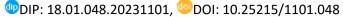
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**Review Paper** 



# Attitude Towards Mental Health Services in Indian Population: A Review

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# **ABSTRACT**

According to the World Health Organization (WHO), India is responsible for approximately 15% of the world's cases of mental health disorders, neurological disorders, and drug addiction ('Mental health in Asia: The numbers', 2019). These numbers imply a strong need for Mental Health Services (MHS) in India. This study seeks to examine the 'attitudes toward Mental Health Services' across the Indian population, including students and Indian males and females living in and outside of India. Another objective is to determine the factors that affect attitudes of individuals toward seeking Mental Health Services. There are 5 survey studies that were identified for review, with an overall sample of 1541 participants. The study found that the Indian population doesn't exhibit positive attitudes rather shows a negative inclination towards the Mental Health Services. We broadly identified 4 factors associated with negative attitudes in the population: i) gender, especially males were found to have contrasting views about mental health services, ii) lower level of education rate iii) stigma associated with mental health iv) availability of less trained professionals. Thus, India is still lagging behind in understanding these mental health problems, and more specifically, we can remark that it is because there is a lack of awareness that results in reduced use of Mental Health Services.

Keywords: Attitudes, Mental Health Services, Stigma, India.

he former president of India, Sri Ram Nath Kovind, recently in 2017, alarmed about the 'Mental Health Epidemic' in India, where it was recognized that 10% of the 1.3 billion population is suffering from at least one or more mental health issues. Also, according to the World Health Organization (WHO), India is responsible for approximately 15% of the world's cases of mental health, neurological disorders, and drug addiction ('Mental health in Asia: The numbers', 2019). These numbers imply a strong need for Mental Health Services (MHS) in India. Mental Health Service can be described as 'A service that deals with diagnosing and delivering mental health care by a trained professional to the client or/and patient with the purpose of providing a quality life. It is a service meant for all.' These services are generally provided by professionals such as psychiatrists, psychologists, counsellors, mental health coaches or trainers, and psychiatric

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nurses. However, India, with a population of over 1.3 billion people, (World Population Prospects: The 2015 Revision, 2015) has only 0.3 psychiatrists for every 100,000 people, 0.07 psychologists for every 100,000 people, and 0.1 nurses for every 100,000 people, working towards the MHS ('Mental health atlas 2014', 2015, Zieger et al., 2017, p. 341)

In the early 1970s, a renowned psychiatrist named Neki (1979), noted that Indians used to view their therapists as their gurus, who would show them a solution to their problems. However, there has been a decline or shift in this mindset. But today's therapists are more like collaborators or consultants; to be more precise, "If the middle mental space between the body and the soul needs repair, the doctor or the guru is no use, it needs its own specialist to heal it" (Wadhwa, 2005; Bhatt, 2022).

MHS utilisation for mental wellbeing is essentially important part for overall health and mental disorders and for a quality of life. Humans face a variety of problems which are associated with their personal, family-related, socio-economic, career or educational aspects. They face problems of critical nature such as anxiety, stress, depression, etc (Sinha & Satpathy, 2020, p. 338). However, everyone has different point of views or attitudes on looking for these MHS. They have a variety of opinions on these services that might be favourable, unfavourable or even neutral.

# **OBJECTIVE**

This review synthesis the findings on 'attitudes toward mental health services' among the Indian population, including students, Indians residing in and outside of India as well as looking at attitudinal disparities at the level of gender. Another objective is to determine the factors that influence attitudes of individuals toward seeking professional Mental Health Services.

