

Perceptions, Knowledge, and Attitude Toward Mental Health Disorders among Students in a West Bank Universities - Cross Sectional Study

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Abstract

Background: Mental health is a key to relationships, personal and emotional well-being and, contributing to the community or society. A significant medical disorder called mental health disorder affects a person's thoughts, feelings, mood, and behavior. There is a wide range of conditions associated with mental health disorders.

Purpose: To identify perceptions, knowledge, and attitudes toward mental health disorders among students in West Bank Universities.

Methodology: A cross-sectional study that measures perceptions, knowledge, and attitudes of 526 universities student using convenience sampling through a 53-item self-administered questionnaire were conducted, chi-square test and the Kruskal-Wallis test was employed to analyze the association between student characteristics and variables. Furthermore, Spearman rank correlation coefficient was utilized to evaluate the relationship between variables.

Results: 88% of students had negative perceptions, 68.8% had limited knowledge, and 81.4% had positive attitudes toward mental health disorders and their treatment. Differences in the experience of speaking with someone who has a mental health disorder were associated with perceptions and knowledge (p values = 0.003 and 0.012, respectively). A positive relationship was found between perception and attitude, as well as knowledge and attitude.

Conclusion: Students demonstrated low knowledge and negative attitude toward mental health disorders. Additionally, most of them maintained negative perceptions regarding the mental disorders. Health promotion about mental health disorders and their treatment must be conducted to increase positive perceptions, good knowledge, and positive attitudes of the students.

Keywords: Knowledge; Perception; Attitude; Mental Health Disorder; Student

Introduction

Mental disorders are generally characterized by some combination of abnormal thoughts, emotions, behaviors, and relationships with others [1]. Common mental disorder is a term incorporating depression, anxiety, adjustment disorders, and stress-related ill health, all of which have major consequences around the world [2]. Mental disorders can cause suffering, pose a risk of social isolation, and threaten the personal income of individuals [2]. Fortunately, most of these disorders can be successfully treated [1].

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World Health Organization (WHO) defined mental disorder as a disruption in the ability of persons to control their feeling, thoughts and behavior that causes significant impairment in functioning in basic life activities. Mental disorder affects all age group regardless of gender, social status, religion and culture. However, the signs and symptoms of mental illness vary from mild that makes the slight effect on daily living activities to severe which need multi-therapies in hospital [3].

According to WHO reports in 2019, it states that one out of every eight (1:8) of 970 million people has troubled mental health and suffers from mental disorders. WHO reported that the most common mental disorders among the population are anxiety and major depressive disorder. Furthermore, it states that the cases of mental diseases have decreased by approximately 26% and 28%, respectively, due to the Covid-19 pandemic over the course of a year in the one hand [3]. On the other hand, American Psychiatric Association (APA), also, confirms the prevalence of mental disorders in United States, which is shown that one out of five adults experiences some forms of mental disorders, one in 24 has serious mental disorders and one in 12 was diagnosed with substance use disorder [4].

Many studies are done worldwide and in the Arab region try to explore and measure the knowledge and perception of university students toward mental health and mental disorders.

One of these studies was conducted by Puspitasari, *et al.* [5] in an Indonesian university, which exhibits that half of the participants have a negative perception of mental disorders, more than half of the participants have a good knowledge of mental disorders, and have a positive attitude toward mental health disorders.

AlAzzam and Abuhammad [6] conduct a study at a Jordanian university. It indicates that students have low knowledge about mental health disorders and people with mental health problems. Moreover, they have a negative attitude toward people with mental health disorders. Another Arabian study was conducted in Saudi Arabia universities, it exhibit that students had an adequate level of knowledge on mental health and a positive attitude toward it [7].

In Palestine, mental health disorders are one of the most serious and little- acknowledged health issues, specifically in 2020. the indications show that the number of new psychiatric cases registered in the West Bank is 76 per 100,000 of the population, where it formed the highest percentage of neurological disorders, with an incidence of 18.6 per 100,000 of the population then followed by Intellectual Disability with a rate of 13.3, and then schizophrenia with a rate of 12.3. The distribution of new psychiatric cases showed 1187 cases of males with a percentage of 56.7%, and 906 of a female with a percentage 42.3% [8]. Additionally, 84,852 persons attended community mental health centers and clinics in the West Bank as the highest distribution of these visits was for schizophrenia patients, which amounted to 28,782 visitors [8].

