

Attitudes of Medical Staff Towards the Psychiatric Label »Schizophrenic Patient« Tested by an Anti-Stigma Questionnaire

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ABSTRACT

The aim of this research was to investigate the opinions and attitudes of medical staff towards schizophrenic patients. The research included three groups of examinees, 200 physicians of various specialties, 200 nurses and technicians working in Zagreb city hospitals, and 200 3rd and 4th year students of the School of Medicine in Zagreb. Previously validated anti-stigma questionnaire was used, consisting of 25 questions divided into three thematic groups, structured and adapted to the specific requirements of this study. The results were mutually compared and statistically analyzed by applying the χ^2 -test. Significant difference ($p < 0.01$) between the answers of physicians and those of medical students was found in questions 2, 4, 5, 6, 11, 13, 15, 16, 18, 22, 23, 25, and between physicians and nurses/technicians in answers to questions 4, 15, 22, 23. Significant difference ($p < 0.01$) between the answers given by nurses/technicians and medical students was found in questions 10, 13, 22, 23. The results point to the existence of prejudices and stigmatizing attitudes in all three investigated groups. The most frequent reasons for stigmatizing attitude of students are based on fear and insufficient knowledge about mental patients and schizophrenia as a disease, while there are a high percentage of positive answers to the questions on rehabilitation and resocialization. The nurses/technicians also show a high degree of mistrust towards schizophrenic patients and mostly answer with »I don't know«, thus presenting insufficiently formed attitudes about the mentioned problems. The physicians in their answers confirm fear, mistrust and stigmatizing attitudes towards schizophrenic patients found in general population in Croatia¹. The consequences of such attitudes are the low quality of life of schizophrenic patients, and slow, often incomplete, resocialization.

Key words: anti-stigma questionnaire, medical staff, schizophrenic patient

Introduction

Stigma is defined as a sign of disgrace or discredit, which sets a person apart from others². The stigma of mental illness, although more often related to context than to a person's appearance, remains a powerful negative attribute in all social relations^{3,4}. For effective health care to be delivered, it is crucial that health professionals are not hampered by prejudiced attitudes^{5,6}.

Mental disorders remain some of the most stigmatized illnesses^{2,7}. The concept of mental illness is often associated with misunderstanding a disease and with fear of the potential threat of patients.⁸ Mental illness can be difficult to understand and empathize with, especially when the illness affects fundamental personal attributes^{2,8}. Schizophrenia has been found to be one of the most stigmatizing conditions⁸. Negative attitudes and stigma against schizophrenic patients have direct effects on the clinical practice of every medical doctor, especially psychiatrists^{5-7,9}. Fear and ignorance of mental illness can result in an insufficient focus on a patient's physical health needs⁸⁻¹⁰. The occurrence of schizophrenia at a younger, adolescent age is stigmatizing for a young man, because the disease and its course follows his mental development and changes it¹¹. Accepting that stigma plays a negative role at every stage of mental illness presentation, diagnosis, treatment and outcome the degree and type of stigmatization varies according to prevailing cultural norms^{3,10}. Anthropology and cultural studies provide a wider context within which stigma operates. Prejudice against people with mental illness has parallels with racism and racial discrimination^{4,11}. The results of research with the anti-stigma questionnaire in Croatian population speak about the lack of information, a large number of prejudices and stigmatizing attitudes connected with psychiatric (schizophrenic) patients¹.

Subjects and Methods

In the study were included 700 examinees, 65 (9.3%) sheets were not properly filled in, and 35 examinees (5%) refused the test. Statistically analyzed were the results of 600 examinees, who correctly filled the questionnaire. The examinees were selected into three groups. The first group consisted of 200 physicians (specialists) employed in Zagreb (Croatia) city hospitals, divided by gender (100 female and 100 male). The second group consisted of 100 nurses and 100 medical technicians employed in the same Zagreb city hospitals. The third group consisted of 100 students of medicine (50 female and 50 male) of the third and fourth year of the Zagreb School of Medicine. The principle of the examinees anonymity was respected.

