



## ORIGINALS

### Positive mental health in nursing students, Chile

Salud mental positiva en estudiantes de enfermería, Chile

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#### ABSTRACT:

**Introduction:** Positive mental health is defined as a state of mental well-being, which is little understood among nursing students in Chile.

**Objective:** To evaluate the level of positive mental health and its relationship with associated factors in nursing students at a university.

**Method:** Quantitative, observational, correlational, and cross-sectional study. A sample of 179 nursing students from a Chilean university. An online questionnaire was applied to collect biosociodemographic and academic background, along with the Positive Mental Health Questionnaire by Lluich, from May to June 2024, after obtaining informed consent. Data analysis involved descriptive and inferential statistics using the Jamovi 2.5 software. The study was formulated according to the ethical requirements of E. Emanuel and was approved by the respective ethics committees.

**Results:** 56.4% of the students showed a high level of positive mental health. Among the six factors of the questionnaire, self-control and autonomy had the lowest mean scores. Academic year, presence of mental health disorders, and the intensity of the relationship with individuals with mental health disorders were significantly associated with the level of positive mental health.

**Conclusion:** Nursing students showed a high level of positive mental health. It is necessary to generate strategies to strengthen positive mental health as a protective factor, in order to train competent and humanized nursing professionals.

**Keywords:** Mental health; Students nursing; Nursing Research; Nursing.

## RESUMEN:

**Introducción:** Salud mental positiva se define como un estado de bienestar mental del cual poco se conoce en estudiantes de enfermería en Chile.

**Objetivo:** Evaluar el nivel de salud mental positiva y su relación con factores asociados en estudiantes de enfermería de una universidad.

**Método:** estudio cuantitativo, observacional, correlacional y transversal. Muestra de 179 estudiantes de Enfermería de una universidad chilena. Se aplicó cuestionario online para recabar antecedentes biosociodemográficos y académicos, y cuestionario de Salud Mental Positiva de Lluch, de mayo a junio del 2024, previa firma de consentimiento informado. Para el análisis de datos se aplicó estadística descriptiva e inferencial en programa Jamovi 2.5. Estudio fue formulado bajo los requisitos éticos de E. Emanuel, y fue aprobado por comités de ética respectivos.

**Resultados:** Un 56,4% de los estudiantes mostró un alto nivel salud mental positiva. De los seis factores del cuestionario, autocontrol y autonomía presentaron las medias más bajas. Año académico, presencia de trastorno de salud mental e intensidad del vínculo con personas con trastorno de salud mental resultaron significativas con el nivel de salud mental positiva.

**Conclusión:** Los estudiantes de enfermería mostraron un alto nivel de salud mental positiva. Es necesario generar estrategias para reforzar la salud mental positiva de los estudiantes como factor protector, a fin de formar profesionales de enfermería competentes y humanizados.

**Palabras clave:** Salud Mental; Estudiantes de Enfermería, Investigación en Enfermería, Enfermería.

## INTRODUCTION

Mental health is a state of mental well-being that allows people to cope with the stresses of life, develop all their abilities, learn and work properly, and contribute to their community. It is also a fundamental human right and an essential element for personal, community, and socioeconomic development.<sup>1</sup> Its promotion and preservation require a comprehensive approach that includes public health interventions, primary care strategies, and the active participation of nursing staff in the detection, prevention, and treatment of mental disorders.

Currently, the concept of positive mental health (PMH) has gained greater relevance within the field of mental health, defined as “a dynamic and fluctuating state in which the person tries to feel and be as well as possible within their circumstances”<sup>2</sup>. It corresponds to “a state in which the person is able to maintain a level of personal satisfaction with themselves and their life, a certain capacity to accept others and differing facts, a degree of emotional self-control and autonomy, is able to solve problems as they arise, maintaining an attitude of growth and self-actualization, and is able to establish and maintain satisfactory interpersonal relationships”.<sup>(2-6)</sup> Initially proposed by Jahoda<sup>(7)</sup> in 1958, this concept was later expanded and developed by Lluch-Canut, giving rise to the ‘Multifactorial Model of Positive Mental Health (MMPMH)’.<sup>(2-6)</sup>

The Chilean Health Code and the Code of Ethics for Nurses highlight the importance of guaranteeing the comprehensive well-being of people throughout their entire life cycle<sup>(8,9)</sup>. In this context, nurses play an essential role in health promotion and prevention, actively participating in the process of both physical and mental recovery and rehabilitation, thus contributing to a healthier society.

