

CHAPTER 4

Research findings

4.1 INTRODUCTION

This chapter presents the findings of the empirical research according to sample, respondents' demographic details and respondents' perceptions of nursing mentally ill people in a general hospital setting. The perceptions are presented in four categories, namely the self, the patients, the nursing environment, and feelings. The Chi-square test is computed to test the differences in perceptions. (Percentages in the figures have full stops instead of commas, because the program's format is fixed.)

4.2 SAMPLE

According to the official hospital records, the Helen Joseph Hospital accommodates a total of 225 registered nursing staff in the following categories: Assistant Directors (3), Chief Professional Nurses (60), Senior Professional Nurses (36) and Professional Nurses (126).

A total of 124 questionnaires were administered among the registered nurses. The calculated minimum standard error ($p = 0,1$), to determine how close the sample statistics were clustered around the true mean, yielded $s = 3,429$ at the Standard Deviation (SD) of 1,9 for population with characteristics $P = 0,5$. The error value reflected the administered sample size as a good representation of the nursing population in this hospital and the findings of the study were therefore regarded as fully representative.

4.3 RESPONDENTS' DEMOGRAPHIC DETAILS

Table 4.1 Respondents' demographic details

<i>Race</i>	<i>N (%)</i>	<i>Gender</i>	<i>N (%)</i>	<i>Age</i>	<i>N (%)</i>
<i>Black</i>	75 (61)	<i>Male</i>	26 (21,1)	<i>Under 25 yrs</i>	3 (2,5)
<i>Coloured</i>	16 (13)	<i>Female</i>	97 (78,9)	<i>25-34 years</i>	43 (36,1)
<i>Indian</i>	6 (4,9)	-	-	<i>35-44 years</i>	50 (42)
<i>White</i>	26 (21,1)	-	-	<i>45-54 years</i>	15 (12,6)
-	-	-	-	<i>55+ years</i>	8 (6,7)

Although the majority of the respondents (61%) were Blacks, most of the respondents in all the race categories were females, namely 86,7% Blacks, 53,8% Whites, 80% Indians and 81,3% Coloureds. The total race by gender representation is reflected in figure 1 below.

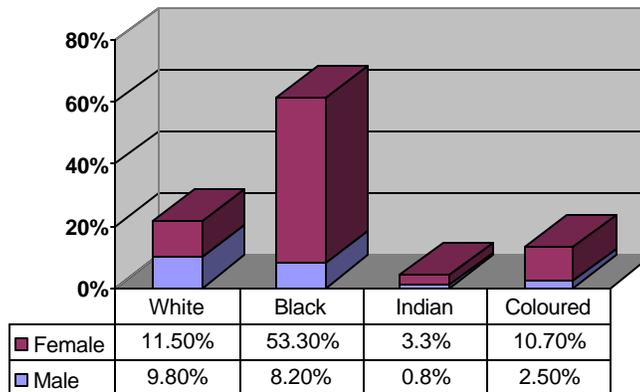


Figure 4.1

Race by gender (N=124)

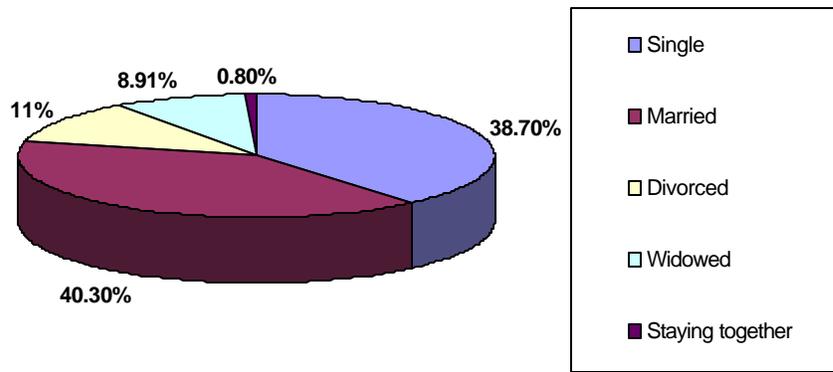


Figure 4.2
Marital status (N=12)

The majority of the Black respondents were married (45,3%) followed by singles (38,7%) while the White and Coloured respondents were mainly married (50% [N=123], respectively).

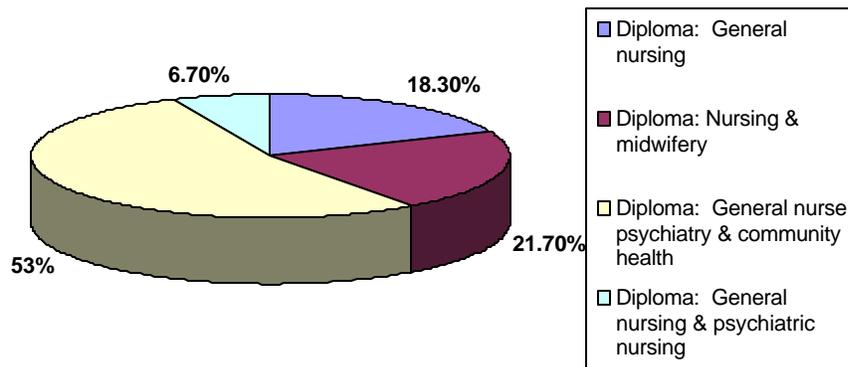


Figure 4.3
Educational qualifications (N=120)

More than half of all the respondents (52,9%) had diplomas in general nursing, psychiatry and community and in the racial groups, this represented 44% Whites, 54,1% Blacks, 80% Indians and 53,3% Coloureds.

