

Human Rights Awareness among Psychiatric Nurses Caring for Individuals with Mental Illness in a Selected Psychiatric Hospital in Saudi Arabia

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Abstract

Protection of human rights of individuals with mental illness is basic to ethical and legal psychiatric care. Nurses play an important role in safeguarding these rights in mental healthcare settings; and this depends largely on the nurses' knowledge, attitudes, and clinical practices. Therefore, this study aimed to assess the knowledge, attitude, and practice of psychiatric nurses regarding the human rights of individuals with mental illness and to examine the relationships among these variables. A quantitative descriptive correlational design was adopted. Data collected from a total of 109 psychiatric nurses working in the inpatient department of a selected psychiatric hospital in Saudi Arabia; through a self-administered questionnaire via Google Forms link. The majority of participants (64%) had good knowledge, while 33% showed moderate knowledge. The mean attitude score was 50.94 ± 6.20 , indicating a moderately favorable attitude; however, 70% of nurses demonstrated a neutral attitude. The mean practice score was 24.72 ± 8.28 , reflecting a moderate level of rights-based practice, with 33% exhibiting poor practice. A very strong positive correlation found between knowledge and attitude ($r = 0.928$, $p < 0.001$) and between knowledge and practice ($r = 0.946$, $p < 0.001$) and a moderate positive correlation between attitude and practice ($r = 0.506$, $p < 0.001$). This indicates though psychiatric nurses had good knowledge and favorable attitudes toward human rights, practice remains suboptimal. Hence strengthening formal training is essential to bridge the gap between knowledge and practice to promote ethical psychiatric care.

Keywords: Human rights; Psychiatric nurses; Mental illness; Knowledge–attitude–practice; Saudi Arabia; Mental health law.

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INTRODUCTION

Mental health is an essential component of overall health and well-being. Mentally ill individuals often experience not only psychological distress but also social exclusion, discrimination, and violations of their fundamental human rights. Globally, concerns have been raised regarding coercive practices, involuntary admissions, lack of informed consent, and inadequate participation of the patients in decision-making related to their care. Ensuring the protection of human rights in mental healthcare settings has therefore become a critical priority worldwide.

International frameworks such as the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and the World Health Organization's Quality Rights initiative emphasize dignity, autonomy, equality, and non-discrimination in mental healthcare and advocate person centered, recovery oriented, rights-based approaches to care. However, research continues to report stigma,

paternalism, and inconsistent adherence to human rights standards within mental health service settings.

In Saudi Arabia, mental health services have evolved over the past decade, following the Saudi Mental Health Law. The legislation aims to safeguard the rights of individuals with mental illness, regulate admission and treatment procedures to promote ethical psychiatric practice. However, effective implementation of such legislation largely depends on healthcare professionals' knowledge, attitudes, and clinical practice. Nurses, in particular, play a vital role in protecting patients' rights, being directly involved in day-to-day care, therapeutic communication, documentation, and advocacy.

The Knowledge–Attitude–Practice (KAP) model suggests that adequate knowledge influences attitudes, which subsequently influence the practices. While previous studies in various countries have explored healthcare professionals' awareness and perceptions regarding mental health rights; limited

studies available focusing on psychiatric nurses working in Saudi Arabia.

Therefore, the present study aimed to assess the knowledge, attitude, and practice of psychiatric nurses working in selected psychiatric hospital in Saudi Arabia regarding the human rights of individuals with mental illness and to examine the relationships among these variables. The findings are expected to contribute to the development of structured training programs, institutional policies, and rights-based mental health strategies in Saudi Arabia.

MATERIAL AND METHODS

A quantitative descriptive correlational study design was adopted to assess the knowledge, attitude, and practice (KAP) of psychiatric nurses working in in-patient department in a selected psychiatric hospital in Saudi Arabia regarding the human rights of individuals with mental illness. The correlational approach was used to determine the relationship among knowledge, attitude, and practice variables.

The study population comprised nurses working in the inpatient psychiatric department of the selected psychiatric hospital in Saudi Arabia. A total of 109 nursing personnel participated in the study. The participants were selected by non-probability convenience sampling technique.

