



## **A study to assess the level of knowledge regarding the Rights of mentally ill person among care givers attending OPD of mental hospital Selaqui Dehradun, Uttarakhand”**

### **Affiliation:**

Authors

**Kuldeep Singh Pundir<sup>1</sup>, Kamlesh dixit<sup>2</sup>**

Lecturer, Pal College of Nursing & Medical Sciences

### **ABSTRACT**

India has a huge burden of mental illness which is increasing day by day. The rights of mentally ill have been violated and stigmatized by the caregivers and society. The reason for ill treatment may be due to lack of knowledge regarding rights of mentally ill clients. Rights of the human being deals with balancing the rights of all human beings as individuals within the community, Hence the investigator has undertaken a descriptive study to assess the knowledge regarding rights of mentally ill person among caregivers at State Mental Health Institute, Selaqui, Dehradun. The objectives of the study were, describe the characteristics of the subjects, assess the knowledge regarding rights of patient among their care givers, and determine the association between selected demographic variables and level of knowledge. Descriptive survey was carried out among 100 caregivers at State Mental Hospital. Non probability convenient sampling technique was adopted for the present study. The self-structured questionnaires were used for data collection. The data was collected through face to face interviews. Data was analyzed and interpreted using descriptive and inferential. Majority 70 (70%) of the samples were male and 30 (30%) of were female. Male care givers 35 (35%) were having inadequate knowledge, 22 (22%) male were having moderate knowledge and 16 were having adequate knowledge, where as in female care givers 27 (27%) were having inadequate knowledge, and 9 (9%) were having moderate and 6 (6%) having adequate knowledge regarding human rights of person with mental illness. shows that the mean value of 100 subjects were 55.2 with standard deviation of 23.36 and mean percentage 55.20%. gender shows no association at 0.05 level of significance Chi-square calculated value is 0.117 at  $df = 2$ , age and education shows the significance level at 0.05, calculated value is 29.09 and 84.607 at  $df = 6$ , marital status has significant association with knowledge score value is 7.59 at  $df = 2$  significance at 0.05 level, occupation has significant association with knowledge at significance level 0.05 with  $df = 8$ , religion did not show any association at  $df = 8$ , whereas resident's area is significant to knowledge score at  $p < 0.05\%$ , there is no significant association between types of family at 0.05 level of significance value is 2.62 at  $df = 2$ , in relation with relationship its is significant at 0.05 value is 27.19 at  $df = 14$ . Its is interpreted that there is scant need of health education among caregivers of person with mental illness in vast area so that they can know about their rights and can help person with mental illness to live with dignity.

**Key words:** knowledge, mentally ill, rights. Care givers.

## INTRODUCTION

"All human beings are born free and equal in dignity and rights" (UNO)

Since the dawn of human civilization, mentally ill patients have received the scant care and concern of the community because of their unproductive value in the socio-economic value system. They have not only been neglected but received step motherly treatment from the health planners especially in the developing countries. Mental health is a core filament of life that is closely related and deeply interdependent with the physical health. Universal Declaration of Human Rights UNO emphasized on that "Everyone has the right to a standard of living good for the health and wellbeing of himself and of his family including food, clothing, housing and medical care and necessary social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age, or other lack of livelihood in circumstances beyond his control". The first human rights legal resolutions, such as 1948 Universal Declaration of Human Rights, did not specifically address the rights of mental health consumers. They codified more general, but still relevant, rights like right to life and liberty and right to be free from inhuman, degrading treatment. Later resolutions such as the Declaration on the Rights of Mentally Retarded Persons (1971) and the Declaration on the Rights of The Disabled Persons (1975), began the process of establishing international minimum standards for the treatment of persons with mental disabilities.

Approximately 1 in 5 adults in the U.S.—43.8 million, or 18.5%—experiences mental illness in a given year. Approximately 1 in 25 adults in the U.S.—9.8 million, or 4.0%—experiences a serious mental illness in a given year that substantially interferes with or limits one or more major life activities. An estimated 26% of homeless adults staying in shelters live with serious mental illness and an estimated 46% live with severe mental illness and/or substance use disorders. Approximately 20% of state prisoners and 21% of local jail prisoners have "a recent history" of a mental health condition. 70% of youth in juvenile justice systems have at least one mental health condition and at least 20% live with a serious mental illness. Only 41% of adults in the U.S. with a mental health condition received mental health services in the past year. Among adults with a serious mental illness, 62.9% received mental health services in the past year. Just over half (50.6%) of children aged 8-15 received mental health services in the previous year in 2015.