Therefore, a group of interest for current research is the mental health of nursing students, who are called upon to fulfill the previously described roles in the future. While in other countries the relationship between depression, anxiety, academic overload, and the level of PMH in students has been evidenced<sup>(10-13)</sup>, in Chile a previous meta-analysis

shows the presence of anxiety, depressive symptoms, and general psychological distress<sup>(14)</sup>, which was aggravated during the pandemic period<sup>(15)</sup>.

In response to this issue, the objective is to evaluate the level of Positive Mental Health (PMH) and its associated factors in nursing students at the University of Concepción, with the purpose of knowing their current state. This information will produce evidence to guide educational authorities in the design and implementation of mental health promotion and prevention strategies. All of this aims to contribute to student well-being, strengthen interpersonal relationships, promote appropriate decision-making, and, ultimately, ensure humanized nursing care with mental balance.

## **MATERIALS AND METHODS**

Type of study: quantitative, descriptive, correlational, and cross-sectional.

Population: Comprised of 1,166 nursing students from the first to the fifth year, from the 3 campuses of a university in southern Chile.

Sample: non-probabilistic, by convenience with consecutive sampling. Consisting of 179 students, calculated based on a formula with 95% confidence and 5% error.

Selection criteria: being a regular undergraduate student of the Faculty of Nursing, voluntarily accepting the invitation to participate in the study, and not being on medical leave at the time of the instrument's application.

Sample collection: participants were recruited through various means. One of these was an invitation via institutional email, which contained an informational link. At the same time, posters with a QR code were displayed in different places in the university neighborhood. Both the link and the QR code directed students to the informed consent and the data collection instrument.

Data collection instrument: Composed of two questionnaires, the first created by the author to collect biosociodemographic and academic data such as: age, gender, university campus, academic year, mental health courses taken according to the degree curriculum (Human Interaction, Nursing in Mental Health, Management of Care in Nursing in Mental Health; presence of a personal mental disorder, time since diagnosis of the mental disorder, contact with people with a mental disorder, bond with people with a mental disorder, and intensity of the bond), all of them supported by empirical evidence<sup>(11-14,16-21)</sup>. And the positive mental health questionnaire (PMHQ) consisting of 39 questions in a Likert format from 1 to 4. It measures the 6 factors of the PMH Model proposed by Lluç Canut: personal satisfaction, prosocial attitude, self-control, autonomy, problem-solving and self-actualization, and interpersonal relationship skills.<sup>4</sup> Previously validated in Chile, in this study it yielded a Cronbach's alpha of 0.93.<sup>(19)</sup>

Statistical analysis: Descriptive statistics with measures of central tendency, percentages, frequencies, and the Chi-square test<sup>2</sup> were used for inferential analysis in Jamovi version 2.5 software.

Ethical considerations: The project was approved by the ethics committees of the Faculty of Nursing and the Vice-Rectorate for Research and Development of the

University (CODE: CEBB 1606-2024). For this study, the ethical requirements proposed by Ezequiel Emanuel<sup>(22)</sup> based on the CIOMS guidelines were considered.

## RESULTS

The sample was characterized by an average age of 21 years with a standard deviation of 2.8 years, and was predominantly female (81.5%). 37% of the participants reported having a mental health disorder, and more than half reported having had previous contact with people with a mental health disorder, most of whom were family members. The remaining variables are described in Table 1.

**Table 1.** Characterization of nursing students.

Biosociodemographic variables	Categorization	Fr	%
Gender	Female	147	81.5%
	Male	31	17.9%
	Non-binary	1	0.6%
Presence of a mental disorder	Yes	66	37%
	No	113	63%
Mental disorder diagnosis time	Non applicable	113	63.1%
	No diagnosis	6	3.4%
	< 1 year	4	2.2%
	1-5 years	46	25.7%
	6-10 years	8	4.4%
	> 10 years	2	1.1%
Previous contact with people with a mental disorder	Yes	126	70.3%
	No	53	29.7%
Link with people with a mental disorder (non-exclusive)	Family relationship	51	28.4%
	Couple relationship	13	7.2%
	Friendship	77	43%
	Neighbor	2	1.1%
	Assistance relationship	18	10%
	Acquaintances	22	12.3%
	Does not know anyone	1	0.6%
Strength of the bond with people with mental disorder	Low	24	13.5%
	Medium	41	22.9%
	Strong	61	34.0%
	NR	53	29.6%

Source Own research.

