

Research Article
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Student Perceptions in Psychiatric Nursing: A Before and After Qualitative Study

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ABSTRACT

Introduction: Negative perceptions and stereotypes of patients suffering from mental health disorders can have a significant impact on the quality of care that they receive. By eliminating these ill-conceived rhetorics, undergraduate nursing students can focus on providing safe, empathetic, and competent care.

AIM/Question: The goal of this qualitative study was to determine what perceptions sophomore undergraduate nursing students had towards psychiatric nursing before their psychiatric nursing course rotation, compared to after their course completion, using a 3-question open-ended pre- and post-survey.

Method: An open-ended 3-question pre- and post-survey was used for this study. Forty-five students participated. A thematic analysis was conducted after all pre- and post-submissions were collected.

Results: The pre-course survey revealed some negative perceptions towards psychiatric patients. The post-survey indicated that negative perceptions following didactic and clinical learning had been mostly eradicated, but they are still present within the clinical atmosphere.

Discussion: The findings of this research indicate that bias does exist and continues to exist within the healthcare field. Eradicating these perceptions will help healthcare professionals empathize with patients and, therefore, provide more effective care.

Limitations: This study involved a small sample group and therefore does not represent the entire nursing student body.

Implications: This study's findings focused on the perceptions of nursing students before and after didactic and clinical psychiatric course completion, as identified through comparisons between pre- and post-course surveys.

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Received: March 18, 2026; **Accepted:** March 24, 2026; **Published:** April 01, 2026

Introduction to the Project

Problem Formulation

Perception, as described by Cherry, refers to the way we, as individuals, experience the world [1]. Within this process, we become aware of objects, people, and feelings, as well as our relationships with them. So often, patients who have mental illnesses are perceived as dangerous, unpredictable, or even self-sabotaging [2]. These negative attitudes are based on ignorance and misinformation and lead to false representation and discrimination for those afflicted with mental health disorders. According to the National Institute of Mental Health, in 2022, there were an estimated 59.3 million adults aged 18 or older in the United States that are living with mental health issues [3]. These numbers are increasing every day. Studies have also shown that because of these negative attitudes and preconceived notions, some undergraduate nursing students have an unfavorable attitude when it comes to working with mental health patients [2]. This is problematic because patients with mental health issues are hospitalized not just for psychiatric needs but also for medical issues, and at every stage in life.

At a public university in Western Massachusetts, students in their sophomore nursing spring semester completed a didactic and clinical rotation focused on patients within the psychiatric population. The goal of this qualitative study was to determine the perceptions that sophomore undergraduate nursing students had towards psychiatric nursing before their nursing course rotation, compared to after completing the course, using a 3-question open-ended pre- and post-survey. Within this experience, 45 students were presented with didactic instruction and participated in an observational clinical experience at one of several psychiatric facilities. They were exposed to classroom instruction, simulation activities, case studies, group therapy sessions, one-on-one conversations with patients and nurses, observed medication administration, and interacted with staff and patients. As future registered nurses, it is essential to prioritize safe and compassionate care for all patients. By identifying potential barriers such as bias or stereotypes and eliminating these, nursing students gain propitious insight into the realities of patients living with mental health disorders. They can identify their own bias and eliminate them before venturing into practice.

Purpose or Research Question

Psychiatric or Mental Health Nursing is defined as a state of wellbeing in which an individual realizes their abilities, can cope with the everyday stressors of life, can work productively, and can make meaningful contributions within society [4]. With over 1 billion people globally, roughly 16% of the population suffering from a mental health issue, attitudes and conduct towards these individuals hold profound importance in respect to how their care is managed [5]. The purpose of this qualitative study was to determine the perceptions that sophomore undergraduate nursing students at a public university in Western Massachusetts had towards psychiatric nursing before their nursing course rotation, compared to after completing the course, using a 3-question open-ended pre- and post-survey.

