



# HOW INDIA PERCEIVES MENTAL HEALTH

TLLLF 2018  
NATIONAL SURVEY REPORT





# CONTENTS

**02**

---

**Executive  
Summary**

**05**

---

**Introduction to  
the study**

**07**

---

**Findings**

**07**

Mental health -  
awareness & stigma

**09**

Attitude towards  
mental illness

**12**

Attitude towards seeking help  
for their own mental illness

**14**

The three segments of the  
general public based on their  
attitude towards mental health

**17**

---

**Conclusion and  
Recommendations**

# EXECUTIVE SUMMARY

The WHO estimates that 20% of Indians may suffer from depression in their lifetime. Another survey, the National Mental Health Survey in India (2015-16) has estimated that only about 10-12% of people suffering from depression in India get treated<sup>1</sup>. This high treatment gap, if not addressed, would result in an increased disease burden. In light of this increasing need for support and care for persons with mental illness, The Live Love Laugh Foundation approached Kantar Public to understand public perceptions and attitudes towards mental health. The study covered 3,556 males and females in roughly equal proportions, across eight cities of the country. The methodology consisted of a mix of qualitative in-depth interviews, as well as quantitative face-to-face structured interviews.

The survey revealed that although people showed high awareness about mental illness [about 87% participants using at least one term that relates to the names and symptoms of mental illnesses], they also showed high stigma against people with mental illness [with about 62% participants using derogatory terms like 'retard' (47%) or 'crazy / mad / stupid' (40%) or 'careless / irresponsible' (38%) to describe people with mental illness]. Of the respondents who showed awareness about mental illness (87%), the ones showing stigma made up 71%. This indicates that just increasing awareness about mental illness might not be enough – a holistic programme on mental health will also need to address the strong stigma associated with it.

A majority of participants appreciate the importance of social support for people with mental illness, but with reluctance. Data suggests that there are people who are willing to offer help but there is a clear distinction in the attitude shown towards the inclusion of people with mental illness in workplaces and neighbourhoods. While 40% of respondents feel that it is frightening to have people with mental illness in their neighbourhoods (as seen earlier), 57% feel that no one has the right to exclude them.

The presence of a strong stigma towards people with mental illness makes it difficult for them to reach out for help. This also explains why 54% of the survey participants claimed that they were very likely to visit a doctor to discuss mental health.

The study revealed three broad segments of people based on their attitudes towards mental illness.

---

## **Segment 1 (27%): A group indicating support for people perceived as having mental illness.**

---

They do not discriminate against people with mental illness and predominantly believe that it could happen to anyone.

---

<sup>1</sup> [http://www.searo.who.int/india/depression\\_in\\_india.pdf](http://www.searo.who.int/india/depression_in_india.pdf)

---

**Segment 2 (47%): Those who indicate high judgement against people perceived as having a mental illness.**

---

This is the largest segment of the general population and includes people who are relatively more aware of mental illnesses and their associated symptoms, but also display some stigma against people with mental illness. While the individuals in this segment sympathise with people with mental illness, and voice the need for equal job opportunities for them, they themselves would like to keep a safe distance. The stigma shown by this segment, however, is not as severe as shown by individuals that constitute segment 3.

---

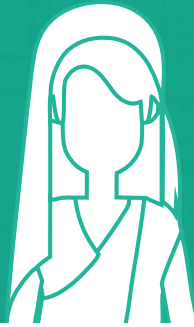
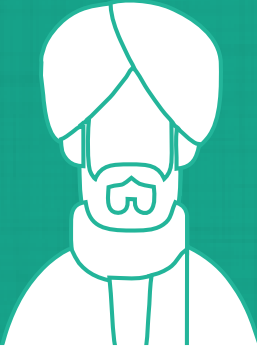
**Segment 3(26%): A group indicating fear of people perceived as having mental illness.**

---

This segment comprises of people who are frightened of living in the same neighbourhood as

and interacting with someone suffering from mental illness.

The stigma present in their immediate community might make it difficult for people with mental illness to talk about their problems openly. The fear of being labelled or judged can keep people from openly admitting to having any mental illness. People are also likely to remain in denial of the possibility that mental illness can occur to them, sometimes believing that these ailments are caused by having a 'weak mind'. Measures to overcome mental illnesses such as counselling or visiting a psychologist for treatment are misinterpreted as 'weakness' or 'failure'. There is a need for the normalisation of mental health, as well as for more open conversation around the subject, so as to increase awareness and reduce stigma in order to make a positive change in the attitudes of the general population.



# INTRODUCTION TO THE STUDY

The Live Love Laugh Foundation approached Kantar Public to understand the mental health landscape in India. The objective of this study was to gauge the level of awareness about mental