A countrywide National Institute of Mental Health & Neurosciences (NIMHANS) Bangalore study has revealed a shocking prevalence of mental illness in India. At least 13.7 per cent of India's general population has been projected to be suffering from a variety of mental illnesses; and 10.6 per cent of this requires immediate intervention. The common mental disorders such as depression, anxiety disorders and substance use disorders are as high as 10 per cent in the total population. Almost 1 in 20 suffers from depression and it is reported to be higher in females in the age-group of 40-49 years. High rates of depression are also reported in the elderly (3.5 per cent). 22.4 per cent of the population above 18 years suffers from substance use disorder. Nearly 1.9 per cent of the population is affected by severe mental disorders that included schizophrenia, other non-affective psychosis and bipolar affected disorders. These are detected more among males and those residing in urban and metro areas.

In Indian culture, family is viewed as the most important structure in caring for susceptible family members including those with mental illness and more than 90% of mental ill patients with chronic mental illness live with their families. The caregivers not only provide the basic needs of care like long-term assistance of housing and financial aid, they also take care of the day-to-day needs of the people with mental illness, monitoring the mental state, identify the early signs of illness, relapse and deterioration, and help the patient in accessing services. The family caregiver also supervises treatment and provides emotional support to the patient. However, the lack of knowledge and relatively lower mental health literacy stance challenges to family caregivers, mental health patients and service providers. Mental health literacy has been defined as knowledge

on awareness about mental disorders, which aid their recognition, management or prevention though; people's symptom-management activities will be influenced by mental health literacy.

## **MATERIAL AND METHODS**

Design: Exploratory Descriptive Research Design was used to assess the knowledge rights of mentally ill patients

Sample: A total of 100 of care giver selected through convenient sampling technique who met inclusion criteria.

Subjects who were not willing to participate in study

Tools: Various tools used to collect the data were:

Self- structured questionnaire: Total number of questions were 30.

Data collection schedule and procedure

Ethical permission

Permission to conduct the study was taken from the Chief Medical Officer Mental Hospital Selaqui Dehradun

Procedure of data collection

Data collection was conducted after receiving permission from the Medical Superintendent of State Mental Hospital Selaqui, Dehradun

A separate cabin was allotted for conducting the interview, participants were asked to give active participation in study, those who are willing for interview. Participants were fulfilling the inclusion criteria were enrolled in the study. Participants were informed about the purpose of the study, possible risks, benefits and confidentiality of their information before conducting interview. Written informed consent was obtained from the study participants. After making participants comfortable, they were interviewed by using various tools i.e. socio-demographic profile, and Self- Structured Questionnaire.

## **DATA ANALYSIS**

Analysis of data was done in accordance with the objectives laid down for the study using descriptive and inferential statistics in SPSS software version 20.0, and spearman's correlation were used to analyze the data.

## **RESULT:**

Findings of the study revealed that-

majority 70 (70%) of the samples were male and 30 (30%) of were female

Majority 44 (44%) of the samples were in the age group of 25-40 years, 35 (35%) were in age group of 41-65 years, 15 (15%) were in age group of 18-24 years, and only 6( 6%) were in age group of 65 and above.

Majority 41 (41%) of the samples were higher secondary education, 22 (22%) of samples were graduate and primary education and minority of 15 (15%) have no formal education

One third 75 (75%) of the samples were married and 25 (25%) were unmarried

Majority 23 (23%) of the sample were employed, where as 22 (22%) of the sample were self employed and labor, and only 17 (17%) were house wife

Majority 37 (37%) of the samples belongs to Hindu religion, and 34 (34%) were Muslim and 15(15%) were Sikh and only 14(14%) were belongs to Christian from total samples

Majority 61 (61%) of the samples were residents of rural area, where as 39 (39%) living in urban area.

Majority 53 (53%) of the samples were from nuclear family and 47 (47%) belongs to joint family.

Majority 29 (29%) of the samples were father in relationship, 21 (21%) were son and 17 (17%) were brother and daughter were 10 (10%) where as wife were 11 (11%) and only 1 (1%) were sister of mentally ill person.

