Journal of Nursing
Revista de Enfermagem
UFPE On Line
ISSN: 1981-8963

ORIGINAL ARTICLE

THE IMPACT OF ACADEMIC TRAINING ON AUTHORITARIANISM DISPLAYED BY NURSING STUDENTS TOWARDS MENTAL ILLNESS

IMPACTO DA FORMAÇÃO ACADÊMICA NO AUTORITARISMO DE ESTUDANTES DE ENFERMAGEM FRENTE AOS TRANSTORNOS MENTAIS

IMPACTO DE LA FORMACIÓN ACADÉMICA EN EL AUTORITARISMO DE ESTUDIANTES DE ENFERMERÍA FRENTE A LOS TRASTORNOS MENTALES

Angelina Moda Machado Romano[1], Luiz Jorge Pedrão[2], Moacyr Lobo da Costa Junior[3], Adriana Inocenti Miasso[4]

ABSTRACT

Objective*:** to verify the impact of academic training, particularly in the field of psychiatric nursing, on authoritarianism displayed by nursing students towards mental illness and people affected by mental illness. ***Method: a quantitative study with 51 students who were tracked during the period of their training using the Opinions on Mental Illness Scale, isolating the authoritarianism factor. The data was analyzed using statistical calculations on the EpInfo 6 program. This study was approved by the Research Ethics Committee, Protocol n°0225/2001. ***Results*:** there was a significant reduction in the authoritarianism displayed by graduating students compared to when they first began the program. ***Conclusion:*** academic instruction, particularly in the field of psychiatric nursing, had a favorable influence towards reducing these students' authoritarianism. ***Descriptors:*** Psychiatric Nursing; Education; Attitude; Behavior.

RESUMO

Objetivo*:** mostrar o impacto da formação acadêmica, particularmente a proveniente da área de enfermagem psiquiátrica, no autoritarismo de alunos do curso de enfermagem frente aos transtornos mentais e pessoas com transtornos mentais. ***Método: estudo de abordagem quantitativa com 51 alunos que foram rastreados no período de sua formação com a Escala de Opiniões Sobre os Transtornos Mentais no fator autoritarismo. Para análise utilizou-se cálculos estatísticos no programa EpInfo 6. Este estudo teve a aprovação do projeto pelo Comitê de Ética em Pesquisa, Protocolo n°0225/2001. ***Resultados*:** houve diminuição significativa no autoritarismo dos alunos formandos em relação ao momento quando ingressaram no curso. ***Conclusão*:** a instrução acadêmica, particularmente a proveniente da área de enfermagem psiquiátrica, influenciou favoravelmente na diminuição do autoritarismo desses alunos. ***Descritores*:** Enfermagem Psiquiátrica; Educação; Atitude; Comportamento.

RESUMEN

Objetivo: mostrar el impacto de la formación académica, particularmente de aquella proveniente del área de enfermería psiquiátrica, en el autoritarismo de alumnos del curso de enfermería frente a los trastornos mentales y personas con trastornos mentales. ***Método***: estudio de abordaje cuantitativo con 51 alumnos que fueron estudiados durante el período de su formación con la Escala de Opiniones sobre los Trastornos Mentales en el factor autoritarismo. Para el análisis, se utilizaron cálculos estadísticos con el programa EpInfo 6. Estudio y proyecto aprobados por el Comité de Ética en Investigación, Protocolo nº0225/2001. ***Resultados***: existió significativa disminución del autoritarismo en los alumnos del curso en relación al momento en el cual ingresaron a la carrera. ***Conclusión***: la instrucción académica, particularmente aquella proveniente del área de enfermería psiquiátrica, influyó favorablemente en la disminución del autoritarismo en dichos alumnos. ***Descriptores***: Enfermería Psiquiátrica; Educación; Actitud; Conducta.

