# Mental Health Literacy among Nursing Students: A Descriptive Cross-Sectional Study in a Selected College of Nursing

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**Abstract**

**Background:** Mental Health Literacy (MHL) among healthcare providers is a key factor for early diagnosis and effective intervention in psychiatric illnesses. Nurses' preparedness, influenced by MHL, plays a critical role in shaping attitudes and practices toward mental health. **Objectives:** This study aimed to assess the level of MHL among nursing students and examine the associations between knowledge, attitude, behavior, and sociodemographic factors. **Methods:** A descriptive cross-sectional study was conducted among 114 nursing students (MSc, PBBSc, PB Diploma, and recent graduates) of a selected College of Nursing. Data were collected using a structured questionnaire and a standardized 35-item Mental Health Literacy Scale (O'Connor & Casey[3]). Descriptive and inferential statistics were applied. **Results:** The majority (78.1%) of participants had a fair level of MHL, while 16.7% had good and 0.9% had poor MHL. Good knowledge (60.5%) and positive attitude (97.3%) were observed, but only 26.3% had good behavioral/practice scores. MHL was significantly associated with professional qualification ($p = 0.004$) but not with age, experience, or workshop attendance. **Conclusion:** While nursing students demonstrated good knowledge and attitude towards mental illness, their practices did not align, indicating the need for targeted skill-building interventions. Integrating practical mental health training into curricula may bridge this gap.