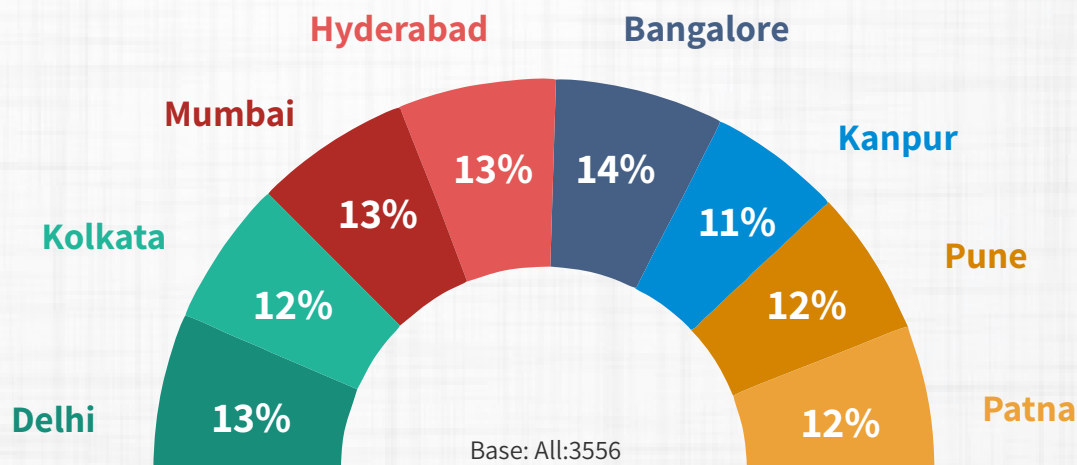
health concerns, as well as to discern the public perceptions and attitudes towards people suffering from mental illness.

## Research objectives of the survey



The study covered 3,556 participants from the general population—both men and women, across eight cities of India (two from each of the four geographical zones of the country).

CHART 1



A representation was maintained across various age-bands (within 18 to 45 years) and socio-economic classes so as to cover the knowledge, attitude and behaviour of people across the different economic stratas, and various stages of life.

The research methodology involved a combination of structured quantitative interviews, along with in-depth qualitative interviews. Quantitative interviews were carried

out face-to-face by trained interviewers using Computer-Assisted Personal Interviewing (CAPI) in the respondents' homes. Interviewing took place between the months of October and November, 2017. Qualitative in-depth interviews were conducted by trained moderators. They covered 12 interviews with the general population and three with mental health experts. The in-depth interviews helped us gain insight into the probable reasons for certain kinds of attitudes and behaviour displayed towards mental health.



# #1

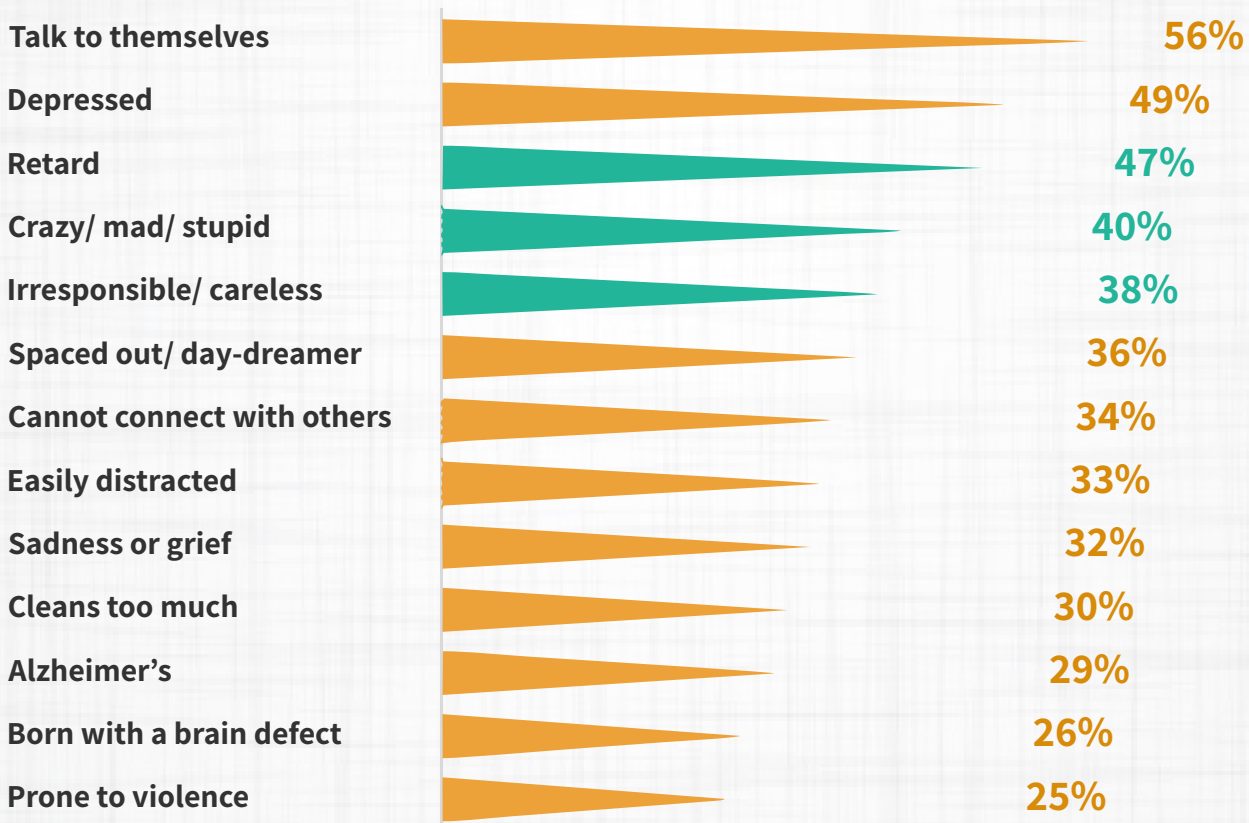
## Findings Mental health - awareness & stigma

In this study, we explored the Awareness (knowledge and perception) about health, mental health and its disorders, and the various treatment methods across eight cities in India. By asking the question, 'what does being healthy mean to you? What else?', we came to understand

how the respondents defined 'being healthy':