**Table 2.** Academic characteristics of nursing students.

Academic variables	Categorization	Fr	%
University Campus	Chillán	36	20.1%
	Concepción	100	55.9%
	Los Ángeles	43	24.0%
Academic year	First	30	16.7%
	Second	32	17.9%
	Third	36	20.1%
	Fourth	48	26.8%
	Fifth	33	18.5%
Mental health subjects completed (non-exclusive)	None	51	28%
	Human interactions	111	62%
	Nursing in mental health	79	44%
	Management of care in nursing	74	41%
	Psychology	11	6%
	Other	4	2%

Source Own research.

Regarding the positive mental health questionnaire and its overall score, it showed that 56.4% had a high level of positive mental health, 41.3% a medium level, and 2.2% a low level. The descriptive analysis of each factor is summarized in Table 3. Overall, the self-control and autonomy factors had the lowest means compared to the rest of the evaluated factors. However, both remained within a range considered satisfactory. While these results are not alarming, they could be relevant from a formative perspective, as self-control and autonomy are key competencies for personal and academic development. Therefore, their lower score could indicate areas for improvement that should be addressed through educational strategies or specific interventions.

**Table 3.** Analysis of the factors of the Positive Mental Health Questionnaire.

Factor	Item	m	SD	(1)	(2)	(3)	(4)
F1: Personal satisfaction	(*) I like the way I am	2.6	1.0	14%	34%	28%	24%
	(**) I'm about to burst	3.0	0.9	34%	43%	16%	7%
	(**) To me, life is monotonous and boring	3.0	0.9	48%	35%	11%	5%
	(**) I see my future in a negative light	3.3	0.9	56%	26%	11%	7%
	(**) I consider myself someone less important than others	3.2	1.0	48%	29%	14%	9%
	(**) I think I'm useless and good for nothing	3.4	0.9	58%	28%	8%	6%
	(**) I am unsatisfied with myself	2.8	1.0	28%	40%	20%	12%
	(**) I am unsatisfied with my physical appearance	2.6	1.1	20%	39%	19%	23%
	Factor total score	24.1	5.9				
	Minimum/Maximum factor score	8/32					
F2: Prosocial attitude	(**) I find it difficult to accept others when they have different attitudes than mine.	3.4	0.6	52%	40%	48%	-
	(**) I find it difficult to listen to people who tell me their problems.	3.7	0.5	77%	20%	3%	-