[1]Nurse, Doctor of Sciences (in course), Graduate Program in Psychiatric Nursing, Psychiatric Nursing and Human Sciences Department, University of São Paulo at Ribeirão Preto College of Nursing. Ribeirão Preto (SP), Brazil. E-mail: angelina_moda@yahoo.com.br; [2]Nurse, PhD, Professor, Graduate Program in Psychiatric Nursing, Department of Psychiatric Nursing and Human Sciences, University of São Paulo at Ribeirão Preto College of Nursing. Ribeirão Preto (SP), Brazil. E-mail: lujope@eerp.usp.br; [3]Bachelor of Statistics and Sanitarian Doctor, Research Collaborator, Center for Legal Medicine/CEMEL, Ribeirão Preto Medical School, University of São Paulo, Ribeirão Preto (SP), Brazil. E-mail: mlobojr@eerp.usp.br; [4]Nurse, PhD, Professor, Psychiatric Nursing and Human Sciences Department, University of São Paulo at Ribeirão Preto College of Nursing. E-mail: amiasso@eerp.usp.br

INTRODUCTION

Throughout time, society has showed fear of individuals who present behavior which deviates from that accepted as standard. Thus, fear can be understood as one form of reacting to these people's behavior, and is not the only one. Other forms, such as labeling, mockery, marginalization and mistreatment, among others, also appeared as striking reactions, preventing proper social interaction. These people, popularly known as "crazy," were only granted more opportunity for social interaction after a greater comprehension of the origins of the factors causing their behavior, or in other words, of the symptoms caused by mental illness.[1]

It can be said that the first step taken towards this greater understanding was the appearance of psychotropic drugs in the 1960s, which enabled a more effective control of such symptoms and, thereafter, Movements that sought to provide more satisfactory health care to people considered "crazy." In this sense, we mention the Anti-Asylum Movement, which gave rise to Law 10216 of the Psychiatric Reform and instituted May 18 as the official date symbolizing the fight for new forms of treating mental illness and, consequently, possibilities for changing the way of understanding behavior of those considered "different" or "crazy."[2] However, the most important factor was the new attitude that was expected towards mental illness. Instead of labeling, mocking, marginalizing and mistreating, one must look at this population with eyes of understanding, tolerance, solidarity and fraternity. In order for this new gaze to take place, an asylum is not necessary, but a society which simply accepts these individuals for who they are.[1]

The Psychiatric Reform Movement brought with it a transformation in several traditional psychiatric hospitals and the appearance of Psychosocial Attention Centers (CAPS) and Outpatient Mental Health Services, directed towards psychosocial rehabilitation.[3] However, in a way, psychiatric care has not yet presented satisfactory transformation, which leads us to believe that a change in how individuals with mental illness are understood, accepted and cared for must precede the creation or broadening of care services.

Historically, psychiatric nursing care took place in the hospital setting, as a direct result of the need for disciplining deviant behavior. It currently finds itself in a critical phase of defining (or redefining) itself, since the psychiatric hospital, i.e. the central institution of psychiatric care, has been gradually replaced by other care facilities. In psychiatry, and more recently in mental health, these issues have come to influence the training of students, who work objectively with a subjective clientele.[4]

The official milestone for nurse training in Brazil was the creation of the Professional Nursing School, an annex of the *Hospício Nacional dos Alienados* (National Hospice for the Insane) in Rio de Janeiro, inaugurated in 1905. Although institutional nurse training began alongside that of psychiatry and the psychiatric hospital, is was only in 1948, with the enactment of Law nº 755, specifically directed at nurse training, that psychiatric nursing became a mandatory part of the curriculum.[5]

For a long time, psychiatric nursing was practiced by untrained staff, guards, servants, attendants, and laundry staff, among others. The transformation of Brazilian psychiatric nursing took place at the end of the 1960s, when it began basing its actions on a therapeutic relationship, and the nurse's role was based on establishing a relationship with mentally ill patients, through understanding the meaning of their behavior.[1]

The psychiatric nursing course demands initiative and creativity of the undergraduate nursing student, and offers the opportunity for knowledge of oneself and others. The theoretical and practical content of the course, which was previously directed towards the clinical aspects of mental illness with an emphasis on hospitalization, began to emphasize communication and the therapeutic relationship.