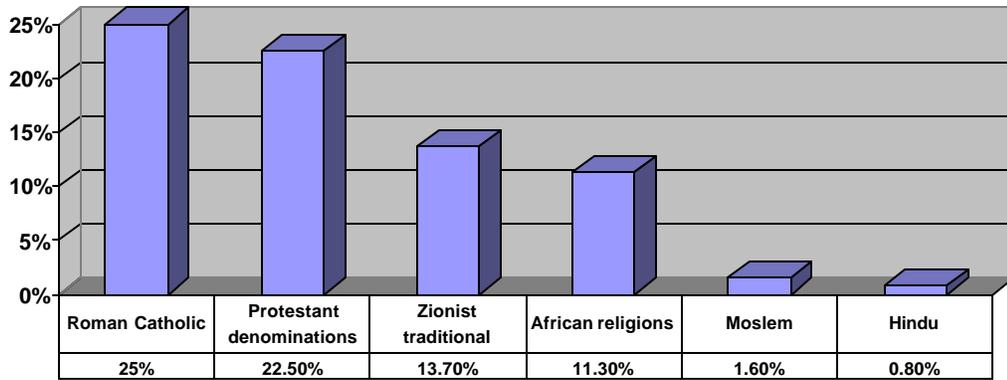


Figure 4.4
Religion (N=124)

Within the racial groups, the majority of the Whites (57,7%), followed by Coloureds (56,3%) and Blacks (30,7%) were Protestants while the Indians were Roman Catholic and Islamic (33,3%, respectively).

The majority (83,5%) of all the respondents were in full-time employment while 41,9% had been employed for between 5 and 10 years and 36,3% for more than 11 years. Two thirds (67,7%) had experience in nursing the mentally ill while 20,2% had experienced cases of mental illness in their families.

4.4 PERCEPTIONS OF NURSING MENTALLY ILL PEOPLE IN A GENERAL

HOSPITAL SETTING

4.4.1 Perception of self

Table 4.2 General respondent perceptions of self

Perception of self	<i>Strongly disagree</i>	Disagree	<i>Uncertain</i>	<i>Agree</i>	<i>Strongly agree</i>
	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>
<i>I believe that mentally ill patients should be nursed only by psychiatric nurses</i>	14 (11,3)	14 (11,3)	14 (11,3)	27 (21,8)	55 (44,4)
<i>I am confident to nurse mentally ill patients in my ward</i>	18 (14,6)	16 (13)	22 (17,9)	40 (32,5)	27 (22)
<i>I do respect a mentally ill patient as an individual</i>	2 (1,6)	2 (1,6)	7 (5,7)	35 (28,5)	77 (62,6)
<i>I think it is normal to shout at mentally ill patients</i>	38 (30,9)	39 (31,7)	18 (14,6)	13 (10,6)	15 (12,2)
<i>A mentally ill person is a person who is sick like any other patient</i>	3 (2,4)	8 (6,5)	7 (5,6)	50 (40,3)	56 (45,2)
<i>I believe that mental illness is caused by witchcraft</i>	42 (34,1)	22 (17,9)	36 (29,3)	12 (9,8)	11 (8,9)
<i>I am unable to establish a therapeutic relationship with mentally ill patients in the ward</i>	26 (21)	42 (33,9)	18 (14,5)	19 (15,3)	19 (15,3)
<i>Mental illness is precipitated by drug abuse/misuse</i>	8 (6,5)	14 (11,3)	28 (22,6)	43 (34,7)	31 (25)
<i>I believe mentally ill people are unable to create friendship with other patients in the ward</i>	17 (14)	46 (38)	14 (11,6)	22 (18,2)	22 (18,2)
<i>Mentally ill patients do not isolate themselves from other patients</i>	16 (12,9)	34 (27,4)	26 (21)	32 (25,8)	16 (12,9)
<i>Mentally ill people view suicide as the one and only alternative to their problems</i>	18 (14,8)	30 (24,6)	20 (16,4)	24 (19,7)	30 (24,6)
<i>I always tolerate mentally ill people in my ward</i>	8 (6,5)	21 (16,9)	23 (18,5)	40 (32,3)	32 (25,8)

From table 4.2 it is clear that of the respondents, 44,4% strongly agree that the mentally ill patient should be nursed only by a psychiatric nurse; 62,6% strongly agree that mentally ill patients are individuals; 62,6% disagree and strongly disagree that it is normal to shout at mentally ill patients, and 85,7% agree and strongly agree that the mentally ill patient is an ill person like any other patient.

