

Community attitudes towards mental illness

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ABSTRACT

This article reviews the literature on the community attitudes and suggestions are made for future research and lessons to be learnt from the experience in Zambia. Stigma, discrimination and social exclusion have been identified as important obstacles to the integration of people with mental illness in the community. The aim of this article was to determine the gender difference in attitudes towards mental illness in a sample of Chifubu District of Ndola Town residing in Zambia. The sample consisted of 344 residents of Chifubu District who were interviewed face-to-face about the attitudes towards mental illness. In conclusion the study reveals that women have a negative attitude towards mental illness than most men. The majority of women were afraid and not willing to work, live or keep relationships with people with mental illness. However more needs to be done to provide evidence based interventions to improve attitudes towards mental illness.

Key words: Illness, community, Mental.

Introduction

Accepting persons with mental illness has a great impact on their mental health. There is some improvement in mood, decision making, knowledge, and patients comfort [1-10]. Persons with mental illness experience a reduction in symptoms, relapse and hospitalization [11]. It is also important to show concern and compassion to persons with mental illness and providing them with affordable housing, this makes them feel at easy and pursue treatment. According to the main place organisation mental illness is as a result of a combination of genetic, biological, environmental and psychological factors.

Examples of mental challenges include addiction, depression, stress disorder, schizophrenia, substance use, anxiety disorder, and social phobia. A person with a mental illness presents with moody swings, strong feelings of anger, thoughts of death, low self-esteem, feelings of hopelessness, loss of interest in previously pleasurable activities, impaired concentration, insomnia or hyper insomnia and dramatic changes in eating [1]. A person with a mental illness is victimized by their disability and by their public prejudice and ignorance. He/she is rejected, deprived of society's resources, isolated and stigmatized [3]. Negative attitudes to persons with mental illness start at an early age as early as preschool and endure into early adulthood [12]. Our culture has not set up acceptable practices for dealing with mental illness. The prevailing approach has traditionally been desert the mentally and exclude them from the society. Misunderstanding of the causes of mental illness has contributed to social exclusion and to a general tendency to deal with mental challenges through denial

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[9].According to two identical opinion surveys done in UK, little change was recorded over 10 years, with over 80% endorsing the statement that “Most people are embarrassed by mentally ill persons” and about 30% agreeing “I am embarrassed by mentally ill persons” [4].

Aim

The aim of this was to determine the gender difference in attitudes towards mental illness in a sample of Chifubu District of Ndola Town residing in Zambia.

Method

A cross sectional study design was used. The sample size for the study was 384 but only 344 residents consented and a random location sampling was used. The broad range for inclusion was selected to obtain information about variables of interest across gender. Residents from the age of 16 and above were included and questionnaire used was designed by the Department of health Toronto, Canada, to assess the gender difference in attitudes towards mental illness. Face to face interviews were based on the questionnaire which included variables on socio-demographic characteristics and attitude towards mental illness. Interviewing took place between the 17th May and 30th June.

Ethical Consideration

Ethical approval was obtained from the Health Research and Ethics Committee of Tropical Disease Research Centre (TDRC) Ethical committee.

Grouping the statements

The study included statements on a range of attitudes towards mental illness. Respondents were asked to give their opinion on each attitude statement, using agree, neither agree or disagree and disagree.

The attitude statements are grouped into two categories for analysis purposes:

- i. Fear and exclusion of people with mental illness

- ii. Integrating people with mental illness into the community

Fear and exclusion of people with mental illness

There were 8 statements which were covered under this section and these portray a negative attitude towards mental illness. These include:

- i. ‘Locating mental health facilities in a residential area downgrades the neighbourhood’
- ii. ‘It is frightening to think of people with mental problems living in residential neighbourhoods’
- iii. ‘I would not want to live next door to someone who has been mentally ill’
- iv. ‘A woman would be foolish to marry a man who has suffered from mental illness, even though he seems fully recovered’
- v. ‘Anyone with a history of mental problems should be excluded from taking public office’
- vi. ‘People with mental illness should not be given any responsibility’
- vii. ‘People with mental illness are a burden on society’
- viii. ‘As soon as a person shows signs of mental disturbance, he should be hospitalized’

Analysis of these statements is based on the proportions of respondents agreeing with each.

Overall women agreed more to the negative statements about people with mental illness. The highest levels of agreement were with the statements ‘People with mental illness should not be given any responsibility’ (67.5%), ‘I would not want to live next door to someone who has been mentally ill’ (65.9%) and ‘A woman would be foolish to marry a man who has suffered from mental illness, even though he seems fully recovered’ (65.9%). One area in which women had a positive attitude was that less agreed to the statement that people with mental illness are a burden to the society.

