



Attitude of Nurses in the Federal Neuropsychiatric Hospital Enugu Relating To Relapse Prevention among Psychiatric Patients

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ABSTRACT

Every hospital has the task of determining whether there is a problem with the patients, the healthcare providers, or the broader public when the intended goal is not achieved. The Federal Neuropsychiatric Hospital's mental health patients' attitudes toward relapse prevention are the basis for this study's attitude analysis. Enugu. This study's goals are to understand nurses' attitudes about relapse prevention and to identify long-term solutions to reduce this threat. It also aims to identify the causes of relapse and provide strategies for preventing it. Data were gathered via questionnaires and interviews, and the results were tabulated, displayed as a bar chart, and expressed as percentages. The study used nurses, and the data was collected and examined. The outcome demonstrated that relapses can be prevented by a mix of factors rather than alone by the nurse's skill. All of these can be avoided with proper education, family-focused therapy, strong social support, compliance, and attendance at follow-up appointments.

INTRODUCTION

Mental illness is a medical condition that has an impact on a person's thoughts, feelings, behavior, and perspective of their surroundings. An individual with a mental illness may experience distress and find it difficult to carry out daily duties, maintain relationships, or work. From mild diseases that last only a few weeks to serious illnesses that can last a lifetime, mental illness can take many different forms. Reason severe impairment[1] Mental illness can take many different forms. Mood disorders, anxiety disorders, personality disorders, psychotic disorders, trauma-related disorders, and substance addiction disorders are some of the primary categories of mental disorders. [2]

Both an individual's quality of life and the productivity of their community depend heavily on their mental health and wellness. For centuries, mental health professionals, thinkers, and scientists have been fascinated and confused by mental disease. Psychiatric nurses play a crucial role in the process of caring for mentally ill individuals, and they frequently face numerous and complicated challenges in providing care. Psychiatric mental health nursing is an essential component of the continuum of nursing practice [3–4]. Mental illness accounts for 7.4% of the world's disease burden and is one of the main causes of lifetime impairment. Its symptoms have been ascribed to demonic possession, understood as divine retribution for transgressions, or acknowledged as proof of the inhumanity of those who experience it.

As a result of this reasoning, those who were diagnosed with this kind of disease continued to face stigma. According to Thorneycroft, stigma is a combination of discrimination brought about by social exclusion or avoidance, prejudice arising from unfavorable attitudes, and ignorance and misinformation brought about by a lack of knowledge. Studies have demonstrated that stigmatization causes people to put off seeking treatment, which increases the risk of recurrence [5].

Relapse is one of the biggest issues facing those who provide mental health care. Approximately 28% of people experience it within the first year of follow-up, 43% within the first 1.5 to 2 years, and 54% within the third year [6].

Even with the current advancements in contemporary therapy, relapse and the recurrence of 45 mental illnesses remain alarmingly common worldwide. Every day, people who should be responsible and productive in life are perishing.

In an effort to lessen reliance on medical care and prevent relapse, patients are now forced to spend a brief time in the hospital and undergo trial leave before being released to their homes. Additionally, this lessens stigma and avoids difficulties. [7]

Since nurses make up the largest group of medical personnel directly involved in patient care, including that of patients with mental health issues, it is especially crucial to focus on them.

The practice of nursing can eventually benefit from having a workforce of highly qualified, adaptable, and culturally aware nurses. This study aims to provide an overview of nurses and demonstrate how effectively using psychiatric nursing services can help eliminate the rising number of relapses among mental patients at the Federal Neuropsychiatric Hospital in Enugu (FNHE).

The most serious mental illness is psychotic disorder, marked by significant disturbances to perception and thought processes. Psychotic experiences like delusions and hearing voices are frequently a part of it. It can hinder functioning by causing disruptions to studies or the loss of an acquired ability to maintain a livelihood [8]

Relapse in psychotic disease has always been a significant difficulty; in recent years, readmissions to the hospital have become more common, which has proven problematic. This has made it impossible to effectively treat the patient's symptoms and find a cure.

