

Percepcija zdravstvenih djelatnika o pacijentima s mentalnim bolestima

Perception of health professionals about patients with mental illness

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Sažetak

Uvod: Mentalno je zdravlje tema koja se posljednjih godina češće pojavljuje u brojnim javnim programima i kampanjama za edukaciju javnosti. U posljednje vrijeme sve veći naglasak stavlja se na destigmatizaciju mentalnih bolesti i poboljšanje pristupa adekvatnoj zdravstvenoj skrbi.

Cilj rada: Cilj je rada usporediti stavove zdravstvenih djelatnika na psihijatriji kao i ostalih zdravstvenih djelatnika prema pacijentima oboljelih od mentalnih bolesti.

Ispitanici i metode: Istraživanje je dizajnirano kao presječno istraživanje. U istraživanju je korišten uzorak metodom snježne kugle (*snowball*), a sudjelovalo je 167 ispitanika. Od toga, 67 ispitanika zaposleno je na psihijatrijskim odjelima, dok preostalih 100 radi na drugim odjelima (kirurškim, internističkim itd.). Istraživanje je provedeno u razdoblju između travnja i srpnja 2023. godine.

Rezultati: Rezultati istraživanja pokazuju značajne razlike u percepciji rada zdravstvenih djelatnika na psihijatriji u odnosu na njihove kolege s drugih odjela. Djelatnici na psihijatriji imaju pozitivniji stav prema svojem radu i ne osjećaju se manje cijenjenima unutar zdravstvenog sustava. Međutim, zdravstveni radnici s drugih odjela percipiraju ih kao manje vrijedne, što je statistički značajno ($Z = 4,05$; $P < 0,001$). Ispitanici rijetko ističu da uče o duševnim bolestima, već samo kada je to nužno, te da rijetko istražuju dodatne materijale (medijan 2,00). Nije dokazano da su pacijenti s mentalnim bolestima percipirani kao opasniji, odnosno obje skupine ispitanika slažu se da oni nisu inherentno opasniji od ostalih pacijenata (medijan 5,00). Postoji statistički značajna razlika u stavovima prema oporavku osoba s duševnim bolestima između djelatnika na psihijatrijskim odjelima i onih na drugim odjelima ($Z = 2,89$; $P = 0,004$).

Rasprava sa zaključkom: Stavovi zdravstvenih djelatnika prema pacijentima s mentalnim bolestima značajno utječu na kvalitetu skrbi. Edukacija i promicanje pozitivnih stavova ključni su za smanjenje stigme, bolju suradnju i poboljšanje ishoda liječenja.

Ključne riječi: stavovi, mentalne bolesti, percepcija, zdravstveni djelatnici

Kratak naslov: Percepcija zdravstvenih djelatnika o mentalnim bolestima

Abstract

Introduction: Mental health is a topic that has increasingly appeared in various public programs and awareness campaigns in recent years. Recently, greater emphasis has been placed on the destigmatization of mental illnesses and improving access to adequate healthcare.

Objective: The study aims to compare the attitudes of healthcare professionals working in psychiatry with those of healthcare professionals working in other areas towards patients with mental illnesses.

Participants and Methods: The study was designed as a cross-sectional survey. A snowball sampling method was used, and it included 167 participants. Of these, 67 participants were employed in psychiatric departments, while the remaining 100 worked in other departments (surgical, internal medicine, etc.). The research was conducted between April and July 2023.

Results: The results show significant differences in the perception of healthcare professionals working in psychiatry compared to their colleagues in other departments. Employees in psychiatry have a more positive attitude toward their work and do not feel less valued within the healthcare system. However, healthcare workers from other departments perceive them as less valuable, which is statistically significant ($Z=4.05$; $P<0.001$). The participants rarely mention that they learn about mental illnesses, doing so only when necessary, and they rarely explore additional materials (median 2.00). It was not proven that patients with mental illnesses are perceived as more dangerous; both groups of participants agree that they are not inherently more dangerous than other patients (median 5.00). There is a statistically significant difference in attitudes towards the recovery of individuals with mental illnesses between healthcare workers in psychiatric departments and those in other departments ($Z=2.89$; $P=0.004$).

Discussion and Conclusion: The attitudes of healthcare professionals towards patients with mental illnesses significantly affect the quality of care. Education and the promotion of positive attitudes are key to reducing stigma, improving cooperation, and enhancing treatment outcomes.

Keywords: attitudes, mental illnesses, perception, healthcare professional

Short title: Health professionals' perception of mental illness

Received / Primljeno October 15th 2024 / 15. listopada 2024.;

Accepted / Prihvaćeno January 20th 2025 / 20. siječnja 2025.;

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Uvod

Mentalne bolesti (MB) predstavljaju ozbiljan globalni javnozdravstveni izazov. Često su praćene stigmom i predrasudama koje se vežu za ovu skupinu pacijenata. Stavovi psihijatrijskih i drugih zdravstvenih djelatnika prema paci-

Introduction

Mental illnesses (MI) represent a serious global public health challenge. They are often accompanied by stigma and prejudice that are associated with this group of patients. The attitudes of psychiatric and other healthcare professi-

jentima s MB-om imaju jednu od ključnih uloga u pružanju kvalitetne zdravstvene skrbi i njihovoj rehabilitaciji [1].

