

Review of: "Perceptions and Experiences of Human Right Violations of People Living with Mental Illness: A multi-centre descriptive cross-sectional study in Nigeria"

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Potential competing interests: No potential competing interests to declare.

REVIEW FOR: Perceptions and Experiences of Human Right Violations of People Living with Mental Illness: A multicentre descriptive cross-sectional study in Nigeria

Abstract:

The abstract is clear and well-structured.

Introduction:

More literature is needed in the introduction; the background of the study is not well elaborated. Moreover, readers need more background on the context in which the study was conducted: the Nigerian culture, the family structure in Nigeria, the quality of mental health care provided in Nigeria, etc. Have there been any progress over the past years? Are there legislations to protect the rights of people with mental illness in Nigeria? How are people with mental illness referred to care centers? Are there self-referrals, or is it a family member who refers them? Have there been any awareness campaigns about mental illness and the rights of people with mental illness over the past?

The aim and purpose of the study are not well delineated. Where are the hypotheses or the research questions?

Moreover, where is the statement of the significance of the study?

Methodology:

In 2.2, Description of the research settings: It appears that 2 of the 4 facilities used to collect the data are exclusive mental health care centers (A and C), while the other 2 are facilities integrated into the general care system. This is a factor that should have been taken into consideration by the authors. Self-perceptions of people with mental illness seeking help at an integrated facility may be different from those of people with mental illness receiving help from a somewhat "segregated" facility.

In 2.3, there is an error in the last sentence of the section: *Using proportionate stratified sampling, 227 participants were enrolled in the study from each of the four study settings.* There was a total of 227 participants across all 4 facilities.

In 2.5. and 2.7, the authors do not mention anything about obtaining informed consent from the participants.



Results:

Error in Table 4: SA should be added instead of repeating A twice.

It is not clear why the Research Hypotheses are listed in the Results section for the first time! These should be clearly stated in the Introduction.

Discussion

The discussion section is not elaborate enough. There should be more discussion, more analysis, more interpretation. It would be a good idea to interpret the results in light of all the demographic variables, to relate these to the Nigerian cultural, religious, and social context. The originality of the study lies in its rootedness in the Nigerian context, so the readers expect a more in-depth discussion here.

Furthermore, a more insightful discussion was expected as to the significance of such findings in relation to the context of mental health care in Nigeria. The implications of this study are not well elaborated: it is very interesting to see, for instance, that most of the stigmatizing experiences stem from family and friends (the private and informal sphere, as the authors call it). How can this study serve to improve such a situation? What are the implications for family involvement in the therapeutic process of any person with mental illness? etc.

Lastly, a more thorough discussion was expected with respect to the different types of disorders. Why are trauma-related disorders better assimilated or perhaps less stigmatized than other disorders? Why are eating disorders stigmatized at all? What is meant by personality disorders? Etc..

Many questions remain unanswered. We strongly recommend a deeper analysis of the statistical findings.