Relapse was confirmed to be possible at any point during therapy and recovery, with 70% of patients experiencing relapses following their initial psychotic episodes. Seeing patients who were just released home after being stabilized upon admission return has frustrated the nursing staff and the hospital. Relapses like this one are linked to decreasing clinical outcomes, declining treatment response, increasing caregiver burden, and growing financial strain on families and society [9].

The cost and risk variables for relapse are examined in the London study conducted by [10]. They discovered that relapsed patients' costs were more than four times greater than those of non-relapsed patients. The main risk factor for relapse in psychotic disease was medication noncompliance.

Relapse in psychotic disease is extremely upsetting, expensive, and causes mental health workers to experience burnout. Some patients must travel one or two days to the hospital, which makes mental health services inaccessible and poorly monitored. Stigmatization and reliance on caregivers are other factors [11].

All of these have contributed to the high rate of recurrence that various patient groups have faced during their care, which has resulted in social incapacity and financial constraints as well as social annoyance, a shortage of personnel, and immense misery. Aside from the immense suffering, the economy could suffer and society would lose out if problems are not adequately addressed and resolved [12].

This is what spurred the researcher to look into the reason, offer recommendations, address the issue, and lower the high relapse rate.

MATERIALS AND METHODS

RESEARCH DESIGN.

This study employed a Description survey method where the prospective method data collection was used and involved the distribution of structural questionnaires to the respondents.

TARGET POPULATION

The target population was drawn from the staff of the hospital whereby 250 nurses were used as the target population.

INSTRUMENT OF DATA COLLECTION

Data was collected using three major research tools, personal observation by the researcher, questionnaire and verbal interview method.

The Questionnaire is the most vital tool of adequate and Correct information.

The Questionnaire guide consist of the following

Section A:Is based in the respondents personal data Section B: Consist of selected questions on the ability and attitude of nurses towards relapse prevention and also factor that predispose them to relapse.

VALIDITY OF INSTRUMENT

Validity is the ability of an instrument to measure what it is Supposed to measure to ensure that the research instrument was Valid, the Questionnaire was submitted by the researcher to her Supervisor for vesting and critical review, necessary correction made were effected. This was to ensure that accurate data would be obtained by the Questionnaire.

RELIABILITY OF INSTRUMENT

Reliability is the Consistency with which an instrument measures what is supposed to measure, (Kerry, 2013). To ensure reliability of the instrument for collection for data. Pilot study was copied of the instrument, using a test-retest method fifteen copies of the questionnaire were given to 10 nurses in federal Neuropsychiatric hospital, Enugu to fill and return. Then days later, Fresh copies of the same questionnaires were given to the same nurses to fill and return.

ETHICAL CONSIDERATION

The Consent of individual respondents participating in study was sought and obtained before administering the questionnaires. Confidentiality was strictly maintained regarding all information. It was carefully chosen to be able to extract useful information from respondents

METHOD OF DATA COLLECTION

120 Questionnaires were administered to the respondents with help of assistance. At the end, 100 questionnaires were collected, 20 Questionnaires were wrongly filled and 100 questionnaires was collected back. The Questionnaires were given and collected within 3 days.

STATISTICAL ANALYSIS

Data collected from the respondents were analyzed using percentage, table and bar chart!