With the transformations which have been taking place in Mental Health policies and the new attention directed towards life outside hospital walls, nursing schools have been rethinking the content of their courses and the location for developing practical activities with their students.

Higher education in health is undergoing a turbulent time due to the changes that have been taking place in how the concept of health is understood and also of issues regarding the need for the future professional to be prepared for the work market at the end of their training.[4]

There are still few nurses with specific training geared towards caring for mentally ill patients,[6] therefore, nurses who wish to work with psychiatric care services need to have the knowledge that will lead them to conduct themselves in a proper and therapeutic way.

In order to professionally define themselves, psychiatric nurses need to be

constantly seeking self-knowledge, so as to become a true working tool in an interpersonal context. Monitoring, punishment and control are the characteristics that have marked the history of psychiatric nursing. However, this authoritarian role must be substituted for another, i.e. a therapeutic one.

Authoritarian attitudes, which are in a way characteristic of nursing teams who control the general organization in most health services, are different from firm attitudes, based on knowledge. Therefore, authoritarianism needs to be worked upon, for even in nursing teams who have received continuous training and education, it has a strong tendency to persist. Thus, it is particularly important to study the attitudes of future nurses towards mental illness, for it enables us to reflect upon all the learning and changes that are needed so that professional practices can be more adequate.[1]

Nursing students present a strong tendency to carry with them stereotypes and prejudice against mental illness and people affected by mental illness, similar to those of the general population. It is important to state that the tolerance society has towards individuals with mental illness is unfavorably disproportionate to the real threat this person poses to society. We emphasize that in the context of the Psychiatric Reform and Psychosocial Rehabilitation, it is extremely important to work with society, for the acceptance of individuals with mental illness and understanding their way of being would, for the most part, render long traditional psychiatric commitments unnecessary.

Generally speaking, the population holds notions about mental illness, and persons thus afflicted, that are either rationalist (based on psychological or organic factors) or traditionalist (assuming an inherent weakness of the brain). The first is more often held by individuals with "white-collar" occupations, while "blue-collar" workers are more likely to adhere to the latter. The population also presents stereotypes and prejudices, such as regarding someone with a mental illness as a fool who cannot think straight, is aggressive, strange, dangerous, and who will never be cured, and is someone who brings trouble to the family and must remain in a hospice. These notions do not bear real correspondence to the behaviors of these individuals with mental illness in their social environment.[7]

It is particularly important to study authoritarianism towards mental illness displayed by students beginning their nurse training and to evaluate if it demonstrates any change by the end of the program, with the influence of their academic training, especially to training in the Psychiatric Nursing Field.

OBJECTIVE

- To demonstrate the impact of academic training, especially in the field of psychiatric nursing, on the authoritarianism towards mental illness and people affected by mental illness displayed by students of an undergraduate-level nursing program.

METHOD

A quantitative study conducted by the University of São Paulo at Ribeirão Preto College of Nursing (EERP-USP). Undergraduate Bachelor degree nursing students from this university, of the class of 2008, participated in the study. In 2005, 80 students were admitted to the class of 2008 and were all invited to participate. A total of 85 students graduated from this class, which indicates that there was a flow of students entering and leaving this class, for different reasons, throughout the four years of the program's duration. Thus, respondents were chosen according to the following criteria: they were in regular standing with the program and presented regular responses to the Opinions About Mental Illness Scale (OMI). Thus, out of all of those admitted, 64 answered the OMI and, later, upon graduation, 71 answered the scale once more. However, considering the established criteria, it was possible to include 51 more students, which constituted the definitive sample of the present study.

The OMI was developed in the 1960s and was translated and validated into Portuguese and for Brazilian reality in the 1980s, as well as in Spanish.[8-11] It is important to emphasize that although the scale is fifty years old, it is still extremely current. This has been proved by its use in several studies conducted over the last few years in several countries. [1,6,7,12] Thus, for the objective of the our research, we extracted the authoritarianism factor from the scale, which as defined in its original form, reflects the perspective that individuals with mental illness need to be isolated from other people, behind locked and guarded doors. It contains both the precept of the impossibility for personal and social recovery, as well as the idea of dangerousness.[1,6,7,9]

The scale was given to students to respond to in a classroom during their first semester, when their academic training had not yet influenced them and then later, in their

eighth semester, shortly before obtaining their nursing degree.

