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Nurses' stigmatizing attitudes towards psychiatric inpatients: A cross-sectional multicenter study in Swiss psychiatric hospitals

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Background

Stigmatizing attitudes from nurses towards inpatients can lead to undertreatment or social isolation. This study aimed **1.** to describe nurses' stigmatizing attitudes towards inpatients in Swiss psychiatric hospitals and **2.** to assess the variation across different units. Further it aimed **3.** to explore associations with work environment factors.

Methods

As part of the Match[RN] Psychiatry project, this study analyzed data of 1,199 nursing staff. Stigmatizing attitudes was measured with the Discrimination-Devaluation Survey with 9 questions. To assess the variation of nurses' stigmatizing attitudes between units, the intraclass correlation (ICC) was tested. Bivariate and multiple regression was performed to explore associations between nurses' attitudes and their perceptions of work environment factors.

Results

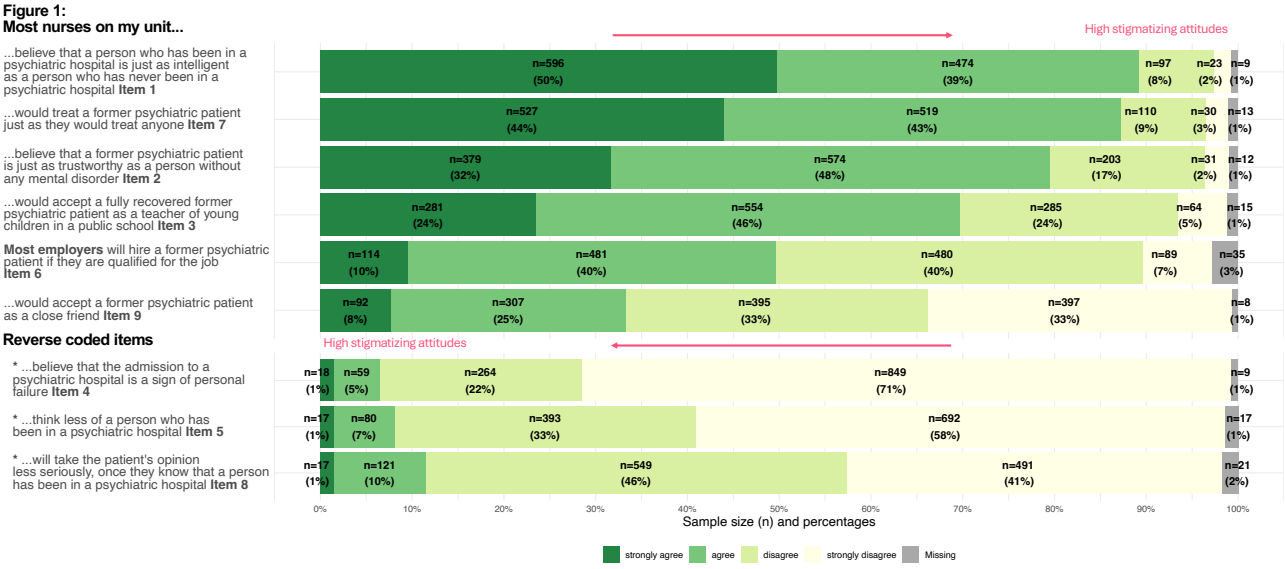
1. Nurses showed low stigmatizing attitudes overall (mean: 1.93; Scale ranging from 1-4; SD: ±0.45). In Item 9, reflecting the acceptance of a former psychiatric patient as a close friend, 66% disagreed or strongly disagreed, indicating high stigmatizing attitudes (Figure 1).

2. The ICC showed a small cluster effect between the units 0.084 (95%-CI: 0.044- 0.13), indicating relatively low variability of stigmatizing attitudes.

3. Better perceived unit leadership was significantly associated with low stigmatizing attitudes (β = -0.151, 95%-CI: -0.194, -0.108). Licensed practical nurses (β = 0.125, 95%-CI: 0.056, 0.195) were associated with significantly higher stigmatizing attitudes compared to registered nurses.

Descriptive table

Figure 1:
Most nurses on my unit...



Discussion

Compared to similar studies with various health care workers, this study found lower stigmatizing attitudes. While literature gives mixed reasoning on nurses' attitudes to be friends with former psychiatric patients, staff working in psychiatric institutions may have less willingness to engage with people with mental illness in their personal lives. Beyond individual factors, variation was observed between units. Higher leadership was associated with lower stigmatizing attitudes, suggesting its positive influence. By empowering nursing unit managers, fostering a shared vision and recognizing patients' experiences, psychiatric hospitals can actively address stigmatizing attitudes.

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