

Suicidality, Psychological distress and Professional help seeking: A cross sectional survey of Omani Student Nurses

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ABSTRACT

Objective: This survey was designed to assess the psychological distress, suicidality and help seeking behavior amongst Omani baccalaureate student nurses. **Methods:** This cross sectional survey took place between January 2021 and June 2021. Undergraduate nursing students enrolled at level two and above of baccalaureate nursing program at Sultan Qaboos University in Oman agreed to participate in the study. A self-administered demographic proforma with Kessler Psychological Distress Scale (K10), suicide behaviors questionnaire-revised and the attitude towards seeking professional psychological help scale short form were distributed to all the participants. **Results:** The sample consisted of 222 student nurses with a mean age of 22 years. Overall, 43% were likely to have psychological distress suggestive of moderate mental disorder and alarmingly, (42%) have a severe mental disorder as well. Six percentage of the study participants have suicidal tendencies as they scored ≥ 7 in the Suicide Behavior Questionnaire. Psychological distress and suicidality are positively correlated ($r=.185$; $p=0.006$), thus it is proven that as the psychological distress increases the suicidality of the students also increases. Majority of the students (70.29%) had average help seeking behavior for the common mental health problems. **Conclusion:** Psychological distress of moderate to severe level, with a positive correlation to suicidality was found among many nursing students. Further research in exploring the multifactorial link of psychological distress, suicidality and its impact on their academic achievement is recommended.

Keywords: psychological distress, suicidality, help seeking behavior, nursing students

Introduction:

Suicide is a serious community health problem distressing adolescents and young adults globally. It is also identified as the key mental health problem affecting university students¹. Early detection and treatment of these suicidal thoughts are prioritized for suicide prevention efforts globally.² Nursing students are experiencing more stress and mental health issues at various stages of their education than the general college students². Student nurses have varying intensities of stress throughout their training period.^{3,4} The main reasons for their stress include; stress through caring for acutely ill clients, course work, and undesirable interaction with the clinical team and faculty.

These stressors can affect a student's ability to cope, academic performance, and performance as a nurse later on.^{2, 3, 4}

When the stressors in one's daily life are too difficult to deal with for the person and cause emotional pain, it results in psychological distress⁵. It is a complex multidimensional problem affecting the youth, mostly adolescents.⁶ Most mental health problems stem from 15-24, and university students are at that age.⁷ Having suicidal thoughts is a common mental health problem among young adults reporting to mental health care facilities this days². The majority (74%) of Oman's population is 15-64 years old, and 24% is below 15 years of age^{8,9}. Suicide is mostly underreported and

poorly studied in most Islamic countries, including Oman. The common idea is that practicing Muslims reduces the risk of suicide, and the stigma associated with suicide leads to underreporting of cases.⁹

Though nursing/midwifery students are a group of students who go through a significant level of emotional distress, little is identified of their support-seeking behavior¹⁰. Despite the resources available on the campus, most of the students seek help from informal sources in times of stress¹¹. They are accessing mental health services when in distress is the most important step in reducing the burden of mental ill health¹².

Some of the factors influencing negative help-seeking behaviors among nursing students include individuals' own stigmatizing attitudes, fear of being judged, humiliation, poor emotional health mastery, and an inclination for self-reliance⁷. However, social support and encouragement from friends, kith, and kind and helpful previous experiences have positively influenced the help-seeking behaviors of students^{7, 10}.

The stigmatizing attitude towards mental illness is another common reason why most adolescents do not try to find help when undergoing psychological distress^{12, 13}. Stigma can contribute to low self-esteem, social isolation, self-neglect, and even suicide. However, recent research shows that stigma is mostly culture-specific and cannot generalize any religion or group with more stigma toward mental illness¹³. Hence, a client-centered approach is more beneficial in combating stigma and promoting help-seeking behavior among the affected individuals.