RESULTS

SECTION A (DEMOGRAPHIC DATA)

SEX		
Male	60	60%
Female	40	40%
AGE		
20-30	30	30%
31-40	20	20%
41-50	40	40%
51-Above	10	10%
MARITALSTATUS		
Married	15	15%

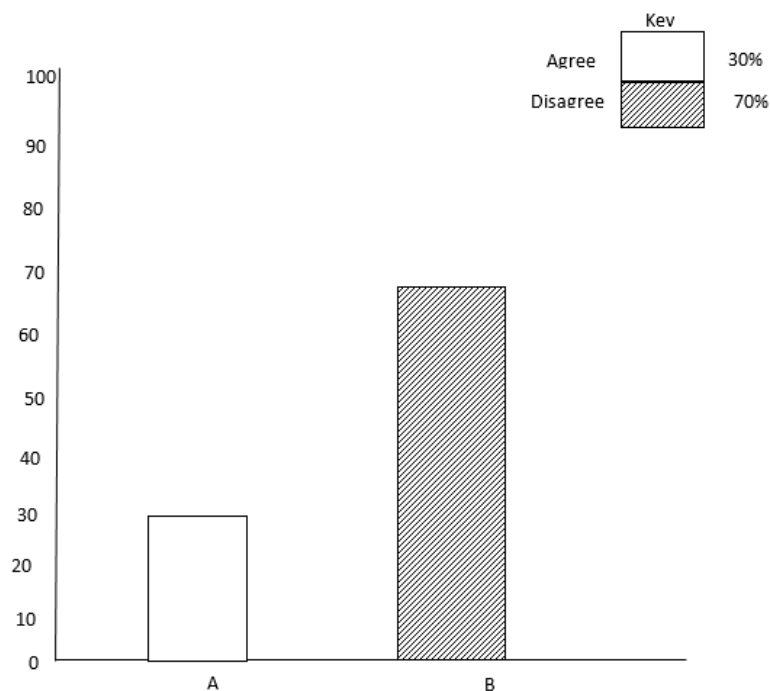
Divorced	5	5%
Single	77	77%
Widow/widower	3	3%
RELIGION		
Christians	60	60%
Muslims	40	40%
Others	0	0%
PROFESSIONAL RANK		
PNO	10	10%
CNO	15	15%
SNO	20	20%
NO	55	55%
Total	500	500%

The above data in this table shows that the male were the major respondents in this research, they had 60% while females had 40%, in age, those of 41-50 were the major respondents compared to other age group where 20-30 had 30%, 31-40 had 20% and 51-above had 10%. Data on marital status were also given and majority (77%) were single, 15% married and 3% were widow/widowers. In Religion, the majority were Christians with 60% and then Muslims were 40%, no other religion was indicated by the respondents. According to their professional rank, the Nursing officers were the major respondents with 55% while the principal Nursing officer (PNO) had 10%, the Chief nursing officer had 15% and the senior nursing officer had 20%.

SECTION B (KNOWLEDGE/INVENTORY)

1. Research Question: Can the ability of the nurse and psycho-education help to prevent relapse among psychiatric patients?

TABLE 1: The ability of the Nurse helps in the prevention of Relapse among psychiatric patients



This table shows that 30% agreed that the ability of the nurse can prevent relapse of psychiatric patients while 70% disagreed. This shows that the ability of the nurse is not enough prevent relapse among psychiatric patients.