- 57% associate 'being healthy' with happiness
- 47% associate 'having a sound mind' with 'being healthy'

**CHART 2** How would you describe a person with mental illness?



Base: All:3556

■ Awareness ■ Stigma

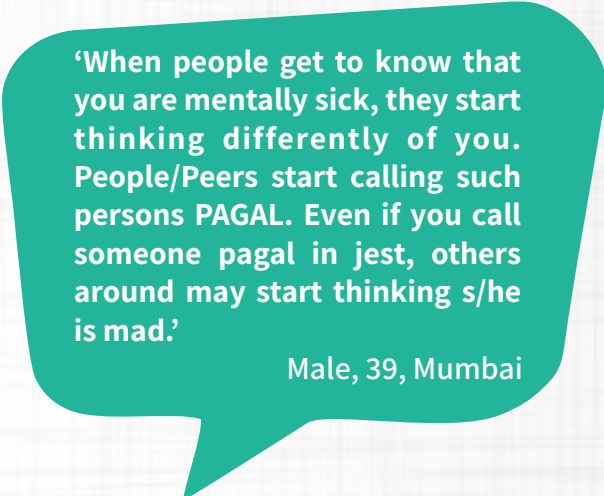
To capture the response on how the participants would identify a person with mental illness, they were asked ‘How would you describe a mentally ill person?’ The respondents were not prompted with any clues related to clinical terms for mental illnesses.

Most people link mental illness with symptoms of severe mental illness [56% say that a sign of a person with mental illness is that they “talk to themselves” (symptom of Schizophrenia); 30% link mental illness with a person who “cleans too much” (symptom of Obsessive Compulsive Disorder)]. Some people mention the illnesses themselves (49% link “Depression” with mental illness; 29% name “Alzheimer's”) as a response to this question. About 87% of respondents showcased some level of awareness about mental illness by giving at least one of the above responses.

At the same time, about 62% of survey participants used one of the following terms such as ‘retard’ (47%), ‘crazy / mad / stupid’ (40%) or

‘careless / irresponsible’ (38%) to describe people with mental illness, suggesting that there is a high level of stigma attached to these illnesses.

Of the respondents who showed some awareness about mental illness (87%), 71% also used terms associated with stigma. These findings indicate that to create a holistic mental health programme, one will need to look into both increasing awareness about mental health and reducing the stigma that is associated with it, simultaneously.



**‘When people get to know that you are mentally sick, they start thinking differently of you. People/Peers start calling such persons PAGAL. Even if you call someone pagal in jest, others around may start thinking s/he is mad.’**

Male, 39, Mumbai

# #2 Findings

## Attitude towards mental illness

The survey included statements to study a range of attitudes towards mental illness, by incorporating 22 items derived from the 40-item Community Attitudes toward the Mentally Ill (CAMI) scale 2. The questionnaire, items and scales were adapted for the Indian context and pre-tested in the survey locations before being finalised. The statements included a wide range of issues, from attitudes towards people with mental illness to opinions on services provided for people with mental health issues. Respondents were asked to give their opinion on each attitude statement, using a 3-point scale ‘Agree’, ‘Neither Agree nor Disagree’ and ‘Disagree’.

### The 22 attitude statements covered the following four broad themes:

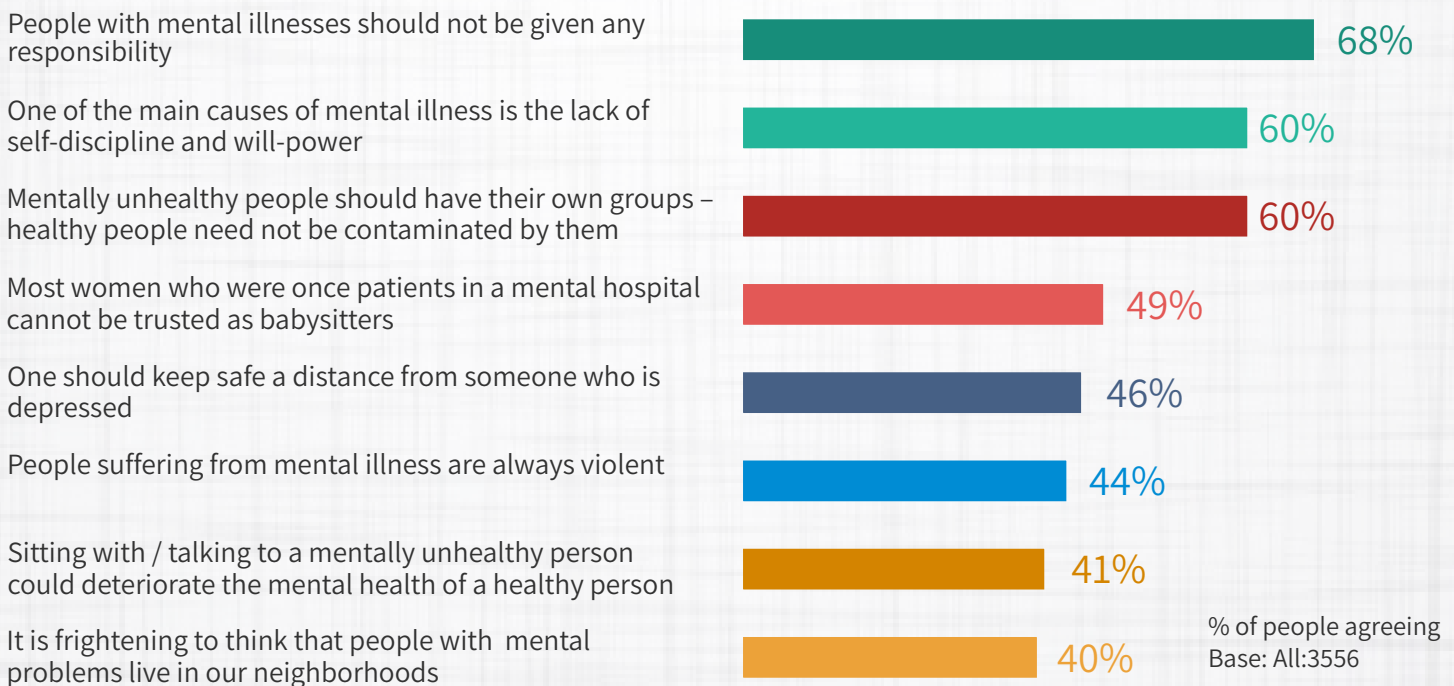
1. Fear and exclusion of people with mental illness
2. Awareness and tolerance of mental illness