To meet the educational and clinical components, students must be emotionally and physically competent to accomplish several roles^{7, 14}. Physical and psychological stress at various stages of their study increases their susceptibility to developing mental disorders of various intensity^{5, 10, 14}. Hence, the stress must be recognized early in becoming a graduate nurse to optimize their academic performances and avoid potential ill effects^{14, 15}.

Need for the study

Several studies have revealed that Nursing students demonstrates different levels of stress throughout their training^{15, 16}. Extremes of psychological distress could result in suicidal ideations or impaired thought and psychological wellbeing during their clinical practice¹⁶. Nursing education is always stressful and it is impossible to remove all of those stressors at any cost. However, it is always feasible to identify the stressors at the earliest and intervene them as required to promote their coping. Although suicide is an ancient phenomenon, its cultural non acceptance in Islamic countries including Oman prevents people from asking for help when they are in the verge of ending their life. Individual's perception and cognitive appraisal of stressors and their attitude to professional help seeking behavior has also got a significant role in the student's coping with these stressors.

Existing studies have shown that nursing students who had more negative experiences during their training had experienced a severe level of psychological distress.¹⁶ We should spare no efforts in identifying psychological distress, suicidal ideations and their attitude to seeking professional help among the student nurses to provide timely interventions. Till date, no study has been done in Oman on nursing students' psychological distress, suicidality, and their help-seeking behavior in times of distress. This study aimed to assess the psychological distress, suicidality, and help-seeking behavior among Omani undergraduate nursing students. The main idea of doing this study was to identify the students with psychological distress at the earliest and sensitize the nurse academicians and health care professionals for early identification, provision of appropriate support, treatment, and prevention of serious mental illnesses among student nurses.

Aim of the study

This study aimed to identify the psychological distress, suicidality and help seeking behavior amongst Omani baccalaureate student nurses. These findings would benefit the policy makers and administrators in designing or maintaining a

student friendly academic environment for undergraduate nursing students and incorporating activities that will aid in maintaining or improving the mental health of the students.

Materials and Methods:

This cross-sectional descriptive survey took place between January 2021 and June 2021 at the College of Nursing, Sultan Qaboos University, the only public university in Oman. All the nursing students enrolled in Baccalaureate Nursing Program for various courses at level two and above in the fall 2020 and spring, 2021 Semesters were targeted. Purposive sampling was used for selecting the participants in the study. Sample size was calculated using the formula; $n = N / (1 + Ne^2)$, where n = number of samples, N = Total population (500) and e = margin of error, (0.05). Thus, 222 nursing students participated in the study. The STROBE checklist for cross-sectional studies is followed in reporting the findings of this study.

A self-administered questionnaire was distributed to all the consented participants. The questionnaire had four sections; the first section collected demographic data of the participants, i.e., age, gender, birth order in the family, level, of course, a semester in which you are studying, experienced probation, place of stay during the study; hostel or home, on treatment for a diagnosed mental illness: yes/no?. The second section explored the simple self-report measure of psychological distress by using Kessler Psychological Distress Scale (K10). It is a reliable (kappa score 0.74) and valid, widely used tool to identify those in need of further assessment for anxiety and depression in the general population. The K10 has ten questions answered using a five-point Likert scale (where five= all of the time and one= none of the time). Scores are then summed with a maximum score of 50 indicating severe distress and a minimum score of 10 indicating no distress. Scores under 20 are likely to be well, 20-24 are likely to have a mild mental disorder, and 25-29 are likely to have a moderate mental disorder, scores 30 and above are likely to have severe mental disorder¹⁷.