Shows that majority 47% subjects were have poor knowledge, 31% have Average knowledge and only 22% have good knowledge regarding rights of mentally ill person

The findings in relation to aspect wise distribution of scores during the test shows that the highest 55.20 mean percentage knowledge score was obtained questionnaire related to rights of mentally ill person, 50.20 mean percentage knowledge score on questionnaire related to rights of mentally ill person

To determine the association between the knowledge score and demographic variables “Chi-square” test was used. The result findings exhibited that age, education, marital status, occupation, residential, and relationship with patient on 0.05 level of significance had statistical significant association with knowledge score. There was no significant association with other variables such as gender, religion, and family type.

## DISCUSSION

Majority 44 (44%) of the samples were in the age group of 25-40 years, 35 (35%) were in age group of 41-65 years, 15 (15%) were in age group of 18-24 years, and only 6 (6%) were in age group of 65 and above. Majority 41 (41%) of the samples were higher secondary education, 22 (22%) of samples were graduate and primary education and minority of 15 (15%) have no formal education. One third 75 (75%) of the samples were married and 25 (25%) were unmarried. Majority 23 (23%) of the sample were employed, whereas 22 (22%) of the sample were self employed and labor, and only 17 (17%) were house wife. Highest 37 (37%) of the samples belongs to Hindu religion, and 34 (34%) were Muslim and 15 (15%) were Sikh and only 14 (14%) were belongs to Christian from total samples, 61 (61%) of the samples were residents of rural area, whereas 39 (39%) living in urban area. Majority 53 (53%) of the samples were from nuclear family and 47 (47%) belongs to joint family, 29 (29%) of the samples were father in relationship, 21 (21%) were son and 17 (17%) were brother and daughter were 10 (10%) whereas wife were 11 (11%) and only 1 (1%) were sister of mentally ill person.

Knowledge of the care givers of the mentally ill person regarding rights of mentally ill person.

Majority of care givers were having poor knowledge that is (47%), followed by (31%) had Average knowledge and (22%) of them had good knowledge regarding rights of mentally ill person. Mean value of 100 subjects were 55.2 with standard deviation of 23.36 and mean percentage 55.20%.

## CONCLUSION

The primary aim of the study was to assess the knowledge of caregivers regarding the rights of mentally ill person state mental hospital, Selaqui, Dehradun. . A descriptive design, with survey approach was used for the present study. The data was collection from 100 samples through convenient sampling.

The conclusion drawn on the basis of the findings of the study includes:

Gender: In relation to gender the maximum number were males 73 (73%) whereas female were 23 (23%).

Age: The maximum number of respondent were 25-40 years 44 (44%) whereas 6 (6%) were above 65.

Education: Most of the respondent were 41 (41%) not having secondary education.

Marital status: majority of 75 (75%) were Married and only 25 (25) were unmarried

Occupation: Majority of caregivers were employed 23 (23%), and 22 (22%) labor.

Religion: Maximum caregiver belongs to Hindu 37 (37%)

Residential area: Maximum caregiver 61 (61%) were from rural area.

Type of family: majority 53 (53%) were belongs to nuclear family

Relationship: Most of the caregiver were parents (father/mother) 35 (35%).

The result of the study showed that the maximum number of caregivers 47 (47%) had poor knowledge, 31 (31%) had Average knowledge and 22 (22%) had good knowledge about the rights of mentally ill person.

There is statistically significant association found between demographic variables such as age, education, occupation, residential area, and type of family.

**Table 1:** Frequency and percentage distribution of socio demographic characteristics of care givers of mentally ill patient

