

Assessing Nurses' Knowledge on Psychiatric Patients' Rights: A Cross-sectional Study at Ndera Neuropsychiatric Teaching Hospital

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ABSTRACT

INTRODUCTION: Nurses are essential in multidisciplinary healthcare teams, especially in their constant contact with patients. Understanding patients' rights, which govern the interaction between healthcare recipients and providers, is crucial. This study assessed nurses' knowledge of psychiatric patients' rights at Ndera Neuropsychiatric Teaching Hospital.

METHODS: A cross-sectional study was conducted from March 1 to 30, 2024, using an adapted questionnaire to evaluate nurses' knowledge of patients' rights. Data were collected via Google Forms, extracted as CSV files, and analyzed with Stata version 13. The Chi-square test examined the relationship between participants' characteristics and their knowledge level.

RESULTS: The study included 140 nurses with a mean age of 34.15 years (SD = 8.5); 55% were male. Formal training on psychiatric patients' rights was reported by 67.9% of participants during their education and 86.4% at work. The majority demonstrated knowledge of rights such as dignity and respect (100%), treatment consent (97.9%), communication (97.9%), and complaints and grievances (97.1%). However, knowledge of the right to refuse treatment was lower at 67.9%. Self-rated knowledge showed 90% of nurses considered their knowledge excellent or good, while 7.9% rated it as fair. No significant association was found between socio-demographic characteristics and knowledge levels.

CONCLUSION: Nurses at Ndera Neuropsychiatric Teaching Hospital generally know psychiatric patients' rights well, particularly regarding dignity, informed consent, and communication. However, gaps exist in understanding the right to refuse treatment. Demographic factors do not significantly affect knowledge. Challenges include high workload, communication barriers, lack of formal training, staff burnout, and resource shortages.

Keywords: patients' rights, nurses, psychiatric, knowledge, Ndera neuropsychiatric teaching hospital.

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INTRODUCTION

Tuberc The nurses play a pivotal role in multidisciplinary team and contribute in decision making within the healthcare system and their contributions are indispensable for the seamless functioning of the entire system. In psychiatric settings, nurses perform a myriad of essential tasks including patient admission, psychiatric assessments, providing support to patients and their families, and safeguarding the confidentiality and privacy of mental health patients [1]. Additionally, psychiatric nurses also have legal and ethical obligations related to patients' rights, such as the admission and discharge processes, outlining patients' rights, obtaining informed consent, and other legal duties [2]. Patients' rights are defined as ethical standards that nurses are obligated to uphold, forming a code of conduct governing the relationship between healthcare recipients and providers [3]. Baziga et al. emphasized that respecting and upholding patients' rights is a critical skill for psychiatric nurses, aligning with the ethical principles guiding nursing practice [4]. Nurses' knowledge of patient rights is crucial for influencing daily activities in psychiatric care [5]. They maintain continuous proximity to psychiatric patients, providing uninterrupted care and ensuring quality of care, thus necessitating thorough knowledge of diseases and patients' rights [6]. They have a vital role in admitting patients, performing psychiatric evaluations, helping both patients and their families, and safeguarding the privacy and confidentiality of individuals receiving psychiatric care. Since, nurses are responsible for ensuring the quality of care, they must be knowledgeable about diseases as well as rights of patients when giving care in hospitals [7]. A mental health nurse must possess the necessary knowledge through training, education, and experience to provide professional care to psychiatric patients [8].

This knowledge ensures the quality of care and helps prevent potential abuses in hospital settings [9]. Essentially, the knowledge acquired by nurses about the rights of patients will go a long way in the provision of quality and holistic healthcare outcomes [10]. As Gandhi et al. noted, psychiatric patients can face unfair treatment, discrimination, and significant social stigma if service providers lack proper knowledge [1]. These individuals may face unfair treatment, discrimination, and significant social stigma, similar to other vulnerable groups, despite their entitlement to legal equality

and rights such as social, cultural, and economic protections. These rights include access to timely and quality treatment, privacy, confidentiality, and informed consent for medication [11].