The third section of the tool explored suicidality using the Suicide Behavior Questionnaire. It is a reliable tool (Cronbach alpha 0.80)¹⁷freely available for identifying young people at risk of suicide. It is available in English, has four items: item 1 measures lifetime suicide ideation or attempt, item 2 measures the frequency of suicidal ideation over the twelve months, item 3 assesses the threat of suicide assessment, and item 4 evaluates the self-reported likelihood of suicidal ideation behavior in the future. The total score ranges from 3-to 18. A score of ≥ 7 is considered positive for the general population, and ≥ 8 is positive for psychiatric in-patients predicting suicidality. A score of ≥ 7 were considered for this study. Permission for use was granted by Osman et al., and it was available in the public domain¹⁸. The final section of the tool explored the attitude toward seeking professional help. It is a shortened version of the tool that is highly reliable (0.87), and the English version of the tool is freely available for research activities. It has ten items rated on a Likert scale from zero to three, where zero = Disagree, 1 = partly disagree, 2 = Partly agree, and 3 = Agree. Items 2,4,8,9, and 10 are scored in reverse order. A total score is calculated; the higher the score, the more is the positive attitude toward seeking professional help¹⁹.

The questionnaire data were collected, coded, and entered into SPSS version 24 by the research assistant. The researchers checked for the missing data, cleaned the data, and conducted the analysis. The analysis was done using the SPSS and Microsoft excel 2016. Baseline demographics of all participants were collected, and the frequency and percentages were reported for all the items in the demographic profile. The psychological distress was categorized as scores under 20 are likely to be well, 20-24 = likelihood of having a mild mental disorder and the 25-29= likelihood of having a moderate mental disorder scores 30 and above = likelihood of having a severe mental disorder. The frequency and percentages of each category of psychological distress were reported. In addition, psychological distress was ranked to understand the most common distress experienced by the majority of the participants. The suicidality among the participants was

analyzed by calculating a total score for the suicide behavior questionnaire. The percentage distribution of suicidal and non-suicidal clients was reported. In addition, the suicidal behaviors were ranked and presented as a bar diagram. The correlation between psychological distress and suicidality was estimated using Pearson Correlation (r). Descriptive statistics analyzed the attitude towards help-seeking behavior for common mental health problems. Frequency percentages, mean and standard deviation were reported. A ranking of their attitude to help-seeking behavior was also presented in a tabular form.

The study got ethical clearance from the College Scientific Research and Ethics Committee (IG/CON/DEAN/21/01). After obtaining informed consent, the research assistant distributed the questionnaires to all the

participants. Participants were given a code number to ensure anonymity. Data were kept secured confidentially with the primary investigator.

Results:

Of the 222 forms returned, nursing students had a mean age of 22 years; most of the students were females (68.5%), born as the third child of their parents (54%), studying in the university for nine or more semesters (88%), and residing in the hostel (68.9%). Out of them, 20.7% of the students experienced probation at some point in their study, 15.3% have a history of mental illness, but only 9.5% sought professional help. Many of the students' families have a history of psychological disorders (35%), and some of the families took professional help for the psychological disorder (23%).

