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# **AWARENESS, PERCEPTION AND PERCEIVED FACTORS ASSOCIATED WITH MENTAL ILLNESSES AMONG SECONDARY SCHOOL STUDENTS OF DUTSE LOCAL GOVERNMENT, JIGAWA STATE, NIGERIA**

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## **ABSTRACT**

*Mental health is an important component of overall health since it contributes to living a happy and full life. In recent years, there has been a lack of awareness of the issues involved with mental illness. The study is aimed at identifying the awareness level on the factors associated with mental illness among secondary school students. A descriptive study design was employed, and a standardized instrument based on DSMIV was used, and a total of 175 formed the sample size. The demographic characteristics of this study showed that most respondents were between the age range of 16 to 19 year 108(61.8%), males 116(66%), and single 175 (100%). Also, findings revealed that majority of the respondents are Moslems (100%) in SS2 (45.7%). The result of this study noted that, the respondents' level of awareness towards mental illness is highly positive (84%) and sources of information include family members and friends 45(25.8%), television programme 65(37.1%) including internet 30 (17.1%). Further findings reveal that the level of perception of students towards mental illness is positive (58, 66.5%), while perceived causes of mental illnesses among secondary students include demonic and witchcraft attacks (12%), heavy use of alcohol and drugs (25.9%), serious injury to the brain (12.6%), and childbirth (9.1%). It is concluded that the awareness level is good, and perception towards mental illness was positive. Therefore, it is recommended that sensitization programs on the factors associated with mental illness be conducted, and more hospital centers should be established to enhance the treatment modalities for mentally ill individuals.*

**Keywords:** Awareness, Perception, Treatment, Mental Illness

## **INTRODUCTION**

Mental health is a basic component of health, and it contributes to living a happy and fulfilled life. Mental health is defined by the WHO (2011) as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to contribute to his or her community. Increasing health and socio-economic burden of mental illnesses and disorders have become a major concern in both developed and developing countries. Globally, it is estimated that more than 450 million people suffer from mental or behavioral disorders and one in four families has at least one member with a mental disorder (Fiasorgbor & Aniah, 2020). According to World Health Organisation (2017), mentally ill people often lack access to education, healthcare and opportunities to earn a decent living, which limit their chances of economic development and deprive them of social protection and recognition within the community. This burden of mental disorders is maximal in young adults, the most productive section of the population, and with the onset notably at adolescence; it issues a serious concern to the economy of any nation (Fiasorgbor and Aniah, 2016). In Nigeria, as in other parts of the world, the prevalence of mental illness is quite high. WHO (2007) reported that 20% of Nigerians have mental illnesses. With a population of 160 million, this means that over 30 million Nigerians suffer from some type of mental illness. Most surveys on perceptions of mental illness have been largely conducted in western countries, with few studies in developing country contexts.

According to Iheanacho (2018), the lack of resources on public perceptions of mental health and mental illness in Nigeria is primarily due to a lack of political will to develop a mental health service based on a comprehensive legal and policy framework that encourages research interest in the subject. Nigeria's Mental Health Act is so poor that the country is currently operating under the 1996 Mental Health Policy (Godiya, Bala, Bala, Ogbonna, Osumanyi, & Ahmed et al., 2018). This contrasts with what is available in Western countries and even neighboring African countries like Ghana, where a new mental health Act was recently passed (Fiasorgbor & Aniah, 2020).

People's belief systems have been shown to influence their attitudes and perceptions on a variety of topics, including mental illness. According to a recent Nigerian poll, urban living, greater educational status, and familiarity with mental illness are associated with beliefs in biological and psychosocial causation, but rural living is associated with beliefs in supernatural causes. This highlights culture as a potential effect on people's views, experiences, and expressions (Adewuya & Makanjuola, 2017). These attitudes surely influence how the mentally sick are treated in society. This was corroborated in a study conducted in South-western Nigeria, where it was discovered that people were unwilling to have social connections with those with mental illnesses. Most of the respondents reported that they would be afraid to have a conversation, would be upset or disturbed about working on the same job, would not share a room, and would feel ashamed if people knew that someone in their family had been diagnosed with a mental illness. Only very few reported that they could maintain a friendship with a person with a mental illness (Gureje, Lasebikan, Ephraim-Oluwanuga, Olley, & Kola, 2017). Conversely, studies from western societies have shown that biological factors (diseases of the brain and genetic factors) and eventual factors (trauma and stress) are more likely to be considered causal while in Africa,

