

# Perception of Society on Mental Illness

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**Abstract**— Mental health literacy is the beliefs and knowledge about psychological state issues and their remedies. Attitudes and beliefs of lay individuals about mental health disorders are formed by personal knowledge about mental health disorders, knowing and interacting with someone living with mental illness, and cultural stereotypes. Mental health disorders are rising and the numbers are quite alarming in almost every part of the world, and hence compiling this review provides an opportunity to understand the different views regarding mental health disorders and problems as well as to fill the gap in the published literature by focusing only on the belief system and perception of psychological state problems among general population.

## 1. Introduction

**M**ENTAL illness is a psychiatric disorder or a state in which psychological well-being of an individual is imbalanced. In layman terms, it is impairment of mind to the human body. Such features may be persistent, remitting and relapsing or occur as a single episode. Mental illness is not just restricted to just depression, it is an umbrella consisting of many more disorders. The disorders include mood, personality, anxiety, psychotic and many more. Obsessive compulsive disorder, schizophrenia, bipolarity, AD/HD, dementia just some to name a few.

According to a report published by WHO in November 2019, more than 375 million cases of mental illness have been registered worldwide<sup>1</sup>. Around 7.5% of India is affected by the disorder and less than 4000 experts are available in the country<sup>2</sup>. Mental illnesses accounts for one-sixth of all health-related disorders in the nation. Primary problems are that the healthcare system for mental illness is not adequate in the country. Infrastructure is not up to the mark, there are no insurance facilities provided, experts in the field are not acknowledged and the worst is, people are not aware enough about the problems faced.

To our knowledge, the disorder has not been labelled accurately in the minds of citizens. Features of mental illness are often linked to paranormal causes and seeks spiritual healing. This might be due to the conservative mindsets in the Indian households.

The aims of this study were to determine levels of knowledge, perception, and attitude of various individuals towards Mental Illness, determine attitudes toward mental health help-seeking, and recognize sociodemographic predictors of correct knowledge and favorable attitudes among the society.

## 2. Review Literature

[Reuben et al., 2019] have made a correlational research paper with childhood lead exposure with adult personality traits as a dependent variable and Lifelong Mental Health as the independent variable. This prospective cohort study was supported a population-representative birth cohort of people born between April 1, 1972, and March 31, 1973, in Dunedin, New Zealand, the Dunedin Multidisciplinary Health and Development Study. Members were followed up in December 2012 when they were 38 years of age In this

longitudinal cohort study of 579 New Zealand children followed up for more than 3 decades, higher lead exposure in childhood was significantly related to higher psychopathology across the life course and with difficult personality traits in adulthood. A child's symptoms of mental illness were taken into consideration along with the corresponding adult's personality and child's internal and external problems. Multiple linear regressions testing was used. It's limitations as described by the researchers were "complete white population and variations could be recorded in under developing nations ." The researchers found out the significance between childhood lead exposure having long-term consequences for adult mental health and personality.

[Corrigan, et al., 2002] have proposed the problem of Public Stigma and Self stigma faced by people with mental illness. Public stigma is the reaction that the general population depict towards people with mental illness. Self-stigma is the prejudice which people with mental illness turn against themselves. These two stigmas can be better explained with the help of three key drivers- stereotypes, prejudices and discrimination. There exists a solution to the public stigma, categorizing into three main heads- education, protest, and contact. Inaccurate and hostile representations of mental illness has been displayed by media, news, and spread through word of mouth around the globe. Putting efforts into the three main heads would send strong messages to the media: STOP reporting inaccurate representations of mental illness. To the public: STOP believing negative views about mental illness. Models are developed to analyses the self-stigma in people suffering from mental illness. These models are tested on different sub -populations, including different ethnic groups and power-holders (legislators, judges, police officers, health care providers, employers, landlords). This research's denouement that people with mental illness may experience diminished self-esteem/self-efficacy, righteous anger, or relative indifference depending on the parameters of the situation, arising either from public, or self-stigma.