The stigma of mental illness remains widespread among society and healthcare professionals in the country. Hence, it is crucial to increase knowledge via antistigma campaigns and public education through schools and the media. Accordingly, we recruited students in a university in Palestine and identified their perceptions, knowledge, and attitudes toward mental health disorders as well as their treatment to prepare a mental health education campaign in the university.

Despite growing interest in and focus on mental health education, particularly among young adult groups around the world, no study in Palestine measures the knowledge, perception, and attitude of young adult groups such as university students.

Methodology

Study design setting

A cross-sectional study was used to assess university students' perceptions, knowledge, and attitudes using online self-administered questionnaires. The study was carried out in West Bank universities and community colleges for Diploma, Bachelor, Master, and PhD degrees from October 2022 to December 2022.

Population

The current study's population included all university students in Palestine. The total number of university students in Palestinian universities and colleges is over 220000.

Sampling and sample size

Convenience sampling was used to collect the sample for this study, and the total sample size was calculated using a margin of error of 5% and a confidence level of 95% with a total population of more than 220000, yielding 384 subjects. Add 8% to avoid non-evaluable subjects. The current study had a total sample size of 526 subjects.

Data collection tool

The researchers used a questionnaire that contained four sections:

1. Demographic data, such as age, level of education, gender, years of enrolling in university, and faculty.
2. Perceptions toward people with mental health disorders were assessed using seven statements with a Likert scale from 1 (strongly disagree) to 5 (strongly agree). Each respondent's scores were calculated, resulting in total perception scores ranging from 7 to 35 points. Because the data did not follow a normal distribution, the participants' perceptions were classified based on the median score, which was 26 in this case. Therefore, scores ≥ 26 corresponded to a positive perception, and scores < 26 entailed a negative perception.
3. Knowledge toward mental health included twenty statements, each response ("Yes," "No). The questionnaire scores ranged from 0 (minimum) to 20 (maximum). The respondents were then classified as having high knowledge if their scores were ≥ 14 and having low knowledge if their scores were < 14 .
4. LI7s were assessed using 17 statements with a five-point Likert scale, where 1 = strongly disagree and 5 = strongly agree. The scores were calculated for each respondent, with the total scores ranging from 17 - 85 points. Attitudes were positive if the respondents' scores were ≥ 62 , and negative if their scores were < 62 .

Data collection

Data was collected using a Google Form in the Arabic language to increase the response rate, the form was distributed to a group of university students on social media sites like Facebook and WhatsApp. The students' office who were interested to participate in the study were invited to fill out the online questionnaire, All the participants' responses were stored in an online database that only the authors could access and download from Google form. The data were summarized in tables, excluding incomplete responses such as those with missing data.

Validity and reliability of data collection tool

A previous questionnaire was used from Puspitasari., *et al.* [5] study, which was done at in Indonesian University. In this study, Cronbach's alpha was calculated by researchers in the previous study from which the questionnaire was taken, which was at first 0.810, and Cronbach's alpha result was generally good.

Data analysis

Analysis was performed using SPSS version 21, which is a software package used for conducting statistical analysis, manipulating data, and generating tables and graphs by using descriptive statistical analysis such as frequency tables, graphically illustrated by using bar charts. Means and standard deviations were used to summarize data. We used a statistical significance set at $p < 0.05$ to determine the relationship between a demographic characteristic and students' perception, knowledge, and attitude toward mental health disorders. In addition, the chi-square test and the Kruskal-Wallis and Mann-Whitney U test were employed to analyze the association between student characteristics and variables.

Ethical considerations

Institutional Review Board (IRB) obtained from Modern University College (MUC). Adherence to participant autonomy, the confidentiality of information, and anonymity. Subjects’ agreement to participate in our electronic google form for questionnaires.

Results

Demographic characteristics of the participants

As for the characteristics of the students participating in the study, the results showed that 67.1% of participants were female, while the mean age of participants was 22.7 years with a minimum age of 17 years and maximum age of 49 years, (66.9%) of them from health faculties. Also, (38.8%) of the students in the present study enrolled in university in the year 2018-2019. See table 1.