# **METHODOLOGY**

A computer database search of Google Scholar, PubMed, ScienceDirect, and Academic Search Premier was conducted, using the following search terms: 'mental health', 'counselling', 'services', 'guidance', 'attitude', 'stigma', 'India'. All searches published from 2012 to 2022 were considered because studies conducted in this era of 'mental health services' are the most recent and relevant to the objective of our review. A total of 5 survey studies were identified to be most appropriate for review, with an overall sample of 1541 participants. Our inclusion design considered a range of Indian population, such as students, Indian males and females residing in and outside of India. In order to provide better clarity, we emphasised the studies that contained factors that were associated with the influence of certain attitudes. The search was strengthened by identifying relevant review articles and retrieving all additional relevant articles cited in reference lists; relevant websites were also consulted.

# DISCUSSION AND RESULTS

Our study focuses on gaining insight about the attitudes towards Mental Health Services in the Indian population. We identified five articles for our study, with a total sample of more than 1500 participants. Based on the literature review, we observed the following findings in terms of gender, levels of education, stigma related to MHS, and some other related factors.

Table 1: Review of 5 studies.

	Studies	Sample	Frequency	Percentage	Assessment tools	Remark (Attitude towards Mental Health Services)
1.	Saxenn & Wadhwan, 2022 Arshad, M., 2012	Indian Students	103+200 = 303	19.67%	The Attitude Toward Seeking Professional Psychological Help Scale (ATSPPHS)	Majority of students showed a positive attitude and the most prominent amongst them were females and PG students.
2.	Syed, Baluch, Duffy, & Verms, 2012	Indians residing in India	49 +212+ 924 - 1185	76.9%	Self-created 12-item attitude questionnaire	Indians had a positive attitude towards mental health care and women seemed to be more favorable.
	Sindhu, Phadnis, Chouhan, Saraswat, & Maheshwar, 2021				Adaption from Michelle Kermode's Questionnaire	In a sample of 212 participants, more than 60% said they would seek assistance.
	Zieger et al., 2017				Adaption of Stigma of Psychiatry and Psychiatrists Questionnaire	However, the majority of the 924 participant's exhibited unfavourable attitudes, most notably those individuals were younger or had less education.
3.	Syed, Baluch, Duffy, & Verms, 2012	Indians out of India (particularly in UK)	53	3.43%	Self-created 12-stem attitude questionnaire	Indians in the UK, particularly men, responded more positively to Mental Health Services than UK citizens and Indians living in India.
	A total of 5 studies.	103+200+49+ 924+212+53	1541	100%	All of the above.	In general, there were mixed reactions from various sections of society, but the majority of Indians had a negative attitude about Mental Health Services.

Overall, it is evident from TABLE 1 that the majority of the sample did not have positive attitudes regarding Mental Health Services. Therefore, based on the review of these studies we may conclude that India has a pretty negative attitude of MHS. These results attributed to numerous factors which is discussed below:

## Gender

The data of three out of five studies (Syed et al., 2012, Arshad, M., 2012, Zieger et al., 2017, Sindhu et al., 2021) indicated that gender was a significant predictor of attitudes toward MHS. When compared to males in India, it was shown that most Indian women appeared to have more positive views towards MHS. In contrast, Indian males who lived abroad, especially in the UK, had positive opinions about counselling. There is a chance for such national variances since women experience higher anxiety, trauma, and mental health concerns as a result of Indian culture. Additionally, a significant portion of Indian males living abroad are having trouble adjusting to being away from their friends and families. The impact of western society and its customs may be another factor contributing to positive attitude in these.

However, the fact that gender is not a major predictor of attitude is supported by only one research out of five (Saxena & Wadhwani, 2022)

# Level of Education

In the study conducted in Udupi Taluk, Karnataka (Sindhu et al., 2021), it was discovered that the population and education level were both high, resulting in an increased understanding of mental health issues. Consequently, more than 60% of those who took part in their survey agreed to seek mental health care assistance from a family member, a psychiatrist, an ayurvedic practitioner, or a local doctor. Similarly, research on students revealed some comparable outcomes in favour of receiving counselling, mostly among PG students (Arshad, M., 2012). As a result, we may state that higher educational-level sectors have more favourable perceptions regarding Mental Health Services.