Data were collected in the month of June 2025, using a self-administered standardized questionnaire based on existing literature and human rights frameworks in mental healthcare. The questionnaire consisted of four sections:

1. Section I: Demographic Variables (Included age, gender, marital status, educational qualification, years of experience, and previous training related to Saudi Mental Health Law.)
2. Section II: Knowledge Scale (Assessed knowledge regarding human rights of individuals with mental illness.)
3. Section III: Attitude Scale (Measured nurses' attitudes toward human rights using a structured Likert scale.)
4. Section IV: Practice Scale (Evaluated rights-based clinical practices in psychiatric care settings.)

The tool was structured in a closed-ended format to ensure uniformity of response. Data were collected using a Google Form format to facilitate accessibility and to ensure confidentiality. The survey link was shared with nursing personnel working in the selected psychiatric hospital in Saudi Arabia. Participants received the link completed the questionnaire voluntarily. The Google Form design allowed only one response per participant to prevent duplication.

Participation was voluntary. Informed consent was obtained electronically at the beginning of the Google Form. Confidentiality and anonymity were ensured, as no potentially identifying information was collected. Participants were informed that they could withdraw at any time without any consequences.

The collected data were exported from Google Forms to Microsoft Excel and analyzed using statistical software (SPSS). Descriptive statistics such as frequency, percentage, mean, and standard deviation were used to summarize demographic characteristics and KAP scores. Inferential statistics, (Pearson's correlation coefficient) were used to determine the relationship between knowledge, attitude, and practice. Statistical significance was considered at $p < 0.05$.

RESULTS AND DISCUSSION

The present study explored the knowledge, attitude, and practice (KAP) of psychiatric nurses regarding the human rights of individuals with mental illness. The findings provide important insights into the competency of psychiatric nurses to deliver rights-based mental healthcare within inpatient settings in a selected psychiatric hospital in Saudi Arabia.

A total of 109 responses were received for the study, among them majority of the participants were nurses aged between 25 to 35 years, bachelor's degree holders, with less than five years of experience and no formal training related to the Saudi Mental Health Law. The homogeneity of the sample reflects a young, early-career workforce. While academic preparation appears adequate, the absence of structured legal or human rights training may influence practice outcomes. This finding aligns with global concerns that formal education alone is insufficient to ensure rights-based clinical implementation without targeted legislative and ethical training (Mahdanian *et al.*, 2023 & Souza *et al.*, 2020).

Table 1: Distribution of nurses according to their level of knowledge (N = 109)

Level of knowledge	Score Range	Frequency (n)	Percentage (%)
Poor	0 – 10	0	0
Moderate	11 – 20	36	33
Good	21 - 30	73	67
Total	0 - 30	109	100

Majority of nurses, 67%, had a good level of knowledge with scores ranging between 21 and 30. Meanwhile, 33% had a moderate level of knowledge, scoring between 11 and 20 and none of the participants with poor level of knowledge between 0–10. This

suggest that foundational awareness of human rights concepts is relatively strong among the psychiatric nurses. Similar findings were reported by (Hassen *et al.*, 2022 & Ali *et al.*, 2021).

Table 2: Distribution of psychiatric nurses according to attitude toward human rights of individuals with mental illness (n = 109)

Attitude level	Score range	Frequency (n)	Percentage (%)
Unfavorable	< (Mean – SD) < 44.74	17	15
Neutral	between (Mean – SD) and (Mean + SD) 44.74 – 57.14	75	70
Favorable	> (Mean + SD) > 57.14	17	15
Total		109	100

The possible score for the attitude scale ranged from 15 to 75. The findings revealed that the participants obtained a mean attitude score of 50.94 with a standard deviation of 6.20. The majority of participants 70% showed a neutral attitude, while 15% exhibited a favorable attitude, and an equal proportion, showed an unfavourable attitude toward human rights awareness.

Although the mean attitude score (50.94 ± 6.20) indicated a moderately favorable attitude, 70% of nurses fell into the neutral category, and 15% demonstrated unfavourable attitudes. Studies from the UAE (Abdulla *et al.*, 2022) similarly found that healthcare professionals endorsed equality in principle but demonstrated discriminatory tendencies and social distance outside professional contexts (Rekhis *et al.*, 2021) also reported

discrepancies in perceptions of autonomy, consent, and legal capacity.

Stigma remains a significant barrier to rights-based care. Gaiha *et al.*, 2020 reported persistent negative attitudes and misconceptions about mental illness in India. The persistence of neutral attitudes in this study highlights the need for attitudinal transformation beyond knowledge acquisition.

