similar study can be conducted as a comparative study between girls and boys.
- 6) The study can be done to know the factors influencing the stigmatization and misconceptions.