supernatural causes are widely considered (Sadik, Bradley, Al-Hasoon and Jenkins, 2018). Studies in Nigeria have shown that as many as one in ten of Nigerian adolescents aged between ten and twenty-four has a clinically recognizable mental health problem (Kabir, Zubair, Isa & Muktar, 2016). Thus, this study seeks to assess the perception and attitude of mental illness among secondary school students in Dutse local government Jigawa state.

### **Attribution Theory**

Attribution theory is the study of theories that describe how ordinary people explain the origins of behavior and events. Psychological research into attribution began with Fritz Heider's work in the early twentieth century and was further expanded by others such as Harold Kelley and Bernard Weiner (Malle, 2011). In social psychology, attribution is the process by which people explain the origins of their actions and events.

### **SPECIFIC OBJECTIVES**

1. To determine the awareness of students towards Mental Illnesses among Secondary School Students of Dutse Local Government Jigawa State
2. To identify the sources of awareness towards Mental Illnesses among Secondary School Students.
3. To assess the Perception of Students towards Mental Illnesses among Secondary School Students.
4. To determine the Perceive causes of Mental Illnesses among Secondary School Students

### **Material and Methods**

This study adopted a cross-sectional design. The study setting were secondary schools located at Jigawa state that was, created in 1991 from the northeastern region of kano state. The state located at latitude 11.00 N° to 13.00 N° and

longitude 8.00 E° to 10.15 E°. According to 2006 Nigerian census the Jigawa state has an estimated population of 4,361,002 and they are predominantly Hausa Fulani. Dutse Local government has a total of 30 secondary schools. The senior secondary schools were public schools located in Madobi town Dutse local government Jigawa state. The secondary schools had a student population of 300 as at 2022 including both males and females, one out of the three secondary schools are a boarding school and the other two were operating on day basis.

A total sample of one hundred and seventy-five (175) was determined for the study using Yamane formula. A proportionate sampling was used to select 175 participants for the study across the studied secondary schools. A standardized instrument based on Diagnostic

Statistical Manual IV was adapted using Adolescents' Perceptions of Mental Illness Scale (APMIS) for the study. The instrument reliability was established using test-retest. The data was collected by the researcher and three research assistants. Ethical approval was sought and granted from Jigawa State Ministry of Education NHREC/17/03/2019.

**Data analysis:** The data was analyzed using descriptive statistics and presented in frequency and percentages.

## RESULTS

Table 1 shows that the majority of responders (61.8%) are 16-19 years old, male (66%), and single (100%). Furthermore, in SS2, the majority of responders are Moslems (100%) (45.7%).

**Table 1:** Demographic characteristics of the Respondents (n=175)

Demographic Variable	Frequency	Percentage (%)
<b>Age</b>		
10 – 15	52	29.8%
16 – 19	108	61.8%
20 – 24	15	8.6%
25 & above	0	0
Total	175	100
<b>Sex</b>		
Male	116	66%
Female	59	33.7%
Total	175	100
<b>Marital status</b>		
Single	175	100%
Married	0	0
Total	175	100
<b>Religion</b>		
Islam	175	100%
Christianity	0	0
Other	0	0
Total	175	100
<b>Class level</b>		
SS1	43	24.6%
SS2	80	45.7%
SS3	52	27.7%
Total	175	100

Table 2 below shows that, the respondents' level of awareness towards mental illness is very high (84%).

