Psychiatric/ Mental Health Nursing Course: Students' Attitudes and Career Choices

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Abstract: The Psychiatric Mental Health Nursing (PMHN) is a therapeutic interpersonal process based on the concept of caring. So, mental health care may be regarded as a paramount to human well-being, family relationships and society. Nonetheless, many evidences refer to the shortage of PMHNs in Egypt and worldwide. This may attribute to the perception of mental health as a stigma in coming societies which negatively affect the nurses' attitudes toward PMHN and its future career. This study aimed to determine the effect of attending PMHN course on student's attitudes and their career choice in the Faculty of Nursing, Ain Shams University. A Pre-post test experimental design was used. The sample of this study consisted of 128 Bachelor nursing students (4th year) who had attended in PMHN Course. Two tools were used for data collection. First; questionnaire was designed to depict the demographic characteristics including gender, age, and residence, marital status, place of clinical area. Second; questionnaire was developed to assess students' attitude toward PMHN and identify factors affecting their carrier choice regarding Psychiatric Mental/ Health field. Results of this study revealed that most of the nursing students have positive attitudes with regard to the PMHN. As well, the study indicated significant changes in the students' attitudes toward mental illness and PMHN career after the completion of the course theory and practice. Conclusion: Most of studied nursing students have positive attitudes and attraction to the PMHN after completion of the PMHN course. Recommendation: career guidance sessions should be provided for the nursing students through graduations ceremonies or orientations to assist them to make decisions regarding their future careers. [Asmaa Hafez Afefe Barakat. Psychiatric/ Mental Health Nursing Course: Students' Attitudes and Career Choices. Biomedicine and Nursing 2016;2(4): 40-47]. ISSN 2379-8211 (print); ISSN 2379-8203 (online). http://www.nbmedicine.org. 7. doi:10.7537/marsbnj020416.07.

Key words: Nursing students, attitude, Psychiatric/ Mental Health Nursing, PMHN course, career.

1. Introduction:

PMNH is an important specialty where meeting the mental health demands of patients, family and community. (World Health Organization, 2010). Working in the psychiatric/mental health field is based on expert interpersonal process that integrates the care concept of which is designed to be therapeutic. Therefore, mental health service is highly regarded for human wellbeing, and productive community. (Wynaden 2010; Santos et al. 2013).

In fact, PMHNs are essential members in the mental health team; however, recruitment policy of PMHN became more complicated particularly in developing countries. In Egypt, we face not only a shortage of PMHNs, but also, inadequate participation in the PMHN education at all levels. As a result, the available numbers of nurses are too few to cover the mental health services. (Mental Health Workforce Advisory Committee 2008; Oywer, 2011).

Despite the fact, PMHNs are the major providers of mental health services. As, they contribute in many fundamental roles e.g. the assessment of patients with different psychiatric disorders; planning and evaluating therapies; provision of services and maintain patients' rights at both hospital and community levels (Hapell & Gough, 2011). Notwithstanding, there is inadequate recruitment and

poor retention for many reasons, Namely, the poor/stressful working environment, lack of career promotion, inadequate faculty training, the students 'perceptions of lack of support during clinical settings, and finally the prejudices and anxieties of students regarding mental illness (Curtis, 2007; Hapell & Gaskin, 2012).

The National **Board** of **Employment** Education & Training (1996) has also proposed number of factors that may influence the career choice among young nurses with regard to mental health career. For instance: the personal interests, the status of the profession, also the opinions retrieved from teachers, family members, and media. The board emphasized the positive effect of lecturers and clinical instructors on mental health nursing students' attitudes towards mental health career. In the same manner Rungapadiachy et al (2004) indicated that nurses who have positive attitudes towards mental health nursing as a result of undergraduate students learning experiences of the mental health course seems intuitive. Therefore, students may be exposed to both good and bad role models during theoretical and clinical learning at different settings.