N=100

| Demographic data          |                     | Frequency | Percentage% |
|---------------------------|---------------------|-----------|-------------|
| Gender                    | Male                | 73        | 73%         |
|                           | Female              | 27        | 27%         |
| Age in years              | 18-24               | 15        | 15%         |
|                           | 25-40               | 44        | 44%         |
|                           | 41-65               | 35        | 35%         |
|                           | 65 above            | 6         | 6%          |
| Education                 | No formal education | 15        | 15%         |
|                           | Primary             | 22        | 22%         |
|                           | Secondary           | 41        | 41%         |
|                           | Graduation          | 22        | 22%         |
| Marital status            | Married             | 75        | 75%         |
|                           | Unmarried           | 25        | 25%         |
| Occupation                | Employed            | 23        | 23%         |
|                           | Unemployed          | 16        | 16%         |
|                           | House wife          | 17        | 17%         |
|                           | Self-employed       | 22        | 22%         |
|                           | Labor               | 22        | 22%         |
| Religion                  | Hindu               | 37        | 37%         |
|                           | Muslim              | 34        | 34%         |
|                           | Christian           | 14        | 14%         |
|                           | Sikh                | 15        | 15%         |
| Resident                  | Urban               | 39        | 39%         |
|                           | Rural               | 61        | 61%         |
| Type of family            | Joint               | 47        | 47%         |
|                           | Nuclear             | 53        | 53%         |
| Relationship with patient | Mother              | 6         | 6%          |
|                           | Father              | 29        | 29%         |
|                           | Sister              | 1         | 1%          |
|                           | Brother             | 17        | 17%         |
|                           | Wife                | 11        | 11%         |
|                           | Husband             | 5         | 5%          |
|                           | Son                 | 21        | 21%         |
|                           | Daughter            | 10        | 10%         |

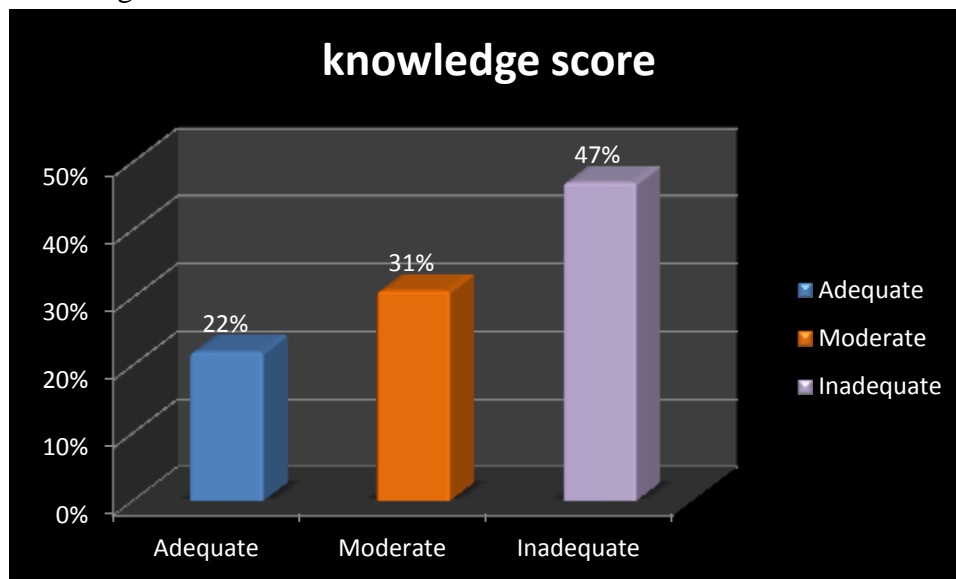
**Table 2:** Frequency and percentage distribution of knowledge score.

N=100

| Knowledge grading in percentage | Frequency | Percent % |
|---------------------------------|-----------|-----------|
| Good Knowledge (81 to 120)      | 22        | 22.0      |
| Average Knowledge (41 to 80)    | 31        | 31.0      |
| Poor Knowledge (<40)            | 47        | 47.0      |
| Total                           | 100       | 100.0     |

The above table shows the frequency and percentage (%) distribution of knowledge score of caregivers of the mentally ill patient. The table depicts that in 47 (47%) of the care givers had Poor knowledge, 31 (31% ) of the care givers had Average knowledge and 22 (22%) of the care givers possess Good knowledge.

Figure 1: showing knowledge score



Above bar diagram shows the knowledge score of the care givers of mentally ill person Majority of 47% were having poor knowledge about rights of mentally ill person

Aspect wise comparison on knowledge scores based on mean in different components of questionnaire regarding substance abuse.