**Table 2: Awareness of Students towards Mental Illnesses among Secondary Schools**

SN	ITEMS	SA	A	D	SD
1	Mental health is a state of well-being	102(58.1%)	63(36%)	6(3.7%)	4(2.2%)
2	Mental health is when every individual realizes his or her own potential,	82(46.6%)	76(43.3%)	13(7.4%)	2(2.7%)
3	Mental health when one is can work productively and fruitfully	60(34.2%)	94(53.9%)	15(8.6%)	6(3.2%)
4	Mental health refers to when one can contribute to his or her community	62(35.7%)	93(53.4%)	13(7.4%)	6(3.4%)
<b>Perceived causes of mental illness</b>					
A	Demonic and witchcraft attacks	24(13.5%)	92(52.7%)	30(29.8%)	7(3.9%)
B	Punishment from God	20(11.3%)	94(53.9%)	53(30.5%)	7(4.2%)
C	Mental illness s passed from parents to children	30(29.8%)	92(52.7%)	24(13.5%)	7(3.9%)
D	Heavy use of alcohol and drugs	57(32.3%)	94(55.7%)	14(8.1%)	7(3.9%)
E	Imbalance of chemicals in the brain	40(23.2%)	122(69.7%)	8(4.7%)	74(42.5%)
F	Serious injury to the brain	102(58.1%)	6(3.7%)	4(2.2%)	63(36%)
G	Thinking too much about loss of dear one or something valuable	82(46.6%)	13(7.4%)	2(2.7%)	76(43.3%)
H	Childbirth	60(38.9%)	88(50.5%)	5(3%)	13(7.6%)
I	Mental disorders are contagious	60(34.2%)	94(53.9%)	6(3.2%)	15(8.6%)
J	Not having adequate rest and nutrition can cause having mental illness	62(35.7%)	93(53.4%)	6(3.4%)	13(7.4%)
K	Mentally ill people may lack access to education,	54(31.3%)	88(50.2%)	9(5.2%)	23(13.3%)
L	Mentally ill people may not have access to healthcare,	30(29.8%)	92(52.7%)	7(3.9%)	24(13.5%)
M	Mentally ill people may not have opportunities to earn a decent living,	53(30.5%)	94(53.9%)	7(4.2%)	20(11.3%)
		34%	50%	8%	11%

Table 3 shows the respondents sources of information include family members and friends 45(25.8%), television programme 65 (37.1%) and 30 (17.1%) through internet. This

study observe that the respondent sources of information include Family members and friends (25.8%), Radio and television programs (37.1%) and Internet (17.1%)

**Table 3: Respondents sources of information on mental illnes**

S/N	Sources of knowledge of Mental Health/Illness	SA	A	D	SD	F	Percentage	Sig
1	Family members and friends	15	10	8	12	45	25.8%	*
2	My teachers in school	0	3	4	8	15	8.6%	
3	Radio and television programs	30	15	10	4	65	37.1%	*
4	Health workers	0	5	9	6	20	11.4%	
5	Internet	5	8	7	10	30	17.1%	*

Sig = Significant

Table 4 revealed that the level of perception of students towards mental illness is positive and above average (66.5%)

**Table 4: Perception of Students towards Mental Illnesses**

S/N	Items	SA	A	D	SD
<u>Perception on stigmatization towards mental illness</u>					
	Items Stigmatization	72(41.1%)	48(27.3%)	19(11.0%)	36(20.6%)
1	It is shameful to have a mental illness	72(41.1%)	46(26.3%)	21(12.4%)	35(20.1%)
2	Mental illness is a punishment for doing bad things	63(35.9%)	49(28.2%)	23(13.4%)	39(22.5%)
3	I am comfortable interacting with individuals who have a mental disorder.	90(51.2%)	33(18.7%)	24(13.9%)	28(16.3%)
	Average score	42.3%	25.1%	12.7%	14.3%
<u>Perception on the treatment option of mental illness.</u>					
4	Medical treatment.	107(61.2%)	16(9.1%)	34(19.6%)	17(10.0%)
5	Herbal medicine	66(37.5%)	23(13.4%)	58(33.3%)	26(15.3%)
6	Family and community support is very necessary for the treatment of person with mental illness	80(45.5%)	20(11.5%)	45(25.8%)	30(17.2%)
7	Psychiatric hospital is the best place to go for effective treatment of mental illness	105 (60%)	58(33%)	9(5%)	4(2%)
8	It is cheaper to treat mental illness in the hospital than other places	11(6%)	35(20%)	12 (7%)	11(6%)
9	Mental illness is not treatable/curable	96(55%)	96(55%)	9 (5%)	61(35%)
10	A person who has a mental disorder cannot restore to sound emotional health.	35(20%)	52(30%)	17(10%)	70(40%)
11	Spiritual treatment informs of prayers.	17(10%)	9(50%)	17(10%)	52(30%)
12	Average perception on treatment	37%	28%	14.4%	19.4%
13	Overall score	40%	26.5%	13.5%	17%