Table 4.3 Perception of self by gender

<i>Gender</i>	Male		Female		Chi-Square
	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	
<i>I am confident to nurse mentally ill patients in my ward</i>	76%	4%	49,5%	33%	0,012
<i>I think it is normal to shout at mentally ill patients</i>	50%	30,8%	14,6%	71,9%	0,000
<i>I believe that mental illness is caused by witchcraft</i>	32%	20%	14,4%	60,8%	0,001

There was a significant difference in opinion among the respondents according to gender, represented by Pearson's Chi-Square of 0,012, 0,000 and 0,001, respectively, regarding the following statements: *I am confident to nurse mentally ill patients in my ward; I think it is normal to shout at mentally ill patients; I believe that mental illness is caused by witchcraft*. A significant number of the male nurses (76%) were confident to nurse mentally ill patients compared to the female nurses (49,5%).

A significant number of the female nurses (71,9%) thought it normal to shout at mentally ill patients compared to the male nurses (50%). A significant number of the female nurses (60,8%) believed that mental illness is caused by witchcraft compared to the males (32%).

Table 4.4 Perception of self by age

<i>Age categories</i>	<25yrs		25-34yrs		35-44yrs		45-54yrs		55yrs+		Chi-Square
	<i>Agree</i>	<i>Dis-agree</i>									
<i>I think it is normal to shout at mentally ill patients</i>	33%	33%	9,3%	79%	27%	55%	47%	47%	-	88%	0,041
<i>I believe that mental illness is caused by witchcraft</i>	33%	-	9,3%	70%	26%	42%	13%	40%	13%	88%	0,020

<i>I am unable to establish a therapeutic relationship with mentally ill patients in the ward</i>	100%	-	23%	65%	34%	58%	20%	60%	13%	25%	0,001
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There was a significant difference in opinion among the respondents of different age groups, represented by Pearson’s Chi-Square of 0,041, 0,020 and 0,001, respectively, regarding the following: *I think it is normal to shout at mentally ill patients; I believe that mental illness is caused by witchcraft; I am unable to establish a therapeutic relationship with mentally ill patients in the ward.*

A significant number of the respondents aged 25-34 (79%), 35-44 (55%), 45-54 (47%) and 55 and above (88%) thought that it is not normal to shout at mentally ill patients compared to those younger than 25 (33%). A significant number of the respondents aged 25-34 (70%), 35-44 (42%), 45-54 (40%) and 55 and above (88%) did not believe that mental illness is caused by witchcraft compared to 33% of those under 25. A significant number of the respondents aged 25-34 (65%), 35-44 (58%), 45-54 (60%) believed that they were not able to establish therapeutic relationships with mentally ill patients in the ward compared to 100% of those under 25.

A significant difference in opinion was established between the respondents of different marital status, represented by Pearson’s Chi-Square of 0,000, regarding whether or not they thought it normal to shout at mentally ill patients.

A significant number of respondents who were single (77%), married (65%) and living together (100%) believed that it is not normal to shout at mentally ill patients compared to those who were divorced (71%).

Table 4.5 Perception of self by employment status

<i>Employment status</i>	Full-time employed		Part-time employed		Chi-Square
	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	
<i>I think it is normal to shout at mentally ill patients</i>	16%	69%	60%	25%	0.000
<i>I believe that mental illness is caused by witchcraft</i>	14%	58%	47%	11%	0.000
<i>I am unable to establish a therapeutic relationship with mentally ill patients in the ward</i>	26%	60%	60%	20%	0.003
<i>I believe mentally ill people are unable to create friendship with other patients in the ward</i>	29%	61%	75%	10%	0.000
<i>Mentally ill people view suicide as the one and only alternative to their problems</i>	40%	45%	68%	5%	0.005

Significant difference in opinion was established between the respondents of different employment status, represented by Pearson’s Chi-Square of 0,000; 0,000; 0,003; 0,000 and 0,005, respectively, regarding the above statements. A significant number of the respondents who were employed full-time (69%) thought it not normal to shout at mentally ill patients compared to the part-time employees (60%) who thought that shouting at mentally ill patients was normal. A significant number of the full-time employees (58%) believed that mental illness was caused by witchcraft compared to the part-time employees (47%) who did not believe that witchcraft caused mental illness. A significant number of the full-time employees (60%) thought they were able to establish a therapeutic relationship with mentally ill patients in the ward compared to the part-time employees (60%) who thought they could not. A significant number of the full-time employees (61%) did not believe that mentally ill people were unable to create friendship with other patients in the ward compared to the part-time employees (75%) who believed mentally ill people were unable to do so.

There was a marginally significant difference between the full-time employees (45%) who did not believe that mentally ill people viewed suicide as the one and only alternative to their problems and those (68%) who believed the opposite.

A significant difference in opinion was established between the respondents with different educational qualifications, represented by Pearson's Chi-Square of 0,006 and 0,002, regarding the following: *I am confident to nurse mentally ill patients in my ward* and *I believe mentally ill people are unable to create friendship with other patients in the ward*.