**Table 3:** Association of care givers knowledge score regarding human rights of mentally ill person with gender.

N=100

| Demographical variables |   | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|---|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
| Gender                  |   | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Male                    | F | 16                 | 22                | 35             | 73    | 0.117                        | 0.943   | NS        |
|                         | % | 16%                | 22%               | 35%            | 73%   |                              |         |           |
| Female                  | F | 6                  | 9                 | 12             | 27    |                              |         |           |
|                         | % | 6%                 | 9%                | 12%            | 27%   |                              |         |           |

Note: - Chi-square value is not significant (NS) at 5% level (p>0.05)



**Table 4:** Association of care givers knowledge score regarding human rights of mentally ill person with age.

N=100

| Demographical variables |       |      | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|-------|------|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |       |      | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Age in years            | 18-24 | F    | 5                  | 7                 | 3              | 15    | 29.09*                       | 0.000   | S*        |
|                         |       | %    | 3.3%               | 4.7%              | 7.1%           | 15%   |                              |         |           |
|                         | 25-40 | F    | 15                 | 17                | 12             | 44    |                              |         |           |
|                         |       | %    | 9.7%               | 13.6%             | 20.7%          | 44%   |                              |         |           |
|                         | 41-64 | F    | 2                  | 5                 | 28             | 35    |                              |         |           |
|                         |       | %    | 7.7%               | 10.9%             | 16.5%          | 35%   |                              |         |           |
| >65                     | F     | 0    | 2                  | 4                 | 6              |       |                              |         |           |
|                         | %     | 1.3% | 1.9%               | 2.8%              | 6%             |       |                              |         |           |

Note: - Chi-square value is significant (S) at 5% level (p>0.05)

**Table 5:** Association of care givers knowledge score regarding rights of mentally ill person with education status.

N=100

| Demographical variables |                     |     | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|---------------------|-----|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |                     |     | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Education               | No formal Education | F   | 0                  | 1                 | 14             | 15    | 84.6*                        | 0.000   | S*        |
|                         |                     | %   | 0%                 | 1%                | 14%            | 15%   |                              |         |           |
|                         | Primary             | F   | 1                  | 0                 | 21             | 22    |                              |         |           |
|                         |                     | %   | 1%                 | 0%                | 21%            | 22%   |                              |         |           |
|                         | Secondary           | F   | 5                  | 24                | 12             | 41    |                              |         |           |
|                         |                     | %   | 5%                 | 24%               | 12%            | 41%   |                              |         |           |
| Graduate                | F                   | 16  | 6                  | 0                 | 22             |       |                              |         |           |
|                         | %                   | 16% | 6%                 | 0%                | 22%            |       |                              |         |           |

Note: - Chi-square value is significant (S) at 5% level (p>0.05)

**Table 6:** Association of care givers knowledge score regarding rights of mentally ill person with marital status.

N=100

| Demographical variables |           |   | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|-----------|---|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |           |   | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Marital Status          | Married   | F | 13                 | 21                | 41             | 75    | 7.59                         | .022    | S*        |
|                         |           | % | 13%                | 21%               | 41%            | 75%   |                              |         |           |
|                         | Unmarried | F | 9                  | 10                | 6              | 25    |                              |         |           |
|                         |           | % | 9%                 | 10%               | 6%             | 25%   |                              |         |           |

Note: - Chi-square value is Significant (S) at 5% level (p< 0.05)

**Table 7:** Association of care givers knowledge score regarding rights of mentally ill person with occupation.

N=100

| Demographical variables |               |   | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|---------------|---|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |               |   | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Occupation              | Employed      | F | 11                 | 11                | 1              | 23    | 36.599                       | .000    | S*        |
|                         |               | % | 11%                | 11%               | 1%             | 23%   |                              |         |           |
|                         | unemployed    | F | 5                  | 5                 | 6              | 16    |                              |         |           |
|                         |               | % | 5%                 | 5%                | 6%             | 16%   |                              |         |           |
|                         | House wife    | F | 1                  | 7                 | 9              | 17    |                              |         |           |
|                         |               | % | 1%                 | 7%                | 9%             | 17%   |                              |         |           |
|                         | Self employes | F | 5                  | 5                 | 12             | 22    |                              |         |           |
|                         |               | % | 5%                 | 5%                | 12%            | 22%   |                              |         |           |
|                         | Labor         | F | 0                  | 3                 | 19             | 22    |                              |         |           |
|                         |               | % | 0%                 | 3%                | 19%            | 22%   |                              |         |           |