PMHN course is regarded a fundamental course for Bachelor Nursing degree. The course contributes to build the intellectual, practical and communication skills among students. Besides, it helps them to understand and respect mental illness concept during the delivery of the nursing process for clients and family, for instance, preventive, curative, and rehabilitative psychological intervention. PMHN course is expected to promote student's interactive skills, self - understanding, problem solving, and critical thinking and leadership skills. After accomplishing the course, students are anticipated to be able to apply theory, concepts, and skills relevant to PMHN, as well as, functioning as a nursing profession member, provider of patient and familycentered care, patient safety advocate, and member of the healthcare team in both inpatient and outpatient settings. By finishing the course, students may gain learning experiences to deal with patients' mental illness and psychiatric disorders through the assessment, planning, and intervention (Happell, 1999; Melrose, 2002; Henderson et al, 2007; Happell 2009).

Significance of the study:

Negative attitude toward PMHN as a career option has been identified as a prime barrier to maintain sufficient psychiatric nursing workforce (Dawood, 2012). Again, many studies revealed that nursing students do not perceive psychiatric nursing as a desirable future career option; also, it is unpopular career. It seems that, career of PMHN suffers from an image problem, as the area of specialization may be regarded as stigma among individuals (Hoekstra, et. al., 2011).

Studies have indicated that PMH nurses are highly exposed to be affected by social stigma as they are perceived as poorly skilled and lack logic, dynamic and respect. Studies may generate knowledge help to identify the motivating factors relevant to mental health nursing profession, and develop convenient recommendations to attract and retain people in this career (Handerson et al. 2007; Happellel al 2008; Hapell & Gaskin, 2012; Santos et al 2012; Chadwick & Porter in 2014). To understand the attitudes of undergraduate nursing students towards PMHN, this research was conducted to explore the potential role of the undergraduate education in shaping students' attitudes towards PMNHN and choosing it as a future career.

The Aim of the study was to determine the effect of attending PMHN course on student's attitudes and their career choice.

The Research hypothesis: Hypotheses 1:

The theoretical and clinical components of the PMHN course of the Bachelor of Nursing will

influence positively nursing student's attitudes toward mental illness.

Hypotheses 2:

The theoretical and clinical components of the PMHN course of the Bachelor of Nursing will influence positively nursing student's to choose PMHN as a future career.

2. Subjects and Methods:

Study design:

Pre-post test experimental design was used.

Setting:

The study was conducted at two settings: 1-Faculty of Nursing, Ain Shams University (for theoretical part). 2-Abbassia Psychiatric Hospital and Center of Psychiatric Medicine (for clinical part).

Subjects:

A convenient sample of 128, 4th year bachelor nursing students who are undergoing to take PMHN course (theory and clinical) in the academic year of 2013 – 2014. Students who previously studied the PMHN course are excluded from the study (technical institutes, repeaters).

Data Collection tools

A self -administered questionnaire was designed to assess two parts: first: Sociodemographic characteristics of nursing students such as age, sex, marital status, residence, place of clinical area). Second: Attitudes toward PMHN Questionnaire: It was developed by Happell et. al. (2008) to assess student's knowledge and skills about psychiatric mental health nursing course and degree of their attitudes and beliefs relevant to mental illness in general and PMHN in particular as well as factors that affects their choices regarding PMHN as a career. It consists of the following subscales: the preparation of nurses for the mental health field, student's knowledge of mental illness, perceptions about mental illness, anxiety surrounding mental illness, value of mental health nursing, Future career options and experience during choices, placement, clinical support. Participants were asked to respond to a five levels Likert scale ranging from strongly agree (5), agree (4) to not sure (3) disagree (2) strongly disagree (1). The total score was obtained by summing the response rate for all statements as well as, each subscale which is rated from positive attitude (\geq 60%) to negative attitude (< 60%). Higher score indicates more positive attitude.

Tools validity and reliability

Tool was submitted to a jury of 3 experts in PMHN fields to determine its applicability and content validity after which the necessary modifications were done. The reliability of tool was checked and approved high reliability value, by Cronbach alpha coefficient statistical test.