Iako je zdravstvena pismenost o mentalnim bolestima u posljednjim godinama značajno napredovala, i dalje postoje prepreke u razumijevanju i prihvaćanju tih stanja u društvu i unutar zdravstvenog sustava [2]. Istraživanja su pokazala da ljudi često doživljavaju osobe s mentalnim bolestima kao opasne, s nepredvidivim ponašanjem i gubitkom kontrole [3], zbog čega su te osobe često izložene diskriminaciji i stigmatizaciji. Znanstvena literatura pokazala je da je zdravstveni sustav, čak i izvaninstitucionalni, okruženje u kojem ljudi koji žive s MB-om doživljavaju stigmatu [5]. Ova izloženost stigmatizirajućim stavovima ima potencijal dovesti do nedostatnog pristupa skrbi, društvene marginalizacije i može uništiti odnos između pacijenta i zdravstvenog djelatnika, stoga prepoznavanje stavova i edukacija zdravstvenih djelatnika o mentalnim bolestima ima važne kliničke implikacije.

Cilj rada

Usporedba stavova zdravstvenih djelatnika prema pacijentima s mentalnim bolestima.

Ispitanici i metode

Istraživanje je dizajnirano kao presječno istraživanje. U istraživanju je korišten uzorak metodom snježne kugle (*snowball*), a sudjelovalo je 167 ispitanika. Od toga, 67 ispitanika zaposleno je na psihijatrijskim odjelima, dok preostalih 100 ispitanika radi na drugim odjelima (kirurškim, internističkim itd.). Istraživanje je provedeno u razdoblju između travnja i srpnja 2023. godine.

Za provedbu istraživanja korišten je mjerni instrument *Mental Illness: Clinicians' Attitudes Scale* (MICA) – ljestvica od 15 čestica koja procjenjuje stavove zdravstvenih djelatnika. Ljestvica se pokazala pouzdanom, valjanom i osjetljivom na promjene. Ova je mjera instrument samoprocjene. Pitanja su bila zatvorenog tipa. Prvi dio upitnika odnosio se na sociodemografske karakteristike (od 1. do 11. pitanja), dok se drugi dio upitnika odnosio na ispitivanje stavova putem MICA ljestvice. Ispitanici su odgovarali na pitanja iz upitnika koji ispituje stavove zdravstvenih djelatnika prema osobama oboljelima od duševnih bolesti koristeći Likertovu skalu od 1 do 5. Ocjene su označavale sljedeće stavove: 1 – Uopće se ne slažem, 2 – Uglavnom se ne slažem, 3 – Ne znam, 4 – Uglavnom se slažem, 5 – U potpunosti se slažem.

Ispitanici su dobrovoljno i anonimno sudjelovali u istraživanju. Upitnik je distribuiran u *online* obliku putem Google Forms ankete.

Za potrebe ovog istraživanja nije zatraženo odobrenje Etičkog povjerenstva jer je anketa distribuirana *online* bez identifikacijskih karakteristika pojedinca ili ustanove.

Statistička obrada podataka

Numeričke vrijednosti prezentirane su upotrebom metoda deskriptivne statistike, i to medijana kao srednje vrijednosti, te interkvartilnog raspona i ukupnog raspona kao

onals towards patients with MI play a key role in providing quality healthcare and facilitating their rehabilitation [1].

Although health literacy regarding MI has significantly improved in recent years, challenges still exist in understanding and accepting these conditions within society and the healthcare system [2]. Studies have shown that people generally perceive individuals with MI as dangerous, with unpredictable behavior and a loss of control [3]. As a result, they are often subjected to discriminatory and stigmatizing behaviors [4]. The scientific literature has shown that the healthcare system, even outside institutional settings, is an environment where people living with MI experience stigma [5]. This exposure to stigmatizing attitudes can lead to insufficient access to care and social marginalization and may destroy the relationship between the patient and the healthcare provider. Therefore, recognizing attitudes and educating healthcare professionals about mental illnesses have significant clinical implications.

Objective of the study

The study's objective is to compare the attitudes of healthcare professionals toward patients with mental illnesses.

Participants and methods

The study was designed as a cross-sectional survey. A snowball sampling method was used, and 167 participants took part. Of these, 67 participants were employed in psychiatric departments, while the remaining 100 worked in other departments (surgical, internal medicine, etc.). The study was conducted between April and July 2023.

For the research purpose, the measurement instrument used was the *Mental Illness: Clinicians' Attitudes Scale* (MICA) - a 15-item scale assessing healthcare professionals' attitudes. The scale was reliable, valid, and sensitive to changes. This instrument is a self-report measure. The questions were of a closed type. The first part of the questionnaire concerned sociodemographic characteristics (questions 1 to 11), while the second part focused on assessing attitudes through the MICA scale. Participants answered questions from the questionnaire, which assessed healthcare professionals' attitudes towards individuals with mental illnesses using a Likert scale from 1 to 5. The ratings represented the following attitudes: 1 – Strongly disagree, 2 – Mostly disagree, 3 – Don't know, 4 – Mostly agree, 5 – Strongly agree.

