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Letter to editor

Impact of a single webinar intervention on attitudes towards mental illness in undergraduate students

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To the Editor

Stigma towards people with mental Illness remains a major issue and many individuals with common mental disorders might not receive adequate support due to the lack of awareness among healthcare providers (1); moreover, the economic and social consequences of the COVID-19 pandemic are expected to increase mental disorders in upcoming years.

Effective training against mental illness stigma remains a major challenge in medical education worldwide. Nurses are key players who provide one-on-one care to patients and most of the direct patient care in mental health services. Education in mental health during undergraduate courses might reduce stigmatising attitudes towards mental illness among nurses. Indeed, undergraduate students generally do not receive sufficient or adequate information about mental disorders. Therefore, short and effective interventions on mental illness stigma should be offered to all nursing students, even in absence of specific and detailed programs as those presented in the literature (2,3).

The unexpected COVID-19 crisis fueled rapid changes in healthcare professional education, including distance learning and other web-based forms of student-instructor communication. Webinars have been well recognized as valuable resources for health care education (4). However, there is a lack of literature describing the use of webinars in anti-stigma interventions.

Here we show that web-based education designed as a short webinar can be used to improve nursing students' perceptions regarding mental illness.

During the course of 2020, we conducted a study on a sample of second-year students from two nursing bachelor schools affiliated with the University of Milan (San Paolo University Hospital), and University of Foggia (ASL BAT healthcare facility) in Italy. Two groups of students were enrolled: one attended the psychiatric nursing course included in the bachelor's program (15 hours) (University of Foggia), while the other attended the same course as well as a two-hour webinar course before the course began, focused on stigma towards patients with mental illness (University of Milan). During the lecture (120 minutes), clear, specific, and up-to-date international data on mental health stigma in the community and media were presented to the students. Sixty more minutes were dedicated to discussion, during which the students who were invited to share their comments online without a webcam, or to post messages on a dedicated chat room. Stigma levels were assessed in both groups before the webinar (T0) and 1 month after the end of the academic course (T1), using the Italian version of the Opening Minds Stigma Scale for Health Care Providers (OMS-HC) (5). A post-webinar questionnaire was administrated to all participants in the intervention group immediately after the end of the course, which captured satisfaction with the webinar.

The study procedure and data management criteria were approved by the institutional review board of the University of Milan.

40 students were enrolled, 26 female and 14 male, median age 21, IQR[20;23]. All the students of the intervention group completed the (OMS-HC), before

and after the webinar. One of the students in the control group did not complete the scale at T1. Administration of the scale and data collection were carried out anonymously.

The Mann–Whitney U-test was employed to assess within– and between–group differences on total score and subscales on items regarding the two subscale of the tool: stigma toward people with mental illness (1) and disclosure of mental illness (2). At T0, the two groups had similar total stigma scores (median 22[18-23] in the intervention group vs 21[18-22] in the control group, p=0.551). After the intervention (T1) the OMS-HC scores were significantly lower in the intervention group, with a median of 14[12-16] vs 19[17-22] in the control group, p=0.015. The overall initial stigma scores decreased significantly after education in the intervention group (p=0.010) but not in the control group (p=0.374); the same results were achieved by analyzing the scores of the two subscales, (stigma toward people with mental illness: p=0.020 vs p=0.185, disclosure of mental illness: p<0.001 vs p=0.280).

Our findings indicate relatively low levels of stigma in both groups before the webinar, and prior to psychiatric nursing education; furthermore, the significant reduction in both domains of stigma observed in the study group suggests that even a 2–hour webinar can positively impact on the wrong perception that some students have regarding mental illness. A 4.2 (out of 5) average score of satisfaction with the webinars also confirmed acceptability of the intervention.

More structured interventions might further decrease stigma and correct misperceptions. However, whereas structured programs are difficult to apply extensively, a webinar intervention such as the one described might be included, particularly in health emergency situations such as the current pandemic which is affecting academic education.

The major limitations of this pilot study are a lack of random assignment to the intervention and the small sample, albeit with multicenter design. We now plan to extend our research to other schools as well as students of other healthcare professions.

In conclusion, a simple two-hour webinar intervention can positively influence students' attitudes toward mental illness. These findings are relevant to all healthcare professionals, given the elevated likelihood of encountering people with mental illness across any clinical setting.

Conflict of Interest: Each author declares that he or she has no commercial associations (e.g. consultancies, stock ownership, equity interest, patent/licensing arrangement etc.) that might pose a conflict of interest in connection with the submitted article.

References

1. Mannarini S, Rossi A. Assessing Mental Illness Stigma: a Complex Issues. Front Psychol. 2019; 9: 2722. doi: 10.3389/fpsyg.2018.02722.
2. Gronholm PC, Henderson C, Deb T, Thornicroft G. Interventions to reduce discrimination and stigma: the state of the art. Soc Psychiatry Psychiatr Epidemiol. 2017; 52; 249-258. doi: 10.1007/s00127-017-1341-9.
3. Itzhaki M, Meridan O, Sagiv-Schifter T, Barnoy S. Nursing Students' Attitudes and Intention to Work with Mentally Ill Patients Before and After a Planned Intervention. Acad Psychiatry. 2017; 41(3);337-344. doi:10.1007/s40596-016-0521-3
4. Knipfer C, Wagner F, Knipfer K, et al. Learners' acceptance of a webinar for continuing medical education. Int J Oral Maxillofac Surg. 2019;48(6):841-846. doi: 10.1016/j.ijom.2018.11.010.
5. Destrebecq A, Ferrara P, Frattini L, et al. The Italian Version of the Opening Minds Stigma Scale for healthcare providers: validation and study on a sample of bachelor students. Community Ment Health J. 2018;54;66-72. doi: 10.1007/s10597-017-0149-0.

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