Data Collection:

A pilot study was carried out on 15 nursing students who were selected randomly apart from the study sample to test the tool clarity, feasibility, time needed to fill in the study tool modifications were done. Questionnaire was distributed among students in their class. Once recruited, students were fully informed that involvement in the research is purely voluntary and they were free to decline to participate at any time during the course of the study. A verbal explanation with a plain and clear language statement was disseminated to all students immediately prior to the distribution of the questionnaires. Questionnaires were distributed in the class time with an envelope for confidentiality. All students were asked to return their questionnaires, whether they had completed them or not, so that non-responders could not be identified. Anonymity was assured by telling the students to avoid putting their names on the questionnaire. The students were compared at two different times: The first time was to determine a baseline of student's self-report questionnaire before attending the PMHN course. The second time was to examine any changes in the students' attitudes and their future career choices as a result of the theoretical and clinical components of the PMHN course.

The PMHN course within the degree of Bachelor of Nursing science includes 16 weeks of theory and clinical. During the first two weeks, students receive the theoretical base only (36 hours). After that, students start 3 days of hospital clinical (18 hours/week) beside one day of theory (6 hours/week) in the previously mentioned psychiatric settings. During the theoretical part, students receive the following: introduction and history of mental health and illness, signs and symptoms of different psychiatric disorders, defense mechanisms, therapeutic communication, substance treatment modalities, and psychiatric/mental health in different age groups.

During the clinical part: The first week is orientation through which students will be familiar with hospital setting, patients and health team members. After the orientation phase, students are distributed between inpatients, outpatients' settings. Students learn the following: interviewing, assessing and intervening patients with mental illness, using therapeutic communication techniques, applying activity therapy in collaboration with mental ill

patients and staff, and attending Elector-Convulsive Therapy procedure.

Ethical considerations:

An approval was taken from the Dean and the vice Dean of education and students affairs of the Faculty of Nursing: Ain Shams University to get their permission for data collection. Prior permission was granted by the head of psychiatric/mental health department to use class time for the questionnaires' completion. The purpose of the study was explained to the students and oral consent was obtained. The students were assured that the obtained information will be treated confidentially by anonymity procedure.

Statistical Design

Data was computerized, coded, analyzed and tabulated. Statistical Packages for the Social Sciences (SPSS) version 19.0 for Windows and Microsoft Excel Spread Sheet Package (Office 2010) were used for the analysis of the study results. Mean and standard deviations well as frequency and percentage were used for data description, and paired T test and P values the significance.

3. Results:

Table (1): shows the socio-demographic characteristics of the studied sample. All of nursing students' age ranged from 21 to 24 years old and most of them were female (82.03), and lived with their families (85.9%). As regards to students' residence, majority of the studied sample (73.4%) come from urban areas. Regarding marital status, most of them (91.4%) were single. Furthermore, about two thirds of studied sample (65.6%) received their training in Abbassia psychiatric hospital.

Table (2): represents the effectiveness of PMHN theoretical and clinical education on the studied nursing students' knowledge and skills in the 1st and 2nd domains. There is a statistical significant difference among the studied sample before and after attending the course; students have understanding of the role of the PMHN (the mean changed to 4.13) as well as have theoretical background that prepared them well for clinical practice (the total mean changed to 4.55). Furthermore, students show confidence to care for patients with mental illness. The results refer also that, students have satisfaction with the curriculum to be more confidence to working in the PMHN field, the P value of both students preparation of mental health field and student's knowledge =< 0.001.

Concerning perceptions about mental illness, it is noticed that, all of the students have a mean score less than 2 in the first assessment (the total score is less than 50%), it means that all of them have negative attitudes toward patients with mental illness before

study. Students before studying PMHN course believed that the patients with mental illness have unpredictable behaviors (mean score=2.4) and they are also more likely to commit offences or crime (mean score= 1.8). Furthermore, they considered patients with mental illness having difficulty to handle too much responsibility (mean score= 1.6). But after applying the PMHN course, all of the students' attitudes have significant positive changes; the total mean score increased from 1.925 to 4.175 (above 81%). In addition, these results showed that all the studied sample in the first assessment have anxieties about dealing with mental ill people. This significant improvement was noted in all items in the post assessment (P Value=<0. 001), students after the course are not anxious about working with mentally ill patients (the mean score changed to 4.4); they get feel safe during their clinical practice (the mean score changed to 4.6). Pertaining to the feedback from studied students about the value of PMHN and choosing it for the future career, a significant improvement is noted after the course completion; students have a positive feeling about its contribution (the mean score changed to 4.9) and are willing to pursue a career in the psychiatric/mental health field (the mean score changed to 3.6). The total P value after course =< 0.001.