Methods

Qualitative Approach and Research Paradigm

The elimination of negative perceptions, biases, and stereotypes within nursing pedagogy is crucial and helps facilitate more empathetic, compassionate, and competent care. The purpose of this qualitative 3-question open-ended pre- and post-survey was to determine what perceptions sophomore undergraduate nursing students had towards psychiatric nursing before their nursing course rotation, compared to after didactic and clinical instruction. The pre- and post-surveys were submitted and approved with exempt status through the university's Institutional Review Board. The sensitivity of the pre- and post-surveys was that they were anonymous, non-mandatory, and did not affect the students' grades in any way, so the students felt no obligation to participate and did so voluntarily. This information was all outlined in a consent form that was submitted along with the pre- and post-survey questions for review by the university's IRB board.

Researcher Characteristics and Reflexivity

This primary researcher holds five nursing degrees, with the most recent being a doctorate in nursing, which was earned in 2021. They have been at this university for the past three years as a full-time assistant professor, teaching psychiatric nursing to sophomore cohorts during the spring semester. This primary researcher is a nurse with 19 years of experience, specializing in the care of patients with psychiatric disorders. This primary researcher also has family members with mental health disorders. The significance of this topic was to ensure that all patients receive compassionate, safe, and competent care, and that any student nursing perception viewed as untoward was ideally eliminated.

Context/Rationale

People who suffer from mental health disorders are often regarded as dangerous, violent, and crazy. This is partly due to how society has depicted and cared for them throughout history. According to research conducted by literature has portrayed people suffering from mental health issues as people to be feared and avoided [6]. This type of fallacious deduction does not go unobserved within the world of nursing students. In order to competently care for those who suffer from a mental health disorder, future nurses need to recognize mental health and mental health disorders for what they are. By participating in the pre- and post-surveys and conducting a thematic analysis, a determination can be made of how effective didactic and clinical instruction was at ascertaining appropriate perceptions of what mental illness is.

Sampling Strategy

A sample of 45 sophomore nursing students was included in this study. These students represented the entire cohort of students participating in the spring psychiatric nursing course. All

students were informed before this research study began that their participation was entirely voluntary and that they could choose not to participate at any time. The demographic data gathered was de-identified and focused on the clinical site attended by the student and their gender.

Ethical Concerns About Human Subjects

This research study consent form, along with the 3-question pre- and post-surveys, was submitted with the application to the university's Institutional Review Board. After consideration, the university IRB board determined that this research study was approved under the exempt status (Appendix A). No harm came to the students who participated in this research study.

Data Collection Methods

Once the course was initiated, the consent form, along with the pre-survey, was distributed to students, with instructions to exclude identifiable demographic information from their responses. They were also instructed to be as honest as possible and that their responses would in no way affect their grade. Once the consent forms were signed, the pre-survey questions were distributed. The three pre-course open-ended survey questions were as follows:

- **Question 1**

When you hear the words "psychiatric nursing," what comes to mind?

- **Question 2**

What are your feelings about working with patients with psychiatric disorders?

- **Question 3**

According to the Britannica Dictionary, stigma is defined as "a set of negative and often unfair beliefs that a society or group of people have about something." What stigma (if any) have you heard associated with patients suffering from a psychiatric disorder?

After completing the pre-survey, the responses were placed in a marked manila envelope and secured in the primary researcher's office. The students then completed their coursework, which consisted of a once-a-week 6-hour clinical rotation in a psychiatric facility, and one group had a 12-hour clinical every other Saturday. Some of these facilities were stand-alone psychiatric facilities, a correctional facility, and hospital inpatient units. They also underwent classroom instruction for 1 hour, twice a week, for 15 weeks, with this primary researcher as the course instructor. Within the didactic portion of their instruction, clinical experiences, case studies, general lectures, games, simulation activities, and testing also occurred. At the culmination of this course, the post-survey was conducted. The post-survey questions mirrored the pre-survey and are as follows:

- **Question 1**

Now that you have completed your psychiatric nursing training, when you hear the words "psychiatric nursing" what comes to mind?