Table 1: shows the percentages of levels of agreement to the above statements by sex

| % agreeing | Male n(%) | Female n(%) | P value |
|--|--------------|----------------|---------|
| Locating mental health facilities in a residential area downgrades the neighbourhood | 90(43.7%) | 116(56.3%) | 0.072 |
| It is frightening to think of people with mental problems living in residential neighbourhoods | 99(42.7%) | 133(57.3%) | 0.018 |
| I would not want to live next door to someone who has been mentally ill | 58(34.1%) | 112(65.9%) | 0 |
| A woman would be foolish to marry a man who has suffered from mental illness, even though he seems fully recovered | 47(34.8%) | 88(65.2%) | 0.001 |
| Anyone with a history of mental problems should be excluded from taking public office | 50(37.3%) | 84(62.7%) | 0 |
| People with mental illness should not be given any responsibility | 51(32.5%) | 106(67.5%) | 0 |
| People with mental illness are a burden on society | 64(53.3%) | 56(46.7%) | 0.124 |
| As soon as a person shows signs of mental disturbance, he should be hospitalized | 133(47.7%) | 146(52.3%) | 0 |

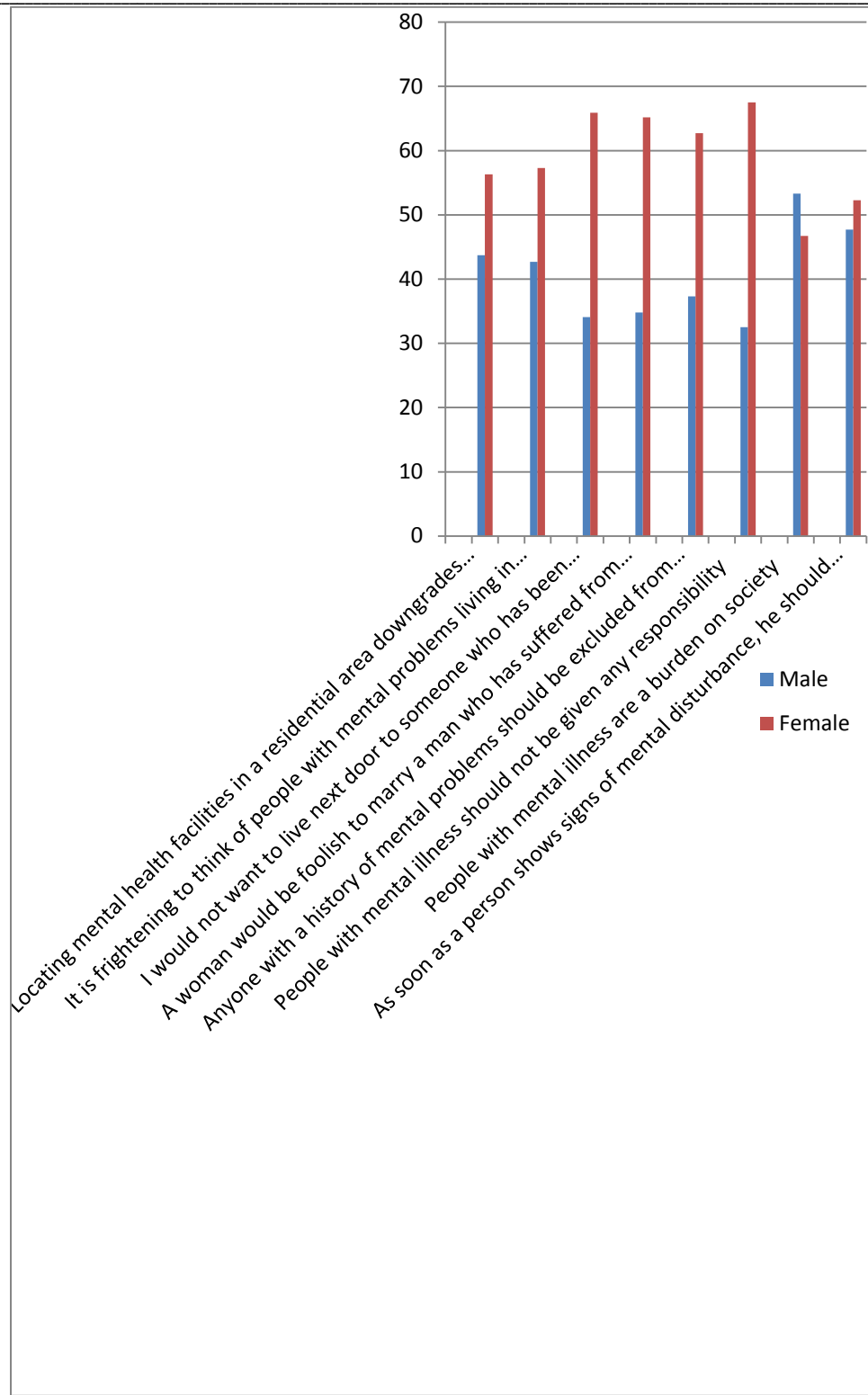


Fig 1: shows the bar graphs on the percentages of levels of agreement to the above statements by sex