As regards to student's experience during clinical course, significant improvements in the mean

scores of all items had observed (the total mean score improved from 1.86 to 3.86; P value = 6.1176). It means that Students improved their attitudes toward nursing staff working in the psychiatric hospital. After the course completion students reported that they are encouraged and supported by nursing staff in clinical and also nursing staff demonstrated a high level of clinical skills (mean score in both items become 3.7) as well as treat the patients with dignity and respect (the mean score become 3.6). It is apparent from the same table that statistically significance differences were detected before and after course application regarding PMHN academic staff support during the clinical placements as perceived by studied sample, total mean improved from 2.022 to 4.0888; P Value=<0. 001. Students reported that the academic staff introduces an effective orientation program during clinical placement (mean score become 4.8). The academic staff is familiar to student's learning objectives (mean score become 4.4) and involves nursing students in patients care (the mean score become 4.7) the total P Value= <0.001.

According to the results, it is clear that there is a strong statistical significant difference between the pre and post, assessments for all subscale items which reflects the high effectiveness of the PMHN course to decrease stigma towards patients with mental illness and increase interest in the specialty as a future career.

Table (1): Distribution of Socio-demographic characteristics among students under study (n=128).

Statement	Number	Percentage		
	n =128	(%)		
Age (in years): 21-24	128	100		
Gender				
Male	23	17.96		
Female	105	82.03		
Living				
With family	110	85.9		
Alone	18	14.1		
Residence				
Urban	94	73.4		
Rural	34	26.6		
Marital Status				
Single	117	91.4		
Married	11	8.6		
Place of clinical area				
Abbasia psychiatric hospital	84	65.6		
Center of Psychiatric medicine	44	34.4		

Table (2): Attitudes toward PMHN among Studied nursing students before and After PMHN Course