**Keywords:** Mental Health Literacy, Nursing Students, Psychiatric Nursing, Attitude, Practice, India

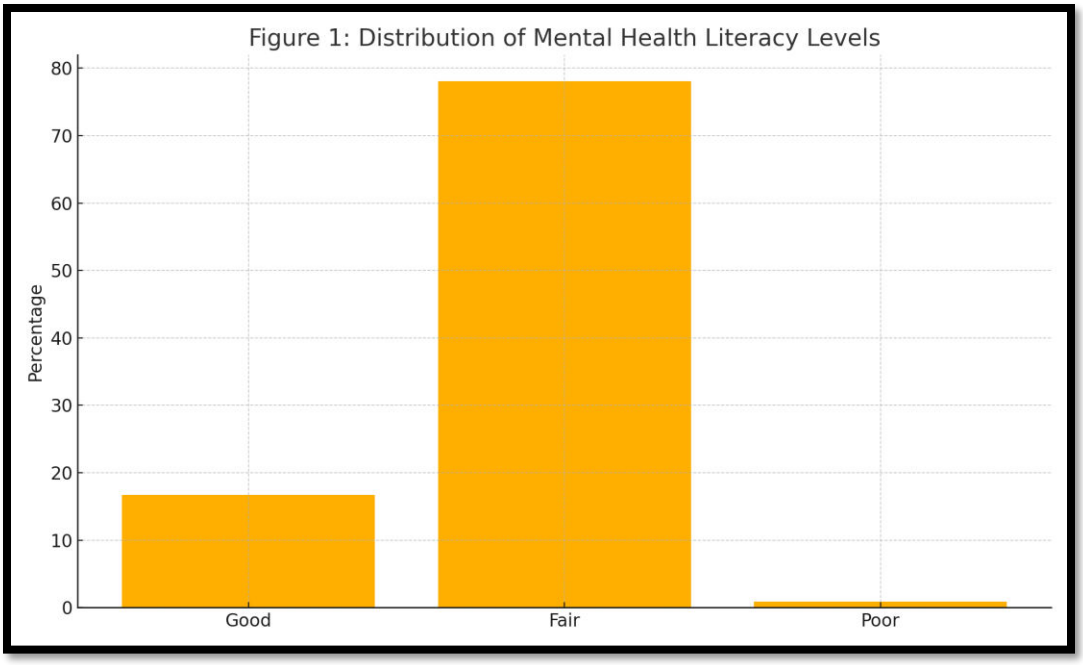



**Figure 1: Distribution of Mental Health Literacy Levels**

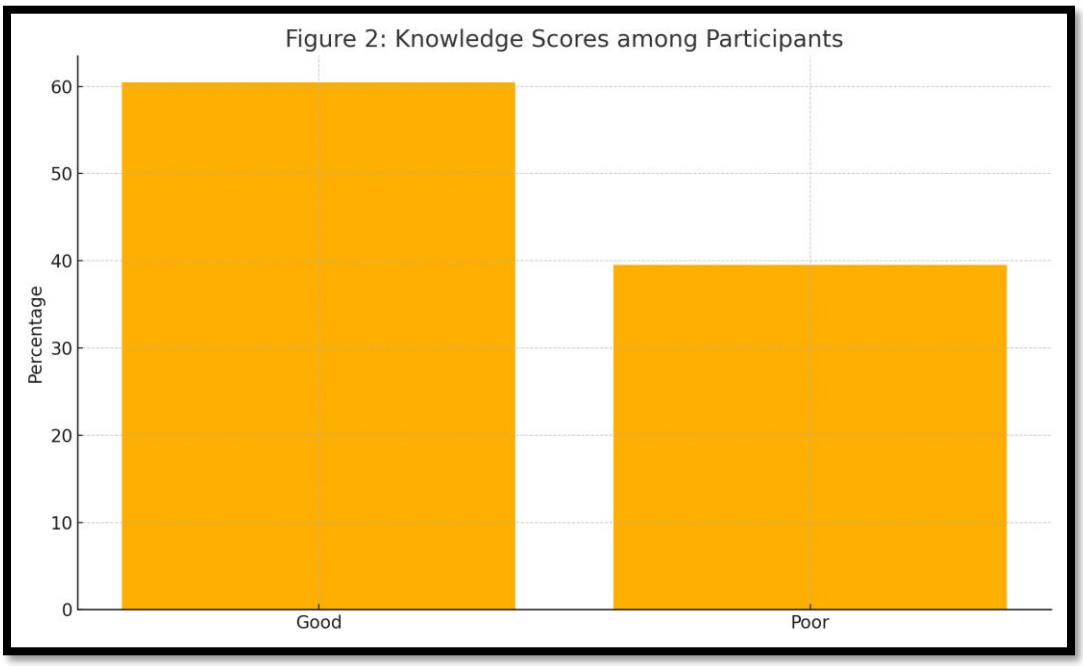



**Figure 2: Knowledge Scores among Participants**

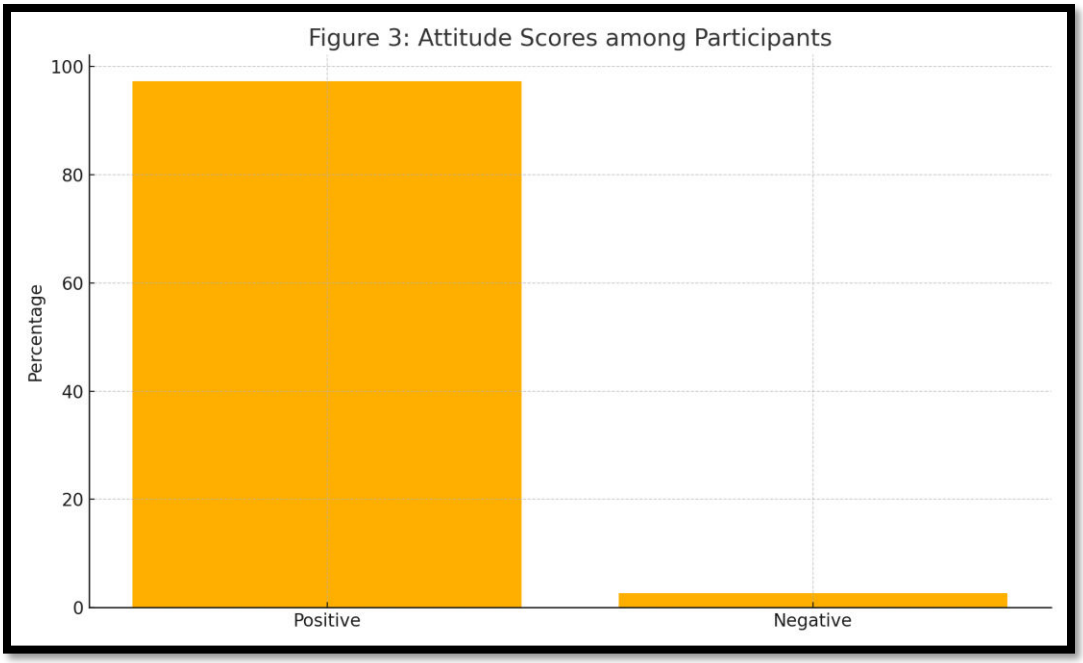



**Figure 3: Attitude Scores among Participants**

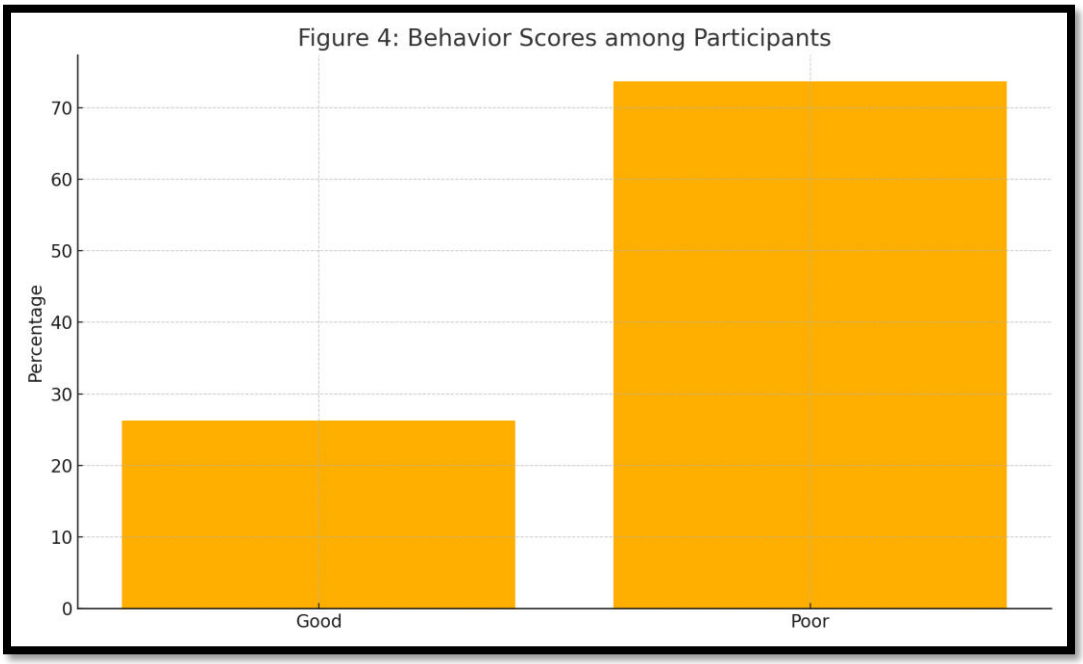



**Figure 4: Behavior Scores among Participants**

## 1. Introduction

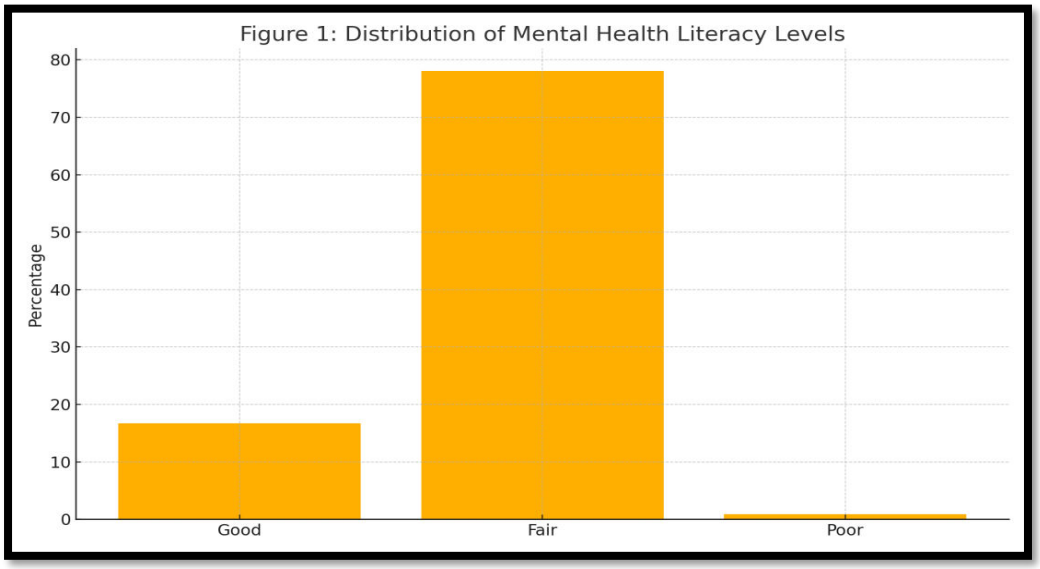
Mental health literacy (MHL), as defined by Jorm et al.