Note: - Chi-square value is not significant (S) at 5% level (p&gt;0.05)

**Table 8:** Association of care givers knowledge score regarding rights of mentally ill person with religion.

N=100

| Demographical variables |           |   | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|-----------|---|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |           |   | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Religion                | Hindu     | F | 6                  | 15                | 16             | 37    | 6.932                        | 0.327   | NS*       |
|                         |           | % | 6%                 | 15%               | 16%            | 37%   |                              |         |           |
|                         | Muslim    | F | 6                  | 11                | 17             | 34    |                              |         |           |
|                         |           | % | 6%                 | 11%               | 17%            | 34%   |                              |         |           |
|                         | Christian | F | 4                  | 2                 | 8              | 14    |                              |         |           |
|                         |           | % | 4%                 | 2%                | 8%             | 14%   |                              |         |           |
|                         | Sikh      | F | 6                  | 3                 | 6              | 15    |                              |         |           |
|                         |           | % | 6%                 | 3%                | 6%             | 15%   |                              |         |           |

Note: - Chi-square value is not significant (NS) at 5% level (p&gt;0.05)

**Table 9:** Association of care givers knowledge score regarding rights of mentally ill person with residents.

N=100

| Demographical variables |       |   | Level of knowledge |                   |                | Total | Chi square (x <sup>2</sup> ) | P value | Inference |
|-------------------------|-------|---|--------------------|-------------------|----------------|-------|------------------------------|---------|-----------|
|                         |       |   | Good knowledge     | Average knowledge | Poor knowledge |       |                              |         |           |
| Resident's              | Rural | F | 4                  | 19                | 38             | 61    | 24.74                        | .000    | S*        |
|                         |       | % | 4%                 | 19%               | 38%            | 61%   |                              |         |           |
|                         | Urban | F | 18                 | 12                | 9              | 39    |                              |         |           |
|                         |       | % | 18%                | 12%               | 9%             | 39%   |                              |         |           |



Note: - Chi-square value is not significant (S) at 5% level ( $p>0.05$ )

**Table 10:** Association of care givers knowledge score regarding rights of mentally ill person with relationship with persons with mental illness. N=100

| Demographical variables               |         |    | Level of knowledge |                   |                | Total | Chi square ( $x^2$ ) | P value | Inference |
|---------------------------------------|---------|----|--------------------|-------------------|----------------|-------|----------------------|---------|-----------|
|                                       |         |    | Good knowledge     | Average knowledge | Poor knowledge |       |                      |         |           |
| Relationship with mentally ill person | Mother  | F  | 1                  | 3                 | 2              | 6     | 27.19*               | .018    | S*        |
|                                       |         | %  | 1%                 | 3%                | 2%             | 6%    |                      |         |           |
|                                       | Father  | F  | 2                  | 4                 | 23             | 29    |                      |         |           |
|                                       |         | %  | 2%                 | 4%                | 23%            | 29%   |                      |         |           |
|                                       | Sister  | F  | 0                  | 1                 | 0              | 1     |                      |         |           |
|                                       |         | %  | 0%                 | 1%                | 0%             | 1%    |                      |         |           |
|                                       | Brother | F  | 5                  | 6                 | 6              | 17    |                      |         |           |
|                                       |         | %  | 5%                 | 6%                | 6%             | 17%   |                      |         |           |
|                                       | Wife    | F  | 1                  | 5                 | 5              | 11    |                      |         |           |
|                                       |         | %  | 1%                 | 5%                | 5%             | 11%   |                      |         |           |
|                                       | Husband | F  | 2                  | 2                 | 1              | 5     |                      |         |           |
|                                       |         | %  | 2%                 | 2%                | 1%             | 5%    |                      |         |           |
|                                       | Son     | F  | 7                  | 9                 | 5              | 21    |                      |         |           |
|                                       |         | %  | 7%                 | 9%                | 5%             | 21%   |                      |         |           |
| Daughter                              | F       | 4  | 1                  | 5                 | 10             |       |                      |         |           |
|                                       | %       | 4% | 1%                 | 5%                | 10%            |       |                      |         |           |

Note: - Chi-square value is not significant (S) at 5% level ( $p>0.05$ )

### Acknowledgement

The authors sincerely thank all the care givers who participate in study and I'm highly thankful to medical superintendent of Mental Hospital, Selaqui, Dehradun for giving permission and support and their co-operation for the smooth conduct of the study.