Globally, nurses' knowledge of psychiatric patients' rights varies, with disparities observed between countries, regions, and healthcare settings. In developed nations, comprehensive education and training on mental health and patients' rights equip nurses with a strong knowledge of these rights [8,12]. They are typically well-versed in laws and regulations that safeguard the rights of individuals with psychiatric conditions, such as the right to informed consent, confidentiality, and freedom from discrimination [8,12,13]. In contrast, in many parts of Africa, limited access to education and resources can hinder nurses' knowledge, contributing to stigma surrounding mental health conditions [14].

In Rwanda, significant efforts have been made to enhance mental health services and decrease stigma. The government has initiated reforms and integrated mental health into primary care [15]. Despite progress, challenges remain, including disparities in access to mental health services and education. Although Rwandan nurses show growing awareness of psychiatric patients' rights, consistent application across healthcare settings is still needed [4,16].

The literature highlights various patients' rights for confidentiality, informed consent, and freedom from forced treatment, refusal of medication, protection from physical restraints, and access to information about their conditions and their respective management and treatment [17]. This study aimed at assessing nurses' knowledge of psychiatric patients' rights at Ndera Neuropsychiatric Teaching Hospital. It evaluates the level of knowledge, explores the association between nurses' knowledge of patients' rights and their baseline characteristics, and identifies challenges and barriers in the practical application of these rights.

METHODS

Study design and settings: This study used a cross-sectional design that assessed nurses' knowledge on psychiatric patients' rights. This research was carried out at Ndera Neuropsychiatric Teaching Hospital (NNPH) located in Kigali city, Gasabo district, and Ndera sector.

Study population: The participants of this study are nurses employed at the Ndera Neuropsychiatric Teaching hospital both general and mental health nurses. In this study, the researcher targeted all nurses based at Ndera Neuropsychiatric Teaching Hospital, Rwanda. The study included nurses with at least 6 months of experience working with psychiatric patients at Ndera Neuropsychiatric Teaching Hospital, registered and licensed by a regulatory body (National Council of Nurses and Midwives). The newly recruited nurses (with less than 6 months of experience) at Ndera Neuropsychiatric Teaching hospital following were excluded from the study.

Sample size calculation and sampling techniques: At the time of the study, there were a total of 205 nurses (152 mental health nurses and 53 general nurses) at Ndera Neuropsychiatric Teaching Hospital, Rwanda. A consecutive sampling technique was used and the calculated minimum required sample from our population was 133 participants, and 140 participants were recruited in this study.

Data collection, tools and procedures: The data were collected using an adapted questionnaire from Chandake et al. [13] with permission obtained from the original authors. The questionnaire was entered into google form then pre-tested to 10 nurses and then it was modified prior to data collection. The principal investigator distributed the link of the data collection form that was designed in google form through WhatsApp and personal emails of the study participants and the participants filled the form online and submitted it once completed. The principal investigator extracted the data from google form in the CSV format. To reduce the response bias, the study participants were assured of anonymity and confidentiality and the online form included neutral, non-leading questions.

Data analysis: The data analysis was performed with Stata version 13. Descriptive data are presented in the following manner: categorical data are displayed with frequencies and percentages in tables and charts, whereas continuous data are summarized by their mean and median values according to their distribution. Normality test was done using Shapiro-Wilk test. The nurse's knowledge was categorized as follow: nurses who were knowledgeable of at least 15 out

of 16 patients' rights (averaging >90% of correct answers) that were evaluated and classified as having good knowledge while those who scored 14 and less out of 16 were classified as having moderate knowledge (averaging <90% of correct answers). Chi-square test was used to study the association of the outcome (knowledge of psychiatric patients' rights) and possible predictors. Statistical associations are considered significant if the p-value is less than 0.05.

Ethical considerations: The study was approved by the Institutional Review Board of College of Medicine and Health Sciences, University of Rwanda (Approval Notice No: CMHS/IRB/056/2024) and by the ethics committee of Ndera Neuropsychiatric Teaching Hospital (Approval Notice No: 001/NNTHEC/2024) and was conducted following the guidelines of the Declaration of Helsinki.