3. Degree of community integration of people with mental illness
4. Perceived causes of mental illness

A majority of the respondents (60%) agree with the statement that ‘one of the main causes of mental illness is the lack of self-discipline and willpower’ and another 60% feel that ‘mentally unhealthy people should have their own groups so as to not contaminate healthy people’. Nearly half of the participants (46%) have said that they would like to keep a safe distance from someone who is depressed.

Many agreed with the statement that ‘sitting with/ talking to a mentally unhealthy person could deteriorate the mental health of a healthy person’ (41%) and that ‘it is frightening to think that people with mental problems live in our neighbourhoods’ (40%).

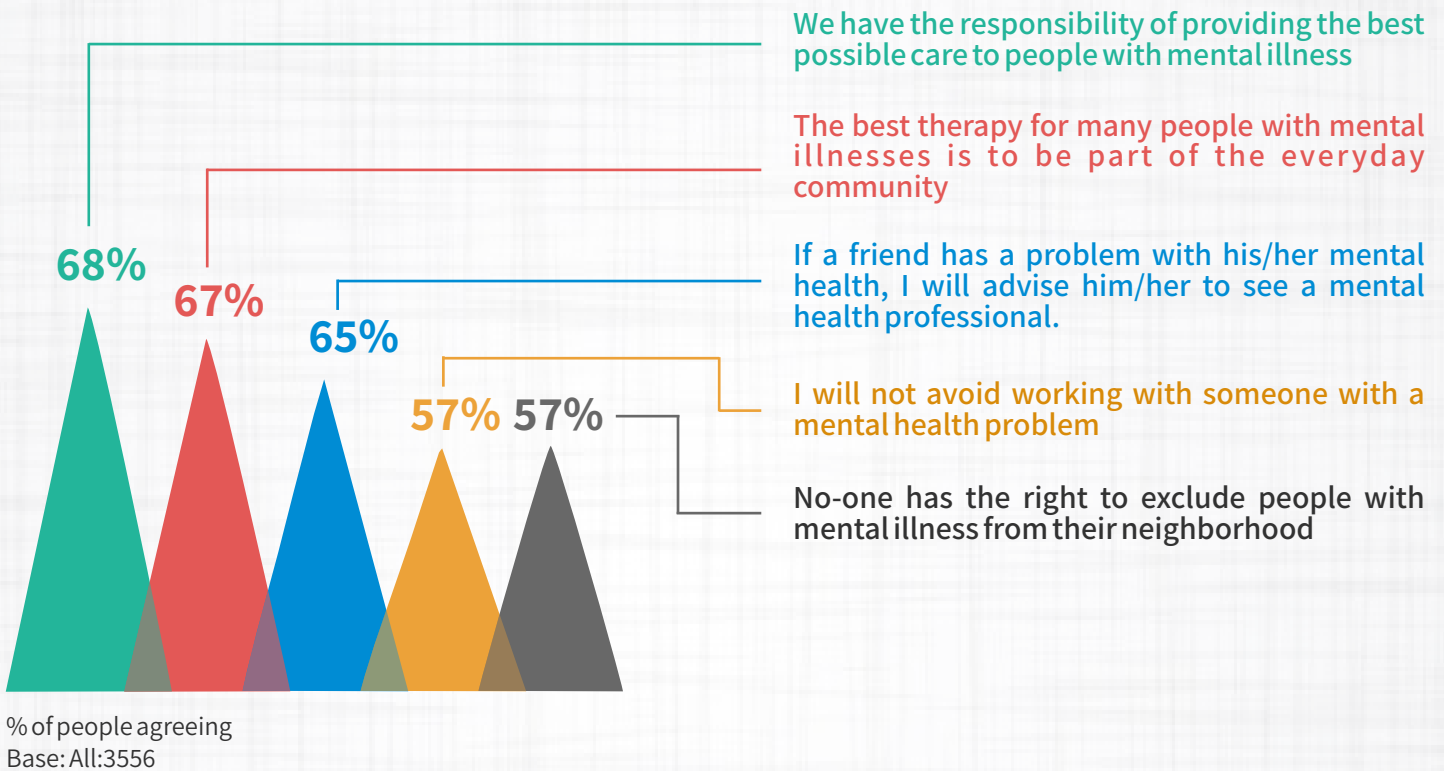
### CHART 3 Attitude towards mental illness



However, a majority of respondents appreciate the importance of social support for people with mental illness. While 68% agree that ‘we have the responsibility of providing the best possible care to people with mental illnesses, the number of

people who believe that ‘no one has the right to exclude people with mental illness from their neighbourhoods’ is comparatively lower (57%). 57% of respondents also state that they would not avoid working with a person with mental illness.