### REFERENCES

1. Dorothy Deena Theodore. Human rights in India: Mental health perspectives. SOUVENIR; human rights of mental health nursing. 2009:15
2. World Health Organization. Mental health new understanding. The World Health Report 2001, Geneva. [http://www.who.int/whr/2001/en/whr01\\_en.pdf](http://www.who.int/whr/2001/en/whr01_en.pdf)
3. Ursula M Read, Edward Adiibokah, Solomon Nyame. Local suffering and the global discourse of mental health and human rights: An ethnographic study of responses to mental illness in rural Ghana. Department of Anthropology. 2009. doi: 10.1186/1744-8603-5-13
4. Serious Mental Illness (SMI) Among Adults. (n.d.). Retrieved October 23, 2015, from <http://www.nimh.nih.gov/health/statistics/prevalence/serious-mental-illness-smi-among-us-adults.shtml>
5. Vandana Kamath| Bangalore Mirror Bureau | Updated: Oct 12, 2016, THE TIMES OF India
6. Poreddi V, B Irudu R, Thimmaiah R, Math SB. Mental health literacy among caregivers of persons with mental illness. Journal of Neurosciences in Rural Practice.2015. 6(3):p.355-60. DOI: 10.4103/0976-3147.154571
7. Gautam S, Jain S, Batra L, Sharma R, Munshi D. Human rights and privileges of mentally ill persons 2009. Indian journal of psychiatry.2009. P. 82-112.

8. Basavaraju AU. To assess the knowledge regarding rights of mentally ill among care givers. Indian journal of psychiatric nursing. 2009; 1(1): p. 47-49.
9. Lalitha K. Mental health and psychiatric nursing: an Indian perspective. 1<sup>st</sup> ed. Bangalore: VMG book house; 2007: p.623-624.
10. Manjunatha N.G. Human and legal rights of mentally retarded persons. International journal of scientific & engineering research. 4. (7).2013. p 173-175.
11. <http://www.ijser.org>
12. Denise F. Polit, Cheryl Tatano Beck. Essential of Nursing Research Appraising Evidence for Nursing Practice. 7<sup>th</sup> ed. Wolters Klywers. India Pvt. Ltd. New Delhi.2010.
13. Shebeer. P. Basher, S. Yaseen Khan, A Concise Text Book Of Advanced Nursing Practice, published by EMMESS Medical Publishers Rajajinagar Bangalore560010.1<sup>ST</sup> ed. 2012.p. 464-467.
14. C. Lauber, C. Nordt, et.al, Public attitude to compulsory admission of mentally ill people. Acta Psychiatrica Scandinavica 2008. 105.(5).p.385–389, DOI: 10.1034/j.1600-0447.2002.1o267.x
15. Kabir M, Iliyasu Z, Abubakar IS, MH. Perception and beliefs about mental illness among adults northern Nigeria. BMC Int. Health Human Rights. 2004.4(1) p.3
16. Houlihan GD. The powers and duties of psychiatric nurses under the Mental ealth Act 1983: a review of the statutory provisions in England and Wales. Journal of sychiatric and Mental Health Nursing. 2005 Jun;12(3):317-24
17. Minas H, Diatri H. Physical restraint and confinement of the mentally ill in the community. International Journal of Mental Health Systems. 2008.2(1).p.1-5. DOI: 10.1186/1752-4458-2-8
18. Lin CL, Chan CH. A qualitative enquiry into the Taiwanese mentally ill Persons difficulties living in the community. Arch Psychiatric Nursing. 2008. 22[5].p.266-76.
19. Basavaraju AU. To assess the knowledge regarding rights of mentally ill among care givers. Indian journal of psychiatric nursing. 2009; 1(1): p. 47-49.
20. Kaur A, Kaur J, Kaur A, et al. To assess the prevalence of physical abuse, sexual abuse and social neglect among male and female mentally ill patients admitted in selected hospitals of Northern India, Indian Journal of Psychiatric Nursing 2009. p.7-11.
21. Kishore J, Gupta A, Jiloha RC, Patrick Bantman P. Myths, beliefs and perceptions about mental disorders and health-seeking behavior India. Indian J. Psychiatry. 2011 53(4).p.324–329.
22. Mohamad MS, Zabidah P, Fauziah I, et al. Mental Health Literacy among Family Caregivers of Schizophrenia Patients Published: Canadian Center of Science and Education 2012; 8(9). 2012. P. 74-82. doi:10.5539/ass.v8n9p74
23. Shinde M, Desai A, Pawar S. Knowledge, Attitudes and Practices among Caregivers of Patients with Schizophrenia. International Journal of Science and Research. 3 (5). 2014. p. 516-522.
24. Yadav T, Arya K, Kataria D, and Singh Balhara YP, Impact of psychiatric education and training on attitude of medical students towards mentally ill. Indian Psychiatry journal. 2012. 21(1).p.22–31.
25. Poreddi V. Ramachandra, Reddemma K, Math SB. People with mental illness and human rights. Indian journal of psychiatric nursing 55 (2) 2013.p117-124.
26. Nagarajaiah, Konduru R, Human Rights Violations among People with Mental Illness; Rural Vs. Urban.Turkish Journal of Psychiatry. 2013. p.1-14.
27. Pusey-Murray A, Paul Miller P. Caregivers' experiences of caring for their relatives with mental illness Parish. Mental Health in Family Medicine. 2013. 10.p.113–21.
28. Ananthapriya. Compare the awareness about Human rights of mentally ill among the Male and Female caregivers of patients diagnosed with psychiatric disorders Journal of Nursing and Health Science Volume 3, Issue 4, Jul-Aug, 2014. p. 2320–1959.

