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Research Paper



Mental Health Awareness Among Young Adults in A Metro City in Kerala

Nithya Abraham¹, Sandhya Cherkil^{2*}, Namitha Das³, TR John⁴, Deepak KS⁵

ABSTRACT

India is a country with about 30% of its population constituted by youth. Their perceptions and attitude towards mental health and associated issues will determine the extent of identification, help seeking and treatment compliance. This study attempts to understand the current levels of mental health awareness in young adults. A survey was conducted among 708 students of which 326 were male students and 382 were female students belonging to both arts and engineering courses from various colleges in a metro city in Kerala drawn using purposive sampling. The tool used was a check list of yes/no response developed by the authors after extensive search and reading of relevant survey tools. Results showed that 38% believed mental illness is a taboo. 27.5% believed that medications will cause side effects and 21.6% thought medications should be taken life-long. Males were more likely to use alcohol (p<0.001), tobacco (p<0.001) and narcotics (p<0.001) when under stress. Male students attempted or seriously contemplated suicide than female students (p=0.001) and more number of males sought psychological help (p=0.001). Females viewed mental health issues as a sign of personal weakness (p=0.03) and they were more likely to feel inferior if they had a mental health issue (p<0.001). Significantly more males perceived individuals with a mental health condition as dangerous (p=0.002). In contrast, women were more willing to be friends with individuals who have previously been treated for the same (p=0.003). Women were more willing to seek psychological help if they thought they had a mental health issue (p<0.001). Significantly more men believed that a person with mental health problem cannot be successful (p=0.043). Stigma and misconceptions regarding mental health are prevalent among young adults which needs to be addressed with awareness programmes that will sufficiently address these perceptions.

Keywords: Mental Health Awareness, Young Adults, Kerala

ccording to the World Health Organisation (2014), mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stressors of life, can work productively and fruitfully, and is able to

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¹Clinical Psychologist, Department of Psychiatry, Aster Medcity, Cochin, Kerala, India

²Psychologist, Department of Neurosciences, Aster Medcity, Cochin, Kerala, India

³Senior Specialist, Department of Psychiatry, Aster Medcity, Cochin, Kerala, India

⁴Senior Consultant, Department of Pyschiatry, Aster Medcity, Cochin, Kerala, India

⁵Lecturer-cum-statistician, Department of Community Medicine, Palakkad, Kerala, India

^{*}Corresponding Author

make a contribution to her or his community (WHO, 2014). As per India's Census 2011, 15-24 year olds in India constitutes one-fifth (19.1%) of India's total population and it is expected to rise to 34.33% by 2010. Adolescence and young adulthood are a period filled with physical, emotional and social changes. It is also a phase of life where individuals are faced with various kinds of stressors, causing many to develop mental health issues.

About 20-25 per cent of the young people suffer from mental health and substance use disorders worldwide (Patel, 2009). Recently concluded National Mental Health Survey of India (Gururaj et al. 2016) estimates the current prevalence of mental disorders in the age group of 18-29 years at 7.39 per cent (excluding tobacco use disorder) and lifetime prevalence at 9.54 per cent. The prevalence of mental disorders (excluding substance use disorders) in the age group of 13-17 years is reported to be 7.3 per cent. The young people also suffer a high rate of self-harm, with suicide being a leading cause of death (Aaron et al., 2004). About half of all the mental illnesses are known to begin by the age of 14 and three-quarters by mid-20s (Wagner et al. 1999). Since mental health problems tend to have a chronic relapsing course, taking care of the mental health of the young people becomes a priority.

Understanding mental illness plays a key role in seeking help and treatment outcome. However, there is a difference in the way psychological problems are looked at in various cultures. In the ancient epoch, mental illness was due to supernatural power, magical spirit (like witchcraft or demonic), or possession by evil spirits which disrupted our mind (Wagner et al.,1999) and a crude procedure where a hole was drilled into the skull to release the evil spirit was followed to cure a person. The concept of evil spirit possession is still prevalent in this modern era. Sometimes it is believed to be a curse or a result of a previous life's curse/punishment. In tribal regions, tribal people prefer to go to sorcerers and other faith healers to cure and get recovery from mental illness (Kishore et al., 2011). A significant number of patients seek help also from general practitioners, faith healers, alternative medicine practitioners, and primary health-care centers (Zeiger et al. 2017).