RESULTS

The study sample consists of 140 nurses whose mean age is 34.15 years (SD = 8.5). The gender distribution is 45% female (n=63) and 55% male (n=77). In terms of marital status, 46.4% are single (n=65), 52.9% are married (n=74), and 0.7% are divorced or widowed (n=1). The majority of participants are Mental Health Nurses (67.1%, n=94), with General Nurses comprising 32.9% (n=46). The nurses have an average of 7.54 years (SD = 6.38) of clinical practice experience. Experience specifically in psychiatric hospitals averages 6.28 years (SD = 5.98) Regarding education, 77.1% hold an Advanced Diploma (A1, n=108), 20% have a Bachelor's degree (A0, n=28), and 2.1% have a Master's degree (n=3) (Table 1).

The study includes data on training regarding psychiatric patients' rights among nurses. Of the participants, 67.9% (n=95) reported receiving formal training on psychiatric patients' rights as part of their education, while 32.1% (n=45) did not. Additionally, 86.4% (n=121) received training on psychiatric patients' rights specifically at the Ndera Neuropsychiatric Teaching Hospital, whereas 13.6% (n=19) did not receive such training there (Table 2).

An overwhelming majority are knowledgeable about psychiatric patients' rights specifically the right to dignity and respect (100%, n=140), the right to informed consent regarding their treatment

Table 1: Sociodemographic features of study participants

Characteristics	n	%
Age in years		
Mean ± SD	34.15 ± 8.5	
Gender		
Female	63	45
Male	77	55
Marital status		
Single	65	46.4
Married	74	52.9
Divorced/Widowed	1	0.7
Qualification		
General Nurse	46	32.9
Mental Health Nurse	94	67.1
Years in Clinical Practices as a Nurse		
Mean ± SD	7.54 ± 6.38	
Median (Min-Max)	5 (1-25)	
Years of experience working in psychiatric hospital		
Mean ± SD	6.28 ± 5.98	
Median (IQR)	4 (1-25)	
Level of Education		
Advanced diploma (A1)	108	77.1
Bachelor's degree (A0)	28	20
Master's degree	3	2.1

(97.9%, n=137), the right to communications (97.9%, n=137), and the right to complaints and grievances (97.1%, n=136). High awareness is also evident for the right to access medical records (89.3%, n=125), privacy and confidentiality (88.6%, n=124), freedom from abuse and restraints (87.9%, n=123), the right to advocacy (96.4%, n=135), and the right to choose their health provider, continuity of care, and education (each at 93.6%, n=131). Knowledge of the right to refuse treatment is somewhat lower at 67.9% (n=95) (Table 3).

The results of analysis of self-rated knowledge of patients' rights among nurses showed that 38.6% expressed to have excellent knowledge, 52.1% self-rated to have good knowledge, 7.9% self-rated to have fair knowledge and 0.7% self-rated as having poor knowledge of psychiatric patients' rights (Figure 1).

The most commonly reported challenge is aggressive behavior of patients among 52.1% of participants followed by high workload (46.4%),

Table 2: Training opportunities among nurses working at Ndera Neuropsychiatric Teaching Hospital

Variables	n	%
Received formal training on psychiatric patients' rights in education		
Yes	95	67.9
No	45	32.1
Received training on psychiatric patients' rights at Ndera Neuropsychiatric Teaching Hospital		
Yes	121	86.4
No	19	13.6

Table 3: Knowledge of nurses on specific psychiatric patients' rights

Psychiatric patients' rights	Knowledgeable	
	n	%
Right to dignity and respect	140	100
Right to informed consent regarding their treatment	137	97.9
Right to communications	137	97.9
Right to complaints and grievances	136	97.1
Right to advocacy	135	96.4
Right to choose health provider	131	93.6
Right to continuity of care	131	93.6
Right to education	131	93.6
Right to visitation and support	128	91.4
Right to access medical record	125	89.3
Right to privacy and confidentiality	124	88.6
Right to freedom for abuse and restraints	123	87.9
Right to refuse treatment	45	67.9

communication challenges, lack of training and education (40.0%), staff burnout and stress (39.3%), lack of resources (35%). The lack of mental health laws protecting healthcare workers was cited by 12.1% of respondents. Other barriers include dealing with aggressive patients (9.3%), inadequate infrastructure (7.9%), and managing a high volume of patients with different diagnoses in the same ward (6.4%). Additional challenges include inadequate staff and family training (5.0%),

n=7), poor communication skills (2.1%), and financial barriers, stigma, and work overload (each at 1.4%) (Table 4).