Participants voluntarily and anonymously participated in the study. The questionnaire was distributed online via a Google Forms survey.

Ethical approval was not required for this research, as the survey was distributed online without identifying the characteristics of individuals or institutions.

Statistical data analysis

Numerical values were presented using descriptive statistical methods, such as median as a central value, interquartile range, and total range as indicators of deviation around

pokazatelja odstupanja oko medijana, dok je normalnost razdiobe prethodno ispitana upotrebom Kolmogorov-Smirnovljevog testa. Razlika u zastupljenosti prema promatranim obilježjima prezentira se upotrebom Hi-kvadrat testa (χ^2), dok se hipoteze ispituju upotrebom Mann-Whitney U testa. Analiza je rađena u SPSS programu inačice 26.0.

Rezultati

Najveći broj ispitanika pripada dobnim skupinama 18 – 30 godina te 51 i više godina, pri čemu svaka skupina broji 47 ispitanika (28,14 %). Broj ispitanika u tim skupinama jest 1,38 puta veći u odnosu na dobnu skupinu 41 – 50 godina. Ispitivanjem nije utvrđena statistički značajna razlika u zastupljenosti medicinskih djelatnika prema dobnj skupini ($\chi^2 = 2,94$; $P = 0,401$).

the median. The normality of the distribution was previously tested using the Kolmogorov-Smirnov test. Differences in representation based on the observed characteristics were presented using the Chi-square test (χ^2), while hypotheses were tested using the Mann-Whitney U test and the Kruskal-Wallis test. The analysis was performed using SPSS version 26.0.

The largest number of participants belongs to the age groups of 18–30 years and 51 years and older, with each group consisting of 47 participants (28.14%). The number of participants in these groups is 1.38 times higher compared to the age group of 41–50. The analysis did not reveal a statistically significant difference in the representation of healthcare professionals across age groups ($\chi^2=2.94$; $P=0.401$).

Tablica/Table 1. Prikaz dobne strukture ispitanika/ *Age distribution of participants*

Koliko imate godina? / How old are you?	n	%	χ^2	p
18 – 30	47	28,14		
31 – 40	39	23,35	2,94	0,401
41 – 50	34	20,36		
51 i više	47	28,14		

Podjela prema spolu uzorkovanih ispitanika pokazuje da je u istraživanju sudjelovalo 147 ženskih ispitanika (88,55 %), dok je 19 muških ispitanika (11,45 %).

Svi su ispitanici trenutno zaposleni. Najveći broj njih ima radni staž duži od 20 godina, dok je najmanje ispitanika s radnim stažem do jedne godine ($n = 7$; 4,19 %). Broj ispitanika s najdužim stažem 10,57 puta veći je u odnosu na one s najkraćim stažem. Ispitivanjem je utvrđena statistički značajna razlika u zastupljenosti medicinskih djelatnika prema radnom stažu ($\chi^2 = 100,27$; $P < 0,001$).

Analizirajući radna mjesta, veći broj ispitanih zdravstvenih djelatnika ne radi na psihijatriji ($n = 100$; 59,88 %), u odnosu na zastupljenost zdravstvenih djelatnika koji rade ($n = 67$; 40,12 %). Najveći broj ispitanih zdravstvenih djelatnika koji ne rade na psihijatriji djelatnici su bolničkih odjela ($n = 65$, 67,01 %). Preostala su radna mjesta ispitanika sljedeća: bolnička ambulanta ($n = 8$, 8,25 %), ambulanta PZZ ($n = 3$, 3,09 %), privatna praksa ($n = 3$, 3,09 %), domovi za starije i nemoćne ($n = 2$, 2,06 %), te ostala neklasificirana radna mjesta ($n = 16$, 16,49 %). Obrazovna struktura uzorka prikazuje da najveći broj ispitanika po strukturi obrazovanja čine medicinske sestre / medicinski tehničari općeg smjera ($n = 83$; 49,70 %), stručni/sveučilišni prvostupnici sestrištva ($n = 55$, 32,93 %), diplomirane medicinske sestre/magistre sestrištva ($n = 22$, 13,17 %), liječnici ($n = 4$, 2,4 %) te neopredijeljeni za raznu obrazovanja ($n = 3$; 1,8 %). Najveći broj ispitanika ocjenjuje svoje znanje o mentalnim bolestima ocjenom dobar ($n = 55$; 33,13 %), vrlo dobrom ocjenom ($n = 50$) ocjenjuje 30,12 % ispitanika, dok izvrsnom ocjenom ocjenjuje ($n = 20$) 12,05 % ispitanika. Nezadovoljavajuću

The gender distribution of the sampled respondents shows that 147 female respondents (88.55%) participated in the study, while 19 male respondents (11.45%) participated.