A significant number of the respondents with diplomas in general nursing, psychiatry and community health (67%) and diplomas in general nursing and psychiatry (63%) agreed that they were confident to nurse mentally ill patients in their wards compared to those with diplomas in general nursing (59%) who believed the opposite.

A significant number of those with diplomas in general nursing (48%), diplomas in nursing and midwifery (46%) and diplomas in general nursing, psychiatry and community health (61%) believed that mentally ill people were able to create friendship with other patients in the ward while 88% of those with diplomas in general nursing and psychiatry believed the opposite.

Table 4.6 Perception of self by years of employment

<i>Work experience</i>	<i><2yrs</i>		<i>3-4yrs</i>		<i>5-10yrs</i>		<i>11yrs+</i>		<i>Chi-Square</i>
	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	
<i>I think it is normal to shout at mentally ill patients</i>	9,1%	63,6%	18,8%	68,8%	36,5%	48,1%	11,4%	77,3%	0,046
<i>I believe that mental illness is caused by witchcraft</i>	18,2%	54,5%	12,5%	50%	33,3%	39,2%	4,4%	66,7%	0,020
<i>I am unable to establish a therapeutic relationship with mentally ill patients in the ward</i>	20%	60%	56%	24%	22,6%	64,3%	60%	40%	0,012

While all the other respondents thought it is not normal to shout at mentally ill patients, whereas those who had between 5 and 10 years' working experience believed it was normal, represented by some marginally significant differences of 0,046.

The same category of respondents (33,3%) also believed that mental illness was caused by witchcraft, differing significantly (0,020) from the other categories. Significant differences of 0,012 were also established between respondents with less than 2 years (60%) and 5-10 years (64.3%) who believed that they were unable to establish therapeutic relationships with mentally ill patients in their wards and those with 3-4 years (56%) and 11 years and above (60%) of working experience who believed they could establish relationships.

The Catholic (80,6%) and Protestant (64,6%) respondents varied significantly in their thinking that it was not normal to shout at mentally ill patients and the Zionist traditional (47,1%), African religions (57,1%) and Moslem (50%) respondents believed the opposite, represented by Pearson Chi-Square of 0,020.

4.4.2 Perception of patients

Table 4.7 General perception of patients

Perception of patients	Strongly disagree N (%)	Disagree N (%)	Uncertain N (%)	Agree N (%)	Strongly agree N (%)
<i>Mentally ill patients are rude when they talk to other patients</i>	13 (10,5)	46 (37,1)	30 (24,2)	19 (15,3)	16 (12,9)
<i>I do not have time to attend to a mentally ill patient</i>	34 (27,6)	39 (31,7)	11 (8,9)	24 (19,5)	15 (12,2)
<i>A wandering patient makes it very hard for me to render nursing care</i>	12 (10)	21 (17,5)	11 (9,2)	44 (36,7)	32 (26,7)
<i>The presence of mentally ill patients in a unit interferes with my duties</i>	17 (13,9)	28 (23)	19 (15,6)	37 (30,3)	21 (17,2)
<i>Mentally ill patients like to be the centre of attraction, for example by taking off their clothes or talking to themselves when they see many people around them</i>	10 (8,1)	23 (18,5)	19 (15,3)	30 (24,2)	42 (33,9)
<i>Mentally ill patients are doubtful</i>	6 (5)	24 (19,8)	26 (21,5)	42 (34,7)	23 (19)
<i>Mentally ill patients are dangerous</i>	7 (5,6)	22 (17,7)	25 (20,2)	34 (27,4)	36 (29)
<i>Mentally ill patients are very unpredictable</i>	1 (0,8)	17 (13,7)	15 (12,1)	44 (35,5)	47 (37,9)
<i>Mentally ill patients do not recover from their illness</i>	2 (1,6)	18 (14,5)	22 (17,7)	50 (40,3)	32 (25,8)
<i>Mentally ill patients don't care how they look or appear</i>	7 (5,7)	29 (23,8)	30 (24,6)	36 (29,5)	20 (16,4)
<i>Mentally ill patients communicate with body gestures</i>	7 (5,7)	26 (21,3)	29 (23,8)	40 (32,8)	20 (16,4)
<i>Mentally ill people are susceptible to committing crime</i>	7 (5,7)	24 (19,7)	25 (20,5)	42 (34,4)	24 (19,7)
<i>Mentally ill patients depend on others to meet their basic needs</i>	7 (5,6)	28 (22,6)	24 (19,4)	41 (33,1)	24 (19,4)

Table 4.7 indicates that just over half of the respondents (58,15%) thought mentally ill patients liked to be the centre of attraction; for example, by taking off their clothes or talking to themselves when they saw several people around them. Most of the respondents (73,45%) thought mentally ill patients were very unpredictable.

Table 4.8 indicates that there were significant differences between the genders on certain items. For example, significantly more of the female respondents (65,6%) thought a wandering patient made it very difficult for them to render nursing care than the males (53,8%). A significant number of females compared to males thought mentally ill patients liked to be the centre of attraction for example by taking off their clothes or talking to themselves when they saw several people around them, that mentally ill patients did not care how they looked or appeared, and that mentally ill patients depended on others to meet their basic needs.