Table (2): Attitudes toward PMHN among Studied nursing				XIICI II		
Statement	Before		After	CD	T test	P Value
D C C M (IX II P! II	205	SD	<u>x</u>	SD	10 1552	-0.001
Preparations for Mental Health Field	2.05	1.01	4.13	2.08	10.1773	<0.001
1. Feeling well prepared for the psychiatric nursing placement	2.2	1.1	3.9	1.9	8.7605	<0.001
2. Having a good understanding of the role of a psychiatric nurse	1.7	0.7	4.1	1.9	13.4099	<0.001
3. Feeling confident to care for people experiencing a mental health problem	1.6	0.6	3.8	2.1	11.3964	<0.001
4. Theoretical component of psychiatric nursing prepared me well for my clinical placement	2.3	1.3	4.3	2.4	8.2900	<0.001
5. course has prepared me to work as a graduate nurse in the psychiatric nursing program	2.1	1.1	4.1	1.9	10.3065	<0.001
6. Clinical placement was long enough to consolidate my understanding	2.4	1.3	4.6	2.3	9.4211	<0.001
of psychiatric nursing Knowledge regarding Mental Illness		1.175	4.55	2.225	10.3416	<0.001
Mental illness is not a sign of weakness in a person	2.25 1.8	1.1	3.8	1.7	11.1749	<0.001
	2.3	1.1	4.6	2.6	9.2173	<0.001
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3. When someone develops a mental illness, it is not their fault	2.4	1.2	4.9	2.4	10.5409	<0.001
4. The way people with mental illness feel can be affected by other people's attitudes towards them		1.3	4.9	2.2	10.6258	<0.001
Perceptions about Mental Illness	1.925	0.95	4.175	1.95	11.7357	<0.001
1. People with mental illness are unpredictable	2.4	1.2	4.9	1.9	12.5863	<0.001
2. If I developed mental illness, I wouldn't tell people	1.9	0.8	3.4	1.8	8.6155	<0.001
3. People with mental illness cannot handle too much responsibility	1.6	0.9	3.9	1.9	12.3772	<0.001
4. People with mental illness are more likely to commit offences or crimes	1.8	0.9	4.5	2.2	12.8512	<0.001
Anxiety Surrounding Mental Illness	1.766	0.933	4.466	2.233	12.6223	<0.001
Being anxious about working with people experiencing a mental health problem	1.8	0.8	4.4	2.3	12.0796	<0.001
Being uncertain about how to act towards someone with a mental illness	1.7	0.9	4.4	2.1	13.3701	<0.001
Feeling safe about psychiatric placement	1.8	1.1	4.6	2.3	12.4253	<0.001
Career Choice	1.4	0.75	3.7	1.95	12.4549	<0.001
Applying for a post basic program in psychiatric nursing	1.2	0.75	3.8	1.95	15.5034	<0.001
	1.6	0.0	3.6	2.1	9.9038	
						<0.001
Value of Mental Health Nursing	2.666	1.2	4.666	2.433	8.3409	<0.001
1. Psychiatric nursing makes a positive contribution to people with mental illness	2.2	1.3	4.9	2.6	10.5085	<0.001
2. The clinical placement in Psychiatric nursing will provide valuable experience for my nursing practice	2.1	1.2	4.8	2.4	11.3842	<0.001
 Mental health services provide valuable assistance 	1.9	1.1	4.3	2.3	6.1176	< 0.001
Experience during Clinical Placement	1.86	1.04	3.86	2.14	9.5100	<0.001
1. Being encouraged by the nursing staff to consider psychiatric nursing as a career	1.7	0.8	3.7	1.9	10.9759	<0.001
2. Enjoying psychiatric/mental health placement	1.6	0.9	4.6	2.7	11.9257	< 0.001
3. The nursing staff demonstrated a high level of clinical skills	2.3	1.3	3.7	2.4	5.8030	< 0.001
4. The nursing staff treated patients with dignity and respect	1.9	1.1	3.6	1.9	8.7605	< 0.001
5. The nursing staff were responsive to my requests for clarification or assistance	1.8	1.1	3.7	1.8	10.1901	<0.001
Clinical Support	2.022	1.122	4.311	2.233	10.3628	<0.001
Being well oriented during my placement	1.9	0.9	4.8	2.6	11.9249	<0.001
2. Feeling supported by the PMHN academic staff during my clinical placement	2.2	1.3	4.5	2.4	9.5336	<0.001
	2.4	1.4	3.8	2.1	6.2757	<0.001
4. Feeling better supported in mental health nursing placement than I have on other placements	1.7	0.8	4.3	2.6	10.8134	<0.001
5. Feeling supported by the mentor/clinical instructor	2.1	1.1	4.9	2.4	11.9990	<0.001
6. Being encouraged to become involved with patients care while on placement	2.1	1.1	4.7	2.5	10.7698	<0.001
7. PMHN academic staff were welcoming to students on placement	2.1	1.2	3.6	2.1	7.0165	<0.001
PMHN academic staff were prepared for my arrival	1.9	1.2	3.8	1.6	10.7480	< 0.001
9. PMHN academic staff were familiar with the learning objectives of my	1.8	1.1	4.4	1.8	13.9444	< 0.001
course	1.5			1.5	15.5111	0.001

4. Discussion:

The PMHNs play a major role in the care and treatment of people experiencing mental health problems and are key success of any health management strategies. However, there is growing evidence that the number of PMHNs will be insufficient to meet the needs of the population into the future (Hoekstra, et. al., 2010). Mental health in many societies is shaped by stigma and negative labels. Stigma can be a barrier and may interfere families and individuals from seeking treatment. There are some reasons affecting nurse's attitudes, lack of knowledge, stigma, and prior experience with mental illness. The health profession especially nurses can broke these barriers from the first contact with patients and families (Warelow & Edward, 2009; Chakwick & Porter, 2014). The aim of the PMHN theoretical and clinical education of a Bachelor of Nursing course is to develop students' knowledge, skills, and attitudes to nurse patients with mental illness as well as assess and encourage more understanding and tolerance of mental illness among nursing students. (Henderson et al. 2007). Hence, the purpose of the study to ensure that PMHN nursing education within the curriculum decrease stigma surrounding mental illness among nursing students as well as increase their future recruitments in psychiatry.