The scales were filled out and analyzed individually and, to avoid typing mistakes while transferring the data to the data bank, we first conducted an in-depth reading of all the responses and these were then recorded in the bank mentioned above. Afterwards, another reading was conducted and, once again, registered in the data bank. The two records were then compared to verify for possible typing mistakes. Through this verification, mistakes were corrected and then the entire reading, typing and data recording were considered to be reliable.

In order to count the points on the OMI, we used specific formulas,[10] which generated raw scores for each student regarding the authoritarianism factor. The scores were then converted into standardized Sten scores, as in its original use.[10] The Sten system provides a measure of normal distribution N(5.5; 0.5).[12] The advantages of using this system have been widely discussed.[13]

In this manner, it was possible to quantitatively analyze the subject's results regarding authoritarianism through statistical calculations using the EpInfo 6 program. This allowed us to discuss, make considerations and reach conclusions about these student's attitudes towards mental illness and people affected by mental illness.

The project for this study was analyzed and approved by the Research Ethics Committee Involving Human Beings of the University of São Paulo at Ribeirão Preto College of Nursing, Protocol: nº 0225/2001.

RESULTS

The results indicate a significant decline in authoritarianism displayed by graduating students when compared to when they began their undergraduate nursing program. This decline, demonstrated through the analysis of Tukey's test of the Sten scores (before and after) for authoritarianism, was highly significant, with p=0,0003.

Table 1 below displays these values, and we bring attention to how many students showed an increase in frequency within the lowest Sten score intervals from their 1st to their 4th year, scores that indicate less authoritarian attitudes. We also highlight the decline in frequency of the highest Sten score intervals, representing authoritarian attitudes.

Table 1. Distribution of Sten values for students in their first and fourth years of a nursing program in the period 2005-2008. Ribeirão Preto, SP, 2012.

Sten scores nº of students	1	2	3	4	5	6	7	8	9	10
1st year	0	1	6	7	10	14	6	6	1	0
4th year	1	7	11	7	7	13	3	1	0	1

Table 1 shows the Sten score distribution in relation to the number of students who were subjects of the present study. Therefore, no students presented Sten score 1, the lowest of the system, in their first year. In the fourth year, however, 1 student presented such score. Regarding Sten score 2, there was a considerable increase from 1 student in the first year to 7 in the fourth. Sten score 3 also displayed an increase in the number of students, from 6 in the first year to 11 in the fourth.

There was evenness regarding the number of students with Sten score 4, and, from then on, the highest Sten scores, which indicate the most authoritarian attitudes, presented an inverted trend regarding the number or students in the first year and in the fourth. Thus, less students obtained Sten scores 5; 6; 7; 8 and 9 in their fourth year than in their first, with the ratios as follows: for Sten score 5, 10 first-year students and 7 fourth-year students; Sten score 6,14 first-year students and 13 fourth-year students; Sten score 7, 6 first-year students and 3 fourth-year students; Sten score 8, 6 first-year students and 1 fourth-year student, and, for Sten score 9, the ratio was 1 first-year student to zero fourth-year students. These results reflect a reduction of authoritarianism in these students regarding mental illness and people affected by mental illness throughout their undergraduate-level nursing program, even if one fourth-year student did present a Sten score of 10.

DISCUSSION

It is important to study authoritarianism displayed by students towards mental illness and people affected by mental illness in order to compare their attitudes from when they first began their nursing program with later, upon graduation. This comparison allowed us to observe these student's journey through their academic training, especially that provided by courses specific to the field of psychiatric nursing, and to demonstrate such training's influence and possible changes

brought about in how these students understand mental illness and persons thus afflicted. Such changes result in lessened stereotypes and prejudice and provide these students with a greater chance for establishing therapeutic relationships, especially with mentally ill patients. We could assume that a change in attitude would be a given after academic training, especially that regarding mental illness and people affected by mental illness, but it is an issue which deserves much attention.