Table 2: Psycho education helps to prevent relapse among patients

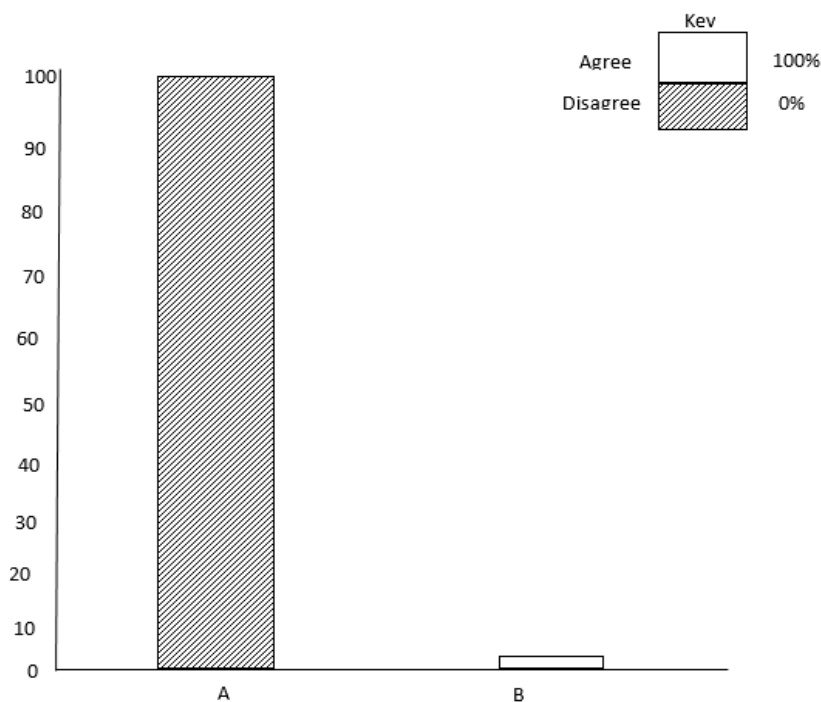
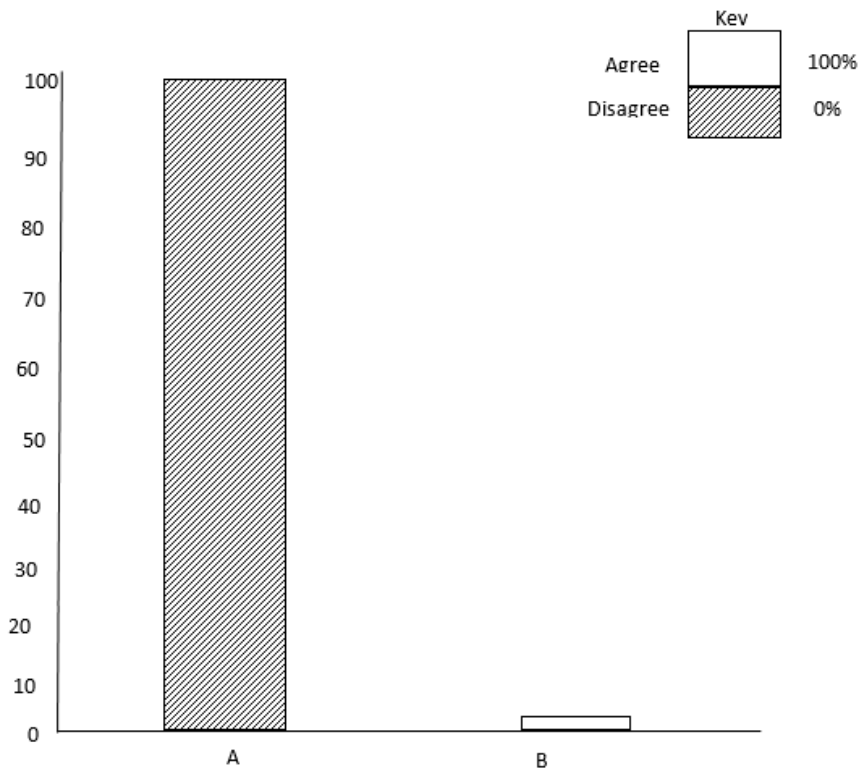


Table 2 shows that 100% respondents agreed that psycho-education helps to prevent relapse among psychiatric patient.