The analysis of data showed that there is no notable variation in knowledge of patients' rights across all the presumed predictors namely age, gender, years of experience, training opportunities on patients' rights, qualifications and level of education among nurses working at Ndera Neuropsychiatric Teaching Hospital. Table

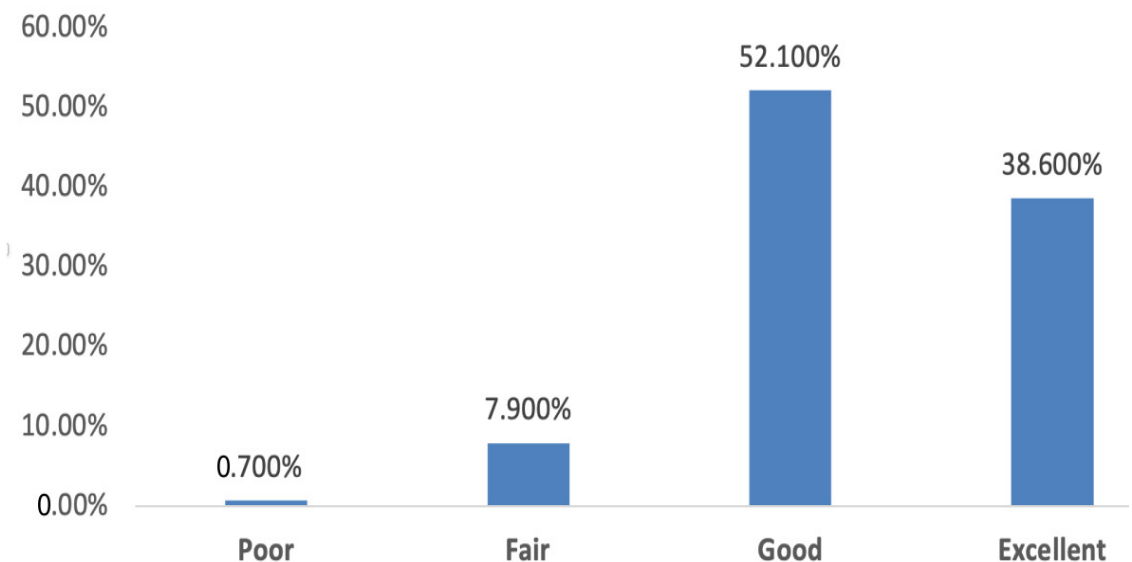
**Figure 1: Overall self-rated knowledge of psychiatric patients' rights**

Table 4: Challenges and barriers faced by nurses while providing psychiatric care

Challenges/Barriers	n	%
Aggressive behavior of patients/clients towards nurses	73	52.1
High workload	65	46.4
Lack of training and education	56	40.0
Communication challenges	58	41.4
Staff burnout and stress	55	39.3
Lack of resources	49	35.0
Lack of mental health law that protects healthcare workers	17	12.1
Aggressive patients	13	9.3
Inadequate infrastructure	11	7.9
High volume of patients in same ward with different diagnosis	9	6.4
Financial barriers of patients/families	2	1.4
Lack of national rules that guides psychiatric patients	1	0.7