Demographic characteristics			Frequency	Percent
Gender	Male		173	32.9
	Female		353	67.1
Faculty	Health faculties		352	66.9
	Non-health Faculties		174	33.1
Year of enrolling the university	2018-2019		204	38.8
	2019-2020		101	19.2
	2020-2021		105	20
	2021-2022		75	14.3
	2022-2023		41	7.8
Academic degree	Diploma		139	26.4
	Bachelor		369	70.2
	Master		13	2.5
	PhDs		5	1
Age	Mean	Standard deviation	Min	Max
	22.71	4.9	17	49

Table 1: Demographic characteristics of the participants.
hDs: Doctor of Philosophy; Min: Minimum; Max: Maximum.

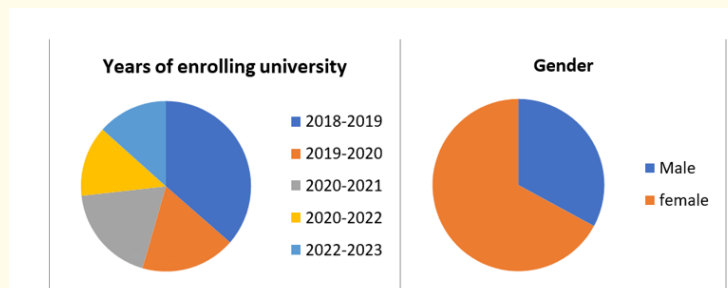


Figure 1: Distribution of participants according to years of enrolling university and gender.

Mental health history of participants

For participants' history with mental health, slightly more than half of our participants (53.4%) have experienced talking with a person with a mental health disorder. According to mental health disorder, only, 10 (1.9%) were diagnosed with a mental health disorder. See table 2.

Mental health history of students		Frequency	Percent
Have experience of talking with a person with a mental disorder	Yes	281	53.4
	No	245	46.6
Have been diagnosed with a mental health disorder	Yes	10	1.9
	No	516	98.1
Have visited a psychologist or Psychiatrist	Yes	101	9.5
	No	476	90.5
Source of information about mental health	Books	165	30.9%
	Environment	145	27.2%
	Formal education	237	44.4%
	Seminars	61	11.4%
	Social Media	320	59.9%

Table 2: Mental health history of students.

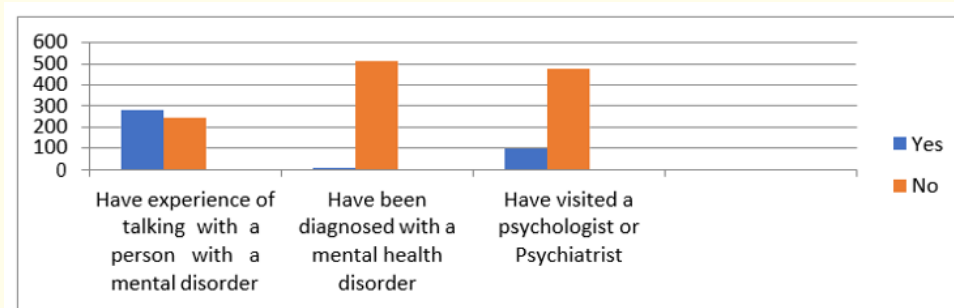


Figure 2: Mental health history of participants.

Perception of students toward mental health disorders

For student perception, the present study illustrates that most respondents agree and strongly agree with the perception that People with mental health disorders tend to be blamed for their conditions (79.9%, and that anyone can suffer from mental health disorders (75.3%). In contrast, some of the respondents disagreed and strongly disagreed with the perception that People with mental health disorders are insane (58%). See table 3.