[Lasser K, et-al, 2000] Rate of usage of smoking and tobacco according to the number and type of psychiatric diagnoses. Formal study/meetings of prevalence of psychiatric disorder in the US. People of ages between 15 to 54 years were studied. It allowed to study prevalence of mental illness. SAS computer statistical package was used to conduct X<sup>2</sup> test to compare differences between groups in the proportion of persons who smoked and compare smoke rates with number of lifetime DSM-III-R diagnosis. Logistics regression is used to analyze mental illness as a predictor of

smoking, while controlling for sex, age and region. Respondents with history of mental illness had elevated smoking rates, and smoking rates were higher in persons who had mental illness in last month. Mentally ill people comprise a major tobacco usage market.

[Dr. Devi et al ,2015 ] have constructed a study on stress and its effects on college students. According to author, stress arises when the mixture of internal and external pressures exceeds the individual's resources. These critical years can also be weakened by depression, anxiety and stress. Further they stated that students are very likely to experience some pressures which may test their ability to cope: habituating to a new environment, becoming more independent, and dealing with numerous other issues. These challenges if not dealt with can only escalate and affect their academic performance, emotional and social well-being. Through the study the major sources of stress found have a direct relation with the stress level of students. The reasons for stress cannot be definite to these. It differs according to students and their psychology. They've created this based on various surveys and interviews conducted in and also by referring to various journals and papers. In inference, the results of this study are suggestive as to the necessary components of a stress management program specific to the needs of college students. Given the harmful effects of stress on health and academic performance, college administrators should consider incorporating stress management training in orientation activities. A better approach may be the use of a stress management workshop, specifically geared to the stressors encountered by college students. Certainly, stress in the college atmosphere cannot be eliminated but we can and should do a better job preparing students to manage and face it.

[Dev, et-al.,2017] have developed a descriptive, exploratory, cross-sectional survey design to assess the knowledge, awareness and attitudes of students in Delhi towards patients with mental disorders like depression and psychosis. The main purpose of this study was to assess the mental health literacy among students of Delhi University. A semi-structured interview, with a standardized tool, Mental Health Literacy(MHL) questionnaire was used for the purpose. The data was collected from 100 (50 males and 50 females) post graduate students from University of Delhi, India. Most of the subjects between 70% to 80% had awareness about identification of patients with mental disorders, whereas more than half, that is, 54% of the subjects had exact awareness to identify depression. Most of the subjects in the study rated psychiatrist and immediate community members as the most reliable help for the patients. Conclusions drawn from the study were that overall mental health literacy of Delhi University students was found to be adequate, but not satisfactory in the area of risk factors and stigmatization.

### 3. Research Methodology and design

#### 3.1. Subject-Area: Psychology

#### 3.2. Sub-Area: Perception of the Society on Mental Illness

#### 3.3. Research Problem: To Understand the views/perception of society on mentally ill people.

#### 3.4. Research Objective

3.4.1. Research Objective 1: To define/ understand the process of self-awareness about mental illness amongst people of different age, occupation and role.

3.4.2. Research Objective 2: To understand society's perception towards mental illness.

3.4.3. Research Objective 3: To understand various ways to tackle mental illness.

#### Research Design

#### 3.5. Data Sources – Primary and/or secondary

3.5.1. Primary data- surveys, interviews

3.5.2. Secondary- blogs, research papers, journals

#### 3.6. Tools – Survey and Questionnaire

#### 3.7. Analysis

-Determine the dependent and the independent variable of the research topic with respect to the field of mental illness.

-Seek advice from the Teacher in Charge (Ms. Vandana Bharadi).

-Prepare a rough draft of research design.

-Observe and learn from previous published research papers.

-Check feasibility of the project.

-Finalize research topic, population, sample, data, hypothesis.

-Conduct surveys / Personal Interviews on the sample.

-Note down the results / responses.

-Finally conduct the above on population.

-Summarize and consolidate the gathered data.

-Ultimately compose the research paper along with the help of Teacher in Charge.