All participants are currently employed. The largest number has a work experience of more than 20 years, while the fewest have work experience of up to one year ($n=7$; 4.19%). The number of participants with the longest experience is 10.57 times greater than those with the shortest experience. Statistical analysis revealed a significant difference in the distribution of medical professionals according to their work experience ($\chi^2=100.27$; $P<0.001$).

Regarding job positions, a greater number of respondents work outside psychiatry ($n=100$; 59.88%) compared to those who work in psychiatry ($n=67$; 40.12%). The largest number of respondents who do not work in psychiatry are staff from hospital departments ($n=65$; 67.01%). Other job positions include hospital outpatient clinics ($n=8$; 8.25%), primary healthcare centers ($n=3$; 3.09%), private practice ($n=3$; 3.09%), nursing homes ($n=2$; 2.06%), and other unclassified workplaces ($n=16$; 16.49%).

The educational structure of the sample shows that the majority of respondents are general nurses ($n=83$; 49.70%), followed by professional/university graduates in nursing ($n=55$; 32.93%), graduate nurses/Masters in nursing ($n=22$; 13.17%), and doctors ($n=4$; 2.4%). Three respondents did not specify their educational background ($n=3$; 1.8%).

Most respondents rate their knowledge about mental illness as good ($n=55$; 33.13%), while 30.12% ($n=50$) rate it as very good and 12.05% ($n=20$) rate it as excellent. A total of

razinu (dovoljan i nedovoljan) ocijenilo je ukupno (n = 41) 24,7 % ispitanika.

Prikaz iskustva djelatnika u radu s osobama koje boluju od mentalnih bolesti ukazuje na to da je za 5,42 puta veća zastupljenost ispitanika koji su tijekom života imali iskustva rada s osobama koje boluju od mentalnih poremećaja (n = 141; 84,43 %) u odnosu na zastupljenost ispitanika koji nisu imali to iskustvo (n = 26; 15,57 %), te je ispitivanjem utvrđena prisutnost statistički značajne razlike u zastupljenosti medicinskih djelatnika s obzirom na iskustvo rada s osobama koje boluju od mentalnih poremećaja ($\chi^2 = 79,19$; $P < 0,001$).

Najveći broj ispitanika poznaje osobu koja boluje od mentalnih bolesti (n = 151; 90,42 %), u odnosu na one koji ne poznaju (n = 16; 9,58 %), te je ispitivanjem utvrđena prisutnost statistički značajne razlike u zastupljenosti medicinskih djelatnika s obzirom na poznavanje osobe koja boluje od mentalnih poremećaja ($\chi^2 = 109,13$; $P < 0,001$).

Hipoteza 1: Zdravstveni djelatnici koji rade na psihijatriji će vjerojatno pokazati veću sklonost kontinuiranom učenju o duševnim bolestima i čitanju dodatnih materijala u usporedbi s onima koji ne rade na psihijatriji.

Ispitanici ističu da rijetko uče o duševnim bolestima, osim kada je to nužno, te da rijetko istražuju dodatne materijale (medijan 2,00), dok varijacija odgovora pokazuje da se mišljenja znatno razlikuju (IQR 1,00-4,00) (Tablica 1.).

Zabilježena je značajno viša srednja razina stava prema izjavi „Učim o duševnim bolestima samo kad je potrebno i ne trudim se čitati dodatne materijale“ među zdravstvenim djelatnicima koji rade u području psihijatrije u usporedbi s onima koji ne rade u toj oblasti. Ova je razlika statistički značajna ($Z = 6,21$; $P < 0,001$) prema rezultatima našeg istraživanja (Tablica 2.).

Hipoteza 2: Zdravstveni djelatnici koji rade na psihijatriji će vjerojatno imati različite percepcije cijenjenosti svog rada u odnosu na zdravstvene djelatnike koji ne rade na psihijatriji.

Ispitanici smatraju da rad u području duševnog zdravlja nije jednako priznat kao u drugim zdravstvenim djelatnostima, s niskom razinom slaganja s tom tvrdnjom (medijan 2,00). Njihova su mišljenja bila vrlo slična, što pokazuje uski raspon odgovora oko medijana (IQR 2,00-3,00) (Tablica 1.).

Zdravstveni djelatnici koji rade na psihijatriji imaju za jedan bod viši stupanj suglasnosti s tvrdnjom „Rad u području mentalnog zdravlja jednako je vrednovan kao i rad u drugim područjima zdravstva i socijalne skrbi.“ od zdravstvenih djelatnika koji ne rade na psihijatriji. Ova je razlika statistički značajna ($Z = 4,05$; $P < 0,001$) (Tablica 2.).

Hipoteza 3: Zdravstveni djelatnici neovisno o radnom mjestu ne koriste stigmatizirajuće izraze poput „lud“ ili „luđak“.

Termini poput „lud“, „luđak“ i slično za opisivanje osoba s duševnim bolestima nisu prihvatljivi za većinu ispitanika (medijan 5,00) koji su se o tome izjasnili vrlo konzistentno (IQR 4,00-5,00) (Tablica 1.).

Zdravstveni djelatnici koji rade na psihijatriji i oni koji rade na drugim odjelima jednako se slažu da ne bi upotrebljavali riječi kao što su „lud“, „luđak“ i slično za opisivanje osoba s

24,7% (n=41) rated their knowledge unsatisfactory (sufficient and insufficient).