The results of the present study indicated that most of the studied students had positive attitudes and intentions to work in the psychiatric/mental health field. These positive attitudes can be induced by the effectiveness of the PMHN course education that provided the students a good understanding of the role of the PMHNs, since the theoretical component prepared them well for the clinical practice as well as be more confident to care for the patients with mental illness. This result was agreed with Happell (1999) who argued that the aim of the undergraduate PMHN component was to reduce stigma towards patients with mental illness and increase interest in the specialty as a future career choice. This study was also supported by Happell et. al., (2008), in study of examining the relationship between exposure to theory and practice of psychiatric nursing and the desirability of psychiatric nursing as a future career choice, who confirmed that positive clinical exposure and theory have been identified as one of the strategies to enhance the confidence of students, and to encourage students to regard mental health more positively.

As for positive attitudes among nursing students, the result of the present study was the opposite to the study of **Oywer**, (2011) who found that the nursing

students had negative attitudes toward mental health nursing and disregard mental health nursing career as an attractive choice, the researcher also reported that nursing students in this study were less confident in clinical practice and in their preparedness for mental health training which reflects why students have negative attitudes in his study.

Furthermore, the PMHN academic staff acts as a positive role model to students in the present study through providing proper support and encouragements as well as they are responsive to students' requests for clarification and assistance. This can enhance students' satisfaction with psychiatric theory and clinical placements. In addition, the PMHN academic and nursing staffs in the psychiatric hospitals gave the students the opportunity to spend time with patients, gain insight about mental illness and caring for patients in psychiatric facilities. The opportunity of nursing students to engage and care for patients with mental illness can decrease the negative image and anxiety. This can explain why the students are motivated to work in PMHN field after completion of the course.

The results of the present study agreed with Ramadan & Essa, (2011) who suggested that the role models in psychiatric nursing education must have the required knowledge, skills, integrity, personal bearing, neatness, empathy and willingness to assist and motivate students. Role models are accountable for what happens in their clinical settings and should be trusted by student nurses because they are professional nurse practitioners. Furthermore, the image projected by role models should be positive and acceptable to student nurses at all times. This study represents the changing attitudes among studied sample after the PMHN education course; they acknowledge and appreciate the value and positive contributions of PMHN to patients with mental illness. This result was supported by Chadwick& Porter in 2014 that studied the effect of mental health clinical on nursing student's attitudes and confirmed that there is an increase in mean score among studied nursing students regarding the value of clinical placement and mental health services after exposure to the PMHN clinical part.

The findings in this study suggested that there are a number of significant changes in attitudes towards mental illness and PMHN as a career choice, following the completion of the PMHN course. Comparing scores on the attitude toward PMHN questionnaire before and after theoretical and clinical parts demonstrates significant changes among studied students. The findings support the literatures that suggest PMHN theoretical part and clinical experience

among student nurses leads to positive changes in attitudes towards mental illness and PMHN career choice. These findings also correlate with recent research findings that nursing students tend to initially have negative attitudes towards mental illness and these attitudes become more favorable after the completion of PMHN course (Handerson et al. 2007; Happellel al 2008; Chadwick& Porter in 2014).

Conclusion:

According to the findings of the present study it could be concluded that, there is significant changes in attitudes toward mental illness and PMHN role and career among the studied sample. Most of nursing students have positive attitudes and attraction to the PMHN after completion of the course theory and practice. Furthermore, the positive clinical experience and the support of PMHN academic staff were found to be important factors that increase the students willing to choose PMHN as a future career.

Recommendations:

- 1. The faculty should provide career guidance sessions for the students through graduations ceremonies or orientations to assist them to make decisions regarding their future careers.
- 2. Psychiatric/Mental Health Associations should organize awareness creation workshops, develop flyers and brochures, and use the media and the trained psychiatric/mental health personnel to introduce psychiatric/mental health as part of health and as a dynamic occupation.
- 3. Further research is needed for larger sample to compare between nursing students' attitudes before and after the PMHN course in different faculties.