METHODS

The study was conducted as a prelude to the later development of an indigenous questionnaire that addresses the unique and specific socio-cultural contributors which may shape attitudes towards mental health in youngsters. It is envisaged that it will help in planning awareness programmes that focus better on the existing misconceptions and stigma, thus promoting healthy coping and help seeking behaviour. The study was carried out at various engineering and arts and science colleges of a metro city in Kerala. The institutional ethics committee approval and permission from the various colleges were obtained to conduct the study. A mental health awareness talk was organised and conducted at each college. Before the talk, the students were briefed about the study and were allowed to clarify any doubts. Those students willing to participate gave a written informed consent following which they were given the tool to fill. Out of the total students who participated, 38 responses were considered invalid due to incomplete information and the final study consisted of the responses from 708 participants of which 326 were males and 382 were female. The study was a cross sectional exploratory one which was conducted using the survey method. The sample was drawn using purposive sampling technique and anonymity of the participants were maintained to ensure maximum participation.

Tools

The tool used was a 16 item checklist with yes or no response options that was developed by the authors after extensive search and reading. The items broadly pertained to the participants' own mental health and coping, and their attitudes towards mental health and stigma.

Items like 'Do you use alcohol when under stress and have you ever attempted or seriously contemplated suicide?' were used to gain insight about the participants' own mental health and coping. Items like 'seeking psychological help to cope with stress is a sign of mental illness', 'medication for mental health problems have to be taken life-long' looked at attitude towards mental health problems and it's treatment. Items like 'if I seek psychological help, my family and friends will look down on me', 'mentally ill individuals are dangerous', 'will you make friends with someone who was previously treated for mental illness' addressed stigma.

Analysis

An individual item analysis was conducted for each of the 16 items. Descriptive statistics was used to obtain the percentages and chi square analysis was used to find out the differences based on gender.

RESULT

The descriptive statistics showed that 37% of students believed mental health issues were a sign of personal weakness and 42% of them reported they will feel inferior if they had a mental health problem. Twenty two percent thought seeking psychological help to cope with stress is a sign of mental illness, 22% reported that their friends and family will look down on them if they took psychological help and 38% said that their family and community believe mental illness should be kept as a secret. According to 31%, individuals with mental illness are dangerous, 28% believed that medications will cause side effects and 22% thought medications should be taken life-long.

Table 1. Percentages and differences between the gender in response to each item

Items			
	Male (%)	Female	p-value
		(%)	
Do you use alcohol when under stress?	48 (14.8%)	3(0.8%)	< 0.001
Do you use tobacco when under stress?	38 (11.7%)	1 (0.3%)	< 0.001
Do you use narcotics when under stress?	21 (6.5%)	1 (0.3%)	< 0.001
Have you even attempted/	26 (8%)	9 (2.3%)	0.001
seriously contemplated suicide?			
Have you ever sought psychological help?	41 (12.8%)	21 (5.5%)	0.001
Mental health issues are a sign of personal	108	154	0.030
weakness.	(35.8%)	(44.1%)	
Seeking psychological help to cope with stress	75 (25.3%)	84 (23.3%)	0.554
is a sign of mental illness.			
If I seek psychological help, my friends and	84 (27.5%)	95 (25.7%)	0.599
family will look down on me.			
Individuals with a mental illness are dangerous.	120	102	0.002
	(38.6%)	(27.5%)	
If I had a mental health problem, i would feel	109(36.2%)	185	< 0.001
inferior.		(51.1%)	

Will you make friends with someone who has	211	290	0.003
been previously treated for a mental illness?	(69.4%)	(79.5%)	
Will you seek psychological help if you think	197	296	< 0.001
you have a mental health issue?	(66.1%)	(80.4%)	
My family and community view mental health	101(34.1%)	156	0.019
problems as something to be kept as a secret.		(43.1%)	
If you have a mental health problem, you can	73 (24.6%)	67 (18.2%)	0.043
never be successful in life.			
If I take medication for mental health problems,	100	97 (27%)	0.043
I will suffer from side effects.	(34.4%)		
Medication for mental health problems have to	71 (24.7%)	82 (23.0%)	0.631
be taken long term/for life long.			

p = 0.05

The chi square analysis revealed that males were more likely to use alcohol, tobacco and narcotics when under stress. Males attempted or seriously contemplated suicide than females and more number of males had taken psychological help in the past. More females viewed mental health issues as a sign of personal weakness and they were more likely to feel inferior if they had a mental health issue. Significantly, more males perceived individuals with a mental health condition as dangerous. In contrast, women were more willing to be friends with individuals who had previously undergone treatment for mental illness. Women were more willing to seek psychological help if they felt they had a mental health issue. More men than women believed that a person with mental health problem cannot be successful in life.