2. Research Question 2: Do nurses have the ability to identify a relapsed patient?

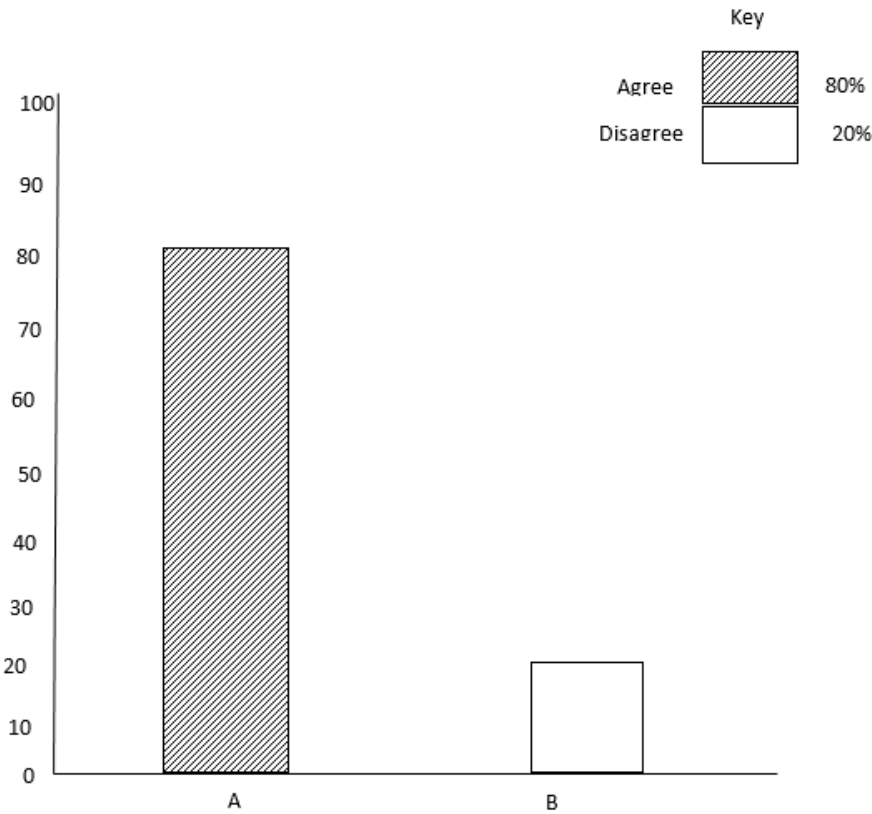
Table 3: Nurses ability to identify a relapsed patient.



Research question 2 queried of nurses have the ability to identify a relapsed patient and his was answered in table 3 where 100% of the respondents agreed that nurses have the ability to identify a relapsed patient.

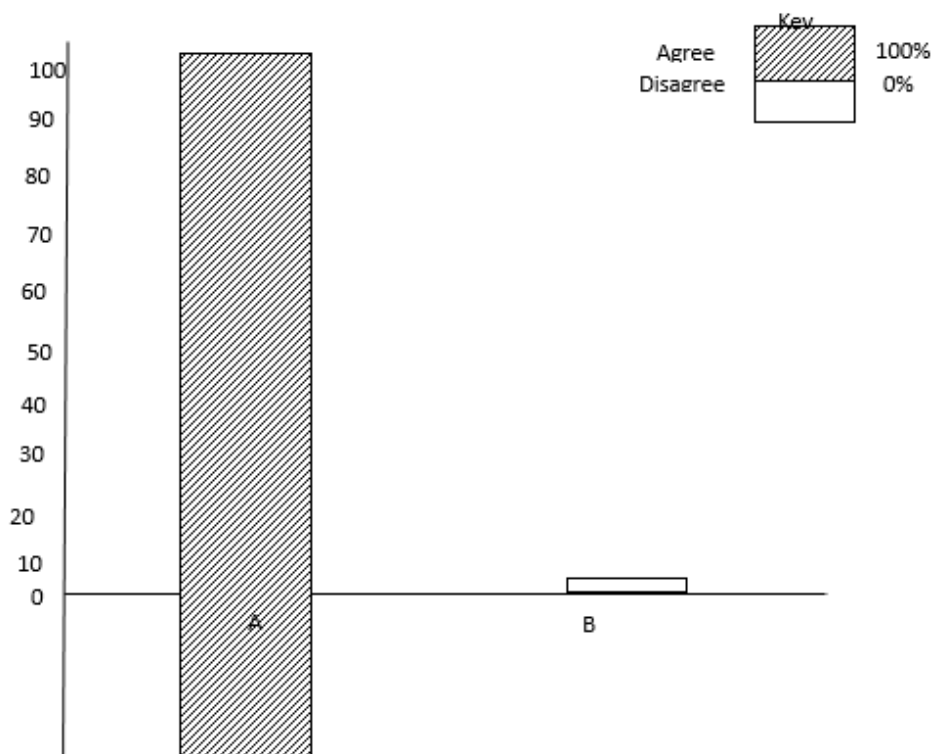
3. Research Question 3: Can poverty affect patient care in hospital and predispose the patient to relapse?