4 presents the results of analysis of predictors of overall knowledge of psychiatric patients' rights among nurses. Age appears to have no significant impact ($p=0.505$), with 64.4% of those who are ≤ 35 years old and 70% of those who are >35 years old having good knowledge. Gender also shows no significant difference ($p=0.166$), with 60.3% of females and 71.4% of males displaying good knowledge. Marital status ($p=0.654$), qualifications ($p=0.330$), years of practice as a nurse ($p=0.768$), and years of experience in a psychiatric hospital ($p=0.678$) do not significantly predict knowledge levels. Education level shows a trend, though not statistically significant ($p=0.536$), with 78.95% of those holding a Bachelor's degree demonstrating good knowledge compared to 63% with an Advanced Diploma and 66.7% with a Master's degree. Training received at school ($p=0.671$) and at work ($p=0.745$) also does not significantly affect knowledge, with 65.3% and 66.9% of those trained at school and work, respectively, having good knowledge (Table 5).

DISCUSSION

The study sample comprised 140 nurses with an average age of 34.15 years, highlighting a relatively young workforce. The gender distribution was nearly balanced, with 55% male and 45% female participants and this distribution was comparable to the one reported by Abou-zeina et al [18]. The mean age found in the current study, representing the young workforce, is comparable to the mean/

median age reported by majority of previous researchers who investigated on the knowledge of patients' rights among nurses around the world [1,12] but low compared to the some previous researchers [6,15,19].

Training on psychiatric patients' rights was a key area of focus in the study. A substantial 67.9% of the nurses received formal training on these rights during their education, and an even higher percentage (86.4%) received training at the Ndera Neuropsychiatric Teaching Hospital. This training appears to have been effective, as high levels of knowledge were reported regarding various patients' rights as all nurses were knowledgeable about the right to dignity and respect, and nearly all were aware of the rights to informed consent, communication, and complaints and grievances. Training during academic curricula and informal work experience which is gained at work places coupled with training opportunities at work places have been reported as the most common sources of nurses' knowledge on patients' rights in a comprehensive review conducted by Mpouzika et al. [12]. The velocity of training opportunities in our results are also in accordance but higher than the rate reported from the study done in Finland which reported that majority of nurses (61%) received a formal training on patients' rights [19]. However, knowledge of the right to refuse treatment was notably lower at 67.9%. The specific patient rights with lower level of knowledge among nurses that were reported in other studies were different from our finding, specifically Iltaanen

Table 5: Factors associated with knowledge of psychiatric patients' rights

Predictors	Overall Knowledge of all patients' rights		P value
	Moderate	Good	
Age category			
≤ 35 years	32(35.6%)	58(64.4%)	0.505
> 35 years	15(30%)	35(70%)	
Sex			
Female	25(39.7%)	38(60.3)	0.166
Male	22(28.6)	55(71.4)	
Marital status			
Divorced/Widow	0(0%)	1(100%)	0.654
Married	23(31.1%)	51(68.9%)	
Single	24(36.9%)	41(63.1%)	
Qualifications			
General Nurse	18(39.1%)	28(60.9%)	0.330
Mental Health Nurse	29(30.9%)	65(69.1%)	
Experience of practice as nurse			
≤5 years	26(34.7%)	49(65.3%)	0.768
>5 years	21(32.3%)	44(67.7%)	
Experience in psychiatric hospital			
≤5 years	30(34.9%)	56(65.1%)	0.678
>5 years	17(31.5%)	37(68.5%)	
Education level			
A1	40(37%)	68(63%)	0.536
A0	6(21.05)	22(78.95%)	
Master's degree	1(33.3%)	2(66.7%)	
Received training at school			
Yes	33(34.7%)	62(65.3%)	0.671
No	14(31.1%)	31(68.9)	
Received training at work			
Yes	40(33.1%)	81(66.9%)	0.745
No	7(36.8%)	12(63.2%)	

et al. who reported right to access to information and right to advocacy as the ones with lowest level of knowledge [19], and Sabzevari et al. who added right to participate to treatment decision [20].