The professional development of nursing is mainly represented by university admissions and the student's interest in acquiring knowledge and constructing a knowledge of their own.[14] If we assume that knowledge is a way of being in the world, it is only possible to understand the practice of nursing if one understands the knowledge which is produced and/or constructed through academic training and research. Approaches to teaching and learning are directly related to the acquirement and construction of knowledge, for this is the reason for such teaching, learning and, mainly, for applying what is learned.

The process of acquiring knowledge and culture lasts an entire lifetime. Students bring with them their own values and these values can be altered when submitted to processes which allow them to confront these values with others, shared with those in their environment, and going through socialization which involves professional values. Hence, it is no wonder that first-year students display their own values, their original values, and are less likely to be open to and share their personal attitudes with other people, in an environment with such different values mixed together. [14] Therefore, this situation makes their authoritarian attitudes towards mental illness and people affected by mental illness more evident.

The educator's theoretical and practical experience needs to offer students the necessary motivation to allow them to seek knowledge for themselves. It is necessary to submerge students in the context of reality, give them some time so that upon such confrontation, they can go beyond the superficial and seek out deeper understanding.[15] This form of seeking knowledge allows the nursing student to describe and interpret reality and then re-act, in order to transform it.

In order for a change of attitude to occur towards a given situation, it is necessary to have some time in order to live and experience it, until new learning and new stances can be incorporated into one's personality. This definitely was the case with the student's authoritarianism, considering that their time of academic training was enough for such change and incorporation. Adding to this, aside from theoretical content, they certainly had good opportunities for practical experiences, as is shown by the program's curriculum. This constitutes a relevant factor when considered together with the opportunities they also had to observe their professor's attitudes when interacting with people affected by mental illness, acting as true teaching role models, [16] for education is the pillar for transforming social and human paradigms, fostering changes in how people feel, think and act towards themselves and others.[17]

Upon concluding their nursing program, with their ways of thinking and acting transformed by academic training and incorporated into their personalities, the students displayed more positive attitudes regarding authoritarianism towards mental illness and people affected by mental illness. This result indicates that their curricular coursework certainly contributed favorably to improving their abilities and also in the sense of acquiring self-awareness, learning about their prejudices and dealing with several situations, especially with individuals who display altered behavior due to the symptoms of such illnesses. In addition, they had the opportunity to observe the patient in a clinical setting, to consider the causes of illnesses and disorders, acquire knowledge, experience and coping strategies, especially regarding mental illness.[14]

We believe that the students became aware of the importance of understanding themselves as human beings, and that this fact is a basic condition for being able to care for a patient as a human being. Thus, taking into consideration the data provided by this study, we can assume that there was a transformation in how the students perceive mental illness and in their understanding of people affected by mental illness.

Thus, we conclude that the learning provided by courses related to the specific field of psychiatric nursing led students to a better understanding of the possibilities for the inclusion of mentally ill patients into society, avoiding their isolation, as well as contributing towards their psychosocial rehabilitation. In addition, such patients can live freely in society and have a life routine similar to people considered to be normal, or in other words, those with no psychiatric diagnosis.

It is important to point out that these students, upon their admission to the nursing program (as is the case in any other program), carried with them the stereotypes and prejudice towards mental illness and people affected by mental illness that they acquired throughout their life. These attitudes are strongly influenced by an authoritarian, restrictive and discriminating socio-cultural environment/milieu, which discriminates against people afflicted with mental illness.[17] The results of this study clearly indicate positive change in the student's authoritarianism regarding such situations, which confirms the influence of educational activities which favor more therapeutic conduct in the care for people affected by mental illness.[18] Throughout their training, graduating students were given the opportunity to confront the attitudes they held as a freshman with different ones presented in their academic coursework. This also includes attitudes displayed by professors and other nursing professionals when interacting with people affected by mental illness, which led to a change of their attitudes, as was shown in the present study.