Table 4.8 Perception of patient by gender

<i>Gender</i>	Male		Female		Chi-Square
	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	
<i>A wandering patient makes it very difficult for me to render nursing care</i>	53,8%	19,2%	65,6%	30,1%	0,002
<i>Mentally ill patients like to be the centre of attraction, for example, by taking off their clothes or talking to themselves when they see many people around them</i>	80,8%	7,7%	51,5%	32%	0,020
<i>Mentally ill patients don't care how they look or appear</i>	68%	8%	39,6%	35,4%	0,014
<i>Mentally ill patients depend on others to meet their basic needs</i>	69,2%	7,7%	48,5%	33%	0,036

There was a significant difference in opinion, represented by Pearson's Chi-Square of 0,033, between the respondents according to marital status regarding whether or not *mentally ill patients depend on others to meet their basic needs*. A significant number of the divorced (79%), widowed (82%) and living together (100%) respondents agreed while the married (42%) and single (27%) respondents disagreed that mentally ill patients depended on others to meet their basic needs. There was a significant difference in perceptions, represented by Pearson's Chi-Square of 0,030, among the various racial groups regarding whether mentally ill patients depended on others to meet their basic needs. Whereas the majority of the Whites (62%) and Blacks (59%) agreed, the majority of the Indians (67%) and Coloureds (38%) disagreed.

Table 4.9 Perception of patients by employment status

<i>Employment status</i>	Full time employed		Part time employed		Chi-Square
	<i>Agree</i>	<i>Disagree</i>	<i>Agree</i>	<i>Disagree</i>	
<i>Mentally ill patients are rude when they talk to other patients</i>	23,8%	55%	55%	10%	0,001
<i>I do not have time to attend to a mentally ill patient</i>	23%	69%	75%	15%	0,000
<i>Mentally ill patients don't care how they look or appear</i>	41%	32%	74%	16%	0,032

Significant differences in perceptions were found between the respondents according to employment status. While most of the full-time employees (55%) thought mentally ill patients were rude when they talked to other patients, most of the part-time employees (55%) disagreed. The majority of the part-time employees (75%) thought they did not have time to attend to mentally ill patients while most of the full-time employees (69%) thought they had time to attend to a mentally ill patient. Some of the full-time employees (32%) thought mentally ill patients did not care about their appearance while the majority of the part-time employees (74%) believed the opposite.

There was a significant difference in opinion, represented by Pearson's Chi-Square of 0,021, among the various years of employment categories regarding the respondents' availability of time to attend to mentally ill patients. Most of the nurses who had been employed less than 2 years (55%) indicated they did not have time to attend to mentally ill patients, while most of those who had been employed for 3 to 4 years (56,3%) indicated they had time to attend to mentally ill patients. Most of the respondents who had been employed between 5 and 10 years (66%) also indicated that they did not have time to attend to mentally ill patients.

There was a significant difference of 0,001 Pearson Chi-Square in the perception of patients between the individuals who had been exposed to the mentally ill differently regarding whether or not "*the presence of mentally ill patients in a unit interferes with my duties*". While those who had mentally ill members in the family (54%) and those who were exposed to the mentally ill in the community (45,8%) agreed, a significant number of those who had never been exposed to the mentally ill in the past (30%) and those who were exposed through nursing (43,4%) disagreed.

Table 4.10 Perception of patient by religion

<i>Religion</i>	Catholic		Protestant		Zionist traditional		African Religions		Moslem		Chi-Square
	<i>Agree</i>	<i>Dis-agree</i>	<i>Agree</i>	<i>Dis-agree</i>	<i>Agree</i>	<i>Dis-agree</i>	<i>Agree</i>	<i>Dis-agree</i>	<i>Agree</i>	<i>Dis-agree</i>	
<i>Mentally ill patients are rude when they talk to other patients</i>	25,8%	48,4%	16,7%	58,3%	70,6%	5,9%	28,6%	35,7%	50%	-	0,014
<i>Mentally ill patients do not recover from their illness</i>	30%	43,3%	52,1%	20,8%	75%	6,3%	57,1%	21,4%	100%	-	0,030

There was a significant difference in perceptions, represented by Pearson’s Chi-Square of 0,014 and 0,030, among respondents of the various religions regarding whether “*mentally ill patients are rude when they talk to other patients*” and “*mentally ill patients do not recover from their illness*”. Whereas most of the Zionist traditionalists (70,6%) believed that mentally ill patients were rude when they talked to other patients, the Catholics (48,4%) and Protestants (58,3%) did not think so. While a significant number of the Zionist traditionalists (75%) and African religions believers (57,1%) thought that mentally ill patients did not recover from their illness, some of the Catholics (43,3%) thought the opposite.