Factor	Item	m	SD	(1)	(2)	(3)	(4)
	(*) I think I am trustworthy.	3.6	0.6	1%	6%	25%	68%
	(*) I think about the needs of others	3.4	0.6	1%	7%	49%	44%
	(*) When there are changes in my environment, I try to adapt.	3.7	0.6	-	4%	22%	74%
	Factor total score	17.8	1.8				
	Minimum/Maximum factor score	5/20					
F3: Self-control	(**) I am easily blocked by problems	2.8	0.9	24%	45%	21%	10%
	(*) I am able to maintain self-control when I'm experiencing negative emotions	2.7	0.9	6%	36%	39%	20%
	(*) I am able to maintain self-control when I'm having negative thoughts.	2.9	0.9	7%	27%	40%	26%
	(*) I am able to keep a good level of self-control under conflictual situations.	2.9	0.8	4%	25%	45%	26%
	(*) When under unfavorable external pressure, I keep my personal balance.	2.7	0.5	9%	30%	43%	18%
	Factor total score	14	3.5				
	Minimum/Maximum factor score	5/20					
F4 Autonomy	(**) I am very concerned about what others think about me.	2.6	1.1	25%	34%	20%	21%
	(**) The opinions of others influence me when making decisions.	2.8	1.0	25%	38%	25%	12%
	(**) I worry about people criticizing me.	2.7	1.1	24%	36%	21%	19%
	(**) I find it difficult to have personal opinions.	3.4	0.8	55%	33%	10%	3%
	(**) When I have to make important decisions, I feel insecure.	2.5	0.9	11%	44%	26%	19%
	Factor total score	13.9	3.7				
	Minimum/Maximum factor score	5/20					
F5 Problem-solving and self- actualization	(*) I am capable of making decisions for myself.	3.2	0.8	3%	16%	39%	43%
	(*) I try to find the positive aspects of the bad things that happen to me.	2.9	0.9	7%	27%	37%	28%
	(*) I try to improve as a person.	3.6	0.7	2%	4%	27%	66%
	(*) When there are changes in my environment, I try to adapt.	3.2	0.7	1%	13%	50%	36%
	(*) When faced with a problem, I am able to request information.	3.1	0.8	2%	21%	40%	37%
	(*) Changes that occur in my usual routine stimulate me.	2.7	0.9	6%	41%	34%	18%
	(*) I try to develop and enhance my good skills.	3.3	0.8	2%	11%	40%	47%
	(*) I am able to say no when I want to say no.	2.9	0.9	6%	25%	40%	29%
	(*) () When a problem arises, I try to look for possible solutions.	3.5	0.7	-	11%	31%	58%
	Factor total score	28.4	4.6				
	Minimum/Maximum factor score	9/36					
F6: Interpersonal relationship skills	(**) () I find it especially difficult to give emotional support.	3.3	0.8	47%	38%	10%	5%
	(**) I have difficulties establishing interpersonal relationships.	3.0	0.9	33%	44%	17%	6%
	(*) I believe I have a great ability to put myself in others' shoes.	3.2	0.9	6%	13%	37%	44%
	(*) I consider myself a good professional.	2.3	0.9	18%	41%	32%	8%



Factor	Item	m	SD	(1)	(2)	(3)	(4)
	(*) I think I am a sociable person.	2.8	1.0	9%	32%	32%	26%
	(**) I find it especially difficult to understand the feelings of others.	3.3	0.8	47%	42%	7%	4%
	(**) I have difficulties relating openly with my professors/bosses.	3.1	0.9	41%	37%	15%	8%
	Factor total score	21.0	3.7				
	Minimum/Maximum factor score	7/28					

Source Own research.

(\*) Positive item (4) Always or Almost Always; (3) Quite Frequently; (2) Sometimes; (1) Never or Almost Never

(\*\*) Negative item (reversed) (1) Always or Almost Always; (2) Quite Frequently; (3) Sometimes; (4) Never or Almost Never.

In the inferential analysis shown in Table 4, a significant association was observed between the academic year, the presence of a personal mental disorder, the intensity of the bond with a person with a mental disorder, and the level of positive mental health.

**Table 4.** Factors associated with the level of positive mental health (PMH)

Variable	Category	PMH level			Chi²	p
		Low	Medium	High		
Gender	Female	4 (3%)	63 (43%)	79 (54%)	4.2	0.38
	Male	-	10 (32%)	22 (69%)		
	Non-binary	-	1 (100%)	-		
Campus	Chillán	1 (3%)	18 (50%)	17 (47%)	8.84	0.07
	Concepción	-	38 (38%)	62 (62%)		
	Los Ángeles	3 (7%)	18 (42%)	22 (51%)		
Academic year	First	-	9 (30%)	21 (70%)	15.5	0.04*
	Second	-	19 (59%)	13 (41%)		
	Third	1 (3%)	18 (50%)	17 (47%)		
	Fourth	1 (2%)	21 (44%)	26 (54%)		
	Fifth	2 (6%)	7 (21%)	24 (73%)		
MH subjects						
Human interactions	Yes	3 (3%)	45 (41%)	63 (57%)	0.34	0.85
	No	1 (2%)	29 (43%)	38 (56%)		
Nursing in mental health	Yes	2 (3%)	28 (35%)	49 (62%)	2.03	0.36
	No	2 (2%)	46 (46%)	52 (52%)		
Management of care in nursing in mental health	Yes	2 (3%)	25 (34%)	47 (64%)	2.99	0.22
	No	2 (2%)	49 (47%)	54 (51%)		
Psychology	Yes	-	4 (36%)	7 (64%)	0.44	0.8
	No	4 (2%)	70 (42%)	94 (56%)		
Other	Yes	-	2 (50%)	2 (50%)	0.2	0.91
	No	4 (2%)	72 (41%)	99 (57%)		
None yet	Yes	-	24 (47%)	27 (53%)	2.31	0.32
	No	4 (3%)	50 (39%)	74 (58%)		
Mental health disorder	Yes	2 (3%)	37 (56%)	27 (41%)	10.2	0,006**
	No	2 (2%)	37 (33%)	74 (65%)		
Previous contact	Yes	4 (3%)	47 (37%)	75 (60%)	6.45	0.38