No.	Item	SA %	A %	N %	D %	SD %
1	People with mental health problems tend to be blamed for their conditions.	116 (22.1)	304 (57.8)	72 (13.7)	25 (4.8)	9 (1.7)
2	One can tell whether an individual has a mental health disorder through his/her physical appearance.	44 (8.4)	200 (38)	136 (25.9)	125 (23.8)	21 (4)
3	People who are mentally ill cannot make friends	27 (5.1)	123 (23.4)	152 (28.9)	190 (36.1)	34 (6.5)
4	People with mental illnesses can work	54 (10.3)	268 (51)	116 (22.1)	78 (14.8)	10 (1.9)
5	People with mental illness are commonly dangerous	26 (4.9)	147 (27.9)	195 (37.1)	128 (24.3)	30 (5.7)
6	Anyone can suffer from a mental illness	110 (20.9)	286 (54.4)	76 (14.4)	45 (8.6)	9 (1.7)
7	People with mental illnesses are insane	17 (3.2)	74 (14.1)	109 (20.7)	234 (44.5)	92 (17.5)

Table 3: Perception of students toward mental health disorders.

% = percentage of participants. SA, strongly agree; A, agree; N, neither agree nor disagree; D, disagree; SD, strongly disagree.

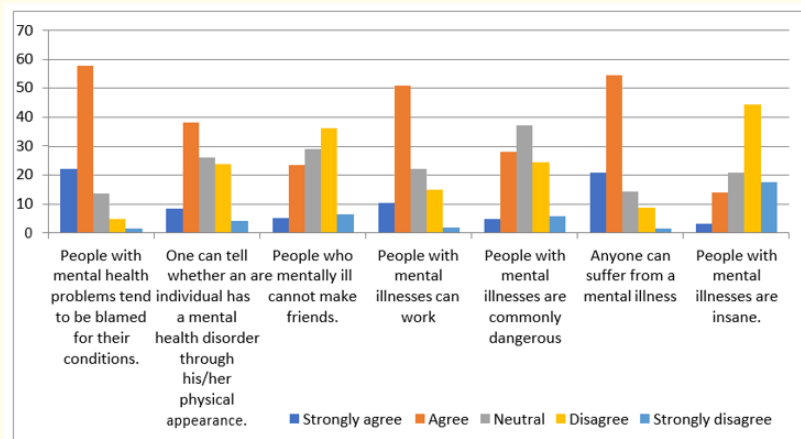


Figure 3: Perception of students toward mental health disorders.

Knowledge of students toward mental health disorders

The knowledge of students in the present study illustrates that most of the students 362 (68.8%) have a low knowledge of mental health disorders whereas only 164 (31.2%) of students have a high knowledge. Of the 20 questions, the majority of the respondents answered correctly on the following items: 1, 3, 5, 7, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, and 20. Conversely, only questions 2, 4, and 8 students answer them incorrect. See table 4.

Attitude of university students toward mental health disorder

The results of present study state that most of the students agreed and strongly agreed with the attitude that people with mental health disorders deserve respect (item 1, 94.7%), that we must help people with mental health disorders for them to be better (item 1, 97%),

No.	Item		Frequency	Percent
1	Exercise can help maintain mental health	Yes	492	93.5
		No	34	6.5
2	Mental disorders are caused by wrong way of thinking	Yes	351	66.7
		No	175	33.3
3	Many people have psychiatric problems, but they do not realize them	Yes	499	94.9
		No	27	5.1
4	External stress factors are the causes of all types of mental health disorders	Yes	310	58.9
		No	216	41.1
5	The components of mental health include normal intelligence, stable moods, positive attitudes, interpersonal relationships, and quality adaptability	Yes	480	91.3
		No	46	8.7
6	The majority of mental disorders cannot be cured	Yes	225	42.8
		No	301	57.2
7	Psychological or psychiatric services should be sought if one suspects the presence of psychological problems or mental disorders	Yes	511	97.1
		No	15	2.9
8	Psychological problems can occur at almost all ages	Yes	493	93.7
		No	33	6.3
9	Mental disorders and psychological problems cannot be prevented	Yes	271	51.5
		No	255	48.5
10	In severe mental disorders (e.g. schizophrenia), treatment is only given within a certain period of time and should not be given for a long period of time.	Yes	216	41.1
		No	310	58.9
11	The main symptom of schizophrenia is hallucination	Yes	462	87.8
		No	64	12.2
12	Individuals who have a family history of mental disorders have a higher risk of experiencing psychological problems and mental disorders	Yes	462	87.8
		No	64	12.2
13	Psychological problems in adolescents do not affect academic grades	Yes	120	22.8
		No	406	77.2
14	Middle-aged or elderly individuals rarely have psychological problems and mental disorders	Yes	170	32.3
		No	356	67.7
15	Individuals with bad temperament are more likely to have psychiatric problems	Yes	460	87.5
		No	66	12.5
16	Feelings of sadness and depression are the same	Yes	195	37.1
		No	331	62.9
17	The treatment of people with mental health disorders is enough by giving antidepressants	Yes	102	19.4
		No	424	80.6
18	The treatment of people with mental health disorders needs supportive psychological therapy	Yes	492	93.5
		No	34	6.5
19	Mental health medications do not provide considerable adverse effects	Yes	134	25.5
		No	392	74.5
20	Sertraline is one of the antidepressants	Yes	392	74.5
		No	134	25.5