Ia. Psychological distress among the students

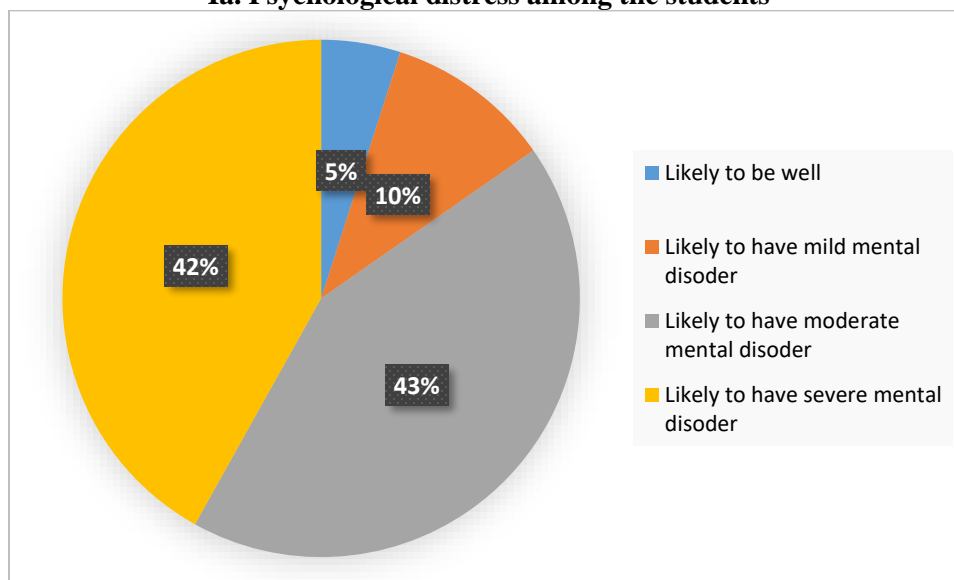


Figure I: Pie diagram showing the Psychological distress among nursing students

Figure I depicts that most of the participants (43%) had a likelihood of having a moderate mental disorder, and alarmingly, a nearly similar percentage of them (42%) had a likelihood of having a severe mental disorder. They would require a further assessment of their anxiety and depression to prevent major mental illness in the end.

Ib. Common psychological distress experienced by the undergraduate nursing students

Common psychological distress experienced by the students was ranked, and they appeared in the following order from the first rank to the last ranked. The distress of feeling worthless, sad that nothing could cheer up, that everything was an effort, depressed, very restless and could not sit still, nervous, restless or fidgety, nervous that

nothing could calm, tired out for no good reason, hopeless.

IIa. Suicidality among undergraduate nursing students

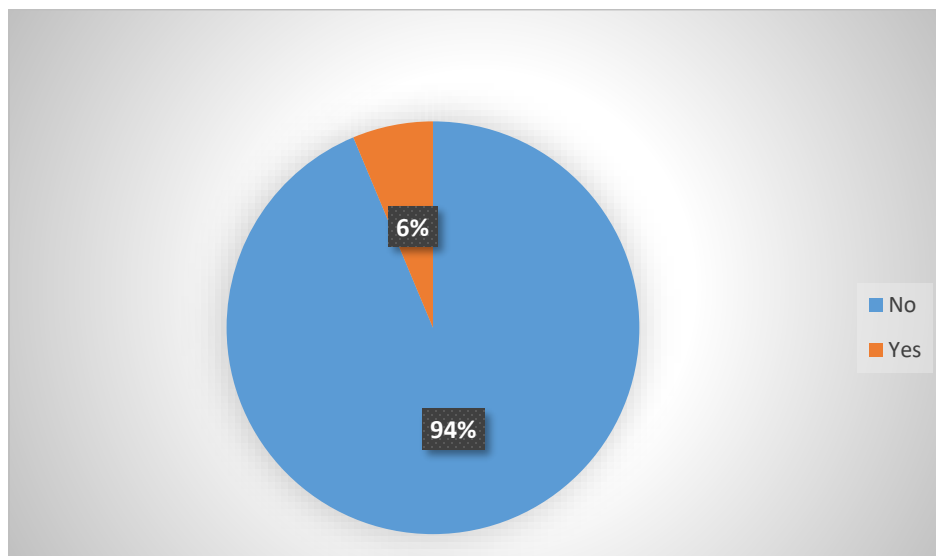


Figure II a: Presence of Suicidality among undergraduate nursing students

Figure II a shows that 6% of the study scored ≥ 7 on the Suicide Behaviour participants have suicidal tendencies as they Questionnaire.