Self-rated knowledge of psychiatric patients' rights showed that 38.6% of nurses considered their knowledge excellent, 52.1% rated it as good, 7.9% as fair, and only 0.7% as poor showing that nurses with good knowledge of psychiatry patients' rights are 90.7%. These self-assessments

align with the high levels of knowledge observed in specific rights where the results of the actual assessment which showed that 66.4% of nurses provided the correct answers related to patients' rights with a percentage score of 93%. The results of this study are consistent with Abdalla et al.'s findings, which showed that most participants rated their knowledge as excellent or good [21] and other researchers [8,13,22]. Our results are different from the results of the analysis done by Iltanen et al. who reported that there was no

association between self-reported and assessed understanding of patients' rights among their study participants [19] and as of the majority of the studies from a systematic review which included studies from all over the world including Africa [21,23] which reported no correlation between self-rated knowledge and evaluated knowledge [12]. The results of this study correspond with those from Abdalla et al., who found that most of their participants assessed their knowledge as excellent or good [21].

Despite a good understanding of these rights, nurses reported high workloads and communication difficulties, exacerbated by inadequate training and education. Staff burnout and stress further compound these issues, reflecting a need for more resources and better support systems as reported by Abou-Zena [18]. The absence of mental health laws to protect healthcare workers also leaves them vulnerable, emphasizing the urgent need for legislative reform to ensure both patient rights and nurse well-being are adequately safeguarded.

The analysis of predictors of overall knowledge of patients' rights revealed that age, gender, marital status, qualifications, years of practice, and experience in psychiatric hospitals did not significantly impact knowledge levels. There was a non-significant trend suggesting that those with a Bachelor's degree might have better knowledge, but this was not statistically conclusive which might be explained by the fact that those with bachelor's degree (A0) are mostly general nurses and those with A1 are mainly mental health nurses. Similarly, whether nurses received training on patients' rights at school or at work did not significantly affect their knowledge levels, with similar proportions of good knowledge among those trained in both settings. This indicates that while training is widespread and generally effective, other factors might also contribute to boosting nurses' knowledge of the rights of mental health conditions. The results of this study align with those of Chendake et al. [13], who found no correlation between demographic factors and nursing students' scores on their knowledge of the rights of psychiatric patients. In other words, the analysis did not reveal any substantial associations between variables such as age, gender, or other demographic characteristics and the level of knowledge among nursing students. Our findings also are in accordance with the results from the

study carried out by Mohammed et al. who stated there were no notable associations or significant relationships between nurses' knowledge and various factors, including age, gender, qualifications, marital status, and longevity of working experience. In other words, The analysis showed no statistically significant connections between these demographic features and nurses' knowledge levels [8]. Other researchers reported lack of significant association between nurses' characteristics and their knowledge of patients' rights [20,21]. However, the results of this study differ from those of the systematic review conducted by Mpouzika et al., who identified associations between older age, longer clinical experience, and personal beliefs in the importance of patient rights, all contributing to higher levels of knowledge on this topic [12]. Our results are also different from the results from other two separate studies conducted in Iran which reported that nurses' knowledge of patient rights was significantly associated with working in teaching hospitals and the extent of their educational attainment where nurses in academic hospital settings and those with higher levels of education showed a higher degree of knowledge regarding patient rights [24,25].

In this study we faced some limitations which include the use of an online questionnaire which might have excluded nurses with limited access to or familiarity with digital platforms, potentially affecting the representativeness of the sample. The self-reported data are also subject to social desirability bias, especially given the sensitive nature of psychiatric patients' rights. Lastly, the cross-sectional design limits the ability to infer causality between knowledge levels and influencing factors.

In conclusion, this study reveals that the most of nurses solidly understand the psychiatric patients' rights, particularly in areas such as dignity, informed consent, and communication. Training, both during education and at the Ndera Neuropsychiatric Teaching Hospital, appears effective in fostering this knowledge. However, there are notable gaps, particularly regarding the right to refuse treatment. The findings indicate that demographic factors, qualifications, and experience do not significantly influence knowledge levels, suggesting the need for more targeted training interventions. Challenges

such as aggressive behaviors of Clients towards nurses, followed by high workload, communication challenges, lack of training and education, staff burnout and stress, lack of resources and the lack of protective mental health laws highlight areas needing systemic improvement to support nurses in their roles.

