Introduction

This paper provides a qualitative critique of Frances Reed and Les Fitzgerald’s 2005 article “The Mixed Attitudes of Nurse’s to Caring for People with Mental Illness in a Rural General Hospital”. The article presents a qualitative descriptive study which investigated the attitudes of 10 nurses in a rural general Australian hospital towards caring for people with a mental illness. The outline in Box 9.1 on pages 196 & 197 of LoBiond-Wood & Haber (2005) provide guidelines for formatting of this paper.

Statement of Phenomenon of Interest

The phenomenon of interest that the researchers looked at was the attitudes of nurses caring for patients with mental illness and the effect of various positive and negative factors on their ability to provide care. The focus of the study is clearly described in the title, the abstract, and introduction. In the background section the authors reference previous studies which provide a context for the research. They cite Wyaden el al. (2000) in asserting that “nursing education has only recently sharpened the focus on mental health, with the amount still considered inadequate” (250) and cite the Auditor General Victoria (2002) in stating that “Rural areas are more affected more by the demand for mental health care because of limited mental health resources” (250). In addition, they reference Roberts and Priest (1997) in suggesting that support, education and collaboration with mental health services can benefit rural nurses.

Purpose

Reed and Fitzgerald (2005) note that more people with mental health problems are being cared for in general hospitals today and that nurses are a key “resource in the delivery of mental health care” (249). However, the quality of care provided by nurses in these hospitals has “been shown to be poor” (249) and many “feel unprepared to support mental health needs” (250). This
is particularly true in rural areas where there is a lack of support for nurses from mental health professionals. The authors state that “the purpose of this study was to explore rural nurses’ attitudes and how they affect care, the problems they associate with providing care, and the impact of education, support, and experience” (p.249). In pointing out that no research with this specific objective has been conducted, they indicate the importance of their study.

Method

The researchers employed a qualitative descriptive research method because limited research had been done in their subject area and it allowed them to “provide a ‘comprehensive summary’ of the data presented in an understandable and usable manner” (250) as well as to promote an understanding of the pertinent issues. Ethical approval was obtained from the selected hospital as well as university, research and ethics committees. Describing the research process in detail and presenting the data which supported the findings and interpretations ensured “confirmability” (251) and enabled readers to assess whether the study could be generalized.

Sampling

The researchers selected 10 nurses working in two wards of a rural 300-bed general hospital which provided “a wide variety of health services to the community” (250); participants from one of these wards had the support of nurses specializing in mental health. A stratified random sample was used to give nurses at different levels an opportunity to be selected and eliminate the possibility of researcher bias due to the researcher knowing the participant. Nurses who did not directly care for patients or had special training or experience in mental health care were excluded from the sample. Informed consent was obtained from the participants and the semi-structured interviews were audio-taped.

Data Collection
The research questions “focussed on [the participants’] perceptions and experiences in caring for people with mental health problems” (250). Conducting the interviews informally allowed the researchers to build rapport with the nurses, which made the nurses more comfortable and encouraged them to disclose information candidly. Interviewers could prompt participants to discuss their feelings, guide them in uncovering their concerns, and explore ways to improve their ability to care for patients with a mental illness. After transcribing the interviews, the researchers employed a quantitative content analysis to “identify themes and relationships within the data” (250). LoBiondo-Wood and Haber (2005) support this approach because it enables researchers to “clarify misunderstood questions (p.319)” and generates substantial and nuanced data which can lead to strong conclusions.

Data Analysis

Reed & Fitzgerald (2005) state that maintaining a clear audit trail, taking steps to ensure credibility, and having supervisors check the research contributed to the study’s dependability, while “trustworthiness was established through the application of dependability, credibility, confirmability, and transferability” (250). However, in the method and conclusion sections the analysis is discussed, but not described, and no descriptive or supportive data is provided to back up these assurances. As the interviews were presented in summary form, readers must trust the researchers’ abilities to retain consistency throughout the process of data collection and analysis. The article did not mention whether the interviews were to be kept confidential, so it possible that the disclosure of details could have skewed the results.

Credibility

* According to Reed & Fitzgerald (2005), the dependability and credibility of the study were enhanced by the use of audiotape, which allowed for detailed responses and ensured they could be accurately recorded; consultation with peers, supervisors and experts; the researchers’ confirming key points and interpretations with participants; the “prolonged engagement of
participants through a working acquaintance”; “data triangulation through the use of subjects working in different areas”; and “person triangulation by accessing subjects with different levels of training, experience, and responsibility” (p. 250). The authors also considered contradictory information in modifying their findings and explaining negative attitudes.