II b. Ranking of suicidal behaviour

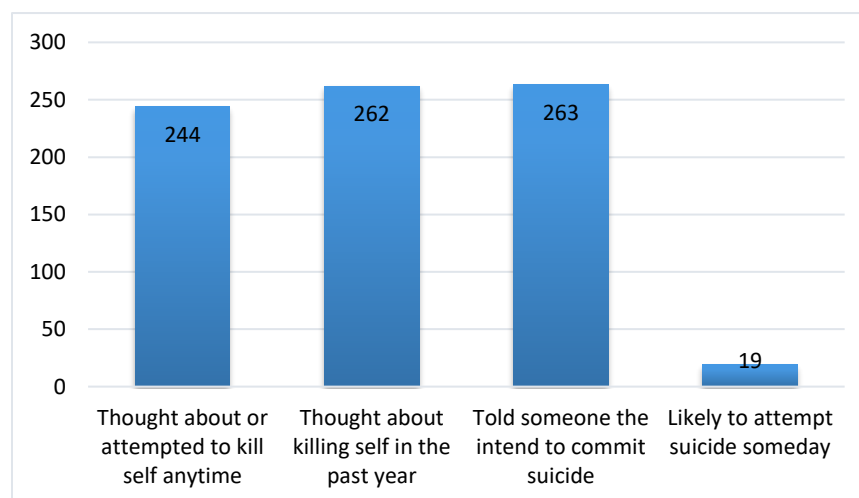


Figure II b: Bar diagram showing the total scores of students in the items of Suicidal Behaviour Questionnaire

The bar diagram (Figure 4) shows that majority of the students have expressed to someone their intention to kill themselves (Rank order 1), followed by a thought about killing themselves in the past year (Rank order 2) and thought about killing themselves anytime in their lives (Rank order 3).

3. Correlation between psychological distress and suicidality

**Table I : Correlation between psychological distress and suicidality
n=222**

Variables	Mean	Standard Deviation (SD)	Pearson Correlation (r)	Sig. (2-tailed) (p value)
Psychological distress	28.62	5.29	.185**	.006
Suicidality	3.55	1.159		

**p<0.01

The data in Table I depicts that psychological distress and suicidality are positively correlated ($r=.185$; $p=0.006$); thus, it is proven that as the psychological distress increases, the suicidality

of the students also increases. Hence, the null hypothesis that there is no correlation between psychological distress and suicidality is rejected at the 0.01 level.

4a. Attitude for help seeking behaviour among undergraduate nursing students for common mental health problems

Table II : Distribution of sample based on their attitude for help seeking behaviour

n=222

Help seeking behaviour total scores	Frequency (f)	Percentage (%)	Mean	Standard Deviation
0-5	6	2.70	15.2	2.79
6-10	54	24.32		
11-15	156	70.27		
16-20	1	0.45		
21-25	4	1.8		
26-30	1	0.45		

The data presented in table II show that the mean score for help-seeking behavior was 15.2. The majority of the students (70.29%) had average help-seeking behavior (11-15) for the common mental health problems. A higher score on the scale indicated good help-seeking behavior.

The ranking of the attitude for help-seeking behavior among undergraduate students for common mental health problems is presented in Table 4. It shows that they would be inclined to get professional attention if they believed that they have a mental breakdown (Rank order 1), followed by the students like the idea of talking about problems with a psychologist (Rank order 2) and the students feel confident in the effect of psychotherapy in relieving the emotional crisis (Rank order 3).

Discussion:

Existing research supports the idea that nursing students experience psychological distress of varying degrees during their training

program.^{7,8,9} However, few studies have investigated psychological distress, suicidality, and help-seeking behavior among nursing students in Oman. The primary aim of this study was to understand the psychological distress, suicidality, and help-seeking behavior among nursing students in Oman. The study results showed that most of the participants (43%) had a likelihood of having a moderate mental disorder, and nearly similar percent of them (42%) had a likelihood of having a severe mental disorder. Pearson correlation coefficient was computed for psychological distress and suicidality, and it showed a positive correlation with ($r=.185$; $p=0.006$); thus, it is proven that as the psychological distress increases, the suicidality of the students also increases. Hence, the null hypothesis that there is no relationship between psychological distress and suicidality is rejected at the 0.01 level. The majority of the students (70.29%) had average help-seeking behavior for the common mental health problems. A higher score on the scale indicated good help-seeking behavior.