- **Question 2**

Now that you have completed your psychiatric nursing training, how have your feelings about working with patients with psychiatric disorders changed?

- **Question 3**

According to the Britannica Dictionary, stigma is defined as "a set of negative and often unfair beliefs that a society or group of people have about something." What stigma (if any) have you heard in the clinical setting associated with patients suffering from a psychiatric disorder?

Once all responses were recorded, the results were compared pre- and post, and a thematic analysis was conducted to identify themes in student perceptions and how these perceptions were impacted, if at all, from pre- to post-survey responses.

Data Collection Instruments and Technologies

Two electronic databases (CINAHL and Google Scholar) were examined and searched for information related to nursing student perceptions, psychiatric nursing, and stigma, with restrictions to the English language. Titles and abstracts were examined for relevance, and articles were chosen based on their subject content and association with themes identified in the pre- and post-survey results. Students were given paper copies of the consent form and pre- and post-surveys. These results were placed in manila envelopes and assessed by this researcher once all the information was obtained. Students were instructed not to include their names on their responses to ensure complete anonymity. They were also encouraged to elaborate on their responses as much as possible, and that their responses would in no way affect their grades.

Units of Study

Forty-five students were informed about the subject matter for this research study. Forty-five students decided to participate in both the pre- and post-surveys. Once both surveys were completed, the themes were identified for both surveys.

Data Processing/Analysis

To facilitate confidentiality and maintain anonymity, all responses were kept in a secure location in sealed manila envelopes. Once the research was concluded, all responses were analyzed manually by the researcher. All responses were read, and no alterations of any kind were made to the responses of the participants. Each question was read, and answers were compared using a thematic analysis approach. According to Braun and Clarke Thematic analysis is used for identifying, analyzing, and reporting patterns (themes) within a dataset [7]. This analytical approach organizes and describes the data set in detail, interpreting various aspects of the research topic or question.

Techniques to Enhance Trustworthiness

Qualitative thematic analysis differs from quantitative analysis in that it employs an approach to help understand phenomena in a more nuanced and realistic manner [8]. Within qualitative research, the researcher must be actively involved in the process, being present both before and after the change occurs [8]. Research conducted by Sundler et al., employs a thematic analysis based on a descriptive phenomenological approach, emphasizing the need to explore lived experiences from both patients and professionals. Sundler et al., also described how understanding these lived experiences enables us to make sense of what we see and gives our experience meaning [9]. By identifying response themes before and after didactic and clinical exposure, these lived experiences will help nursing students to adjudicate perceptions towards psychiatric nursing and caring for patients with mental health issues.

Results/Findings

Synthesis and Interpretation

All 45 sophomore nursing students were asked to participate in this IRB-approved qualitative open-ended pre- and post-survey. A consent form (Appendix B) was distributed to all students outlining the process for this research study. It was also specified that at any time during the study, the student could opt out of participation. All responses were given in an open-ended question form and kept anonymous. The responses were then placed in a labeled

manila envelope and secured in this researcher's office. Once all responses to the post-survey were completed, the researcher identified themes associated with the students' responses. The following data analysis identified the themes that emerged from the qualitative responses to each open-ended question.

Pre-Survey Question 1 Themes

When you hear the words "psychiatric nursing," what comes to mind?

Three main themes were identified in response to this survey question. 43% of students responded stating that this question either described patients with mental health disorders or patients who were hospitalized in psych wards to "get better." 23% of the responses described it as caring for patients with a mental illness, "unstable," "crazy people," and "dark and gloomy." 14% of respondents replied with the statement "patients with mental health disorders."

Pre-Survey Question 2 Themes

What are your feelings about working with patients with psychiatric disorders?

Four main themes were identified in response to this survey question. 52% of students stated that they were "excited to learn." 25% stated that they were "nervous about unpredictability, safety, and worried about triggering the patients." 2-separate 1 percent categories identified that they either did not know what to expect or that they had previous experience dealing with mental health patients, so the experience did not faze them.

