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Awareness Matters: Improving Healthcare Workers' Self-Efficacy, Knowledge, Skills and Attitudes Related to Mental Illness and Suicide Prevention

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Abstract

Problem Description: Healthcare workers' (HCWs) lack of knowledge impacts the care received by patients with mental illness and suicidal ideations.

Rationale: Increasing knowledge has been linked to patients seeking care and achieving optimal health outcomes.

Intervention: Participants attended training and received interactive emails over a six-week period.

Results: 73 HCWs attended training and responded to eight of the twelve emails. A paired t-test demonstrated a statistically significant change in both survey instruments when participants attended training and answered 5 or more emails ($p=0.01$ & $p=0.02$).

Conclusion: Raising awareness through training and emails impacted HCWs' knowledge which led to better identification of patients in need.



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Rationale

- Idaho had the 5th highest suicide rate in the US in 2017; for every completed suicide, there are approximately 25 attempted suicides
- Healthcare workers' (HCW) lack knowledge about suicide prevention
- HCWs' negative stigmas and attitudes prevent patients from seeking and obtaining care for their mental illness

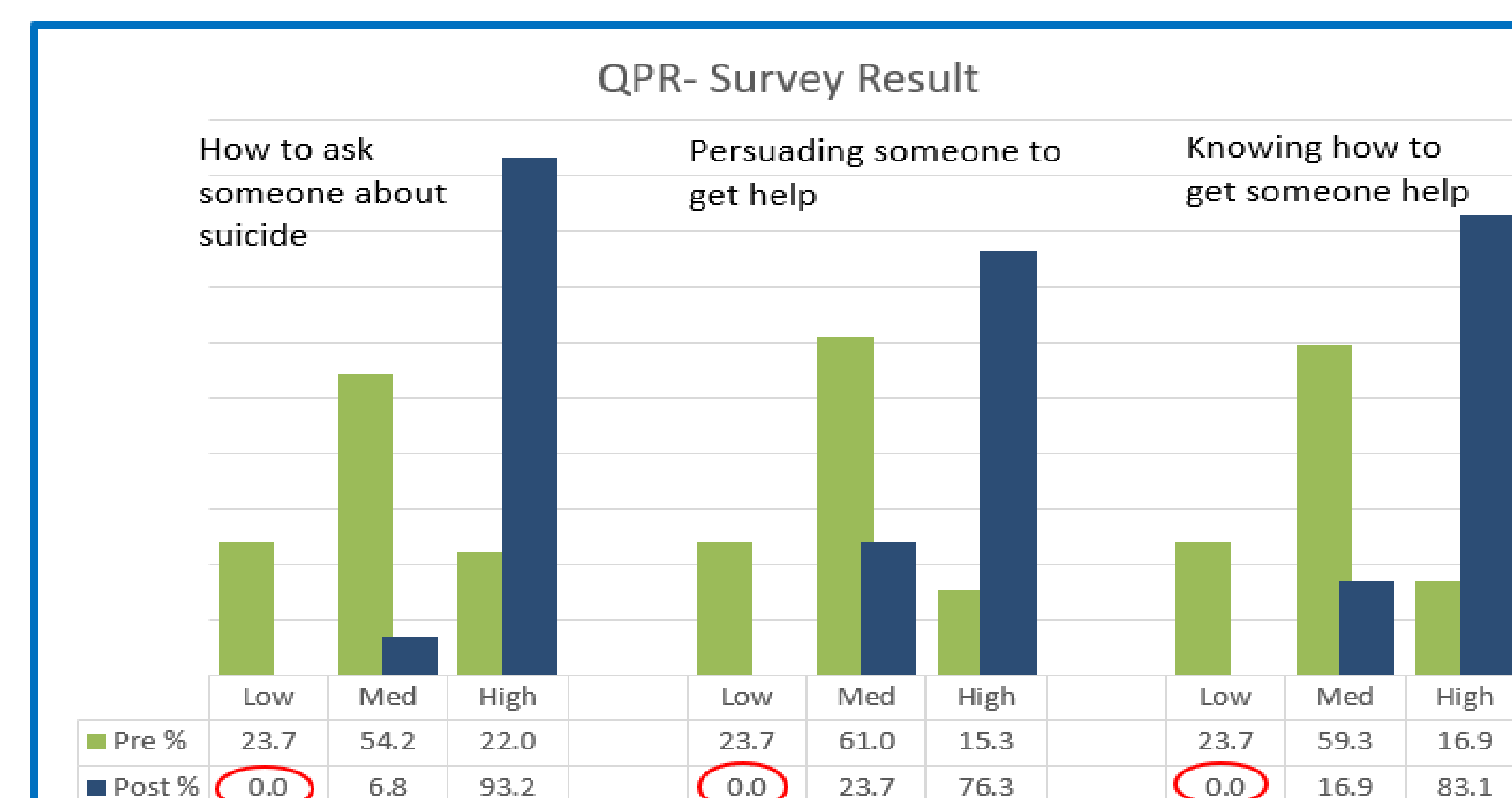
Purpose/Aims

- Improve HCWs' knowledge, attitudes, and self-efficacy related to mental illness and suicide prevention
- Increase HCWs' community awareness & involvement in activities related to mental health

Methods

- Question, Persuade, & Refer (QPR) gatekeeper training
- Spaced Learning Model
 - Bi-weekly emails for 6 weeks
- Survey Instruments
 - Mental Illness Clinical Attitude (MICA-4) survey
 - Mental Health Knowledge Schedule (MAKS)

Results



73 (100%) participants self-reported improved knowledge and skills related to using QPR for someone who was suicidal

MICA-4 Survey: Mean %, and Absolute Change

Groups	N	Mean % Change	Group Comparisons (% change)	Mean Absolute Change	Group Comparisons (P-Value)
1=No QPR & emails <5	8	-13.6%	1 VS 2 =20%	-0.33	1 VS 2 p=0.28
2=No QPR & emails >=5	18	-4.1%	1 VS 4 =44%	-0.13	1 VS 4 p=0.51
3=QPR & emails <5	2	-14.7%		-0.39	
4=QPR & emails >=5	34	-18.1%	2 VS 4 =0%	-0.43	2 VS 4 p=0.01

Group 2 (QPR) vs. 4 (No QPR) showed an improvement in self-reported attitudes and knowledge

MAKS Survey: Mean %, and Absolute Change

Groups	N	Mean % Change	Group Comparisons (% change)	Mean Absolute Change	Group Comparisons (P-Value)
1=No QPR & emails <5	8	-5.8%	1 VS 2 =28%	-0.27	1 VS 2 p=0.25
2=No QPR & emails >=5	18	-1.3%	1 VS 4 =7%	0.06	1 VS 4 p=0.02
3=QPR & emails <5	2	6.3%		0.25	
4=QPR & emails >=5	34	6.4%	2 VS 4 =11%	0.21	2 VS 4 p=0.07

Group 1 (QPR) vs. 4 (No QPR) and the number of emails answered showed an improvement in self-reported stigmas

Clinical Relevance

- HCWs have an important role in suicide prevention
- Raising HCWs' awareness of mental illness and suicide prevention through QPR and bi-weekly emails improved knowledge, attitudes, and decreased stigmas which may lead to improving patient care.