Variable	Category	PMH level			Chi <sup>2</sup>	p
		Low	Medium	High		
Intensity of the bond	No	-	11 (42%)	15 (58%)	13.6	0,009**
	Does not remember	-	7 (70%)	3 (30%)		
	Does not know	-	9 (53%)	8 (47%)		
	Low	1 (4%)	11 (46%)	12 (50%)		
	Medium	3 (7%)	7 (17%)	31 (76%)		
	Strong	-	29 (48%)	32 (52%)		

Source Own research. \*p<0.05, \*\*p<0.01

## DISCUSSION

According to Lluch's multifactorial model, positive mental health consists of six factors that explain mental well-being. For nursing students, this is fundamental in order to strengthen their emotional development and face both daily demands and the teaching-learning process in higher education. The results of this study indicate a high level of positive mental health among students, reflecting a favorable state of mental well-being. This is demonstrated by very good personal satisfaction, prosocial attitude, and problem-solving and self-actualization capacity, in addition to good levels of self-control, autonomy, and interpersonal relationship skills, which would lead them to cope in a mentally healthy way with the adversities posed by the higher education process.

The results of this study show that Chilean nursing students have a high level of positive mental health (PMH), which matches findings reported in other countries such as Mexico and Peru.<sup>(11,12,18,20)</sup> At the same time, the results obtained from this research are more positive than those obtained in studies from Europe and the Middle East<sup>(13,14,21)</sup> where PMH levels were mostly moderate. These differences could be influenced by contextual factors such as the characteristics of the educational system, perceived social support, or the specific sociocultural conditions of each region.

Therefore, it is necessary to develop strategies to improve the level of PMH by strengthening students' security through self-control, stimulating decision-making by improving autonomy, and training skills to establish healthy interpersonal relationships. From an academic standpoint, it is necessary to strengthen each of the factors involved in the PMH model through workshops, courses, and interdisciplinary activities where students can strengthen these aspects.

One particularly noteworthy finding is the significant relationship between the presence of a mental health disorder and the level of PMH. Multiple studies have shown that mental health conditions and the intensity of the bond with people with mental disorders are related to a low level of mental health.<sup>(12,16,20)</sup> According to the two-continua model of health and illness, an individual with a mental disorder can have a good level of mental health if they have social, family, and educational support that allows them to fully develop their potential.<sup>(23)</sup> Furthermore, the maturity acquired during the years of study and interaction with people living with mental health problems could favor the emotional well-being of students across its different factors. Integrating mental health topics early in the curriculum would therefore be beneficial. This approach has been shown to promote better positive mental health. These results call for further research on this topic and the variables that could influence this phenomenon.



Regarding the first factor of the Positive Mental Health Questionnaire (PMHQ), which evaluates personal satisfaction with life and future prospects,<sup>(4)</sup> the results of this research indicate that nursing students show a high level of personal satisfaction, although some show a rather negative view of themselves, as was evidenced in another study that associates a lack of self-esteem with this particular factor<sup>(13)</sup>. It is relevant to mention that a higher level of personal satisfaction is associated with greater motivation and academic adherence. Therefore, this highlights the need to promote mental health in different areas—family, social, educational—and even through the creation of self-esteem workshops in mental health courses within the curriculum to stimulate personal satisfaction in those who will soon enter the workforce.