The experience of healthcare professionals in working with individuals with mental illness shows that the proportion of those who have worked with people with mental disorders is 5.42 times higher (n=141; 84.43%) compared to those who have not (n=26; 15.57%). A statistically significant difference was found in the distribution of medical professionals regarding their experience with individuals with mental disorders ($\chi^2=79.19$; $P<0.001$).

The majority of respondents know someone with a mental illness (n=151; 90.42%), compared to those who do not know someone (n=16; 9.58%). A statistically significant difference was found in the distribution of medical professionals based on whether they know someone with a mental illness ($\chi^2=109.13$; $P<0.001$).

Hypothesis 1: Healthcare professionals working in psychiatry are likely to be more inclined to continuously learn about mental disorders and read additional materials compared to those not working in psychiatry.

Participants rarely indicate that they learn about mental illness unless it is necessary, and they rarely explore additional materials (median 2.00). The variation in responses shows that opinions differ significantly (IQR 1.00-4.00) - Table 1.

A significantly higher average level of agreement with the statement “I learn about mental illness only when necessary and do not try to read additional materials” was recorded among healthcare professionals working in psychiatry compared to those not working in this field. This difference is statistically significant ($Z=6.21$; $P<0.001$) according to our research results - Table 2.

Hypothesis 2: Healthcare professionals working in psychiatry will likely have different perceptions of the value of their work compared to those working in other fields.

Respondents believe that work in the field of mental health is not as equally recognized as in other healthcare sectors, showing a low level of agreement with this statement (median 2.00). Their opinions were very similar, as shown by the narrow response range around the median (IQR 2.00-3.00) - Table 1.

Healthcare professionals working in psychiatry have one point higher agreement with the statement “Work in the mental health field is equally valued as work in other areas of healthcare and social care” compared to those working in other fields. This difference is statistically significant ($Z=4.05$; $P<0.001$) - Table 2.

Hypothesis 3: Healthcare professionals, regardless of their workplace, do not use stigmatizing terms like “crazy” or “lunatic.”

Terms like “crazy”, “lunatic” and similar are unacceptable to most participants (median 5.00), with a very consistent response (IQR 4.00-5.00) - Table 1.

Healthcare professionals working in psychiatry and those working in other departments agree equally that they would not use terms such as “crazy,” “lunatic,” or similar to describe people with mental disorders they encounter in their

duševnim bolestima koje su susreli u poslu (medijan 5). Ispitivanjem nije utvrđena prisutnost statistički značajne razlike ($Z = 0,50$; $P = 0,616$) (Tablica 2.).

Hipoteza 4: Zdravstveni djelatnici koji rade na psihijatriji će vjerojatno imati manje pesimistične stavove prema oporavku osoba s duševnim bolestima u usporedbi s onima koji ne rade na psihijatriji.

Postoji niska sklonost ispitanika prema mišljenju da osobe s duševnim bolestima teško mogu voditi kvalitetan život (medijan 2,00), s varijacijom (IQR 1,00-3,00) (Tablica 2.).

U istraživanju su primijećene statistički značajne razlike u stavovima zdravstvenih djelatnika prema temama povezanima s duševnim bolestima. Primijećeno je da je razina slaganja s tvrdnjom „Osobe oboljele od duševnih bolesti ne mogu se nikad dovoljno oporaviti kako bi mogle voditi kvalitetniji život.“ bila za jedan bod veća kod zdravstvenih djelatnika koji rade na psihijatriji u odnosu na one koji ne rade na psihijatriji, pri čemu je i ova razlika bila statistički značajna ($Z = 2,89$; $P = 0,004$) (Tablica 3.).

work (median 5). No statistically significant difference was found ($Z=0.50$; $P=0.616$) - Table 2.

Hypothesis 4: Healthcare professionals working in psychiatry will likely have less pessimistic attitudes toward the recovery of individuals with mental illness compared to those not working in psychiatry.

There is a low tendency among participants to believe that people with mental illness cannot lead a quality life (median 2.00), with variation (IQR 1.00-3.00) - Table 2.

Statistically significant differences were observed in healthcare professionals' attitudes toward issues related to mental illness. It was noted that the level of agreement with the statement "People with mental illness can never fully recover enough to lead a better life" was one point higher among healthcare professionals working in psychiatry compared to those not working in psychiatry. This difference was statistically significant ($Z=2.89$; $P=0.004$) - Table 3.