[1] (1997), encompasses the knowledge and beliefs about mental disorders that aid their recognition, management, or prevention. Globally, the burden of mental disorders continues to rise, accounting for a significant percentage of disability-adjusted life years (WHO, 2015[2]). Nurses, often first-line responders, must be adequately equipped in terms of MHL to ensure early detection and reduce stigma surrounding mental illness. This study investigates the MHL levels among nursing students at a premier Nursing College in India.

## 2. Methods

A descriptive cross-sectional study was conducted at a selected College of Nursing . 114 students (MSc, PBBSc, PB Diploma, and graduates) were selected using convenience sampling. Data were collected using a structured demographic questionnaire and the 35-item Mental Health Literacy Scale by O'Connor & Casey[3] (2015). Descriptive statistics and inferential analyses (ANOVA, Chi-square) were performed using SPSS v20.

## 3. Results

Most participants were aged 20–25 years (46.5%) and had <5 years of experience (61.4%). The majority held BSc degrees (58.8%). Fair MHL was observed in 78.1% of participants, while 16.7% showed good and 0.9% poor MHL. Good knowledge was seen in 60.5%, while 97.3% showed a positive attitude. Only 26.3% had good behavioral scores.

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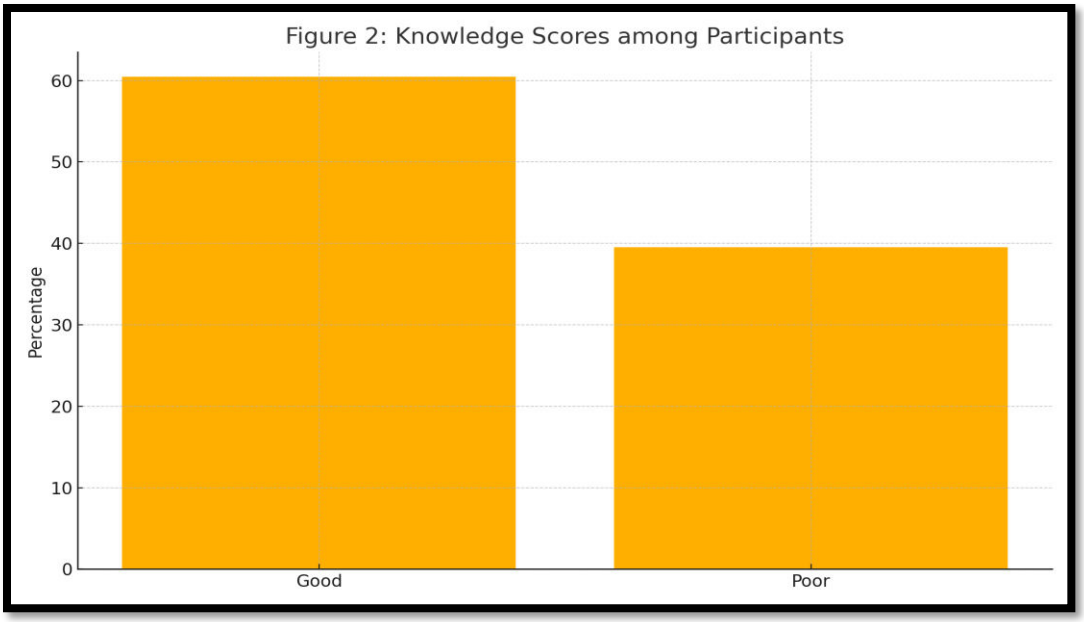