The anti-stigma questionnaire was calibrated and structured by the 25 questions divided into three thematic parts, according to the specific requirement of this study¹. The order of the questions is mixed, and for each question one of the three offered answers should have been chosen (Yes, No or I don't know).

The first group of questions tested the knowledge of the examinees and basic attitudes towards schizophrenia. The second group dealt with negative attitudes towards schizophrenic patients (fear, mistrust, rejection). The third group investigated the attitudes of the tested groups towards treatment, future, rehabilitation and resocialization of schizophrenic patients. For processing the data was used the statistical-graphic software package Statistica, Version 6.0. The significance of the differences in levels of qualitative measures was tested by the χ^2 -test.

Results

The total results of the analysis are presented in (Table 1), and graphically

for each group of examinees: physicians, nurses/technicians, students of medicine (Figures 1–3). Statistically significant difference ($p < 0.01$) was found in the answers of physicians and students to questions (2, 4, 5, 6, 11, 13, 15, 16, 18, 22, 23, 25), difference $p < 0.05$ was found in the answers to questions (7, 10 and 14), while in other questions statistically significant difference was not found. Statistically significant difference ($p < 0.01$) was also found in the answers of physicians and nurses/technicians to questions (4, 15, 22, 23), and in the answers of students and nurses/technicians to questions (10, 13, 22, 23). Statistically significant difference ($p < 0.05$) was observed in the answers of students and nurses/technicians to questions (5, 6, 16).

The results reveal significant differences in the students' answers to the first group of questions, where insecurity and fear are prominent, as the result of lacking information connected with the course and symptoms of schizophrenia, and its limitations. Forty-eight percent of students consider schizophrenia to be a synonym for madness, 40% of them would isolate a schizophrenic patient, 9.5% think that schizophrenic patients are mentally retarded persons, and 20% believe that they are inclined to alcohol and drug abuse. In comparing the answers of all the three investigated groups, significant differences were found in the answers to the third group of questions, what confirms prejudices and stigmatizing attitudes. The physicians in 40% of their answers refuse socializing with a schizophrenic patient, 40% of them have no definite opinions about that, while 36% of the physicians would not like to have a schizophrenic patient in their neighborhood. In 38% percent of the answers the physicians would not lend money to a schizophrenic patient, while students would do that in the same percentage, and would socialize with schizophrenic persons. Negative and pos-

itive answers of nurses/technicians amount of about 30%, and »I don't know« answers prevail in more than 40%. The »I don't know« answer of nurses/technicians is mostly present also in the questions (5, 8, 13, 17, 22, 23, 24), thus showing their uncertainty, fear and mistrust towards schizophrenic patients, considering them to be violent and aggressive, what confirms the results of other similar investigations worldwide^{5,8,13}. The significant difference in answers regarding gender was found in questions (13 and 15). Out of the total number of female examinees, 4% accept the possibility that a schizophrenic patient looks after their child, only one female doctor and 14% of men and students. The men would markedly more rarely employ a schizophrenic patient, what refuses 35–38% of them. Prejudices and stigmatizing attitudes are often the reflex of social relations and attitudes within a society. Schizophrenia is considered to be worse than cancer by 23% of the physicians, 15% of the nurses/technicians and 1.5% of the students, and as more severe than AIDS by 15% of the physicians and 11% of the nurses/physicians.

The fear and embarrassment connected with schizophrenic patients is confirmed by 40% of the answers in each of the three tested groups. Sixty percent of the examinees believe that schizophrenic patients are rejected and isolated from the community, 40% think that they cannot make decisions on their own, and 75% that schizophrenia is not enough presented in media.