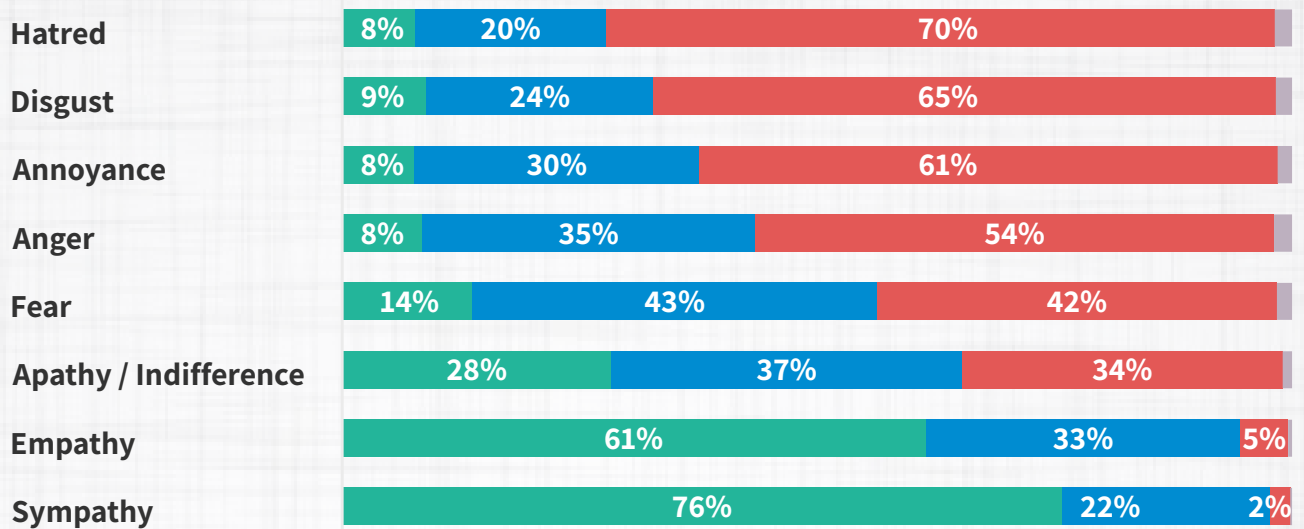
**CHART 4 Social inclusion of the patients**



In order to explore this attitude in further detail, respondents were asked about their feelings towards people with mental illness. While there exists widespread sympathy towards people with mental illness with more than three-fourths of survey participants stating that they would always feel sympathetic towards them, they also exhibit feelings of fear (14% would always be fearful), hatred (28% feel hatred sometimes or

always) and anger (43% feel angry sometimes or always) towards people with mental illness. More than a quarter admitted that they would always be ‘indifferent’ towards people with mental illness. This admission of the general public to their feelings towards people with mental illness again indicates the prevalent stigma in society.

**CHART 5** Feelings towards mentally ill



Base: All:3556

Always Sometime Never Don't know / Can't say

# #3 Findings

## Attitude towards seeking help for their own mental illness

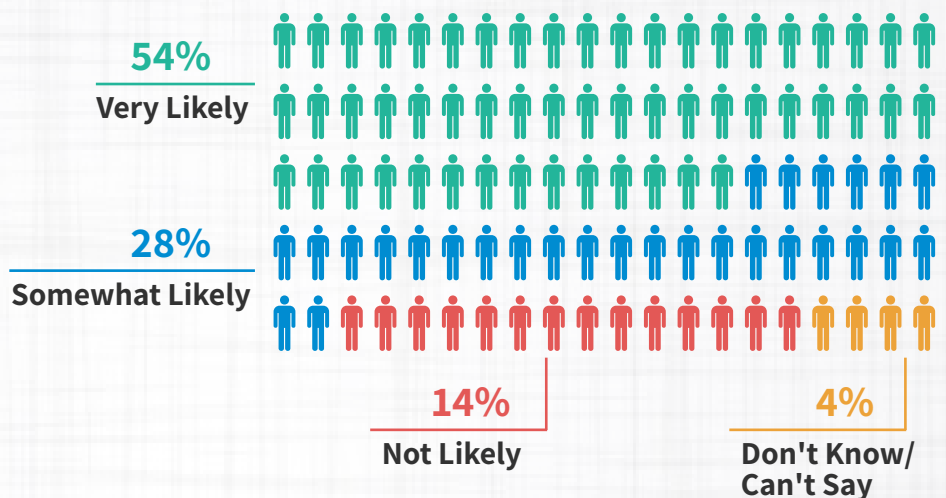
While 54% of survey participants displayed high likelihood towards visiting a doctor to discuss

their mental health, another 28% were somewhat likely to discuss their mental health concerns with a doctor.

CHART 6

Would you visit a doctor if you had a mental health problem?