Table 4: Knowledge of students toward mental health disorders.

that mockery of mental health disorder is painful (item 3, 93.9%) and that learning about mental health disorder is crucial (item 92.8%). On the other hand, most of students disagreed and strongly disagreed that it would be a shame if I had mental health disorder (item 13, 78.9%). See table 5.

No.	Item	SA %	A %	N %	D %	SD %
1	People with mental illnesses deserve respect.	323 (61.4)	175 (33.3)	21 (3.9)	5 (1)	2 (0.4)
2	We must help people with mental illnesses for them to be better.	379 (72.1)	131 (24.9)	12 (2.3)	3 (.6)	1 (.2)
3	A mockery of mental disorders is painful.	383 (72.8)	111 (21.1)	11 (2.1)	13 (2.5)	8 (1.5)
4	Learning about mental illnesses is crucial.	305 (58)	183 (34.8)	22 (4.2)	14 (2.70)	2 (.4)
5	Avoiding people with mental illnesses is a good idea.	23 (4.4)	58 (11)	139 (26.4)	210 (39.9)	96 (18.3)
6	I feel comfortable when encountering people with mental illnesses.	29 (5.5)	116 (22.1)	195 (37.1)	140 (26.6)	46 (8.7)
7	People with mental illnesses can help others.	66 (12.5)	303 (57.6)	115 (21.9)	36 (6.7)	6 (1.1)
8	I am scared when being approached by people with mental illnesses.	20 (3.8)	109 (20.7)	155 (29.5)	172 (32.7)	70 (13.3)
9	When I have a mental health disorder, I most likely do not tell my friends.	52 (9.9)	168 (31.9)	145 (27.6)	143 (27.2)	18 (3.4)
10	If any of my friends suffer from mental illnesses, then I would advise them not to tell anyone.	34 (6.5)	89 (16.9)	115 (21.9)	196 (37.3)	92 (17.5)
11	Caring for people with mental illnesses in hospitals makes the community feel safer.	129 (24.5)	237 (45.1)	93 (17.7)	57 (10.8)	10 (1.9)
12	Only people who are weak and overly sensitive let themselves be affected by mental illness.	23 (4.4)	91 (17.3)	110 (20.9)	214 (40.7)	88 (16.7)
13	It would be a shame if i had a mental illness.	14 (2.7)	37 (7)	60 (11.4)	207 (39.4)	208 (39.5)
14	Students with mental illnesses should not be in regular classes.	32 (6.1)	212 (40.3)	154 (29.3)	105 (20)	23 (4.4)
15	I have a little in common with people suffering from mental health disorders.	33 (6.3)	149 (28.3)	171 (32.5)	136 (25.9)	37 (7)
16	Students with mental illnesses need a special curriculum in learning.	81 (15.4)	236 (44.9)	96 (18.3)	97 (18.4)	16 (3)
17	Someone with mental illnesses can be a good friend	134 (25.5)	281 (53.4)	87 (16.5)	22 (4.2)	4 (.4)

Table 5: Attitude of university students toward mental health disorder.

% = Percentage of Participants. SA: Strongly Agree; A: Agree; N: Neither Agree Nor Disagree; D: Disagree; SD: Strongly Disagree.

The overall perception, knowledge and attitude for students university

The results of the present study illustrate that 80.8% have a negative perception of mental health disorders. Also, only 18.6% have a positive attitude toward mental health disorders. For knowledge toward mental health, 31.2% have a high knowledge of mental health see table 6.