Discussion

For people with mental illness, stigma is the largest single obstacle to improving their quality of life^{4,9}. Senior medical staff often has more realistic attitudes towards mental illness than their junior colleagues^{5,10}. This investigation wanted to

TABLE 1
 THE ANTI-STIGMA QUESTIONNAIRE RESULTS OF THE 600 EXAMINEES: 200 PHYSICIANS,
 200 MEDICAL STUDENTS, 200 NURSES AND TECHNICIANS

No.	Question	Answer					
		»Yes«	(%)	»No«	(%)	»I don't know«	(%)
1	Have you ever heard about schizophrenia?	598	99.7	2	0.3	-	-
2	Are schizophrenia and madness synonyms?	260	43	284	47	56	10
3	Are you afraid of a schizophrenic person?	222	37	281	47	97	16
4	Has anyone in your family had schizophrenia?	4	0.6	550	91.7	46	7.7
5	Do you think that schizophrenic patients should be locked in or isolated in some way?	92	15.3	397	66.2	111	18.5
6	Schizophrenic patients incline to alcohol and drugs?	94	15.7	290	48.3	216	36
7	Schizophrenic patients are mentally retarded?	42	7	509	85	49	8
8	Would you mind having a schizophrenic person in your immediate neighborhood?	164	27.3	250	41.7	186	31
9	Schizophrenic patients cannot make decisions on their lives by themselves?	264	44	158	26.3	178	29.7
10	Schizophrenia is a disorder than cannot be cured?	442	73.7	86	14.3	72	12
11	Schizophrenic patients are lazy and unreliable?	85	14.2	413	68.8	102	17
12	Schizophrenic patients are mostly violent and dangerous?	123	20.5	362	60.3	115	19.2
13	Would you employ someone treated due to schizophrenia?	145	24.2	182	30.3	273	45.5
14	Would you lend money to a schizophrenic person?	179	30	197	33	224	37
15	Would you let a schizophrenic patient to take care of your child?	44	7.3	481	80.2	75	12.5
16	Would you marry a schizophrenic patient ?	32	5.3	498	83	70	11.7
17	Are schizophrenic patient sexually perverse?	52	8.7	354	59	194	32.3
18	Would you have a schizophrenic patient as a friend?	180	30	219	36.5	201	33.5
19	Do you think that schizophrenic patients are isolated and rejected by society?	358	59.7	63	10.5	179	29.8
20	Media do not discuss schizophrenia sufficiently?	57	9.5	447	74.5	96	16
21	Schizophrenic patients tend to criminality?	77	12.8	357	59.5	166	27.7
22	Schizophrenia is worse than cancer?	80	13.3	436	72.7	84	14
23	Schizophrenia is worse than AIDS?	54	9	472	78.7	74	12.3
24	Investments in treating schizophrenia are futile?	46	7.7	463	77.2	91	15.2
25	You see that your friend has some mental problems. Would you advise him to see a doctor?	564	94	7	1.2	29	4.8

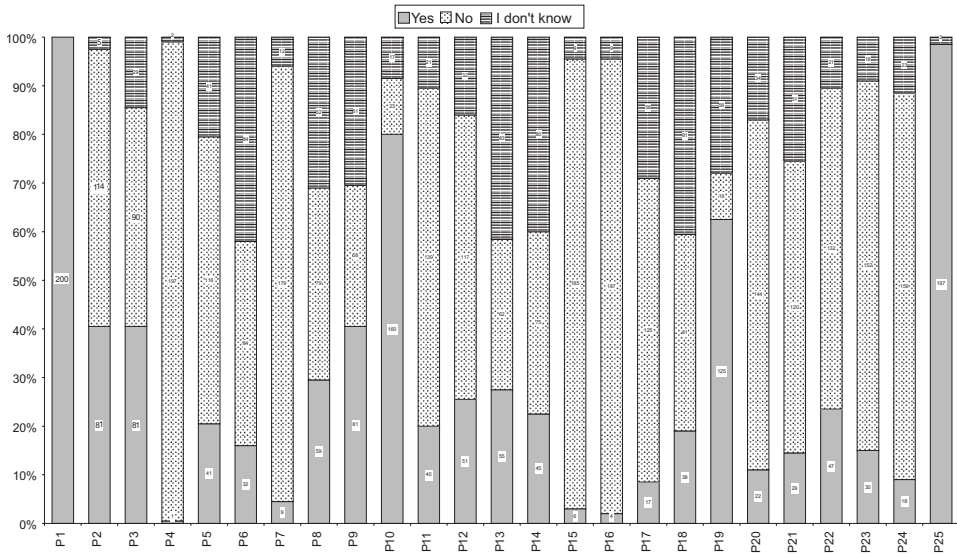


Fig. 1. The anti-stigma questionnaire results of the 200 physicians.