However, a study (Zieger et al., 2017) conducted in five metropolitan locations with the highest number of participants found that lower levels of education constitute a hindrance to favourable attitudes.

Intriguingly, the above two factors of gender and education level were determined to be in line with a study done by WHO, where they conducted a 'mental health survey' revealing that male gender and low education are associated with higher treatment gaps i.e. the number of people with disorder in India who require mental health treatment but don't receive it, ranges from 70 to 92 percent. (Wang et al., 2007, 'Mental health in Asia: The numbers', 2019).

# Stigma

Another important factor is that there is a lot of stigma related to mental health issues in India (Arshad, M., 2012). Indians have more faith and trust in the religious healers compared to MHS providers like psychiatrists, psychologists, and counsellors. For instance, when someone has schizophrenia, they are typically treated by Babas, Taantriks, Haakims, etc. rather than by mental healthcare professionals. They use their old, conventional ways to treat, for they are convinced that such a person is possessed by some unnatural powers. Studies have even shown that those who suffer from OCD and schizophrenia are more likely to harbour superstitions and turn to faith healers (Zieger et al., 2017, Grover et al., 2014a, Grover et al., 2014b). A link between mental health-related stigma and religiosity has also been demonstrated by several earlier studies (Mungee et al., 2022, Eisenberg et al., 2009, Thimmaiah et al., 2016). This commonly occurs as a result of a lack of knowledge around mental health issues, which affects the desire to seek help from mental health professionals in India. However, researches have found that Indians who live abroad are more exposed and free to look for MHS (Raney and Cinarbas, 2005). Another reason might be that Indian immigrants are living abroad without their immediate family. As a result, in the absence of family support and stigma, they are less hesitant to seek Mental Health Services (Syed et al., 2012).

# **Professionals**

The student participants showed a pretty bizarre, reverse correlation, i.e., those who had received Mental Health Services before were more negatively inclined towards the MHS and those who had not received these services before had positive inclination (Arshad, M., 2012) This might be due to the reason that students who received these services were not exposed to skilled and trained professionals, hence thinking negatively about counselling and Mental Health Services. Therefore, the participants who had received the services of counselling were not satisfied and had negative attitudes towards these services.

The majority of participants believed that there weren't many skilled professionals in this field. They imply that either the providers lack training and/or skills or that they chose this line of work simply because they weren't fit out for other specialisations (Zieger et al., 2017). Gulati et al. (2014) reported that medical students and interns at medical schools were refrained from pursuing psychiatry by family members and peers. A shocking 85% of medical interns in this research thought that psychiatry positions are only evaluated when medical graduates are unable to get employment in any other field (Mungee et al., 2022).

# CONCLUSION

We conclude that the Indian population doesn't exhibit positive attitudes rather shows negative inclination towards the Mental Health Services. We broadly identified 4 factors

associated with negative attitudes in the population: i) gender, especially males were found to have contrasting views about mental health, ii) lower level of education rate iii) stigma associated with mental health iv) availability of less trained professionals.

Therefore, India is still behind in understanding these mental health issues and more precisely we can say it's due to the lack of awareness leading to less utilisation of MHS. To improve these issues, it is essential to bring important changes in our education and healthcare systems. Firstly, we would suggest to give mental health understanding from the school level. And it is important to emphasize that mental health is not just for the disordered but for all. Another important step could be taken into account for the betterment is that mental healthcare providers and Mental Health Services should mandatorily be established at every primary health care system as well as at all the levels in the society.

# Limitations and Future Suggestions

We truly admit that our study could have been improved by examining and arranging additional studies as there were fewer articles considered for the review and, hence, fewer participants. Future replication researches must ensure larger sample size. Furthermore, our research might also have compared the differences in attitudes toward Mental Health Services before and after COVID-19. Further analysis may have included a comparison of Mental Health Services provided in India and other countries.

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# Conflict of Interest

I, Filzah Kakul declare no conflict of interest.

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