REFERENCES

- Gandhi, S.; Poreddi, V.; Nagarajiah; Palaniappan, M.; Reddy, S.S.N.; BadaMath, S. Indian Nurses' Knowledge, Attitude and Practice towards Use of Physical Restraints in Psychiatric Patients. *Investig. Educ. En Enfermeria* 2018, 36, doi:10.17533/udea.iee.v36n1e10.
- Hem, M.H.; Gjerberg, E.; Husum, T.L.; Pedersen, R. Ethical Challenges When Using Coercion in Mental Healthcare: A Systematic Literature Review. *Nurs. Ethics* 2018, 25, 92–110, doi:10.1177/0969733016629770.
- Ivarsson, B.; Johansson, A.; Todorova, L. Prehospital Emergency Nurses' Competence Progress in Assessing Psychiatric Disorders; 1-Year Follow-up of a Psychiatric Emergency Response Unit. *Int. Emerg. Nurs.* 2022, 62, 101149, doi:10.1016/j.ienj.2022.101149.
- Baziga, V. Student Nurses's Stigmatising Attitudes towards Persons with a Mental Disorder in a Selected School of Nursing and Midwifery in Rwanda. *Rwanda J.* 2017, 4, 22, doi:10.4314/rj.v4i1.3f.
- Raphalalani, S.; Becker, P.J.; Böhmer, M.W.; Krüger, C. The Role of Mental Health Care Act Status in Dignity-Related Complaints by Psychiatric Inpatients: A Cross-Sectional Analytical Study. *South Afr. J. Psychiatry* 2021, 27, 1–8, doi:10.4102/sajpsychiatry.v27i0.1602.
- Thapa, K.; Samson, V.W. A Study to Assess the Knowledge and Attitude of Staff Nurses Regarding Human Rights of Mentally Ill Patients at Selected Hospitals of Bangalore, India. *J. Kathmandu Med. Coll.* 2017, 6, 27–31, doi:10.3126/jkmc.v6i1.18583.
- Grace, P.J. Nursing Ethics and Professional Responsibility in Advanced Practice. *Jones Bartlett Learn.* 2018, 1–14.
- Qahtan Q, M.; Mohammed, E.H.; Karim, M.H.; Hassan, N.A. Assessment of Nurses' Knowledge about Ethical and Legal Issues in Mental Health Nursing at Psychiatric Teaching Hospitals in Baghdad City. *IOSR J. Nurs. Health Sci.* 2017, 06, 43–47, doi:10.9790/1959-0603034347.
- Hustoft, K.; Larsen, T.K.; Brønnick, K.; Joa, I.; Johannessen, J.O.; Ruud, T. Voluntary or Involuntary Acute Psychiatric Hospitalization in Norway: A 24 h Follow up Study. *Int. J. Law Psychiatry* 2018, 56, 27–34, doi:10.1016/j.jljp.2017.10.011.
- Daniel, V.; Daniel, K. Perception of Nurses' Work in Psychiatric Clinic. *Clin. Med. Insights* 2020, 1, 27–33, doi:10.52845/cmi/2020v1i1a5.
- Færden, A.; Bølgren, B.; Løvhaug, L.; Thoresen, C.; Dieset, I. Patient Satisfaction and Acute Psychiatric Inpatient Treatment. *Nord. J. Psychiatry* 2020, 74, 577–584, doi:10.1080/08039488.2020.1764620.
- Mpouzika, M.; Karanikola, M.; Panayiotou, E.; Raftopoulos, V.; Middleton, N.; Papathanassoglou, E. Nurses' Attitudes and Knowledge Regarding Patient Rights: A Systematic Review. *Rev. Esc. Enferm.* 2021, 55, 1–10, doi:10.1590/S1980-220X2019037603678.
- Mahesh Chendake, V. A Study to Assess the Knowledge Regarding Human Rights of Mentally Ill Among Post Basic B. Sc. Nursing Students In Krishna Institute of Nursing Sciences, Karad.-. *Int. J. Health Sci. Res. IJHSR* 2014, 4, 164–171.
- Ghanem, M.; Haidy, M.; Nagah, A.E.-F.M.A. Practice of Patients' Rights among Physicians and Nurses in Two Egyptian Hospitals from Patients' Perspective. *J. Nat. Sci. Res.* 2015, 5, 159–169.
- Hassen, A.; Abozied, A.; Mahmoud, E.; El-Guindy, H. Mental Health Nurses' Knowledge Regarding Patients' Rights And Patients' Advocacy. *NILES J. Geriatr. Gerontol.* 2022, 5, 307–324, doi:10.21608/niles.2022.243510.
- Smith, S.L.; Misago, C.N.; Osrow, R.A.; Franke, M.F.; Iyamuremye, J.D.; Dusabeyezu, J.D.A.; Mohand, A.A.; Anatole, M.; Kayiteshonga, Y.; Raviola, G.J. Evaluating Process and Clinical Outcomes of a Primary Care Mental Health Integration Project in Rural Rwanda: A Prospective Mixed-Methods Protocol. *BMJ Open* 2017, 7, doi:10.1136/bmjopen-2016-014067.
- Jansen, T.L.; Hem, M.H.; Dambolt, L.J.; Hanssen, I. Moral Distress in Acute Psychiatric Nursing: Multifaceted Dilemmas and Demands. *Nurs. Ethics* 2020, 27, 1315–1326, doi:10.1177/0969733019877526.
- Zeina, H.A.A.; El Nouman, A.A.; Zayed, M.A.; Hifnawy, T.; El Shabrawy, E.M.; Eltahlawy, E. Patients' Rights: A Hospital Survey in South Egypt. *J. Empir. Res. Hum. Res. Ethics* 2013, 8, 46–52, doi:10.1525/jer.2013.8.3.46.
- Iltanen, S.; Leino-Kilpi, H.; Puukka, P;