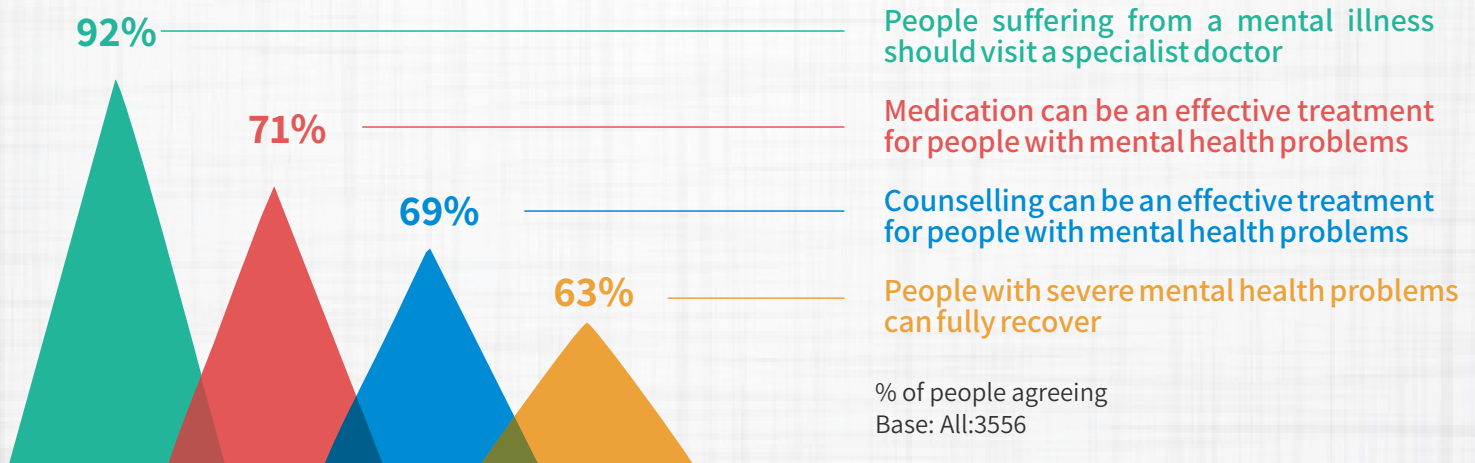
Base: All:3556



The results indicate that there is a high awareness of available treatment for mental illness - 92% of people agree that visiting a specialist doctor can help a person with mental illness recover. Additionally, 71% of respondents agreed that 'medication can be an effective treatment for people with mental health problems' and 69%

agreed that 'counselling can be an effective treatment for people with mental health problems'. There was also a favourable response to the statement 'people with severe mental health problems can fully recover', with 63% agreeing to it.

CHART 7 Knowledge of treatment available

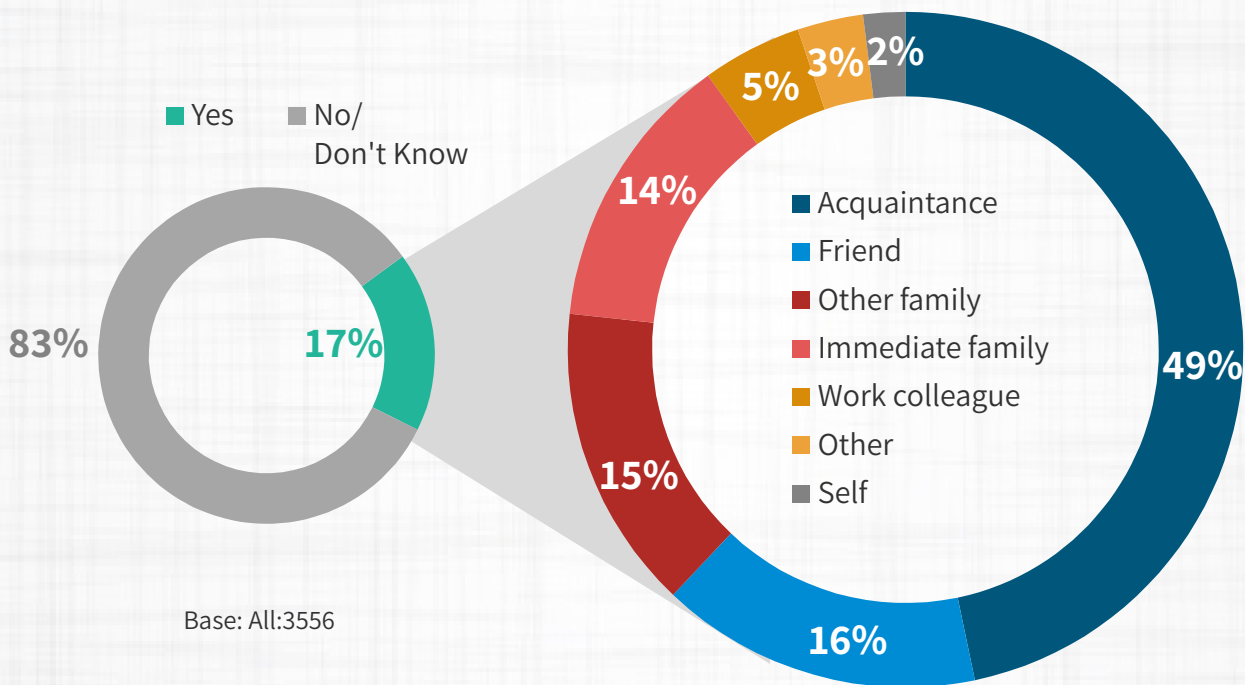


When participants were asked if they personally knew of someone with mental illness, 17% said yes. Nearly half of those respondents said that this person was an acquaintance and only a mere 2% admitted that the person mentioned was themselves.

The people in the society are always ready to laugh and make jokes. People will make fun of a patient or gossip about him/her and might call him/her mad.