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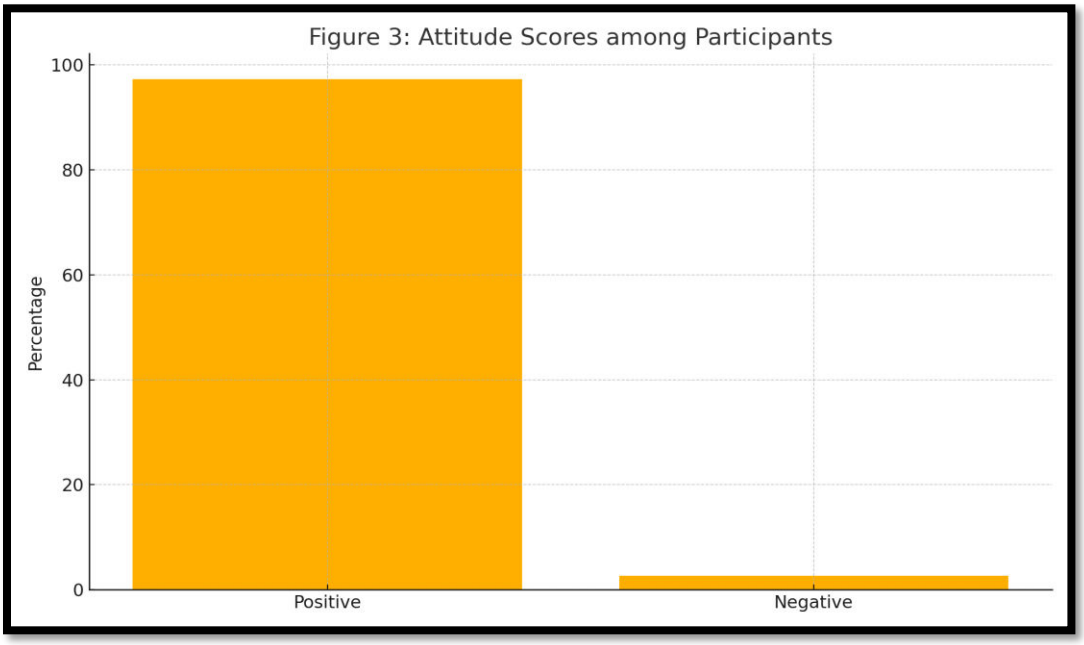