Pre-Survey Question 3 Themes

According to the Britannica Dictionary, stigma is defined as "a set of negative and often unfair beliefs that a society or group of people have about something." What stigma (if any) have you heard associated with patients suffering from a psychiatric disorder?

Three main themes were identified in response to this survey question. 36% of students identified that the stigma they heard the most was focused on "being afraid of patients with mental illness" or "they are dangerous." 27% used the word "crazy." 11% stated that the stigma they have heard was those patients suffering from mental illness "do not belong in society."

Post-Survey Question 1 Themes

Now that you have completed your psychiatric nursing training, when you hear the words "psychiatric nursing" what comes to mind?

Four main themes were identified in response to this survey question. 27% of students responded, "compassionate nursing focus for behavioral and mental issues." There were 2- 23% responses, the first being "management/understanding of mental illness," the second response being "empathy for those with mental illness." 18% of students also responded using phrases like "effective/therapeutic communication with patients with mental illness."

Post-Survey Question 2 Themes

Now that you have completed your psychiatric nursing training, how have your feelings about working with patients with psychiatric disorders changed?

Four main themes were identified in response to this survey question. 34% described their answers as having "more empathy for those suffering from mental illness." 27% stated that they "enjoyed their experience." There were 2-18% responses, the first being student emphasis on "being able to understand the disease

processes and being more aware of safety.” The other responses focused on “how easy it was to communicate with patients with mental illness.”

Post-Survey Question 3 Themes

According to the Britannica Dictionary, stigma is defined as “a set of negative and often unfair beliefs that a society or group of people have about something.” What stigma (if any) have you heard in the clinical setting associated with patients suffering from a psychiatric disorder?

Five main themes were identified in response to this survey question. 64% of students stated that they heard healthcare professionals use words like “crazy, scary and dangerous.” Two themes received an 11% response each: the first being that the patients were “attention-seeking or faking it,” and the other stating that they did not hear any stigmatizing remarks. Lastly, there were two theme responses at 7% the first being that these patients “do not deserve or want to change,” and the second being to “just ignore them.”

Discussion

Implications

Stigma, as discussed by Lai, is defined by persistent traits that evoke negative or punitive responses towards an individual or a group [10]. Lai also states that when discussing stigma, functional limitations are not the most significant problem, but rather the perception of negative differences and how they elicit a social response [10]. As evidenced by the results of this survey, stigma was and remains a significant problem when addressing perceptions towards mental health patients.

Pre-Survey Question 1

For the themes identified in pre-survey question 1, students had a broad and general understanding of what psychiatric nursing was. They knew there was an inpatient component to it, but their ideal of what psychiatric nursing entailed was limited to what they saw on television. Hunter describes student perceptions of psychiatric nursing as stemming from fear of the unknown, media effects, and fear of violence [11]. Hunter also goes on to explain that due to students’ lack of preparation for roles within a psychiatric discipline, this could be the reason behind fear and apprehension.

Pre-Survey Question 2

For the students within this cohort, most were excited to learn from this didactic and clinical experience. When addressing concerns about being nervous due to safety issues and unpredictability, a research study conducted by Zeng describes how attitudes of healthcare workers are influenced by the stigma associated with the profession [5]. Stigma towards psychiatric nursing can negatively affect the experience for nursing students before they even experience interaction with mental health patients. This may be due to negative preconceived attributions related to societal-level conditions and cultural norms and can function as a potential barrier when students enter this clinical setting [5].

Pre-Survey Question 3

For the themes identified within this survey question, most of the buzzwords were focused on mental health patients being “crazy” or “dangerous.” Many studies have shown that communities within society and the healthcare discipline endorse the idea that patients with mental health conditions are dangerous or harmful also went on to discuss that stigma towards mental health patients has even gone as far as affecting not only their social acceptability but also their employability [10-13, 5].