Male, 19, Mumbai

**CHART 8**



# #4

## Findings

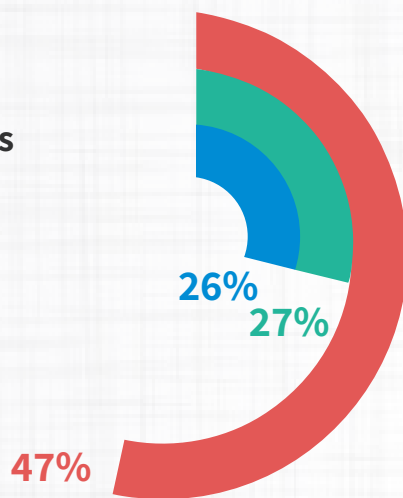
### The three segments of the general public based on their attitude towards mental health

The 22 attitude statements that were analysed above, were also used to segment the general population based on their responses. We ran a

cluster analysis on the statements and it showed three clear groups of people based on their attitude towards people with mental illness.

CHART 9

Three broad segments



Segment 1 (27%): Indicating Support for people perceived as having mental illness.

Segment 2 (47%): Indicating higher judgement against people perceived as having mental illness.

Segment 3 (26%): Indicating fear of people perceived as having mental illness.

\* Base for cluster analysis was 3175 cases

**Segment 1: Those who indicate support for people perceived as having a mental illness:** This set includes people who do not discriminate against people with mental illness and predominantly believe it may happen to anyone. They agree that a person, after suffering from a mental illness, can recover completely. Awareness of the symptoms of various mental illnesses is relatively high among this set. The segment identifies mental illness mostly with **depression (62%), sadness (38%), and incapability of making decisions (25%)**.

58% of these respondents believe that a healthy life includes having a 'sound and healthy mind.' About 50% feel that mental illness is more harmful

than physical illness. As many as 26% within this segment admit to knowing someone suffering from mental illness as opposed to 17% at an overall level. They also showcase higher agreement to following attitudes:

- Virtually anyone can develop a mental illness (86% within the segment agree vs. 70% overall)
- People with severe mental health problems can fully recover (82% within the segment agree vs. 63% overall)
- We have the responsibility of providing the best possible care to people with mental illness (86% within the segment agree vs. 68% overall)



- If a friend has a problem with his/her mental health, I will advise him/her to see a mental health professional (86% within the segment agree vs. 65% overall)

This segment is relatively bigger in cities like Delhi, Kanpur and Patna. These responses were obtained from a relatively younger age group (18 to 24 years), as well as a comparatively lower socio-economic background and educational level. With regards to mental illness, people from this segment are more likely to go to a doctor / GP for help, and are relatively more comfortable talking to a friend, family member or employer about their illness, when compared to the other segments.

**Segment 2: Those who indicate higher judgement against people perceived as having a mental illness:** This is the largest segment of the general population and includes people who are relatively more aware of mental illnesses and their associated symptoms, but display stigma against people with mental illness. This segment of participants associate mental illness with terms such as **Alzheimer's (34%), Split Personality (29%), and Anorexia (25%) on one hand while also describing a person with mental illness as 'irresponsible and careless' (41%).**

They showcase higher agreement with the following attitudes:

- One should keep safe a distance from someone who is depressed (80% within the segment agree vs. 46% overall)
- Sitting with / talking to a mentally unhealthy person could deteriorate the mental health of a healthy person (68% within the segment agree vs. 41% overall)

- People with mental health problems should have the same rights to a job as anyone else (90% within the segment agree vs. 63% overall)

This segment is relatively bigger in cities like Kolkata, Hyderabad and Mumbai. The respondents who fall into this segment are mostly from higher socio-economic background and may have a relatively higher level of education. They show a less likelihood to visit a doctor / GP or talk to a friend, relative or employer with respect to mental health.

**Segment 3: Those who indicate fear of people perceived as having a mental illness:** This segment shows the highest degree of stigma towards people with mental illness. This segment associates mental health with terms like 'retard' (50%) to identify a person with mental illness. Additionally, more people in this segment believe that a person suffering from mental illness is prone to violence (25%).

This segment is fearful of living in the same neighbourhood as someone suffering from mental illness. People in this segment show apathy towards people with mental illnesses. Additionally, they do not believe that people with mental illness should be included back into society, post their recovery. They do not agree that medication and counselling can be effective treatments for people with mental illness. This segment indicates lowest agreement to the following attitudes:

- People with severe mental health problems can fully recover (only 41% within the segment agree vs. 63% overall)
- Medication can be an effective treatment for people with mental health problems (only 44%)

within the segment agree vs. 71% overall)

- Counselling can be an effective treatment for people with mental health problems (only 56% within the segment agree vs. 69% overall)
- Virtually anyone can develop a mental illness (only 54% within the segment agree vs. 70% overall)
- There is nothing wrong or crazy about people with mental illness (only 41% within the segment agree vs. 63% overall)
- The best therapy for many people with mental illness is to be part of the everyday community (only 49% within the segment agree vs. 67% overall)
- Mental illness is an illness like any other (only 25% within the segment agree vs. 53% overall)
- No-one has the right to exclude people with mental illness from their neighbourhood (only 37% within the segment agree vs. 57% overall)

This segment is relatively bigger in cities like Bangalore and Pune. The survey participants from this segment are relatively older (35 to 45 years) and are more likely to have mid-level educational qualifications. They show a lesser likelihood of visiting a doctor / GP or talking to a friend, relative or employer with regards to mental health.

