

# **Reducing Healthcare Provider Mental Illness Stigma to Achieve Health Equity, Provider Well-Being, and Patient Satisfaction in a Rural Indigenous Population**

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**Background:** Healthcare provider mental illness stigma is a problem because of its potential to interfere with quality health care outcomes, such as delays in treatment seeking behaviors, worsening of disease state, reduced compliance rates, and increases the risk of relapse in rural primary care in Canada.

**Local problem:** It was not known if or to what degree the implementation of Opening Minds educational intervention would impact mental health assessment and treatment when compared to current practice among Indigenous patients rural setting Northwestern Alberta primary care over four weeks.

**Methods:** This project focused on primary healthcare providers in Indigenous, primary health care clinic in Northern Alberta, Canada. Using an evidence-based intervention, the HCPs were educated regarding importance of addressing stigma by HCPs toward those with mental illness. Post education, HCP's documented comprehensive mental health care in each patient EMR for two weeks. Patient satisfaction surveys were completed 4 weeks post educational intervention.

**Intervention:** Pre/post educational intervention data were analyzed to determine whether the educational intervention decreased healthcare provider mental illness stigma, increased mental health assessment and treatment and improved both intent of healthcare provider to change behavior in clinical practice and improve patient satisfaction scores.

**Results:** 200 patient records were reviewed, 100 for comparative and 100 for intervention patients. The results showed percentage patients receiving mental health assessment improved significantly (n=29, 29%) to intervention (n=80, 80%),  $p = .000$ . The percentage assessed patients receiving mental health treatment who were assessed improved significantly from comparative (n=7, 24.1%) intervention (n=56, 70%),  $p = .000$ . Wilcoxon signed rank test found statistically significant improvement reducing stigma, indicated by decrease median OMS-HC scores from 53 preintervention (range = 34 – 66) to 43 post intervention (range = 29 to 53),  $Z = -3.422$ ,  $p = .001$ . Patient satisfaction scores responses indicated care received was excellent for 18 (12%) respondents and Very Good for 42 (28%) respondents. 6 (4%) reported that they received poor care. The overall experience at clinic was excellent for 9 (6%) respondents and very good for 11 (7.3%) respondents. Over 10% (n=21, 14%) rated overall hospital experience as "poor."

**Conclusions:** This quality improvement project found educating healthcare providers on healthcare provider mental illness stigma improved mental health assessment and treatments, improved intent to change practice to address mental illness stigma and improved patient satisfaction scores. This project adds to the burgeoning knowledge about mental illness stigma in rural, primary Indigenous health care.