The current study results add valuable insights to the prevailing knowledge by quantifying psychological distress, suicidality, and attitude towards help-seeking behavior among student nurses in Oman. Similar results were found in another study among student nurses, where nearly 44% of students experienced anxiety, and 48% experienced depression. This may affect their academic performance and overall health.^{7,8} However, the present study did not assess the impact of psychological distress on their academic performance and overall health.

In this study, psychological distress results are similar to other studies, where higher levels of psychological distress are observed among university students¹⁹. Using brief measures to screen the adolescents is very beneficial in identifying the mental health concerns of the target population at the earliest.^{20,21} In a similar study, around 50.6% of students do not have psychological distress²¹. Here, only 5% of people considered well, 10 % considered having mild psychological distress, and 43% and 42% moderate and severe psychological distress, respectively. The data were collected through the COVID-19 pandemic, and the teaching and learning during emergency remote teaching might have influenced the study results. Hence, the researchers assume it may continue during the pandemic and may need to explore it separately after the pandemic to understand the real trend of psychological distress among student nurses in Oman.

Suicide is the most severe form of behavioral expression of psychological distress²¹. Previous research indicates that the prevalence of suicidal behavior is less among Arab nations than in other countries like the US, Austria, and Japan²². This was reconfirmed in our study, where six percent of participants (13) expressed the intention to kill themselves in the past 12 months.

Lastly, an important finding was on the student's attitude toward seeking professional help in times of psychological distress. Having access to mental health care within the campus positively influences the mental help-seeking behavior among students.²³ Majority of the adolescents in our study had finally found their way to

professional help in times of psychological distress. Having mental health care available on campus and the students' alertness regarding the significance of seeking psychological support might have influenced their attitude to professional help-seeking.

There are several limitations to this study that needs to be addressed. The data was collected from university students of a selected college in Oman; hence, the findings cannot be generalized nationally. The data was gathered using self-reported tools, which could have resulted in underreporting of psychological, suicidality, or help-seeking attitudes among university students. Another possible limitation could be the multifactorial link between psychological distress, suicidality, and help-seeking attitude was not explored in this study. However, this data would act as a baseline for future large-scale studies addressing the cause and effect relationship between psychological distress, suicidality, and its impact on student's life and various factors influencing their impact.

Conclusion:

This study contributes by facilitating the identification of psychological distress, suicidal ideations and attitude towards professional help seeking behavior among student nurses to fill the existing knowledge gap. All these three variables need to be considered in planning and implementing interventions targeting the student nurses. Psychological distress of moderate to severe level, with a positive correlation to suicidality was found among many nursing students in the university. The majority of the students had a good help seeking behaviour. The findings will benefit policy makers and administrators in designing or maintaining a student friendly academic environment for undergraduate nursing students and incorporating activities that will aid in maintaining or improving the mental health of the students. As a large percentage of students' experiences psychological distress suggestive of moderate to severe mental disorder, health care professionals must detect these symptoms and provide appropriate support, treatment and prevention of serious mental illnesses. Furthermore, psychoeducation regarding

psychological distress, suicidality, seeking professional help when in distress is indispensable to moderate any negative effect on the affected individuals. Further research in exploring the multifactorial link of psychological distress, suicidality and its impact on their academic achievement is recommended.

Statement of conflict of interest:

There are no conflicts of interests.

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Author's Contribution

DKY, BPV & IA conceived the idea, reviewed relevant literatures and drafted the proposal. DKY drafted the proposal with guidance from BPV for research methodology. Demographic profile was modified by DKY with input from BPV and IA. Research assistant was hired for data collection, coding and data entry. Crosschecking of the data was done by DKY and BPV. BPV had done the data analysis. DKY drafted the paper in collaboration with BPV and IA. DKY, BPV & IA read and provided critical feedback to shape the final manuscript.

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