Encouragingly, evidence from the WHO Quality Rights e-training (Poynton-Smith *et al.*, 2023) demonstrated significant improvements in healthcare professionals' attitudes following structured rights-based education, suggesting that targeted interventions could effectively shift neutrality toward advocacy.

Table 3: Distribution of psychiatric nurses according to practice toward human rights of individuals with mental illness (n = 109)

Practice level	Score range	Frequency (n)	Percentage (%)
Poor	< (Mean – SD) < 16.44	36	33
Moderate	between (Mean – SD) and (Mean + SD) 16.44 – 33	73	67
Good	> (Mean + SD) > 33	0	0
Total		109	100

The practice scores regarding human rights of individuals with mental illness ranging from 10 to 50, with a mean score of 24.72 (SD = 8.28) indicates a moderate level of practice related to the protection and promotion of human rights in psychiatric care settings.

However, the relatively wide standard deviation suggests variability in adherence to human rights practices among participants. Further the findings revealed that 67% of psychiatric nurses demonstrated moderate practice toward human rights of individuals with mental illness, while 33% exhibited poor practice. This gap between knowledge and implementation is consistent with findings by Ali *et al.*, 2021, who reported satisfactory knowledge but poor compliance regarding

psychiatric patients' rights. Similarly, Souza *et al.*, 2020 found that professionals were aware of rights but acknowledged that systemic limitations and policy gaps prevented full respect of those rights.

The findings further revealed that knowledge alone does not guarantee practice. Agarwal *et al.*, 2022 emphasized that transitioning from theoretical understanding to constructive, community-based, rights-based practice requires institutional reinforcement and continuous education. Globally, despite improvements in mental health frameworks, human rights violations persist due to systemic gaps and stigma (Mahdanian *et al.*, 2023). Resource constraints, institutional culture, and paternalistic practices have been identified as barriers to

rights implementation (Arévalo *et al.*,2023).
Infrastructure shortages and lack of skilled manpower

further limit effective enforcement of mental health
legislation (Sharma, 2021).

Table 4: Correlation between Knowledge, Attitude and Practice of psychiatric nurses regarding human rights of individuals with mental illness (n = 109)

Variables	r-value	p-value	Interpretation
Knowledge & Attitude	.928	< .001	Very strong
Knowledge & Practice	.946	< .001	Very strong
Attitude & Practice	.506	< .001	Moderate

A very strong positive correlation found between knowledge and attitude ($r = 0.928$, $p < 0.001$); knowledge and practice ($r = 0.946$, $p < 0.001$) and a moderate positive correlation found between attitude and practice ($r = 0.506$, $p < 0.001$). These findings support the Knowledge–Attitude–Practice (KAP) theoretical model, suggesting that increased knowledge significantly enhances attitudes and practice. Similar finding was reported by Ali *et al.*,2021. However, Szajna *et al.*,2021 found that knowledge and attitudes did not always predict practice indicating that contextual and institutional factors may moderate this relationship.

The moderate correlation between attitude and practice suggests that although positive attitudes contribute to better practice, they may not independently drive behavioral change without systemic support. Husum *et al.*,2023 reported that staff attitudes significantly influence importance of addressing attitudinal components to reduce rights violations.

The absence of formal training on the Saudi Mental Health Law among all participants is a critical finding. Legislative awareness is central to rights-based mental healthcare. Sharma, 2021 emphasized that effective implementation of mental health legislation requires trained manpower, funding, and governmental support.

Global reviews (Mahdanian *et al.*,2023) highlight that human rights frameworks demand proactive engagement from policymakers and institutions. Additionally, stigma-reduction strategies must operate at multiple levels, including organizational and structural levels (Kaur *et al.*,2021), rather than focusing solely on individual-level education.

Further studies can be performed to evaluate the impact of structured legal and human rights training on both attitudes and practice.

CONCLUSION

The present study revealed that psychiatric nurses possess good knowledge and moderately favorable attitudes toward the human rights of individuals with mental illness. However, practical implementation remains suboptimal. Along with theoretical preparedness regarding human rights, optimal clinical practice requires structured training, legislative

awareness, institutional commitment, and systemic reform. Bridging the knowledge–practice gap is essential to ensure dignified, person-centered, and legally compliant mental healthcare delivery.

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