



## Service Priorities and Programmes Electronic Presentations

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### **Exploring the Impact of Mental Health First aid on Nursing Students' Knowledge and Attitude: A Pilot Randomised Controlled Trial**

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#### **Keywords:**

nursing students  
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#### **Introduction**

Nurses care for a significant number of people with mental health difficulties. However, many general registered nurses could lack the mental health competencies to identify and treat mental disorder. Nurses and nursing students view people with mental illness negatively. Therefore, additional education is required for nursing students to upgrade their mental health knowledge and reduce their stigmatising attitudes.

#### **Objectives**

This study aimed to explore the impact of providing the Mental Health First Aid (MHFA) training to general nursing students and to evaluate their Mental Health Literacy (MHL) and attitude toward mental illness.

#### **Methodology**

This study was a single site, parallel pilot RCT following CONSORT guidelines. Seventy students randomly assigned to intervention (MHFA plus Usual Education Practice, UEP) or UEP. MHFA is a 3-week mental health education, UEP is a 10-day clinical placement. Primary outcome variables were the vignette questionnaire in MHL (problem recognition, beliefs about treatment, first aid intentions and beliefs) and the secondary outcome was the attitude. Assessments conducted at baseline, post-intervention and 6-month follow-up. Intention to treat and per protocol were performed.

#### **Result**

Repeated measure ANOVAs suggested a strong time effect for MHFA group with partial eta-squared = 0.14 from baseline to post-intervention and significant time effect from post-intervention to 6-month follow-up for attitude. Friedman tests indicated

that order effects might influence three vignette responses. The ANOVAs also supported the attribution model on controllability and dangerousness. In beliefs about treatment, six categories grouped as professional, pharmacological intervention, psychiatric assessment, therapeutic communication, problem-solving skills and psychosocial intervention. Both quantitative and qualitative data concluded the primary outcome variables were statistically nonsignificant. These might be due to random error.

Conclusion: This study was the first pilot RCT for MHFA for general nursing students in Hong Kong. The underpowered significant tests may represent Type I and Type II errors, using p-value 0.01 and mixed methods are effective to reduce these errors. Although nonsignificant results in the primary outcome it is clinical meaningful. The limitations for this pilot were small sample size and high attrition rate. Protocol amendments in expanding the age range and using validated tool i.e. MHLS recommended for future research.