TABLICA/TABLE 2. Deskriptivna statistika stava prema duševnim bolestima/ *Descriptive statistics of attitudes toward mental illness*

	1		2		3		4		5		Me	IQR
	n	%	n	%	n	%	n	%	n	%		
Učim o duševnim bolestima samo kada trebam i ne trudim se čitati dodatne materijale. / <i>I only learn about mental illness when I need to and I don't bother to read additional materials.</i>	50	30,12	44	26,51	28	16,87	35	21,08	9	5,42	2,00	(1,00-4,00)
Osobe oboljele od duševnih bolesti ne mogu se nikad dovoljno oporaviti kako bi mogle voditi kvalitetan život. / <i>People suffering from mental illness can never recover enough to could lead a quality life.</i>	64	38,32	58	34,73	27	16,17	17	10,18	1	0,60	2,00	(1,00-3,00)
Rad u polju duševnog zdravlja je podjednako cijenjen kao i druga polja zdravstva i socijalne skrbi. / <i>Work in the field of mental health is equally valued as other fields of health and social welfare.</i>	37	22,42	49	29,70	39	23,64	20	12,12	20	12,12	2,00	(2,00-3,00)
Nikad ne bih koristio termine „lud“, „luđak“ i slično kako bih opisao kolegama osobe koje pate od duševne bolesti s kojima sam se susreo u poslu. / <i>I would never use terms "crazy", "lunatic" and the like, how would I describe to my colleagues people suffering from mental illness whom I have met at work.</i>	8	4,82	11	6,63	14	8,43	23	13,86	110	66,27	5,00	(4,00-5,00)

Rasprava

Postavljena hipoteza koja se odnosi na potrebu kontinuiranog obrazovanja o mentalnim bolestima i konzultiranje dodatnih izvora za medicinske djelatnike koji rade na psihijatriji, nije potkrijepljena rezultatima. Prisutno je negativno

Discussion

The hypothesis regarding the need for continuous education on mental illnesses and consulting additional resources for healthcare professionals working in psychiatry was not supported by the results. There is a negative attitude

TABLICA/TABLE 3. Stav prema duševnim bolestima s obzirom na radno mjesto/ *Attitudes toward mental illnesses with respect to workplace*

Čestica	PSIH	N	Me	IQR	RX	U	Z	P
Učim o duševnim bolestima samo kada trebam i ne trudim se čitati dodatne materijale./ <i>I only learn about mental illness when I need to and I don't bother to read additional materials.</i>	da ne	67 99	1,00 3,00	(1,00-2,00) (2,00-4,00)	(1,00-5,00) (1,00-5,00)	1488	6,21	<0,001
Osobe oboljele od duševnih bolesti ne mogu se nikad dovoljno oporaviti kako bi mogle voditi kvalitetan život. / <i>People suffering from mental illness can never recover enough to be able lead a quality life.</i>	da ne	67 100	1,00 2,00	(1,00-2,00) (1,00-3,00)	(1,00-4,00) (1,00-5,00)	2512	2,89	0,004
Rad u polju duševnog zdravlja je podjednako cijenjen kao i druga polja zdravstva i socijalne skrbi. / <i>Work in the field of mental health is equally valued as other fields of health and social welfare.</i>	da ne	66 99	2,00 3,00	(1,00-3,00) (2,00-4,00)	(1,00-5,00) (1,00-5,00)	2083	4,05	<0,001
Nikad ne bih koristio termine „lud“, „luđak“ i slično kako bih opisao kolegama osobe koje pate od duševne bolesti s kojima sam se susreo u poslu. / <i>I would never use terms “crazy”, “lunatic” and the like, how would I describe to my colleagues people suffering from mental illness whom I have met at work.</i>	da ne	67 99	5,00 5,00	(4,00-5,00) (4,00-5,00)	(1,00-5,00) (1,00-5,00)	3188	0,50	0,616

*Psih = rad na odjelu psihijatrije, N = broj ispitanika, Me = medijan, IQR = interkvartilni raspon, Rx = ukupan raspon, U = U vrijednost Mann-Whitney U testa, Z = testna Z vrijednost Mann-Whitney U testa, P = signifikantnost
Psych=work at the department of psychiatry, N=number of subjects, Me=median, IQR=interquartile range, Rx=total range, U=U value of the Mann-Whitney U test, Z=test Z value of the Mann-Whitney U test, P=significance

stajalište zaposlenih u području psihijatrije prema potrebi kontinuiranog obrazovanja i pretraživanju dodatnih izvora stručne literature. Ovaj negativan trend suprotan je dostupnoj literaturi [6]. Stoga, važno je poduzeti napore kako bi se svijest zdravstvenih djelatnika podigla i potaknula potreba za kontinuiranim obrazovanjem u ovoj specifičnoj radnoj organizaciji. Dostupna literatura upravo govori o značaju i važnosti različitih oblika aktivnog učenja u psihijatrijskoj grani medicine jer nove spoznaje potiču kritičko razmišljanje i zadovoljstvo, motivaciju te angažman [7].

