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PERFORMANCE EVALUATION OF STAFF WORKING IN PRIMARY MENTAL HEALTH CARE UNITS AT PRIMARY HEALTH CARE CENTERS

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ABSTRACT

Introduction: The quality of care provided by Primary Mental Health Care Units (PMHCUs), which serve as a cornerstone for delivering community-based mental health services depends largely on the performance of their staff. Consequently, systematic performance assessment is essential for evaluating competence, identifying training gaps, and enhancing service effectiveness; yet, despite this importance, current assessment procedures are often inadequate. **Objectives:** To evaluate the performance of staff in Primary Mental Health Care Units (PMHCUs) at primary health care centers in Kirkuk City, and to examine associations with demographic and professional variables (gender, educational level, training, years of experience, and willingness to work in these units). **Methods:** A descriptive cross-sectional study was conducted involving 78 staff members from primary health care units, selected using a convenience sampling method between June 25 and July 15, 2026. Data were collected via a self-administered questionnaire comprising demographic questions and an Arabic-language staff performance assessment tool—a validated instrument used for quality improvement in primary health care units. Relationships were analyzed using descriptive statistics (frequencies, percentages, arithmetic means, and standard deviations) and inferential statistical tests. Ethical approval was obtained from the Kirkuk Health Directorate, and participants signed a written informed consent form. **Results:** The overall performance of personnel in primary mental health care units was moderate to high (mean = 3.42, SD = 0.58), with 57.7% of participants achieving scores in the moderate to high level. Basic competencies received the highest rating (mean = 3.85; 79.5% acceptable), while continuous training (mean = 2.91; 65.4%), updated clinical knowledge (mean = 2.76; 71.8%), and crisis management skills (mean = 2.88; 69.2%). Staff performance was significantly positively associated with training exposure (mean = 3.55; $F = 4.26$, $p = 0.018$) and educational qualification (mean = 3.48; $t = 3.12$, $p = 0.003$), but there was a significant negative association with sex (mean = 2.72; $t = 3.45$, $p = 0.002$). Additionally, there were considerable positive associations between performance and years of experience (mean = 3.62; $t = 3.89$, $p = 0.001$) and willingness to work in PMHCUs (mean = 3.69; $t = 4.14$, $p < 0.001$). These results highlight the necessity of focused ongoing professional development and actions to improve clinical expertise and crisis management skills. **Conclusions:** Staff in primary mental health care units demonstrated performance levels ranging from average to excellent, with "core competencies" emerging as a key strength; however, notable gaps were observed in crisis management, periodic training, and familiarity with the latest clinical knowledge. Higher academic qualifications, intensive training, years of practical experience, and a readiness to work in these units were strongly associated with outstanding performance, although the impact of these factors varied by gender. **Recommendations**: Enhancing staff performance through continuous competency-based training, ongoing professional development, empathy-based supervision, periodic performance evaluations, and regular, effective clinical education—with a particular focus on improving crisis management skills and supporting workforce development in Community Mental Health Units (PMHCUs).

KEYWORDS: Primary mental health care, Staff performance, Mental health services, Professional development.

INTRODUCTION

Modern healthcare systems have increasingly focused on strengthening mental health services within the primary care framework, driven by the rising prevalence of mental disorders that entail severe individual, societal, and economic consequences; these disorders lead to a marked decline in quality of life, hinder productivity, and negatively impact overall public health outcomes (Lebedyn et al., 2024).

Primary mental health care units serve as a cornerstone of community-oriented care; they are designed to provide accessible, rapid, and sustainable mental health services, thereby facilitating prevention, early detection, and appropriate intervention, while also enhancing the quality of life for patients and their families (Parker et al., 2023).

The effectiveness of primary mental health care units is fundamentally influenced by the competence and performance of their staff, as these practitioners play a pivotal role in delivering high-quality mental health services. Their professional capabilities extend beyond clinical tasks to encompass effective communication, sound clinical decision-making, crisis intervention, adherence to evidence-based treatment protocols, and a commitment to continuous professional development. Conversely, any shortcomings in staff performance can significantly undermine the quality, efficiency, and effectiveness of mental health services, ultimately leading to poorer patient health outcomes and reduced service user satisfaction (Sacre et al., 2022).