References:

- 1. Chadwick, L. Porter, J (2014) An Evaluation of the Effect of a Mental Health Clinical Placement on the Mental Health Attitudes of Student Nurses, Nursing and Health 2(3): 57-64, 2014.
- 2. Curtis, J. (2007) Working together: A Joint Initiative between Academics and Clinicians to Prepare Undergraduate Nursing Students to Work in Mental health Settings. International Journal of Mental Health Nursing, 16, 285-293.
- 3. Dawood, E. (2012) Impact of Clinical Placement on Nursing Students' Attitudes towards Psychiatry, Journal of American Science, 8(2).
- 4. Happell, B. (1999) Who wants to be a psychiatric nurse? Novice student nurses' interest in psychiatric nursing. Journal of

- Psychiatric & Mental Health Nursing, 6, 479–484.
- Happell, B., Rbins, R., Gough, K. (2008) Developing more Positive Attitudes towards Mental Health Nursing in Undergraduate Students: Part 2-the Impact of Theory and Clinical Experience. Journal of Psychiatric and Mental Health Nursing, 15 527-536.
- 6. Happell, B. (2009) Appreciating History: The Australian Experience of Direct-entry Mental Health Nursing Education in Universities. International Journal of Mental Health Nursing 18, Pp35–41.
- 7. Happell, B. Gought, K. (2011) Nursing Student Attitude to Mental Health Nursing, Psychometric Properties of Self Report Scale, Archives of Psychiatric Nursing, 23(5).
- 8. Happell, B & Gaskin, J.C. (2012) The Attitudes of Undergraduate Nursing Students Towards mental Health Nursing: A Systematic Review, Journal of Clinical Nursing, 22, Pp148–158.
- Henderson, S., Happell, B. & Martin, T. (2007) Impact of Theory and Clinical Placement on Undergraduate Students' Mental Health Nursing Knowledge, Skills, and Attitudes, International Journal of Mental Health Nursing, 16, Pp116– 125.
- Hercelinskyj, G. (2010) Perceptions of Professional Identity in Mental Health Nursing and the Implications for recruitment and Retention, PhD Thesis in Nursing Studies, Deakin University. Australia 3(2) 32-43.
- 11. Hoekstra, H., Van Meijel, B., Van der Hooft-Leemans, T. (2011) A Nursing Career in Mental Health Care: Choices and Motives of Nursing Students, Nurse Education Today, 4(8).
- 12. Melrose, S. (2002) A Clinical Teaching Guide for Psychiatric Mental Health Nursing: A Qualitative Outcome Analysis Project, Journal of Psychiatric and Mental Health Nursing, 9 (4), 381–389.
- Mental Health Workforce Advisory Committee (2008) Mental Health Workforce: Workforce: Supply of Mental Health Nurses. Australia's Health Workforce, Online, Melbourne, Vic, 7(4).
- 14. National Board of Employment Education and Training, (1996): The Development of Knowledge and Attitudes about Career Options and Australia's Economic Future: Report of Focus Groups (Commissioned report no.46). Australian Government Publishing Service, Canberra. 30-38.
- 15. Oywer, E. (2011) Career in Mental Health Nursing: The Kenyan Experience, Master of Arts in health studies, University of South Africa, Kenya, No. 43088740.

- 16. Ramadan, F. & Essa, R. (2011) Perceived Autonomy Support among Maternity and Psychiatric Nursing Students, Journal of American Science, 7(6).
- 17. Rungapadiachy DM, Madill A & Gough, B. (2004) Mental Health Student Nurses' Perception of the Role of the Mental Health Nurse, Journal of Psychiatric and Mental Health Nursing, 11, Pp714–724.
- 18. Santos, S.S, Soares, H.M., & Hirata, P.G.A, (2013): Attitudes, knowledge, and opinions Regarding Mental Health among Undergraduate Nursing Students, f Rev Esc Enferm USP, 47(5): Pp1195-1202.
- 19. Warelow P., Edward, KL. (2009) Australian Nursing Curricula and Mental Health Recruitment. International Journal of Nursing Practice, 15: Pp250-256.
- 20. World health organization (2010) investing in mental health, WHO, Geniva, 23-34.
- 21. Wynaden, D. (2010) There is no Health without Mental Health: Are We Educating Australian Nurses to Care for the Health Consumer of the 21st Century? International Journal of Mental Health Nursing, 19: Pp.203-209.

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- 4. ½ **Hour Western Blot Kit**; this kit could offer the special Buffer to help you to probe you Western Blot result within 30 min. with any antibodies;

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