Rezultati istraživanja ukazuju na značajne razlike u tome kako se percipira rad zdravstvenih djelatnika na psihijatriji u usporedbi s njihovim kolegama na drugim odjelima. Zdravstveni djelatnici u psihijatriji izražavaju pozitivniji stav prema svojem radu i ne osjećaju se manje cijenjenima unutar zdravstvenog sustava. Međutim, opći dojam i stavovi ostalih zdravstvenih djelatnika zabrinjavaju ih. Slično istraživanje koje je provela Tkalčec (2021) također potvrđuje da studenti imaju negativniju percepciju rada na psihijatrijskim odjelima u usporedbi s drugim odjelima. Ovo se djelomično može objasniti karakteristikama pacijenata koji se liječe na psihijatriji (s obzirom na učestalost agresivnih bolesnika) i specifičnim izazovima u njihovu liječenju i dijagnostici. Međutim, navedeni trend zabrinjava i zahtijeva edukativne programe s ciljem podizanjem svijesti opće i ostatka zdravstvene populacije [8]. Priznaje se da je rad na području mentalnog zdravlja stresniji od onoga u drugim područjima medicine [9]. Djelatnici iz djelatnosti mentalnog zdravlja moraju se nositi s teškim pacijentima [10], uključujući neke s višestrukim mentalnim poremećajima, poremećajima ovisnosti i agresije [11] ili nasilja [12], kao i suicidalnog ponašanja [13]. Ključno je spomenuti i njihovu izlo-

among those working in psychiatry toward the need for continuous education and searching for additional professional literature. This negative trend contradicts the available literature [6]. Therefore, it is important to make efforts to raise the awareness of healthcare professionals and encourage the need for continuous education within this specific working environment. The available literature emphasizes the significance and importance of different forms of active learning in the field of psychiatry, as new knowledge stimulates critical thinking, satisfaction, motivation, and engagement [7].

The research results indicate significant differences in how the work of healthcare professionals in psychiatry is perceived compared to their colleagues in other departments. Healthcare professionals in psychiatry express a more positive attitude towards their work and do not feel less valued within the healthcare system. However, the general impression and attitudes of other healthcare professionals concern them. A similar study conducted by Tkalčec (2021) also confirms that students have a more negative perception of work in psychiatric departments compared to other departments. This can partially be explained by the characteristics of the patients treated in psychiatry (given the frequency of aggressive patients) and the specific challenges in their treatment and diagnosis. However, this trend is worrying and requires educational programs to raise awareness among the general public and the rest of the healthcare population [8]. It is acknowledged that working in mental health is more stressful than in other areas of medicine [9]. Mental health professionals must deal with difficult patients [10], including some with multiple mental disorders, addiction, aggression [11], or violence [12], as well

ženost kritici rodbine osoba oboljelih od mentalnih bolesti i poremećaja [13] uz istovremeno prisustvo organizacijskih i administrativnih ograničenja [14]. Govoreći o cijenjenosti rada u polju mentalnog zdravlja, poražavajuće je da je taj rad manje cijenjen [15], što i ovo istraživanje potvrđuje, pogotovo iz percepcije djelatnika koji ne rade u području mentalnog zdravlja. Nekoliko istraživanja potvrđuje da su zdravstveni djelatnici koji rade na psihijatriji višestruko izloženi sindromima sagorijevanja, zloupotrebi droga/alkohola i samoubojstvima [16]. Zadovoljstvo poslom također je među ključnim ishodima timskog rada u području zdravstva [17], ali često se procjenjuje zajedno s čimbenicima nezadovoljstva poslom [18].

Rezultati drugih istraživanja ukazuju na činjenicu da zdravstveni djelatnici koji nisu zaposleni na psihijatrijskim odjelima skloniji su smatrati osobe s mentalnim bolestima opasnijima. Međutim, nije uočena statistički značajna razlika u percepciji između ove dvije skupine u ovom istraživanju. Ispitane skupine smatraju da osobe oboljele od mentalnih bolesti nisu inherentno opasnije od drugih pacijenata. Rezultati se mogu usporediti s drugim istraživanjima. Na primjer, medicinske sestre na hitnoj pomoći pokazale su najvišu razinu stigme (MICA 2,99), dok su liječnici imali prosječnu ocjenu 2,80 [19]. Zdravstveni djelatnici u području mentalnog zdravlja imali su nižu (2,23) ocjenu [19]. Negativni stavovi zdravstvenih djelatnika u hitnoj medicini zabrinjavajući su jer oni prvi procjenjuju pacijente koji trebaju akutnu psihijatrijsku skrb. Ovaj oblik dijagnostičkog zasjenjenja povećava rizik od pogoršanja zdravstvenog stanja pacijenata i potencijalne smrtnosti. Takvi negativni stavovi predstavljaju prepreku pravodobnom traženju pomoći i mogu uzrokovati kašnjenja u pružanju potrebne skrbi [19]. Metaanaliza percepcije opasnosti od strane pacijenata s mentalnim bolestima zaključila je da zdravstveni djelatnici na psihijatrijskim odjelima ne pokazuju značajne razlike u percepciji opasnosti pacijenata oboljelih od mentalnih bolesti [20].

Analizirajući stavove ispitanika o oporavku pacijenata, rezultati istraživanja ukazuju na statistički značajnu razliku u stavovima prema mogućnosti oporavka osoba s duševnim bolestima između zdravstvenih djelatnika koji rade na psihijatrijskim odjelima i onih koji rade na drugim zdravstvenim odjelima. Razina statističke značajnosti koja iznosi $\alpha^* = 0,6\%$ znači da možemo odbaciti nultu statističku hipotezu. To pokazuje da zdravstveni djelatnici koji rade na psihijatriji imaju manje pesimistične stavove prema oporavku osoba s mentalnim bolestima u odnosu na svoje kolege iz drugih područja medicine. Ovi rezultati podupiru istraživačku hipotezu koja sugerira da postoji razlika u stavovima između ovih dviju skupina.