4.4.3 Perception of environment

Table 4.11 General perception of the environment

Perception of environment	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Uncertain</i>	<i>Agree</i>	<i>Strongly agree</i>
	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>
<i>I feel mentally ill patients should be nursed in isolation; they must not come to a general hospital</i>	14 (11,4)	23 (18,7)	16 (13)	33 (26,8)	37 (30,1)
<i>It is easier for me to nurse ten other patients in a general hospital than one mentally ill patient</i>	7 (5,9)	31 (26,1)	14 (11,8)	23 (19,3)	44 (37)
<i>Staff shortages make it difficult for me to nurse a mentally ill patient in a general hospital setting</i>	4 (3,3)	7 (5,7)	9 (7,3)	37 (30,1)	66 (53,7)
<i>A mentally ill patient should always be nursed by a male nurse</i>	21 (16,9)	42 (33,9)	10 (8,1)	32 (25,8)	19 (15,3)
<i>It is difficult to admit a mentally ill patient in a general ward</i>	6 (4,9)	26 (16,3)	21 (17,1)	48 (39)	28 (22,8)
<i>I cannot cope with nursing and manage a mentally ill patient in a general hospital setting</i>	3 (2,4)	26 (21)	20 (16,1)	45 (36,3)	30 (24,2)
<i>Mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards</i>	14 (11,4)	14 (11,4)	12 (9,8)	27 (22)	56 (45,5)
<i>The best way to handle mentally ill patients is to keep them behind locked doors</i>	17 (13,8)	30 (24,4)	24 (19,5)	27 (22)	25 (20,3)

Table 4.11 indicates that 83,8% of the respondents thought that staff shortages made it difficult for them to nurse mentally ill patients in a general hospital setting; 61,8% thought it was difficult to admit a mentally ill patient in a general ward; 60,6% agreed that they could not cope with nursing and managing a mentally ill patient in a general hospital setting, and 67,5% agreed that mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards.

Table 4.12 Perception of the environment by gender

	Male		Female		Chi-Square
	Agree	Disagree	Agree	Disagree	
<i>It is easier for me to nurse ten other patients in a general hospital than one mentally ill patient</i>	80%	16%	49,5%	36,6%	0,023
<i>A mentally ill patient should always be nursed by a male nurse</i>	65,4%	19,2%	34%	59,8%	0,001
<i>Mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards</i>	80,8%	-	63,5%	29,2%	0,003
<i>The best way to handle mentally ill patients is to keep them behind locked doors</i>	69,2%	11,5%	35,4%	44,8%	0,003

Significant differences were found between the genders, represented by Pearson's Chi-Square of 0,023, 0,001, 0,003 and 0,003, respectively. The males strongly believed that it was easier for them to nurse ten other patients in a general hospital than one mentally ill patient, that a mentally ill patient should always be nursed by a male nurse, that a mentally ill patient should always be admitted to hospitals surrounded with a high fence and security guards, and that the best way to handle mentally ill patients was to keep them behind locked doors while in every cases, a significant number of the females disagreed.

Table 4.13 Perception of the environment by employment status

	Full time employed		Part time employed		Chi-Square
	Agree	Disagree	Agree	Disagree	
<i>I feel mentally ill patients should be nursed in isolation and must not come to a general hospital</i>	56%	34%	60%	10%	0,016
<i>A mentally ill patient should always be nursed by a male nurse</i>	37%	57%	65%	25%	0,030
<i>It is difficult to admit a mentally ill patient in a general ward</i>	64%	25%	45%	5%	0,000
<i>Mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards</i>	68%	26%	65%	5%	0,002
<i>The best way to handle mentally ill patients is to keep them behind locked doors</i>	41%	46%	55%	5%	0,001

A significant number of the full-time employees did not believe that mentally ill patients should be nursed in isolation and that they must not come to a general hospital while the part-time employees thought the opposite. A significant number of the full-time respondents compared to the part-time ones believed that a male nurse should always nurse a mentally ill patient. A significant number of the full-time employees believed it was not difficult to admit a mentally ill patient in a general ward, that mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards, and that the best way to handle mentally ill patients was to keep them behind locked doors and in every case, the part-time employees disagreed.

There was a significant difference of 0,005 Pearson's Chi-Square in perceived feeling between the individuals with different exposure to the mentally ill regarding whether *mentally ill patients should always be admitted to hospitals surrounded with a high fence and security guards*. The majority (80%) of those who had had no exposure to the mentally ill, (60%) of those with mentally ill members in the family and (71%) of those who were exposed through nursing agreed; the majority (60%) of those with exposure to the mentally ill in the community disagreed.