Post-Survey Question 1

Once students had completed their didactic and clinical nursing course, their perceptions towards what psychiatric nursing entailed became focused on words like compassion, empathy, effective communication, and understanding. In research conducted by Abd El-Gawad Ahmed Mousa, empathy is described as the ability to understand the emotional makeup of others and, through this understanding, to treat them effectively [14]. Abd El-Gawad Ahmed Mousa also explains that values within empathy include the patient feeling safe enough to share their feelings and the nurse being able to listen closely enough to understand [14]. This is a key component in establishing a climate of trust, facilitating positive and safe health outcomes, and demonstrating a competent, patient-centered, caring relationship.

Post-Survey Question 2

For this response, multiple students again discussed the topic of empathy. Understanding mental health disease processes was a significant factor for students when answering this question. A research study conducted by Bekhet discovered that nursing students’ negative perceptions towards patients suffering from mental health issues had a notable decrease once both their didactic and clinical rotations had been completed [6]. Bekhet also noted that positive relationships developed between the students and patients based on the time spent interacting within the clinical setting. This was further confirmed by student responses from this survey, which stated how “easy it was to communicate with patients [6].”

Post-Survey Question 3

The response to this survey question was quite alarming, highlighting the prevalence of stigma still within the healthcare industry. Healthcare workers are still using phrases like “crazy” and “scary” or “just ignore the patient.” The feelings and attitudes identified by nursing students help bring awareness to the fact that negative stereotypes in clinical experiences are not new to the care of patients with mental illness but have been passed down through preconceived negative attitudes and perceptions of experienced nurses. A study conducted by Hunter describes how negative clinical experiences can have detrimental effects on student perceptions of mental health nursing and deter any interest in wanting to pursue a career within this specialty [11]. Zeng goes on to describe how the actions and attitudes from healthcare professionals is highly influential and when negative stereotypes are prevalent, it presents a significant barrier and in some cases a delay in treatment for patients suffering from a mental illness [5]. Zeng also stated that harboring stigma can result in a lower-quality of care for these patients [5].

Recommendations

Psychiatric nursing brings with it obvious risks to patients and their well-being, with negative attitudes and stereotypes being introduced through the media and what history has inaccurately portrayed as truth towards these individuals. Martensson conducted a study on practicing mental health nurses and their general attitudes towards people with mental health disorders. Within this research, it was determined that when staff are appropriately educated about mental illness, their perceptions and attitudes become more favorable, and patient outcomes significantly improve [15]. Recommendations derived from this qualitative research strongly suggest that bias and stereotypes do exist, but can be mitigated through proper exposure to didactic learning and clinical outreach. The comparison of pre- and post-survey results from this research study, further corroborated this.

Transferability

This study can be easily translated to aid in future qualitative data analysis.

Contributions to the Field

This qualitative research study has shown that with adequate exposure to patients with mental health disorders, eliminating harmful bias and participating in didactic study that both explains mental health on a cognitive as well as empathetic level, can positively enhance perceptions of caring for patients suffering from mental health disorders, emphasizing focus on wellness and management rather than avoidance and shame. Students repeatedly used words like empathy, understanding and therapeutic communication which, as previously stated by Abd El-Gawad Ahmed Mousa [14], that values within empathy include for the patient to feel safe enough to share their feelings and for the nurse to be able to listen close enough to understand. These concepts were all delineated as key components when establishing a climate of trust, facilitating safe and positive health outcomes, and demonstrating a competent, patient-centered caring relationship.

Limitations

Conflicts of Interest

For this qualitative research project, limitations were identified, but were not limited to the following: a small group size and the fact that students were not equally represented by gender or previous experience with mental health patients. There were more female students than male students. Some students had previously worked or had families that lived with mental health conditions. This was also confined to one nursing cohort, and the time frame for this study was a short 15-week period.