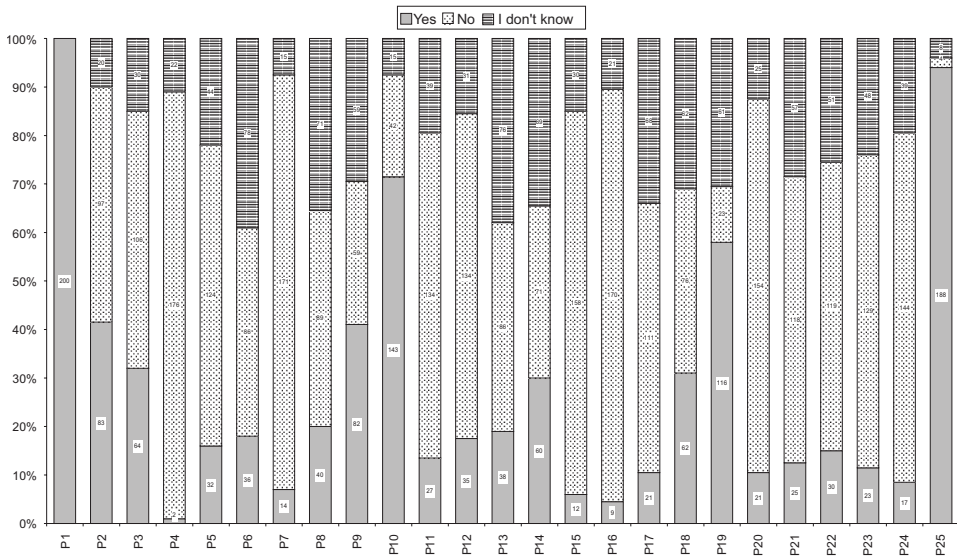


Fig. 2. The anti-stigma questionnaire results of the 200 medical students.

point to the existence of prejudices and stigmatizing attitudes on only in our pop-

ulation but also among medical staff, which was justified by examining the at-

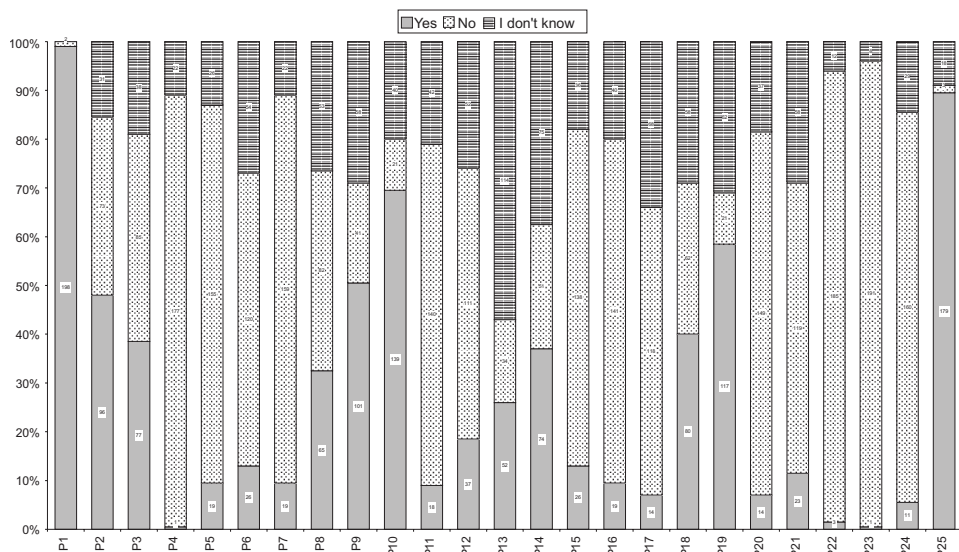


Fig. 3. The anti-stigma questionnaire results of the 200 nurses and technicians.