Table 4.14 Perception of the environment by religion

	Catholic		Protestant		Zionist traditional		African religious belief		Moslem		Chi-Square
	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	
<i>I feel mentally ill patients should be nursed in isolation; they must not come to a general hospital</i>	48,4%	41,9%	66%	27,7%	58,8%	11,8%	57,1%	7,1%	42,9%	57,1%	0,018
<i>The best way to handle mentally ill patients is to keep them behind locked doors</i>	22,6%	54,8%	42,6%	46,8%	64,7%	-	42,9%	14,3%	100%	-	0,003

There were significant differences in the views of the respondents according to religion, as represented by Pearson's Chi-Square values of 0,018 and 0,003. The Zionist traditionalists (58,8%), African religion

believers (57,1%) and Protestants (66%) thought that mentally ill patients should be nursed in isolation and must not be admitted to a general hospital while the Catholics (41,9%) and Moslems (57,1%) disagreed. The Zionist traditionalists (64,7%), African religion believers (42,9%) and all the Moslem respondents thought the best way to handle mentally ill patients was to keep them behind locked doors, while the Catholics (54,8%) and Protestants (46,8%) disagreed.

4.4.4 Perceived feelings

Table 4.15 The general perception of feelings

Perceived feelings	<i>Strongly disagree</i>	<i>Disagree</i>	<i>Uncertain</i>	<i>Agree</i>	<i>Strongly agree</i>
	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>	<i>N (%)</i>
<i>I am scared if a mentally ill person interferes with other patients in the ward</i>	7 (5,7)	16 (13,1)	26 (21,3)	52 (42,6)	21 (17,2)
<i>I feel insecure to render nursing care to a mentally ill patient</i>	16 (13,1)	37 (30,3)	24 (19,7)	32 (26,2)	13 (10,7)
<i>I always fear that a mentally ill patient may lose his/her sense at any given moment</i>	6 (5)	18 (14,9)	22 (18,2)	52 (43)	23 (19)
<i>It frustrates me to learn that I will not be compensated if injured by a mentally ill patient in the ward</i>	6 (4,9)	5 (4,1)	12 (9,8)	36 (29,8)	63 (51,6)
<i>I am afraid to nurse mentally ill patients</i>	22 (17,7)	40 (32,3)	23 (18,5)	25 (20,2)	14 (11,3)
<i>I feel threatened by a mentally ill patient</i>	17 (13,8)	38 (30,9)	27 (22)	16 (13)	25 (20,3)
<i>I feel frustrated when I am unable to communicate with mentally ill patients in my ward</i>	8 (6,5)	14 (11,3)	13 (10,5)	60 (48,4)	29 (23,4)
<i>I feel a mentally ill patient can jump on you</i>	9 (7,3)	23 (18,5)	25 (20,2)	39 (31,5)	28 (22,6)
<i>It is boring to nurse a patient who does not show any signs of immediate improvement like a mentally ill patient</i>	17 (13,7)	33 (26,6)	14 (11,3)	29 (23,4)	31 (25)
<i>It is a waste of time to nurse mentally ill patients in a general hospital</i>	12 (9,7)	36 (29)	22 (17,7)	23 (18,5)	31 (25)
<i>When I disagree with mentally ill patients they express frustration</i>	6 (4,9)	16 (13)	26 (21,1)	42 (34,1)	33 (26,8)

Table 4.15 indicates that the majority of all the respondents (62%) believed that they always feared that mentally ill patients might lose their sense at any given moment; 81,4% agreed that it frustrated them to learn that they would not be compensated if injured by a mentally ill patient in the ward; 71,8% felt frustrated when they were unable to communicate with mentally ill patients in the ward and 60,9% agreed that mentally ill patients got frustrated when they disagreed with them.

Table 4.16 Perceived feelings by age

	<25yrs		25-34yrs		35-44yrs		45-54yrs		55yrs+		Chi-Square
	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	
<i>I feel insecure to render nursing care to a mentally ill patient</i>	100%	-	14%	69%	40%	36%	60%	27%	36%	25%	0,002
<i>It is boring to nurse a patient who does not show any signs of immediate improvement, like a mentally ill patient</i>	100%	-	26%	58%	62%	30%	60%	33%	38%	62%	0,016

There was a significant difference in opinion, represented by Pearson’s Chi-Square of 0,002, among the varying age groups regarding whether or not they felt secure to render nursing care to a mentally ill patient. All (100%) the nurses who were under 25, the majority of those between 45 and 54 and over 55 (36%) felt insecure compared to those between 25 and 34 (69%) and 35-44 who felt secure in rendering nursing care to mentally ill patients.

There was also a significant difference of 0,016 Pearson’s Chi-Square in perceived feeling between the genders regarding whether *it is boring to nurse a mentally ill patient who does not show signs of immediate improvement*. Among those who felt it was boring were all the respondents under 25, those between 35 and 44 years (62%) and those between 45 and 54 years (60%) while those who disagreed were in the age groups 25-34 (58%) and above 55 years (62%).

Table 4.17 Perceived feelings by gender

	Male		Female		Chi-Square
	Agree	Disagree	Agree	Disagree	
<i>It is a waste of time to nurse mentally ill patients in a general hospital</i>	61,5%	11,5%	38,1%	46,4%	0,005
<i>When I disagree with a mentally ill patient he/she expresses frustration</i>	88,5%	-	54,2%	22,9%	0,004

Represented by 0,005 and 0,004 Pearson's Chi-Square, respectively, the males and females differed significantly in their opinions. The males agreed that *it is a waste of time to nurse mentally ill patients in a general hospital setting* and that *when they disagree with a mentally ill patient, they express frustration* and a significant number of the females disagreed in both cases.

