Attitudes Towards People With Mental Disorders and Psychiatry: Impact of Mental Health Residence on a Sample of Portuguese Medical Students

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Introduction

Stigma is assumed to be a threat to the wellbeing and life satisfaction of people with mental disorders, inhibiting recovery, rehabilitation, and reintegration into society, with significant public health implications (Corrigan, 2004; Link & Phelan, 2006). Studies on public stigma have shown the presence of negative attitudes towards mental disorders among general population, medical students and practitioners (Schulze, 2007; Lauber, Anthony, Jdacic-Gross, & Rossler, 2004), which have a clear impact in the lifequality of people with mental illness (Sartorius, 2008). The present study had top mains goals: (1) to examine medical students attitudes towards people with mental illness as well as towards psychiatry, before and after mental health residence; and (2) to be the first contribute to the cultural validation of the instrument Mental Illness: Clinician's Attitudes Scale (medical student version - MICA) (Kassam, Glozier, Leese, Henderson & Thornicroft, 2010) to Portuguese.

Participants					
A convenience sample of 41 fourth-year medical students					
	1 st Assessment (N= 41)	2 nd assessment (N=24)			
Gender	56,1% Female/43,9% Male	50% Female; 50% Male			
Age	M=21,63 (SD=0,915)	M=21,63 (SD=1,05)			
Personal contact with person with mental illness	61%	???????100%??			
Professional contact with person with mental illness	51,2%	100%			

Measures

MICA (Mental Illness: Clinician's Attitudes Scale, medical students version) (Kassam, Glozier, Leese, Henderson & Thornicroft, 2010), which has two sections:

1. Access demographic data.

2. Scale with 16 items created to access the attitudes of medical trainees towards psychiatry and mental illness. These 16 items require the positioning of the student, using a 6-point Likert scale, where 1 means "Strongly Agree" and 6 means "Strongly Disagree". The content of items is detailed in the results' figure.

Procedure

All students attending the 4th year of medical school were invited to participate, and those who did it gave their consent.

The first assessment took place before students participated in one-month mental health residence, and the second assessment occurred one week after it finished.

Data analysis was conducted with SPSS, 19.0 version. To conduct an overall score some items were reversed.

Results

	M	SD		P
Male	38,61	7,18	1.597	.119
Female	35,00	7,17		
Contact	37,52	7,17	.837	.408
No contact	35,6	7,54		
1st assessment	36,58	7,44	????	????
2 nd assessment	32.62	6,56	2	.056

Discussion

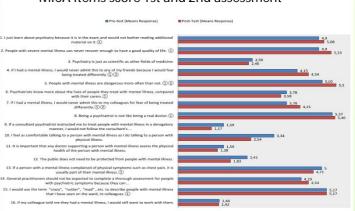
Before entering in Mental Health Residence, medical students showed positive overall attitudes towards persons with mental illness and towards psychiatry. These attitudes have improved, but not in a significant way, after completion Mental Health Residence, as expected. Regarding the reliability, of MICA applied to the sample of portuguese medical students, we found statistical indicators of good reliability (Cronbach's α =.602; Spearmans' coefficient =. 531).

Regarding the perceptions of medical students towards mental illness, there are high values in the items relating to the dangerousness of mentally ill individuals, associating with them terms like "crazy". Devalue the physical symptoms relating them to the psychic, and still consider that being a psychiatrist is not the same as being a real doctor.

Thus, the study manifests it self as a starting point for future research on this issue.

In future research, it is also important using measures of social desirability, analyze the attitudes of medical students taking into account a nosological point of view (in order to adapt the interventions with this population, considering their conceptions of the several mental disorders recognized) and also test the permanence of the anti-stigma effect by engaging moments of follow-up. Future replication studies is necessary to continue to be possible obtain more data on the perceptions of medical students face this issue.

MICA items score 1st and 2nd assessment



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