1	Perception		Attitude		Knowledge	
	Positive %	Negative %	Positive %	Negative %	High %	Low %
	01 (19.2)	425 (80.8%)	98(18.6)	428 (81.4)	164 (31.2)	362 (68.8)

Table 6: The overall perception, knowledge and attitude for students university.

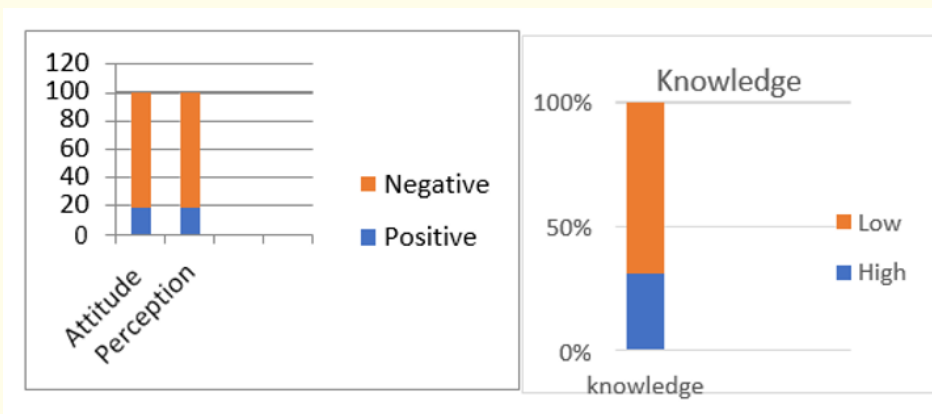


Figure 4: The overall knowledge, attitude and perception for students university.

Association between student characteristics and their perception, knowledge and attitude toward mental health disorder

Because the data is not normally distributed A Chi-square test, Mann-Whitney U, and Kruskal Wallis H Tests were used to explore the association between student characteristics and perception, knowledge, and attitude, (p-value: 0.05 was considered as a significant point), results of the present study exhibited gender differences were associated with attitude toward mental health (P value: 0.026). Also, were associated with knowledge of mental health (p-value: 0.004). Moreover, the results of the present students show a significant association between years of enrolling in university with knowledge of students toward mental health (p-value: 0.002). See table 7.

Characteristic	Perception	Knowledge	Attitude
	P value	P value	P value
Gender	0.195	0.004	0.026
Faculty	0.309	0.4	0.176
Years of entering university	0.255	0.002	0.255
Academic degree	0.255	0.00	0.255
Have experience of talking with a person with a mental disorder	0.003	0.012	0.176
Have been diagnosed with a mental health disorder	0.602	0.169	0.584
Have visited a psychologist or Psychiatrist	0.118	0.495	0.140
Age	0.002	0.163	0.03

Table 7: Association between student characteristic and perception, knowledge and attitude toward mental health.

Relation among students' perceptions, knowledge, and attitudes regarding mental health disorders

Spearman's rank correlation coefficient test was used to measure the correlation between students' perception, knowledge, and attitude regarding mental health. The present study revealed a significant positive correlation between perceptions and attitude ($r = 0.225$, $P < 0.00$). Also, the study revealed a significant positive correlation between knowledge and attitudes ($r = -0.163$, $P < 0.00$) and between perception and knowledge ($r = -0.203$, $P < 0.00$).

B Variables	Correlation coefficient (r)	P-value
Perception - knowledge	0.203	0.00
Perception - attitude	0.225	0.00
Attitudes-knowledge	0.163	0.00

Table 8: Relation among students' perceptions, knowledge, and attitudes regarding mental health disorder.

Discussion

This study demonstrated the perceptions, knowledge, and attitudes of students toward mental health disorders and their treatment in Palestinian universities, specifically where is located in The West Bank. A total of 80.8% of students had negative perceptions, 31.2% had good knowledge, and 81.6% had negative attitudes. This is, in contrast, to the results of the Puspitasari., *et al.* [5] study that illustrates half of the participants have a positive attitude and high knowledge of mental health illness. On the other hand, this study agrees with our study in terms of the perception that both report a poor perception of a student toward mental health disorders. Moreover, the present results consist of Abolfotouh., *et al.* [9] study that reports low knowledge, poor attitude, and poor perception toward mental health disorders among participants.