**Figure 3: Attitude Scores among Participants**

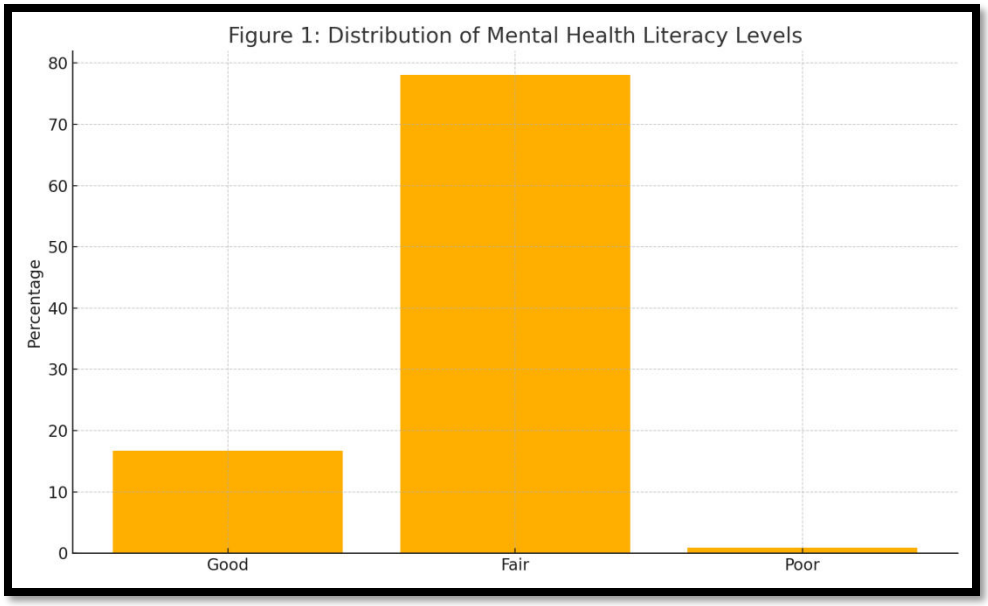


**Figure 4: Behavior Scores among Participants**

## 4. Discussion

This study found that nursing students have good knowledge and attitudes but lacked adequate behavioral practices toward mental health care. The significant association between professional qualification and MHL scores may reflect curriculum exposure. No association was observed with age, experience, or workshop attendance, although trends suggest higher MHL with age and experience. These findings echo earlier studies by Liu et al.[5] and Wei et al. on gaps in practical mental health competencies.

## 5. Conclusion and Recommendations

While participants had fair to good levels of MHL, practical application remains weak. Curricular modifications with simulation-based training, early psychiatric postings, and behavioral workshops are recommended. Follow-up longitudinal research is advised.

## References

1. Jorm AF, Korten AE, Jacomb PA, Christensen H, Rodgers B, Pollitt P. Mental health literacy: a survey of the public's ability to recognise mental disorders and their beliefs about the effectiveness of treatment. Med J Aust. 1997;166(4):182-6.
2. World Health Organization. Mental Health Atlas 2015. Geneva: WHO; 2015.
3. O'Connor M, Casey L. The Mental Health Literacy Scale (MHLS): A new scale-based measure of mental health literacy. Psychiatry Res. 2015;229(1-2):511-6.
4. Kutcher S, Wei Y, Coniglio C. Mental health literacy: past, present, and future. Can J Psychiatry. 2016;61(3):154-8.
5. Liu W, Gerdtz MF, Liu TQ. Mental health literacy among health professionals in China. Int J Ment Health Nurs. 2011;20(1):50-6.
6. Srivastava K, et al. Mental health awareness model. Ind Psychiatry J. 2016;25(2):131-4.
7. Aluh DO, et al. Mental health literacy in Nigerian university students. Ment Health Rev J. 2019;24(2):123-34.
8. Poreddi V, et al. Mental health literacy among caregivers in India. J Neurosci Rural Pract. 2015;6(3):355-60.
9. Yusefi[9] AR. Health literacy and quality of life in Iranian nurses. Iran J Nurs Midwifery Res. 2017;22(5):367-71.

## Declarations

**Ethical Approval:** The study was approved by the Institutional Ethical Committee. Participants gave informed consent before data collection.
**Funding:** No funding was received for this study. It was conducted as part of MSc Nursing academic requirements.

**Conflict of Interest:** The authors declare no conflict of interest.

**Author Contributions**

**Lt Col Sadhana Kumari:** Conceptualization, data collection, analysis, manuscript preparation.
**Maj Sumitha G (Guide):** Research guidance, manuscript review.
**Dr Janarthanan B (Co-Guide):** Methodological inputs, critical revision.