Funding

No funding was used for the entirety of this research study. All students were informed that this was a voluntary activity and would in no way impact the outcome of their grade. No tools were utilized other than the pre- and post-surveys and the consent form. No monetary compensation was given to student participants for the completion of this research study.

Recommendations

A bigger sample size would be recommended for further study.

Appendix A

Institutional Review Board Determination Letter

Proposition for proposed research.

Fitzgerald, Sherri L.

Wed 11/20/2024 4:12 PM

Dear Researcher,

This email is to inform you that your study "Student Perceptions in Psychiatric Nursing: a before and after qualitative study" (IRB Number 24-25-032) has been reviewed by the WSU IRB Chair and has been approved as exempt. You are able to move ahead with your study.

If you have any questions or need further documentation of this approval, please do not hesitate to contact me. All communications with the IRB regarding this proposal must include the IRB number and should use the IRB email (IRB@westfield.ma.edu).

At the end of your study when the research has been completed or at the end of the year you are required to submit a brief report to the IRB that summarizes all procedures and interactions with human subjects during the year/study.

This review is good for one year. If the data gathering process goes beyond one year please seek additional review from the IRB.

Congratulations on a successful review, and good luck with your research.

Lynn Shelley, Ph.D.

Chair, IRB

Appendix B:

Sample Student Consent Form

Information Sheet and Consent for Participation in a Research Study



Primary Investigator:

Sherri Fitzgerald DNP, MSN-Ed, RN

Study Title: Student Perceptions in Psychiatric Nursing: a before and after qualitative study

Introduction

This researcher is interested in examining student perceptions regarding the care and attitudes towards patients in a Psychiatric setting. This qualitative pre- and post- survey will examine both didactic and clinical reflection from the students.

There is no financial relationship between the researcher and this project.

If you agree to take part in this study, this researcher will de-identify you utilizing an anonymous code created by the student and then analyze the responses after the semester ends.

This researcher does not anticipate any risks for participating in this study. Any emotional response elicited from the course and its assignments are not related to the study, but rather inherent in the course content itself.

Although no added benefit is expected to be gained by you from participating in the study, future students will benefit as this research helps advance the understanding of student perceptions and aids in eliminating any stigmatization.

There are no costs, and you will not be paid to be in the study. Participation in this study has no impact on your grade in the course. The data will be analyzed after the course is complete and grades submitted. If you choose to consent for participation in this study, both pre- and post- qualitative surveys are de-identified prior to data analysis starting.

At the conclusion of this study, this researcher may publish their findings. Information will be presented in summary format and you will not be identified in any publications or presentations.

You should know that the Westfield State University Institutional Review Board (IRB) may inspect study records as part of its auditing program, but these reviews will only focus on this researcher and not your responses or involvement. The IRB is a group of people who review research studies to protect the rights and welfare of research participants.

You do not have to be in this study if you do not want to. If you agree to be in the study, but later change your mind, you may drop out at any time by simply not completing the final survey. There are no penalties or consequences of any kind if you decide that

you do not want to participate.

You do not have to answer any questions that you do not want to answer.

Take as long as you like before you make a decision. This researcher will be happy to answer any question you have about this study. If you have further questions about this study, or if you have a research-related problem, you may contact the investigator Sherri Fitzgerald (419) 559-8004. If you have any questions concerning your rights as a research participant, you may contact the WSU Institution Review Board (IRB).

I agree to participate in this research study by signing below.

Signature of Student
Date

Print Full Name

Appendix C:
Sample Pre-Survey



Research: Student Perceptions in Psychiatric Nursing: a before and after qualitative study

3-Question Pre-Survey

Demographics

Clinical Site:

Gender:

Question 1

When you hear the words “psychiatric nursing” what comes to mind?

Question 2

What are your feelings about working with patients with psychiatric disorders?

Question 3 on back....

Question 3

According to the Britannica Dictionary, stigma is defined as “a set of negative and often unfair beliefs that a society or group of people have about something.” What stigma (if any) have you heard associated with patients suffering from a psychiatric disorder?