Table 4: Can poverty predispose a psychiatric patient to relapsed.



Research Question three seeks to know if poverty can affect patient care in the hospital and predispose the patient to relapse. Table 4 answered the question on if poverty predisposing a patient to relapse where 80% of the respondents agreed and 20% disagreed. This shows that poverty actually predispose a patient to relapse.

Table 5: Can poverty affect the care of psychiatric patient in the hospital



The remaining question were answered in this table, if poverty can affect the care of psychiatric patients in the hospital, 100% of the respondents agreed and 0% disagreed, this shows that poverty is a major factor that affect the attitude of nurses towards relapse prevention among psychiatric patients.

DISCUSSION

The study's factors demonstrated the nurses' attitudes toward relapse prevention among mental health patients at the Federal Neuropsychiatric Hospital in Enugu.

The results showed that mental patients had a high probability of recurrence because of a few specific characteristics. The purpose of this study was to ask the respondents questions through questionnaires, and the results showed the following: The primary goal was to determine whether psychoeducation and the nurse's skill could help mental patients avoid relapsing.

According to data gathered from the respondents, psychoeducation can aid in preventing relapse, but among psychiatric patients, a nurse's ability alone cannot prevent recurrence; 30% of respondents agreed and 70% disagreed.

In discussions about preventing relapses in psychiatric patients, other academics have stated that cooperation from the patient and family, in the form of self-care and a balanced lifestyle, is more important in preventing relapses than the nurse's skill. When combined with the nurse's skills, these can help mental patients avoid relapsing [13, 14].

The second goal was to find out if nurses could recognize a patient who had relapsed. All respondents (100%) thought that nurses could recognize a patient who had relapsed. According to the Australian brief Oxford dictionary published by [15], relapse is defined as a decline in a patient's condition following a partial recovery. This definition dates back to the literature review under the notion of relapse. It was also observed that recurrence comes with a worsening of symptoms; in light of this, it's encouraging to know that nurses are able to recognize a mentally ill patient who has relapsed [16].

The third goal was to determine whether living in poverty could make a mental health patient more likely to relapse and have an impact on hospital care. This was addressed in Tables 4 and 5, where 80% of respondents agreed and 20% disagreed that poverty can make a mental patient more likely to relapse, and 100% agreed that poverty has an impact on how mental patients are treated in hospitals. This means that recurrence, which affects the majority of mental patients, is largely caused by poverty.

CONCLUSIONS

During the course of the study, it was found that patients can relapse even while receiving therapy if they are exposed to triggers; as a result, recurrence can be avoided by patients avoiding triggers.

Since poverty has a significant impact on hospital patient care, families can take the initiative to manage these issues by supporting their patients financially.

"Prevention they say is better than Cure" is a key component of the mindset that nurses have toward relapse prevention. According to this statement, medication therapy, avoiding stressful situations, and having strong family support systems are all effective preventive methods that can help prevent relapse, just like they can prevent any other condition. The patient's mental condition is also greatly stabilized by medication compliance. The patient is health-informed enough to understand the requirement of taking medications as prescribed.

The potential complications that arise from recurrent relapses can be minimized with appropriate therapy and care.

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