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Cross sectional survey

Different attitudes towards mental health revealed in a survey of nurses across five European countries; more positive attitudes found in Portugal, in women and in those in senior roles

Mark Haddad

Commentary on: **Chambers M**, Guise V, Välimäki M, *et al.* Nurses' attitudes to mental illness: a comparison of a sample of nurses from five European countries. *Int J Nurs Stud* 2010;47:350–62.

Attitudes to mental illness

Examining the attitudes of nurses is a well-trod route for nurse researchers: such papers are common in our journals, describing nurses' perspectives on topics from complementary medicine to assisted suicide. These studies may involve focus groups, interviews or non-validated question sets; alternatively they may be scale development studies or may use validated scales to examine attitudes in a particular area.

The paper by Chambers and colleagues is an example of the latter: it uses the Community Attitudes to Mental Illness questionnaire (developed in Canada in the late 1970s in response to deinstitutionalisation) to identify the attitudes of nurses working in mental health inpatient and community settings in five European countries.

Measuring attitudes is important in the field of mental health. Mental health problems are common and associated with stigma – that is, problems in the areas of knowledge (ignorance), attitudes (prejudice) and behaviour (discrimination). The widespread misunderstanding and negativity about mental ill health and the merits of treatment affects help-seeking and the general response

that people with these problems elicit from others. There are indications that the attitudes of clinicians may influence their recognition of mental problems, and the way they treat people with these difficulties.

People's attitudes to mental health problems have attracted considerable research attention with general population studies conducted in many nations. In England, the adult population has been regularly surveyed on this topic since 1993 (usually annually), allowing monitoring of public attitudes towards mental illness and tracking changes over time.1 In the European Union, perceptions about people with mental health problems have been identified by a special edition (2006) of the annual Eurobarometer survey series that interviewed representative population samples across each of the 25 Member States and candidate countries, totalling nearly 30 000 adults.2 These surveys provide a mixed picture: people's views are generally tolerant and supportive of integrating people with mental illness into their communities - but there remain considerable negative elements: for instance in the EU, over a third of respondents think that people with psychological problems constitute a danger to others, and 14% of people feel that people with psychological

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problems have themselves to blame, while in England a third of people select being 'prone to violence' as the best descriptor for a person who is mentally ill. In general, women hold more positive attitudes than men, as do older compared to younger people; and higher social grade is also associated with more positive attitudes.

In Australia, surveys of the public conducted over several decades have contributed to the development of mental health literacy programmes to improve knowledge and beliefs about mental health and mental disorders; such initiatives have subsequently been conducted in many other countries including the USA, UK, Germany and Norway and have led to specific training courses (Mental Health First Aid).³

Nurses attitudes in five countries

In this study, Chambers and colleagues from Finland, Portugal, Lithuania, Ireland and Italy, collected responses from registered nurses via paper and electronic surveys. Nurses' responses to the 40-item CAMI questionnaire together with demographic and related information were used to explore attitude differences within the sample. The researchers obtained an excellent overall response rate (74%) for the survey, and total participant numbers (810) were sufficient for the planned analyses.

The chief finding to emerge was that nurses' attitudes differ between the nations surveyed with most positive views evident in Portugal and least positive in Lithuania. The respondents' attitudes are described as generally positive and similar to those of psychiatrists, but the presentation of findings limits comparison of responses between this group and other professionals.

How does this link to what we know?

This study has drawn attention to an important topic: the attitudes of health professionals are a key attribute and potential determinant of clinical behaviour. Using a standardised measure, the authors have identified that the country in which nurses practice is the most influential factor in predicting their views. Nurses from Lithuania reported the most restrictive and authoritarian attitudes and were most concerned about risks posed by people with mental problems. The attitudes to people with mental health problems identified in the Eurobarometer study compare very closely with this key finding. This EU-wide study revealed that from 29 countries polled, Lithuania consistently endorsed views at the negative (bottom five) range.2 This adds weight to the view that the socio-political climate and culture of regions and nations are strong determinants of tolerance and stigma, and that work to extend acceptance must involve whole communities.

Competing interests None.

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