- Suhonen, R. Knowledge about Patients' Rights among Professionals in Public Health Care in Finland. *Scand. J. Caring Sci.* 2012, 26, 436–448, doi:10.1111/j.1471-6712.2011.00945.x.
20. Sabzevari, A.; Kiani, M.A.; Saeidi, M.; Jafari, S.A.; Kianifar, H.; Ahanchian, H.; Jarahi, L.; Zakerian, M. Evaluation of Patients' Rights Observance According to Patients' Rights Charter in Educational Hospitals Affiliated to Mashhad University of Medical Sciences: Medical Staffs' Views. *Electron. Physician* 2016, 8, 3102–3109, doi:10.19082/3102.
21. Abdalla, S.M.; Mahgoub, E.A.A.; Abdelgadir, J.; Elhassan, N.; Omer, Z. Operationalization of Patients' Rights in Sudan: Quantifying Nurses' Knowledge. *Nurs. Ethics* 2019, 26, 2239–2246, doi:10.1177/0969733018787224.
22. Hemavathy V and Pechimayum Ranjita A Study to Assess the Effectiveness of Planned Teaching Program on Knowledge Regarding Rights of Mentally Ill Among Staff Nurse at Knowledge Regarding Rights of Mentally Ill among Staff Nurse at Selected Hospital, Chennai. *Int. J. Curr. Adv. Res.* 2018, 7, 6–7.
23. Ibrahim, S.A.; Hassan, M.A.; Hamouda, S.I.; Abd Allah, N.M. Effect of Patients' Rights Training Sessions for Nurses on Perceptions of Nurses and Patients. *Nurs. Ethics* 2017, 24, 856–867, doi:10.1177/0969733015625365.
24. Al Syed, S.; Abou Hashish, E.A.; Bajamal, E.; Abdaljabbar, L.; Alammari, N.; Alotaibi, R.; Alfaifi, S.; Alrudayni, H. Knowledge of the Patients' Bill of Rights and Influencing Factors Among University Nursing Students. *Cureus* 2023, 15, 1–12, doi:10.7759/cureus.38433.
25. Nezamodini, Z.S.; Rezvani, Z.; Kian, K. Electronic Physician (ISSN : 2008-5842). *Electron. Physician* 2017, 9, 3592–3597.