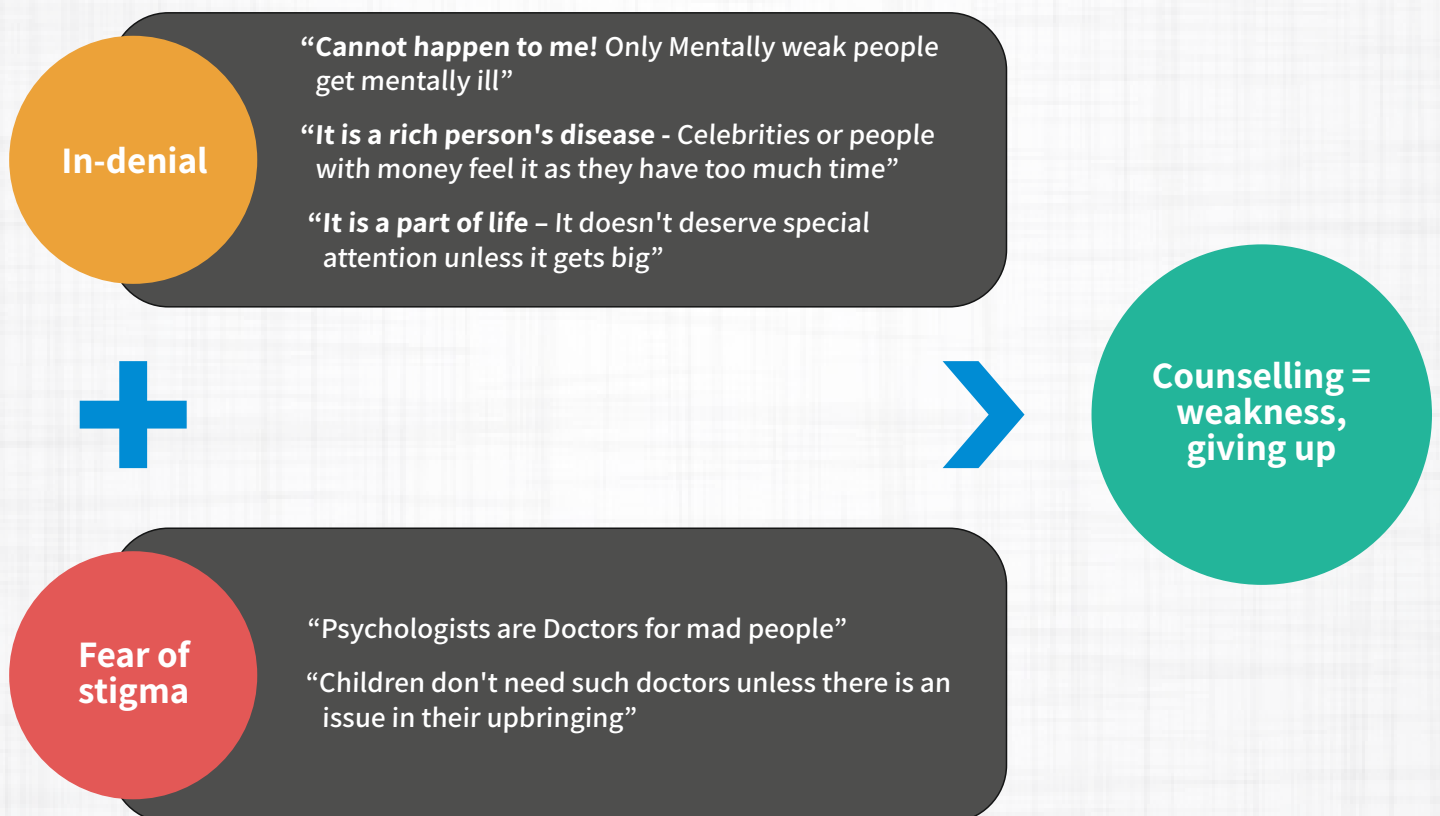
**Demographic differences across segments:** By this segmentation, there does not seem to be much of difference by gender; however, those indicating support for people with mental illness are relatively younger than those indicating stigma and fear. A larger number of people with higher levels of education and better socio-economic class were seen to have higher levels of awareness of mental health concerns while also indicating more stigma and fear towards people with mental illness. This segmentation, therefore, suggests that there is a greater amount of support for people with mental illness from places that possess lower levels of education and lower socio-economic backgrounds.

# CONCLUSION AND RECOMMENDATIONS

As seen in the report above, stigma and awareness are two separate issues that need to be addressed in order to tackle the burden of mental illness in India. If individuals continue to view mental illness with apprehension and resistance, it will remain difficult for people with mental health concerns to seek the support that they require. According to our qualitative analysis, people with

mental illness are likely to avoid discussing their mental health concerns openly, due to the fear of being labelled or judged. Furthermore, some people believe that mental illness can only happen to people who are 'mentally weak' and 'people who have too much money and time'. For these individuals, seeking support from a mental health professional is seen to be a sign of 'weakness'.

**CHART 10**



The need of the hour is to sensitise and educate individuals about the signs and symptoms of mental illness, while normalising the idea of seeking support for themselves and their loved ones. There needs to be more open discussion and

dialogue with the general public (and not just with experts) on this subject. Therefore, to create a better mental health landscape in the country, a two-pronged approach will be required - to increase awareness and to reduce stigma.



**KANTAR PUBLIC** =