Integrating people with mental illness into the community

There were 3 statements which were covered under this section and these included:

- ‘Most women who were once patients in a mental hospital can be trusted as babysitters’
- ‘Mental illness is an illness like any other’
- ‘People with mental health problems should have the same rights to a job as anyone else’

Analysis of these statements is based on the proportions of respondents agreeing with each. Men expressed a positive attitude to the above statements on integrating people with mental illness into the community. The highest level of agreement were with the statement ‘Mental illness is an illness like any other’ (57.9%). 55.4% of men agreed ‘Most women who were once patients in a mental hospital can be trusted as babysitters’ and 50.4% ‘People with mental health problems should have the same rights to a job as anyone else.’

Table 2: shows the percentages on agreement on integrating people with mental illness into the community by sex

| % agreeing | total n | men n% | women n% | P value |
|--|------------|-----------|-------------|---------|
| Most women who were once patients in a mental hospital can be trusted as babysitters | 112 | 55.40% | 44.60% | 0 |
| Mental illness is an illness like any other | 145 | 57.90% | 42.10% | 0.007 |
| People with mental health problems should have the same rights to a job as anyone else | 113 | 50.40% | 49.60% | 0.29 |

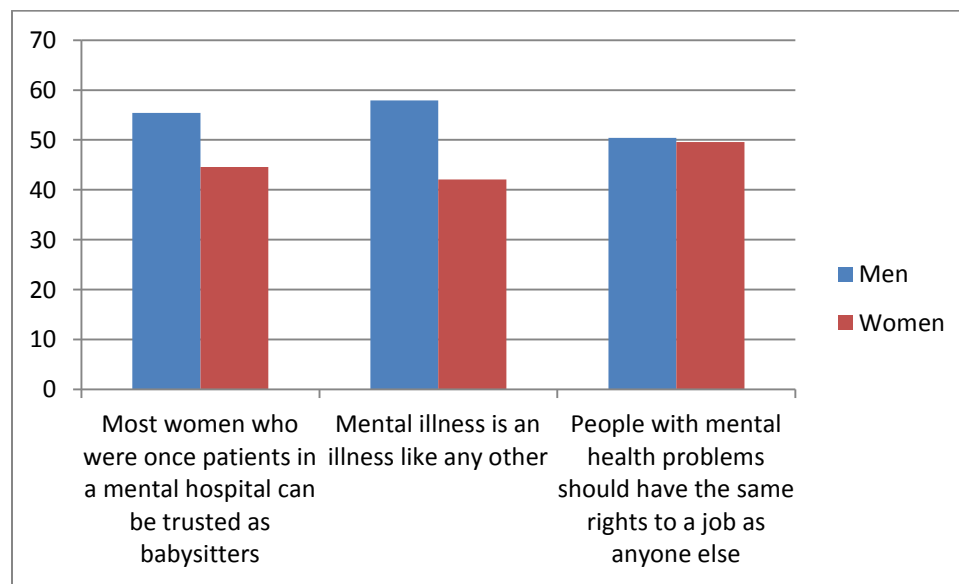


Fig 2: shows the bar graph on integrating people with mental illness into the community by sex

Results

Of the study sample 344 residents participated, 52.3% were female and 47.7% were men. Majority of the participants were aged 30 and below (248 participants) which accounts to 72.1%, those aged between 30 and 60 were 71 and accounts for 20.6% and those aged greater than 60 were 25(7.3%). Figure 1 show women had a negative attitude towards mental illness. Overall most women agreed to the negative statements for example most women agreed 'Locating mental health facilities in a residential area downgrades the neighbourhood' (P value 0.018), 'I would not want to live next door to someone who has been mentally ill' (P value 0.001) and 'People with mental illness are a burden on society' (P value 0.124). Figure 3 shows that Men had a better attitude towards mental illness for example more men believed mental illness is an illness like any other illness (P value 0.007) than women and most men also agreed that most women who were once patients in a mental hospital can be trusted as babysitters (p value 0). It was found by chance that most men agreed 'People with mental health problems should have the same rights to a job as anyone else' (P value 0.29).

Discussion

Female respondents were found to have negative attitudes towards mental illness than men in the community. This finding is in agreement with the study done in Qatar on Gender differences in the knowledge, attitude and practice towards mental health illness in a rapidly developing Arab society. Substantial evidence indicates that women are more nervous and afraid than men [22]. This is because women are less aggressive and rarely involve themselves in risk taking behaviours [23].

Study limitation

Most male did not consent to the study and respondents had challenging understanding the word mental illness because its commonly used in journals and official documents.

Conclusion

In conclusion the study reveals that women have a negative attitude towards mental illness than most men. The majority of women were afraid, nervous and not willing to work, live or keep relationships with people with mental illness. However more needs to be done to

provide evidence based interventions to improve attitudes towards mental illness.

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