One limitation of this study is that it investigated the impact of only academic training on authoritarianism displayed by nursing students towards mental illness and those thus afflicted. This is extremely important, for it helps incentivize more investment towards training that can result in even more positive attitudes, directed towards acceptance and understanding of these people who suffer due to the symptoms of their disorders. Since only one factor was studied, it is necessary to study other ones, such as benevolence, mental hygiene ideology, social restrictiveness, interpersonal etiology, mental effort etiology and minority view. All these factors are well evaluated by the OMI and would certainly bring more contributions to the training of future nurses. A study like this has already been conducted, but with students from different classes.[4] is important to study these factors within the same class, throughout the four years of their undergraduate program, as was done in this study which isolated the authoritarian factor.

CONCLUSION

The results presented by this study allow us to conclude that upon admission to their nursing program, students carried with them authoritarian attitudes towards mental illness and those affected by mental illness. Such attitudes are similar to those of the general population, and the results of stereotypes and prejudices, like the notion of the mentally ill patient as a dangerous, aggressive and strange person.

The content of the courses that make up the undergraduate nursing program, particularly those in the field of psychiatric nursing, allowed for the acquisition of interests, acknowledgements, values and commitments by these students, which led to them overcoming such preconceived stereotypes.

Academic training, especially in the field of psychiatric nursing, had an extremely favorable influence on decreasing the authoritarianism of the nursing students who were studied towards mental illness and persons thus afflicted. Our results clearly indicate positive changes regarding these aspects of the evaluated situation, thus confirming the influence of favorable educational activities towards more therapeutic conduct in caring for individuals affected by mental illness.

Throughout the undergraduate nursing program in question, particularly regarding the field of psychiatric nursing, students were able to incorporate what they lived and experienced to their personalities. That is to say, the subjects of this study incorporated new ways of understanding and accepting people affected by mental illness, which led to a new stance in several situations. Thus, we conclude that the time spent in their academic program, once again, emphasizing the portions related to the field of psychiatric nursing, was sufficient for such change and we hope that this change may follow them throughout their entire professional lives and serve as a spring board for others.

Finally, it is important to remember that the OMI was an appropriate choice of instrument for this study, for it is still extremely current and adequate to be used in studies of this nature.

REFERENCES

1. Pedrão LJ, Avanci RC, Malaguti SE, Aguilera AMS. Atitudes frente á doença mental: estudo comparativo entre ingressantes e formandos em enfermagem. Medicina [Internet]. Ribeirão Preto. 2003 [cited 2009 Nov 10];36:37-4. Available from: http://revista.fmrp.usp.br/2003/36n1/atitudes_frente_doenca_mental.pdf

2. Tenório F. Psychiatry reform in Brazil from the 1980s to present days: its history and concepts. História, Ciências, Saúde [Internet]. Manguinhos; Rio de Janeiro. 2002 [cited 2009 Nov 10];9(1):25-59. Available from:

http://www.scielo.br/pdf/hcsm/v9n1/a03v9n1.pdf

3. Amarante P. (coord). Loucos pela Vida: A trajetória da Reforma Psiquiátrica no Brasil. 2 ed.; Rio de Janeiro: Fiocruz, 2001.

4. Santos CMR, Cavalcanti AMTS, Araújo EC. Nurse's profile who provides assistance at mental health. J Nurs UFPE on line [Internet]. 2008 [cited 2011 Jan 24];2(1):84-93. Available from: http://www.revista.ufpe.br/revistaenfermagem/index.php/revista/article/view/409/pdf_357 DOI: 10.5205/reuol.409-11232-1-LE.0201200811

5. Vieira AN, Silveira LC, Miranda KCL, Franco TB. A formação em enfermagem enquanto dispositivo indutor de mudanças na produção do cuidado em saúde. Rev Eletr Enf [Internet]. 2011 [cited 2012 Nov 21];13(4):758-63. Available from: http://www.revistas.ufg.br/index.php/fen/article/view/9186/10229