From a health systems perspective, systematic performance valuation is a crucial tool for enhancing quality; it helps identify the strengths and shortcomings of health personnel, assess training needs, and formulate evidence-based professional development strategies. Furthermore, such assessment supports health policymakers in establishing mechanisms to strengthen workforce capabilities and improve health system outcomes—particularly in the field of mental health services, which require specialized skills and the continuous updating of professional knowledge (Doshmangir et al., 2025).

However, many primary mental health care units continue to face challenges stemming from the absence or inadequacy of structured performance assessment frameworks; this hinders the accurate evaluation of staff competence and the development of targeted, evidence-based training initiatives. Furthermore, disparities in academic qualifications, professional backgrounds, training experiences, and levels of motivation to work in the mental health field can impact staff competence and the overall quality of mental health service delivery (Ominyi et al., 2025).

Health facilities in Kirkuk are striving to strengthen mental health services within the primary care system, highlighting an urgent need for evidence-based research to assess staff competence and examine relevant issues. Such research is of critical importance given current challenges, including limited resources, rising demand for mental health services, and the need for sustainable professional development programs for healthcare providers.

This research aims to evaluate the competence of staff working in primary mental health units within primary health care centers in Kirkuk, and to examine the relationship between this competence and specific demographic and professional factors—such as gender, educational level, training experience, length of service, and willingness to work in these units. The findings are expected to contribute to building an evidence base that supports enhancing the quality and efficiency of mental health services in primary care settings.

METHODOLOGY

Study Design: A descriptive cross-sectional study was conducted involving staff in primary mental health care units at primary health care centers in Kirkuk City to evaluate staff performance and examine its association with certain demographic and professional characteristics.

Study Population and Sampling: Seventy-eight employees of Primary Mental Health Care Units made up the study population. Participants were chosen based on their availability and willingness to take part in the study using a non-probability convenience selection technique.

Period of Data Collection: From June 25 to July 15, 2026, a total of 21 days were spent gathering data.

Instrument of Data Collection: Data were collected using a self-administered structured questionnaire consisting of two sections: Demographic and occupational characteristics, and, the validated Arabic version of the "Staff Performance Evaluation Questionnaire (SPEQ) (Dahiru & Almustapha, 2024), for Quality Improvement in Primary Mental Health Care Units" Which measures staff performance across multiple domains, including basic competencies, continuous training, updated clinical knowledge, and crisis management skills.

The self-administered structured questionnaire had two sections: demographic and occupational characteristics, The validated Arabic version of the "Staff Performance Evaluation Questionnaire (**SPEQ**) for Quality Improvement in Primary Mental Health Care Units," which measures staff performance across multiple domains, including basic competencies, ongoing training, updated clinical knowledge, and crisis management skills, was used to gather data.

Ethical Considerations: The Kirkuk Health Directorate granted ethical permission. Before any data was collected, each participant provided written informed consent. Throughout the study, voluntary participation, confidentiality, and anonymity were guaranteed.

Data Analysis: Both descriptive and inferential statistical techniques were used to analyze the data. Staff performance levels across domains were described using descriptive statistics (frequencies, percentages, mean values, and standard deviations). The t-test and ANOVA, were used to investigate relationships between staff performance and a number of characteristics, such as sex, educational background, years of experience, previous training exposure, recent training participation, and willingness to work in the units. Statistical significance was defined as $p < 0.05$.

RESULTS

Table 1: Staff Performance by Domains (n = 78).

Domain	Mean	SD	Level	Frequency (n)	Percentage (%)
Overall performance	3.42	0.58	Moderate–High	45	57.7%
Basic competencies	3.85	0.49	Acceptable	62	79.5%
Continuous training	2.91	0.63	Deficient	51	65.4%
Updated clinical knowledge	2.76	0.71	Deficient	56	71.8%
Crisis management skills	2.88	0.66	Deficient	54	69.2%

According to Table 1, 78 employees of Primary Mental Health Care Units participated in the study. Overall, 57.7% of participants had (moderate to high) staff performance (mean = 3.42, SD = 0.58). With 79.5% of people attaining acceptable skill levels, fundamental competences showed the best performance (mean = 3.85, SD = 0.49). Continuous

training (mean = 2.91, SD = 0.63; 65.4%), updated clinical knowledge (mean = 2.76, SD = 0.71; 71.8%), and crisis management skills (mean = 2.88, SD = 0.66; 69.2%) all showed lower performance scores.