Table 4.18 Perceived feelings by marital status

	Single		Married		Divorced		Widowed		Living together		Chi-Square
	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	
<i>I feel insecure to render nursing care to a mentally ill patient</i>	26%	51%	33%	51%	79%	14%	55%	18%	-	-	0,007
<i>I feel threatened by a mentally ill patient</i>	29%	46%	25%	51%	50%	43%	73%	18%	-	-	0,042

The respondents differed significantly by marital status, represented by Pearson's Chi-Square of 0,007 and 0,042. A significant number of the divorced (79%) and widowed (55%) respondents felt insecure rendering nursing to mentally ill patients compared to the single (51%) and married (51%) respondents. More of the widowed (73%) respondents felt threatened by mentally ill patients than the divorced (43%) and married (51%) respondents.

Table 4.19 Perceived feelings by employment status

	Full-time employed		Part-time employed		Chi-Square
	Agree	Disagree	Agree	Disagree	
<i>I feel insecure to render nursing care to a mentally ill patient</i>	30%	50%	74%	5%	0,000
<i>I am afraid to nurse mentally ill patients</i>	26%	58%	60%	5%	0,000
<i>I feel threatened by a mentally ill patient</i>	28%	49%	63%	21%	0,010
<i>I feel frustrated when I am unable to communicate with mentally ill patients in my ward</i>	70%	22%	75%	-	0,011
<i>It is boring to nurse a patient who does not show any signs of immediate improvement, like a mentally ill patient</i>	44%	47%	80%	5%	0,002
<i>It is a waste of time to nurse mentally ill patients in a general hospital</i>	39%	47%	70%	10%	0,011

The respondents differed significantly by their full-time or part-time status, represented by Pearson's Chi-Square of 0,000, 0,000, 0,010, 0,011, 0,002 and 0,011, respectively. A significant number of the part-time employees (74%) felt more insecure to render nursing care to mentally ill patients compared to the full-time employees. Of the part-time employees, 60% were afraid to nurse mentally ill patients; 63% felt threatened by mentally ill patients; 75% felt frustrated when unable to communicate with mentally ill patients in the ward; 80% felt it was boring to nurse a patient who did not show any signs of immediate improvement and 70% felt it a waste of time to nurse mentally ill patients in a general hospital. In all cases, a significant number of the full-time employees felt differently.

Represented by Pearson's Chi-Square of 0.001, the respondents of different educational qualifications varied significantly regarding the following: respondents with diplomas in general nursing and psychiatry (86%), those with diplomas in nursing and midwifery (50%) and those with diplomas in general nursing (41%) felt more insecure nursing mentally ill patients compared to those with diplomas in general nursing, psychiatry and community health (60%).

Table 4.20 Perceived feelings by experience with mentally ill people

	Never		Mentally ill in family		Nursing		Mentally ill in the community		Chi-Square
	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	Agree	Dis-agree	
<i>I feel insecure to render nursing care to a mentally ill patient</i>	20%	30%	45,8%	25%	36,1%	51,8%	40%	20%	0,021
<i>I feel threatened by a mentally ill patient</i>	30%	10%	50%	25%	28,6%	53,6%	40%	60%	0,007

Represented by a Pearson’s Chi-Square of 0,021 and 0,007, respectively, respondents with different experience or exposure to mentally ill patients differed significantly in perceptions. The respondents who had experience of mentally ill members in the family (45.8%) and experience of the mentally ill in the community (40%) felt more insecure compared to those with no experience with the mentally ill and those with experience nursing mentally ill patients. The respondents with experience of nursing mentally ill patients (53,6%) and those who had experience of the mentally ill in the community (60%) did not feel as threatened by a mentally ill patient as those with no experience and those with mentally ill members in the family.

There was a significant difference of 0,006 Pearson’s Chi-Square in perceived feeling between the respondents of different religions regarding whether or not *it is a waste of time to nurse mentally ill patients in a general hospital*. The majority of the Catholics (64,5%) disagreed while 64,7% of the Zionists, 45,8% of the Protestants and 57,1% of African Traditional Religions agreed that it is a waste of time to nurse mentally ill patients in a general hospital setting.

4.5 CONCLUSION

This chapter discussed the general experiences and perceptions of a representative sample of the Helen Joseph Hospital nursing staff. The findings revealed that the majority of the nursing staff are Blacks, followed by Whites, and mainly single and married individuals aged between 25 and 44. With regard to educational qualifications, the majority had diplomas in general nursing, psychiatry and community health.

Most of the respondents were Roman Catholics, followed by Protestants, Zionists, and members of African traditional churches.

The respondents' perceptions and attitudes towards nursing the mentally ill patients differed significantly according to marital status, gender, religion, and work experience. This means therefore that, among other things, the hospital may expect different outcomes and work quality when these nurses deal with the mentally ill on the basis of their demographic profiles and experience.

Chapter 5 concludes the study, discusses its limitations and makes recommendations for practice, policy and further research.