Appendix D:

Sample Post-Survey



Research: Student Perceptions in Psychiatric Nursing: a before and after qualitative study

3-Question Post-Survey

Question 1

Now that you have completed your psychiatric nursing training, when you hear the words “psychiatric nursing” what comes to mind?

Question 2

Now that you have completed your psychiatric nursing training, how have your feelings about working with patients with psychiatric disorders changed?

Question 3

According to the Britannica Dictionary, stigma is defined as “a set of negative and often unfair beliefs that a society or group of people have about something.” What stigma (if any) have you heard in the clinical setting associated with patients suffering from a psychiatric disorder?

References

1. Cherry K (2024) What is Perception? Recognizing Environmental Stimuli Through the Five Senses. verywellmind.com. <https://www.verywellmind.com/perception-and-the-perceptual-process-2795839>.
2. Granados-Gamez G, Del Mar Lopez Rodriguez M, Corral Granados A, Marquez Hernandez V (2017) Attitudes and Beliefs of Nursing Students Toward Mental Disorder: The Significance of Direct Experience with Patients. *Perspectives in Psychiatric Care* 53: 135-143.
3. National Institute of Mental Health (2024) Prevalence of Any Mental Illness. U.S. Department of Health and Human Services, National Institutes of Health, Retrieved from https://www.nimh.nih.gov/health/statistics/mental-illness#part_2539.
4. Boyd MA, Luebbert R (2023) *Essentials of psychiatric nursing* (3rd ed.), Philadelphia, Pennsylvania: Wolters Kluwer. <https://shop.lww.com/Essentials-of-Psychiatric-Nursing/p/9781975185121?srsId=AfmBOopIv8smyXL4nHTqSNhfJRuMquQbBBKNSAZDKus8bTwTjSAFqis>.
5. Zeng Y, Pan T, Sun M, (2024) The influencing factors of stigma towards people with mental illness among nursing students: a mixed-method systematic review. *Medical Education Online* 29: 2376802.
6. Bekhet A, Murrock C, Mu Q, Harpreet SG (2017) Nursing Students' Perception of the Stigma of Mental Illness. *College of Nursing Faculty Research and Publications* 3: 1013.
7. Braun V, Clark V (2006) Using thematic analysis in psychology. *Qualitative Research in Psychology* 3: 77-101.
8. Golafshani N (2003) Understanding Reliability and Validity in Qualitative Research. *The Qualitative Report* 8: 597-606.
9. Sundler A, Lindberg E, Nilsson C, Palmer L (2019) Qualitative thematic analysis based on descriptive phenomenology. *Nursing Open* 6: 733-739.
10. Lai YM, Hong CP, Chee CY (2001) Stigma of Mental Illness. *Singapore Med Journal* 42: 111-114.
11. Hunter L, Weber T, Shattell M, Harris BA (2015) Nursing Students' Attitudes about Psychiatric Mental Health Nursing. *Issues in Mental Health Nursing* 36: 29-34.
12. Henderson C, Gronholm P (2018) Mental Health Related stigma as a ‘Wicked Problem’: The Need to Address Stigma and Consider the Consequences. *International Journal of Environmental Research and Public Health* 15: 1158.
13. Hussain Ali Mistry S, Hussain Ali Mistry S, Munir Widhani M (2020) Stigma Against Mental Illness: Discrimination, Stereotyping and Prejudice. *i-manager's Journal on Nursing* 10: 26.

14. Abd El-Gawad Ahmed Mousa M (2015) Empathy toward Patients with Mental Illness among Baccalaureate Nursing Students: Impact of a Psychiatric Nursing and Mental Health Educational Experience. *Journal of education and Practice* 6: 2222-288X.
15. Martensson G, Jacobsson JW, Engstrom M (2014) Mental health nursing staff's attitudes towards mental illness: an analysis of related factors. *Journal of Psychiatric and mental Health Nursing* 21: 782-788.

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