DISCUSSION

Perception on mental health by young adults was studied using a checklist. The study setting was engineering, arts and science colleges in Central Kerala. It is a fact that mental illness is considered to be a taboo and carries a certain stigma around it. That mental illness is deemed to be a stigma even by the medical students (Jugal et al., 2007) brings forth the need for awareness and education. Among the general public, mental illness is still not well understood, often ignored, and is considered a taboo (Kishore et al. 2011).

It was also found that males are more likely to use alcohol, narcotics and tobacco under stress. Alcohol consumption can reduce the magnitude of an organism's response to stress (Sayette, 1999). Several personal characteristics like family history of alcoholism, personality traits, extent of self-consciousness, level of cognitive functioning, and gender may influence the extent to which a person is sensitive to alcohol's stress response dampening effects. Situational factors that determine drinking behavior in response to stress are pleasant distractions and the time when drinking occurs relative to the stressful experience (Sayette and Wilson, 1991).

The study also revealed that males contemplated or attempted suicide than females. Globally, suicide is the second leading cause of death among persons aged 15–29 years (World Health Organization 2016). In adolescents and young adults, suicide rates are 2-4 times higher in males than in females, while suicide attempts are 3-9 times more common in females (Wunderlich et al. 2001; Eaton et al. 2012). In Indian scenario, a 2021 study by Swain et al. observed that the number of male suicide victims has been increasing throughout the past three decades; whereas there is a fall in the number of suicide cases among females.

Perception of psychological illness as an indication of personal/moral weakness is one of the attitudes that contributes to stigma. People with mental illness are often seen as weak, lazy, lacking in will power to manage and change his/her life (Gergel, 2014). Falling in line with this observation, the sample of this study also voiced that psychological illness is a sign of personal weakness. Females in particular viewed psychological illness as a personal weakness and they are more likely to feel inferior if they had mental health issues.

Stigma in the mental disorders leads to nondisclosure of psychiatric illnesses, and shying away from treatment facilities; thus, potentially leading to poorer outcomes (Thornikroft, Rose and Kassam, 2007). In the current study the prevalence of stigma against the mental health problems are voiced by the young adults who are college students. Another stigma-laden perception revolves around the sense of inferiority, where females more than males reported that they would feel inferior if they were diagnosed with a mental health problem.

The females are more open to the idea of seeking help from mental health professionals if they thought they have a psychological issue. The psychological mechanism behind this disparity between men and women in seeking help for psychological distress was brought out by a 1981 study by Kessler, Brown and Broman where it stated that this sex difference is largely due to the fact that women translate nonspecific feelings of distress into conscious recognition that they have an emotional problem more readily than men do.

There was also a significant gender difference between the males and females where their perception about psychiatric medication is concerned. Men felt that they are likely to have side effects if they are to take medicines. This is in line with the results of the study conducted in 2017 by Zeiger et al. in India where it says that negative attitudes toward psychotropic medication were associated with lower age and male gender. Another study from Korea also found that the likelihood of a negative attitude and prejudice toward psychiatric treatment were significantly higher in men (Kim et al., 2018). Attitude towards medication may directly or indirectly mediate the impact of illness. A negative attitude, delay or refusal of treatment may lead to higher impact of illness (Dushad et al., 2019) while a positive drug attitude favors greater shared decision making and self-efficacy that are helpful in reducing impact of illness (De las Cuevas, 2014).

CONCLUSIONS

Amongst the college going population there is considerable stigma about the mental illness. There are prejudices and misinformation about the treatment of mental health problems in this group. Gender difference were seen in the coping to stress and in the readiness for taking help for the mental health issues.

Limitations

- The study used a checklist instead of a standardized and validated questionnaire.
- The sample consisted of the students confined to a single city and hence generalizing the findings should be done with caution.

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Conflict of Interest

The authors have no conflict of interests to declare.

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