29. Jooj R, Hajibabae F, Zarea K, Hosein M, Zadeh H. Relationship between Awareness of and Respect for Patients' Rights from the Perspective of Patients Admitted to Psychiatric Wards. *Iran Journal of Client Centered Nursing Care* 2015; 1(2).p.63-70.
30. hendake M, Mohite VR, Gholap M, et al. A Study to Assess the Knowledge Regarding Human Rights of Mentally Ill Among Post Basic B. Sc. Nursing Students. India. *International Journal of Health Sciences and Research (IJHSR)*. 2014. 4(10).p. 164-171.
31. Mahesh Chendake, Vaishali R.Mohite, Manisha Gholap, Prakash.M.Naregal, Prabhuswami Hiremath, A Study to Assess the Knowledge Regarding Human Rights of Mentally Ill, 05/09/2014
32. Jagannathan A and Rao VN. Knowledge about Human Rights of Persons with Mental Illness in India: A Pilot Cross-Sectional Study. *Austin J Psychiatry Behav Sci*. 2015;2(1): 1033. ISSN : 2381-9006
33. Poreddi, V., BIrudu, R., Thimmaiah, R., & Math, S. B. (2015). Mental health literacy among caregivers of persons with mental illness: A descriptive survey. *Journal of Neurosciences in Rural Practice*, 6(3), 355–360. <http://doi.org/10.4103/0976-3147.154571>
34. Sangeetha B. Qualitative Study on Human Rights and Mentally Ill People. *International Journal of Current Research*. 2015.7 (7). P.18624-18628
35. Dipika Neupane , Sarmila Dhakal, Sabita Thapa, Parash Mani Bhandari, Shiva Raj Mishra Caregivers' Attitude towards People with Mental Illness and Perceived Stigma in Nepal, Published: June 23, 2016 <https://doi.org/10.1371/journal.pone.01581131111>
36. Polit DF, Hungler BP. *Nursing Research. Principles and Methods*. 6<sup>th</sup> ed. Philadelphia: J.B Lippincott Company. 1999. P. 14-15.
37. Suresh K Sharma, *Nursing Research and Statistics*, published by Reed Elsevier India Pvt. Ltd. New Delhi, second edition, 2014,pg no. 93, 175, 223, 250.
38. Shebeer. P. Basher, S. Yaseen Khan, *A Concise Text Book Of Advanced Nursing Practice*, published by EMMESS Medical Publishers Rajajinagar Bangalore560010.1<sup>ST</sup> ed. 2012.p. 464-467.
39. uresh K Sharma, *Nursing Research and Statistics*, published by Reed Elsevier India Pvt. Ltd. New Delhi, second edition, 2014.