Table 2: Association between Staff Performance and Study Variables (n = 78).

Variable	Mean ± SD	t / F value	p-value	Interpretation
Sex	2.72 ± 0.70	t = 3.45	0.002	Negative association
Educational Qualification	3.48 ± 0.61	t = 3.12	0.003	Significant positive association
Current Training	3.55 ± 0.57	F = 4.26	0.018	Significant positive association
Years of Experience	3.62 ± 0.54	t = 3.89	0.001	Significant positive association
Desire to Work in the Units	3.69 ± 0.50	t = 4.14	<0.001	Strong positive association

Table 2 demonstrates that staff performance was significantly associated with all evaluated variables ($p < 0.05$). Staff performance was inversely associated with sex, but positively associated with (years of experience), (education), (current training), and (desire to work in the units). Desire to work in the units showed the largest positive association ($p < 0.001$) with staff performance among these characteristics.

DISCUSSION

This findings display that staff performance in Primary Mental-Health Care Units, in general (moderate to high), with strong performance in "basic competencies". This result is in line with recent evidence from countries with low or middle incomes showing that primary care staff can attain acceptable mental health competencies following the integration of Psychiatric health services into primary care through structured continuous training and coordinated care approaches (Park et al., 2023; Whitfield et al., 2023). Additionally, it is consistent with recent (MH GAP) implementation data showing that competency-based, recurrent, and continuously supervised training improves the performance of non-specialist providers (Keynejad et al., 2023).

However, the study found significant gaps in crisis management abilities, current clinical knowledge, and ongoing training. These results align with WHO guidelines that show shortages in emergency mental health competence, supervision, and ongoing professional development among primary care providers in many low- and middle-income countries (World Health Organization [WHO], 2023). According to current mhGAP implementation assessments, refresher courses, clinical supervision, and mentoring should be used in addition to one-time training since it is insufficient on its own (Keynejad et al., 2023).

The important association between "higher educational qualification" and improved staff performance is enhances by recent health workforce evidence showing that Stronger academic preparation improves clinical reasoning, evidence-based decision-making, and quality of service delivery in primary care, according to recent health care workforce research, which supports the strong relationship between higher educational qualification and better performance among staff (Cometto et al., 2022). Likewise, the positive relationship between years of experience and performance is consistent with workforce research signifying that accumulated clinical experience improves provider Self-confidence and competency in regular management mental health conditions (WHO, 2023).

On the other hand, continual training only earned a modest grade (Mean = 2.91), suggesting that there are still not enough options for further professional growth. Similar to other domains, updated clinical knowledge (Mean = 2.76) and crisis management abilities (Mean = 2.88) were lower, indicating deficiencies in upholding current evidence-based practice and successfully handling crises or difficult circumstances. These results highlight the necessity of

competency-based training, recurring refresher courses, and ongoing professional development programs to keep staff members up to date on changing clinical recommendations and best practices (Chen, et al., 2026).

The association shown between “willingness to work” in mental health Unites and improved performance emphasizes the significance of job preference and motivation. Motivated healthcare professionals are more likely to engage in continuing education, apply evidence-based practices, and perform better clinically, according to recent study on the health workforce. (Cometto et al., 2022).

In contrast, sex was strongly related with performance; nevertheless, this data should be taken carefully. According to recent workforce literature research observed gender inequalities in performance are more likely to reflect differences in professional responsibilities, access to training opportunities, workplace support, and organizational environment than innate aptitude (WHO, 2023). Therefore, more investigation is necessary to elucidate this association.

Overall, the results show that training exposure, educational attainment, professional experience, and motivation are the main factors influencing staff performance in Primary Mental Health Care Units. To improve the quality of primary mental health services in Iraq, it is imperative to strengthen ongoing professional development, increase access to updated competency-based mental heal]th training, and institutionalize supportive supervision (WHO, 2023; Keynejad et al., 2023).

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