The Prosocial Attitude dimension evaluates social sensitivity, the desire to help others, and the acceptance of differences.<sup>(4)</sup> This study showed that students have an excellent prosocial attitude, a skill that must be valued and strengthened to ensure humanized care in the nursing profession. Providing an academic environment that promotes physical and emotional well-being, along with solid ethical and professional training, will better prepare future nurses to assume active and committed roles in patient-centered care.<sup>(24)</sup>

The Autonomy and Self-Control factors are closely linked emotional competencies, and they are fundamental for the psychological well-being and academic performance of nursing students. Self-control, which involves the ability to manage stress, maintain emotional balance, and tolerate anxiety,<sup>(4)</sup> was one of the factors with the lowest scores in this study, in line with previous research on university students.<sup>(12)</sup> Similarly, although autonomy levels were adequate, a tendency to be influenced by external opinions when making important decisions was observed, suggesting an area for improvement in self-confidence and personal independence.<sup>(4)</sup> These weaknesses can affect clinical decision-making and emotional management in high-demand contexts, typical of the academic and healthcare environment in nursing.<sup>(13,25)</sup>

Given their impact on positive mental health and professional training, it is recommended to implement joint interventions that strengthen both competencies. Among these are workshops on emotional skills and decision-making, mindfulness practices for stress management, and the use of clinical simulations and problem-based learning, which allow students to face scenarios of uncertainty, develop self-regulation, and consolidate functional autonomy.

The Problem-Solving and Self-Actualization factor evaluates the capacity for analysis, decision-making, and flexibility to adapt to changes, promoting continuous personal development.<sup>(4)</sup> In general, students show a good level in this dimension, although they stand out with a low score in their response to changes in routine. About half of the respondents do not feel motivated by changes, which could reflect a lack of flexibility or resistance to uncertainty. This aspect is crucial, as the ability to adapt is essential both professionally and personally. According to some authors, students with a "growth mindset" cope better with uncertainty, viewing changes as challenges and opportunities, whereas low stimulation in the face of change could indicate a fixed mindset, generating resistance.<sup>(26)</sup> It would be important to confront students with daily problems where they can deal with situations of frustration. Academia needs to foster active pedagogical strategies where the student-in-training is faced with situations of stress and uncertainty that require decision-making, such as problem-based learning, case resolution, and

simulation scenarios where they can experience challenges and the management of major decisions, in order to develop flexibility in the face of change.

The Interpersonal Relationship Skills factor evaluates the ability to communicate, establish intimate relationships, and show empathy. In nursing, these skills are essential for effective communication and for creating a relationship of trust with patients and also with the work team.<sup>(27)</sup> Although students show strengths in emotional support and empathy, the lowest-scoring item in the factor, "I consider myself a good professional," has the lowest score, along with "I think I am a sociable person." In nursing, being a good professional is more associated with technical competencies, and being sociable does not always mean being extroverted.<sup>(27)</sup> Many effective nurses are reserved but excel in their active listening and deep empathy.<sup>(28)</sup> Good professionals must combine technical and emotional skills to provide comprehensive care that addresses both the physical and emotional needs of patients.<sup>(29)</sup> Therefore, it is considered fundamental that, from undergraduate training, skills be stimulated that allow students to critically reflect on the concepts of being social and being a good nursing professional, understood not only from a technical perspective but also from a relational and emotional one. Strengthening this dimension is key to guaranteeing comprehensive, high-quality care for the user, as well as to fostering a healthy and collaborative organizational environment in healthcare teams.<sup>(30)</sup>

Undoubtedly, this study has limitations and potential biases that could have influenced the results. First, social desirability is recognized as a latent bias, as some students might have tried to project a positive self-image, despite the anonymity of the responses being guaranteed. Another significant limitation was the focus on a single Faculty of Nursing, which restricts the generalizability of the findings to other academic contexts; however, the results obtained are consistent with evidence reported in international studies. Despite this, this weakness opens new opportunities for research on the topic, strengthening the nursing discipline.

In the future, focused interventions could be implemented to improve self-control and autonomy, and their impact on professional training and practice could be assessed, thereby enriching the nursing discipline.

## CONCLUSIONS

Nursing students show a high level of positive mental health; however, enhancing self-control and autonomy could foster a more integral and humanized development. It is fundamental to implement strategies from the beginning of their training, such as psychological support and activities that strengthen mental health self-care, to prepare resilient and competent professionals.

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