6. Pedrão LJ, Galera SAF, Silva MCP, Gonzalez AC, Costa Junior ML, Souza MCBM. Perfil das atitudes de formandos em enfermagem frente aos transtornos mentais no Brasil, Chile e Peru. Rev Latino-am Enfermagem [Internet]. 2005 [cited 2009 Apr 17];13(3):339-43. Available from: http://www.scielo.br/pdf/rlae/v13n3/v13n3a08.pdf

7. Avanci RC, Malaguti SE, Pedrão LJ. Autoritarismo e benevolência frente à doença mental: estudo com alunos ingressantes no curso de enfermagem. Rev Latino-am Enfermagem [Internet]. 2002 [cited 2009 Feb 18];10(4):509-15. Available from: http://www.scielo.br/pdf/rlae/v10n4/13362.pdf

8. Cohen J, Struening EL. Opinions about mental illness in the personnel of two large mental hospitals. Journal of Abnormal Society Psychology. 1962;64(5):349-60.

9. . Rodrigues CRC. Comparacion de actitudes de estudiantes de medicina braileños y españoles hacia la enfermedad mental. Actas Luso - Españoles de Neurologia, Psiquiatria y Ciências Afines. 1992;20(1):30-41.

10. Struening EL, Cohen J. Fatorial invariance and other psychometric characteristics of five opinions about mental illness fators. Education Psychological Measurement. 1963;23(3):289-98.

11. Corrigan PW, Edwards AB, Green A, Diwan SL, Penn DL. Prejudice, Social Distance, and Familiarity with Mental Illness. Schizophrenia Bull [Internet]. 2001 [cited 2010 May 18];27(2):219-25. Available from: http://schizophreniabulletin.oxfordjournals.org/content/27/2/219.full.pdf

12. Canfield AA. The sten scale: a modified C - scale. Education Psychological Measurement. 1951;11:295-7.

13. Lyman HB. Derived Scores. In: Lyman HB. Test scores and what they mean; New Jersey, Prentice – Hall. 1963; cap.6, p. 90-36.

14. Kruse MHL. É possível pensar de outro modo a educação em enfermagem? Esc Anna Nery Rev Enferm [Internet]. 2008 [cited 2009 Apr 12];12(2):348-52. Available from: http://www.scielo.br/pdf/ean/v12n2/v12n2a23.pdf

15. Esperidião E, Munari DB. Holismo só na teoria: a trama de sentimentos do acadêmico de enfermagem sobre sua formação. Rev Esc Enferm USP [Internet]. 2004 [cited 2009 Oct 21]; 38(3): 332-40. Available from: http://www.scielo.br/pdf/reeusp/v38n3/12.pdf

16. Ferreira HM. A totalidade do conhecimento da enfermagem: uma abordagem curricular. Acta Paul Enf; São Paulo. 2003;16(1):56-65.

17. Fernandes CNS. Refletindo sobre o aprendizado do papel do educador no processo de formação do enfermeiro. Rev Latino-am Enfermagem [Internet]. 2004 [cited 2009 Apr 10]; 12(4):691-3. Available from: http://www.scielo.br/pdf/rlae/v12n4/v12n4a17.pdf

19. Pejović-Milovancević M, Lecić-Tosevski D, Tenjović L, Popović-Deusić S, Draganić-Gajić S. Changing attitudes of high school students towards peers with mental health problems. Psychiatr Danub [Internet]. 2009 [cited 2010 Mar 10];21(2):213-9. Available from: http://www.hdbp.org/psychiatria_danubina/pdf/dnb_vol21_no2/dnb_vol21_no2_213.pdf

19. Einat H, George A. Positive Attitude Change toward Psychiatr y in Pharmacy Students Following an Active Learning Psychopharmacology Course. Academic Psychiatry [Internet]. 2008 [cited 2010 Mar 10];32:6. Available from: http://psychiatryonline.org/data/Journals/AP/2660/08AP515.PDF

Submission: 2013/09/24
Accepted: 2014/04/10
Publishing: 2014/06/01

Corresponding Address

Angelina Moda Machado Romano
Alameda das Itaúbas, 76
Bairro Terras de São Carlos
CEP 13216-783 — Jundiaí (SP), Brazil