Although, differences in gender, years of enrolling at university, and academic degree were associated with the knowledge that female students were more knowledgeable about mental health disorders in comparison with a male. This is by Abolfotouh., *et al.* [9] study that validated that female students have high knowledge related to psychiatric disorders. Whereas the results are contrasted with Puspitasari., *et al.* [5] study that illustrates no significant relationship between gender, years of enrolling in university with knowledge of students about mental health disorders and consists with them that academic degrees have a significant relationship between subjects and knowledge of mental health disorders.

This study also found an association between gender differences and attitudes toward mental health disorders. Specifically, female students were more tolerant of people with mental health disorders. A more positive view of female students toward mental health disorders might be due to their comparatively optimistic attitudes about the treatability of mental health disorders, this is by some studies, which are Pascucci., *et al.* [10]; Abolfotouh., *et al.* [9] and Smith., *et al.* [11] that confirmed that women tend to show more tolerant attitudes toward people with mental health disorders and have more tolerant attitudes than men. However, another study reported that men have better attitudes toward mental health disorders than women and that most women are afraid and do not want to be friends with those who are suffering from mental health disorders [12].

In addition, further found that differences in the experience of interacting with people with mental health disorders were associated with perceptions (p value = 0.003) and knowledge (p value = 0.012). Students who had contact with people who had mental health disorders, in particular, had more favorable perceptions and knowledge toward mental health disorders.

These results are supported by Abi Doumit., *et al.* [13] that asserted that being in close relationships with persons who have mental health disorders demonstrates minimal stigma, improved knowledge, and positive perception. These results are consistent with the

Puspitasari, *et al.* [5] study which illustrate in their study that the experience of interacting with people with mental health disorders was associated with perceptions. In contrast to our study which exhibits no relation between attitude and experience of interacting with people with mental health, Puspitasari, *et al.* [5] study asserted that having experience with mental health people increase the attitude of participants toward mental health disorder.

Another find here is that no association between differences in experiences visiting a psychologist or psychiatrist and perceptions, knowledge, and attitude. That is, students who have visited a psychologist or psychiatrist did not have better perceptions, knowledge, and attitudes toward mental health disorders. These results are in contrast with Puspitasari, *et al.* [5] and Benti, *et al.* [14] that asserted in their studies that having experience visiting a professional (psychologist or psychiatrist), students will understand more about mental health from the explanation that they obtain from the professional, which increases their knowledge.

Our findings suggested that perceptions and attitudes are positively correlated. They also confirmed those students' attitudes toward mental health disorders could be influenced by their perceptions and knowledge. The positive correlation in this study is in line with Aguiniga, *et al.* [15] study which claimed that views among students are influenced by their opinions of how mental health disorders are portrayed in the media. Furthermore, the positive correlation between knowledge and attitudes in this study is in line with Aljedaani's [16] study. That showed a positive correlation between knowledge and attitudes among people in Jeddah City toward patients with a mental health disorders. According to Sher and New [17] it affirmed that the experience of obtaining education increases the attitudes of students toward psychiatry.

Conclusion

Generally, the students displayed low knowledge and negative attitudes toward mental health disorders. However, most of them maintained negative perceptions of mental health disorders. Differences in gender, academic degree, and year of enrolling in university were associated with knowledge of mental health disorders. Gender differences were also linked with students' attitudes toward mental health disorders. Additionally, age differences were also linked with students' perceptions of mental health disorders. Moreover, the experience of talking with a person with a mental health disorder was associated with perceptions and knowledge. The experience of visiting a psychologist or psychiatrist not influenced the perceptions, knowledge, and attitudes of the students. A positive correlation was observed between perceptions and attitudes and between knowledge and attitudes. Awareness programs and campaigns for universities and colleges student focusing on mental health disorders and their treatment must be implemented to increase students' perceptions, knowledge, and attitudes. Social media can also be considered to disseminate information on mental health as well as prevention efforts [18-30].

Recommendations

1. Awareness programs and campaigns for universities and college students focusing on mental health disorders and their treatment.
2. Social media can also be considered to disseminate information on mental health as well as prevention efforts.
3. Health promotion for mental health disorders to increase positive perception, knowledge, and attitude.

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Conflicts of Interest

The authors report no conflicts of interest in this work.

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