### Hypothesis

We believe that millennials and gen z would understand the seriousness of the topic more than any other age group

We believe that female respondents would be most sympathetic towards mentally ill people

With increase in education level understanding of this topic may increase

We believe that students may have most open knowledge of the topic due to their varied data sources. Rest of the classes may be concerned about their work and family well-being when handling or being asked to deal with a mentally ill person.

## Variables Under Study

### INDEPENDENT VARIABLES

Male

Female

Others

### DEPENDENT VARIABLES

Age

Occupation

Education Level

City

## Data collection methods

The research study area was mainly conducted in Mumbai with respondents varying from various tier I and tier II cities. There was no age limit set since the subjects have been classified into different generations to which they belong. A sample size of 200 plus participants was expected.

Following steps were taken in data collection process. Knowledge about the research topic was gained with the help of few experts and via the internet. An informal personal interview was conducted of interviewees ranging from all generations in order to understand their views on the topic hence drafting a rough questionnaire. Later, the finalized questionnaire made on google forms was circulated on various media based on the internet. Those media include e-mail services, Whatsapp, etc.

The question types included dichotomous, Likert scale, etc. Open ended questions were avoided in order to refrain on losing participants. The data collected was mainly qualitative in nature thus, t-tests were performed amongst the variables. Information gathered was later extracted in excel sheets and coded to perform tests.

## Sampling design

The population for our research paper consists of all people who are aware or unaware about mental illness. For this, we have considered a sample size of 238 people using the Convenience Sampling method. The survey has respondents of age 16 and above.

## Data Analysis

To begin with we have analyzed the experiences of people and their meetings with people who are mentally ill. Our test shows that 32% people have had meetings with them whereas 17% people have studied or worked with them. This shows a very less frequency of people who have been around a psychiatric person.

Talking about the knowledge people have regarding mental illness, our survey and the T-test performed shows that 54% of the respondents believe that mental illness is caused by genetic inheritance whereas 25% disagree to it and the rest do not know the cause. Around 54% of the respondents feel that poverty can be the reason of mental illness and 28% disagree to it whereas 17% of them have no clue. Another cause that is God's punishment has been disagreed by maximum people (76%). Majority of our respondents of around 88% agree that past bad experiences in a person's life does affect his mental illness. Drugs/substance abuse and brain diseases are other major causes of mental illness where 85% and 77% accept it respectively. Lastly, our respondents believe that spirits do not play any role as 56% have disagreed and 25% do not know about it.

Another area that we have analyzed is the attitude towards psychiatric people. This has been analyzed using the answers we got by the Likert scale which is also in the table given. We have seen that around 103 people are neutral about the fact that mentally ill people can work and 75 people agree to it. Many people disagree or are neutral about the fact that they should be allowed to make decisions. A lot of people think that we are either sympathetic or indifferent towards people with mental illness. Our respondents strongly disagree that this illness should be kept as a secret from society. The sample feels that mental illness can be treated with medicines. Around 52 people also feel that they are unconcerned if they have to have a conversation with a mentally ill person and 79 people aren't afraid to do so. 97 people strongly disagree that psychiatric people are not to be blamed for their own condition whereas a small number of people think it is their own mistake.

## 4. Conclusion/implication

From the surveys conducted and the tests performed along with analyzing the charts made above, we can infer that millennials and gen z can understand the seriousness of mental illness and how important it is for society to build awareness towards it. We also can conclude that education does affect the society's perception and that it is important to make people aware about this topic. Students in particular have an advantage of having more knowledge about it compared to the others. Out of the 238 respondents, very few

people have worked with such psychiatric people and aren't aware about them. People are fairly aware about mental illness but most of their opinions were neutral which means they don't have strong facts supporting this topic. Using T-Test we could conclude that as the value of P is  $> 0.05$ , we accept the null hypothesis. This means, there exists no significant difference between the opinions of male and female regarding the causes of mental illness. This can also be proven with the help of T-Stat and T-Critical values.

T Stat value for both ( yes and no)  $< T$ -Critical value. This concludes that there exists no major difference between the point of views of male and female towards the causes that could lead to mental illness.

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## 6. Appendix

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