

The times

Report on Mental Health Foundation MORI survey investigating public attitudes to mental health*

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“You don’t stand much chance of recovering from the illness in that hospital. It makes you worse.”

The above quotation comes from the general public group discussions which were part of MORI’s survey on public attitudes to mental health. This investigation was commissioned by the Mental Health Foundation as part of the events making the charity’s 40th anniversary appeal.

The aim of the MORI survey was to evaluate trends in public attitudes to mental health, and this was attempted by both qualitative ‘ethnographic’ and quantitative ‘survey’ research methods. The qualitative aspect involved two in-depth group discussions with members of the general public. The quantitative dimension was a survey of a representative quota sample of 2,057 members of the general public aged 15 and over interviewed using a formal questionnaire in 148 constituency sampling points throughout Great Britain. The final data were weighted accurately to reflect the known profile of the population.

The findings should be of interest to all psychiatrists as public attitudes to mental health are not frequently formally investigated, even by academics, on this scale. Public attitudes surely shape society’s funding of mental health care and research, the treatment of patients in the community and the professional position of psychiatrists – which has inevitable implications for recruitment.

Although the survey found there was a high public awareness of the link between stress and mental illness, different types of mental illness and handicap were less clear in people’s minds. Schizophrenia was the most widely mentioned type of illness while Down’s syndrome had the highest profile of the handicaps. Asking people to say from a list which factors they felt caused mental illness produced financial worries as the most prominent (Freudians and geneticists please note!) while the proportion

identifying weakness of character as a cause had halved from 20% in 1979 (when the survey was last done) to 10% in 1990. There was strong agreement that most people are embarrassed by mentally ill people (80% said this) though few feel that people would be justified in resisting mental health services in their neighbourhood (22%).

However, one can’t help suspecting that many responses in this survey conceal gaps between stated attitudes and actual behaviour. Thus a general problem with interpreting the results is that many of the questions posed could have been better designed to probe the undoubted complexity of public attitudes and behaviour to mental illness. For example Whalley’s 1958 study (*Social attitudes towards discharged patients, Social Problems, 1958–1959, 6, 313–320*) revealed that any tendencies to restrict social interaction with formerly mentally ill people depended on ‘social distance’. For instance, only 15% of his subjects were prepared to hire someone who had seen a psychiatrist as a baby-sitter.

A particularly worrying feature of the group discussion with business donors to charity was the finding that they were influenced by personal experience – donations would frequently be to those medical charities involved with diseases which colleagues in the company had suffered from. Yet the secrecy surrounding mental illness is possibly a major factor which affects the prospects for business donations to mental health charities.

Despite all the problems highlighted by this survey of public attitudes to mental illness, the Mental Health Foundation’s press briefing of these results remained remarkably up-beat. They intend to use the findings as part of a campaign to change attitudes to mental illness.

In contrast to the activity of this charity, many mental health professionals appear to be neglecting this enterprise. To continue to do so would appear to be in the very least short sighted – after all some future MORI survey may ask about public attitudes to psychiatrists. . .

* Press briefing, 20 November 1990.