itudes of physicians' specialists and medical nurses/technicians employed in Zagreb city hospitals¹. Health professionals can take both collective and individual action to challenge the stigma of mental illness, and if we recognize our patients as unique individuals, and not as illnesses or persons with low intellectual performance, it is harder to stereotype and maintain stigmatizing attitudes towards mental illness^{2,12,14}. This implies that the stigma of mental illness can be reduced by education and experience, and that an examination of attitudes towards mental illness should be included in medical

training^{2,15}. Some authors in their work showed that even though knowledge about mental illness remained unchanged in their study group, attitudes and behavioral intention towards those with mental illness did improve^{4,8,15}. This investigation confirmed the need for organizing and performing the educational courses for medical staff on the topic of anti-stigma, who would afterwards with their everyday organized activities create and apply long-term educative-informative program, which would contain integrated biological, psychological, and social view of health care.

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**STAVOVI MEDICINSKOG OSOBLJA PREMA PSIHIJATRIJSKOJ
DIJAGNOZI »SHIZOFRENI BOLESNIK» TESTIRANI ANTI-STIGMA
UPITNIKOM**

SAŽETAK

Cilj ovog istraživanja bio je ispitati mišljenje i stavove medicinskog osoblja (liječnika, medicinskih sestara i tehničara te studenata medicinskog fakulteta) prema shizofrenim bolesnicima. Ispitivanje je uključilo tri skupine ispitanika, 200 liječnika raznih specijalnosti, 200 medicinskih sestara i tehničara zaposlenih u bolnicama grada Zagreba te 200 studenata treće i četvrte godine Medicinskog fakulteta u Zagrebu. Korišten je prethodno validiran anti-stigma upitnik od 25 pitanja podijeljenih u tri tematske cjeline, koji je bio strukturiran i prilagođen specifičnim potrebama ove studije. Međusobno su uspoređeni i statistički obrađeni rezultati pomoću χ^2 - testa, s obzirom na ispitivanu skupinu i spol. Statistički značajna razlika ($p < 0,01$) između odgovora liječnika i studenata medicine nađena je u pitanjima (2, 4, 5, 6, 11, 13, 15, 16, 18, 22, 23, 25), a između liječnika i medicinskih sestara i tehničara u odgovorima na pitanja (4, 15, 22, 23). Statistički značajna razlika ($p < 0,01$) između odgovora medicinskih sestara i tehničara i studenata medicine nađena je u pitanjima (10, 13, 22, 23). Rezultati istraživanja ukazuju na prisutnost predrasuda i stigmatizirajućih stavova u sve tri ispitivane skupine. Najčešći razlozi stigmatizirajućeg stava studenata temelje se na strahu i nedovoljnom poznavanju psihičkog bolesnika i shizofrenije kao bolesti, dok je visok postotak pozitivnih odgovora vezanih uz pitanja rehabilitacije i resocijalizacije istih. Medicinske sestre i tehničari također iskazuju visok stupanj nepovjerenja prema shizofrenom bolesniku, a najčešće odgovaraju sa »ne znam« čime pokazuju nedovoljno izgrađene stavove o spomenutoj problematici. Liječnici u odgovorima potvrđuju strah, nepovjerenje i stigmatizirajuće stavove prema shizofrenim bolesnicima te potvrđuju rezultate dobivene ispitivanjem stavova u općoj populaciji Hrvatske¹. Posljedice takvih stavova su niska kvaliteta života shizofrenih bolesnika i spora, često nepotpuna resocijalizacija.