Zaključak

Provedeno istraživanje dovelo nas je do zaključka da je inovativno u procjeni stavova zdravstvenih djelatnika iz različitih kliničkih okruženja na našim prostorima, te kao takvo dalo je uvid u profesionalne karakteristike zdravstvenih djelatnika. Vidljivo je da obje promatrane skupine imaju prisutnu empatiju prema oboljelima od mentalnih bolesti, ali zdravstveni djelatnici s iskustvom rada na psihijatrijskim

as suicidal behavior [13]. It is also essential to mention their exposure to criticism from the families of patients with mental disorders [13], alongside organizational and administrative constraints [14]. When it comes to the value of work in the field of mental health, it is disheartening to see that it is considered less valuable [15], which this research also confirms, especially from the perspective of professionals not working in mental health. Several studies confirm that healthcare professionals working in psychiatry are multiple times exposed to burnout, substance abuse (drugs/alcohol), and suicide [16]. Job satisfaction is also among the key outcomes of teamwork in healthcare [17], but it is often evaluated together with job dissatisfaction factors [18].

Results from other studies indicate that healthcare professionals not employed in psychiatric departments are more likely to consider individuals with mental illness as more dangerous. However, no statistically significant difference in perception was observed between these two groups in this study. The groups surveyed believe that people with mental illness are not inherently more dangerous than other patients. These results can be compared with another research. For example, emergency medical staff showed the highest level of stigma (MICA 2.99), while doctors had an average score of 2.80 [19]. Healthcare professionals in mental health had a lower score (2.23) [19]. Negative attitudes among emergency medical professionals are worrying as they are the first to assess patients who require acute psychiatric care. This form of diagnostic bias increases the risk of worsening the patient's health and potential mortality. Such negative attitudes pose a barrier to timely seeking help and may cause delays in providing necessary care [19]. A meta-analysis of the perception of danger from patients with mental illnesses concluded that healthcare professionals in psychiatric departments do not show significant differences in the perception of danger from mentally ill patients [20].

By analyzing the attitudes of respondents toward recovery, the research results indicate a statistically significant difference in attitudes towards the possibility of recovery for individuals with mental illnesses between healthcare professionals working in psychiatric departments and those working in other healthcare departments. The statistical significance level of $\alpha^* = 0.6\%$ means we can reject the null hypothesis. That indicates that healthcare professionals working in psychiatry have less pessimistic views about the recovery of people with mental illnesses compared to their colleagues in other fields of medicine. These results support the research hypothesis that suggests a difference in attitudes between these two groups.

Conclusion

The research conducted has led to the conclusion that it is innovative in assessing the attitudes of healthcare professionals from various clinical environments in our region, providing insight into the professional characteristics of healthcare professionals. It is clear that both observed groups demonstrate empathy for individuals with mental illnesses, but healthcare professionals with experience working in psychiatric departments have a more optimistic

odjelima optimističnije gledaju na oporavak pacijenata. Zdravstveni djelatnici koji rade na psihijatriji, s obzirom na svoje kliničko iskustvo, svjedoče oporavku i znaju da se bolesnici oboljeli od mentalnih bolesti mogu oporaviti. To ih čini skupinom koja zbog vlastitog iskustva drugačije percipira pojam oporavka jer razumije njegov pravi značaj za oboljele od mentalnih bolesti.

Stavovi psihijatrijskih i drugih zdravstvenih djelatnika prema pacijentima oboljelima od mentalnih bolesti imaju značajan utjecaj na kvalitetu skrbi i života pacijenata. Edukacija, osvješćavanje i promicanje pozitivnih stavova ključni su za smanjenje stigme, poboljšanje suradnje između pacijenata i stručnjaka te unapređenje ishoda liječenja. Za stvaranje zdravstvenog sustava koji osigurava ravnopravnu skrb svim pacijentima nužno je raditi na razvijanju i promicanju pozitivnih stavova prema osobama s mentalnim bolestima.

Nema sukoba interesa.

Autori izjavljuju da nisu ostvarili financijsku pomoć za pisanje ovog članka te da ne postoji pravna ni fizička osoba koja je financirala izradu ovog rada.

outlook on patient recovery. Healthcare professionals working in psychiatry, due to their clinical experience, witness recovery and know that patients with mental illnesses can recover. That makes them a group that perceives the concept of recovery differently through their own experience, as they understand its true significance for individuals with mental illnesses.

The attitudes of psychiatric and other healthcare professionals towards patients with mental illnesses significantly impact the quality of care and patients' lives. Education, awareness, and promoting positive attitudes are key to reducing stigma, improving collaboration between patients and professionals, and enhancing treatment outcomes. To create a healthcare system that ensures equal care for all patients, it is essential to work on developing and promoting positive attitudes towards individuals with mental illnesses.

Authors declare no conflict of interest.

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