According to Table 4, the perceived causes of mental illnesses among secondary students are demonic and witchcraft attacks (12%), heavy use of alcohol and drugs (25.9%), serious brain injury (12.6%), childbirth (9.1%), and lack of adequate rest and nutrition can cause mental illness (9.7%), while punishment from God (5.7%), Mental illnesses transferred from parents to children (4.6%), Imbalance of

chemicals in the brain (8.6%), Thinking too much about the loss of a loved one or something significant (8.6%), Mental diseases are contagious (4%) and are not seen as causes of mental illnesses among secondary students. The respondents perceived causes of mental illness include Demonic and witchcraft attacks (12%), Heavy use of alcohol and drugs (25.9%) and Serious injury to the brain (12.6%).

**Table 4: Perceived causes of mental illness Among Secondary School Students**

S/N	Items	SA	A	D	SD	F	Percentage	Sig.
1	Demonic and witchcraft attacks	9	4	5	3	21	12%	*
2	Punishment from God	0	5	2	3	10	5.7%	
3	Mental illnesses passed from parents to children	2	5	1	0	8	4.6%	
4	Heavy use of alcohol and drugs	22	12	8	2	44	25.9%	*
5	Imbalance of chemicals in the brain	3	2	7	3	15	8.6%	
6	Serious injury to the brain	2	5	8	7	3	12.6%	*
7	Thinking too much about loss of dear one or something valuable	1	2	8	4	15	8.6%	
8	Childbirth	7	5	2	2	16	9.1%	
9	Mental disorders are contagious	0	0	4	3	7	4%	
10	Not having adequate rest and nutrition can cause having mental illness	4	2	8	3	17	9.7%	

Sig = Significant

**DISCUSSION**

This study aimed to evaluate the awareness, perception and perceived factors associated with mental illnesses among secondary school students of Dutse Local Government, Jigawa state, Nigeria. The demographic analysis revealed a predominant representation of male respondents aged 16-19, potentially indicating gender-related educational disparities in the study area. The majority of respondents were single, adhered to the Islamic faith, and were in SS2. The observed demographic dynamics, especially the higher proportion of males, might be attributed to cultural and educational

factors, potentially leading to more girls leaving secondary school for marriage within this age range. The study also highlighted a high level of awareness among respondents regarding mental illness, with socio-cultural influences likely contributing to this awareness. This finding aligns with similar studies among young adults, as noted by Jackide et al. (2016). Sources of information on mental illnesses included family members, friends, television programs, and the internet, diverging from findings in an Indian study by Vijayalakshmi (2019), possibly influenced by geographical variations in the studies.

These findings diverge from Jack-ide's (2016) results, where a significant portion (75%) reported having no sources of information on mental illness. The authors suggested that cultural taboos and family dynamics might have limited some individuals' access to information about mental health. In contrast, the present study indicates a generally positive and above-average perception of mental illness among students, contradicting the findings of Jack-ide et al. (2016) and Kermode et al. (2017). The students in this study associated various causes with mental illness, including demonic and witchcraft attacks, heavy use of alcohol and drugs, serious brain injury, childbirth, and insufficient rest and nutrition. This aligns with Gureje's (2017) Nigerian study, where participants believed that substance misuse could lead to mental illness, along with divine punishment. The discrepancies in findings could be attributed to cultural and contextual variations across different study populations.

## CONCLUSION

The study findings indicate a positive and above-average awareness and perception of mental illnesses among the studied group. This contrasts with previous research, which reported a lack of information sources among respondents. In this study, students revealed diverse sources, including family members, friends, television programs, and the internet. The positive perception toward mental illness contradicts earlier findings, emphasizing the influence of socio-cultural factors on individuals' attitudes. The various causes attributed to mental illness by the students, such as demonic attacks, substance misuse, brain injury, childbirth, and inadequate rest and nutrition, align with findings from a Nigerian study. These disparities underscore the importance of considering cultural nuances and contextual factors in comprehending perceptions of mental health across diverse populations.

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