

Mental Health Literacy, Stigma, and Attitude towards Seeking 'Help'

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Abstract

When people are aware about various physical and mental health illnesses that can affect their health and well being, they can not only engage themselves in improving their own health but can also play an active role in disseminating trustworthy information in the community, specially in the era of 'fast forward' messages on various social media platforms. The concepts of Health Literacy and Mental Health Literacy have been discussed in this paper. Mental health literacy understands mental health problems with right mindset to spot them early, deal with them properly, and even stop them before they start. The concept of mental health literacy encompasses not just information about mental illnesses, but also practical knowledge that empowers meaningful information which can lead to beneficial action for promoting mentally healthy behaviour. This paper is a non-systematic review of publications that have been written about public mental health literacy. Evidences from the literature indicate that public understanding of mental disorders as medical conditions, as well as knowledge of effective, evidence-based treatments, is often limited or inaccurate. In lower-resource contexts, where availability of mental health services is already constrained, poor mental health literacy can make it challenging to treat those in need. This study aims to enhance understanding of the problem through an examination of mental health literacy, stigma and attitudes. This study was conducted to review past-present comprehensive data regarding mental health literacy in India. Treatment hurdles have been discovered which includes stigmatized understanding of mental health illnesses or low mental health literacy. By promoting mental health literacy, we can combat the pervasive discrimination against those seeking mental health services.

Keywords: Mental health literacy, stigma, help-seeking attitude, healthcare, community health

People constantly attempt to maintain their health and well being by accessing important information, acquiring relevant knowledge and developing a general understanding about the causes, symptoms of various illnesses. The concept of Health literacy is termed as important factor in determining health status of individuals. Health literacy has been defined by the World Health Organization as the level of knowledge and competencies that an individual acquires by engaging in social interactions, organizational interactions and the information sharing among the families or across generations. The organizational structures mainly the healthcare infrastructure, government organizations that disseminate information among the public regarding health are an important component in the organizational infrastructure to promote health literacy.

Health Literacy

Health literacy enables individuals to understand various illnesses and provides information that can be used to promote and maintain health and well being. Health literacy is not merely reading or accessing information through pamphlets, websites or information boards as one way traffic but it also encompasses involving oneself critically to analyze the available information for its relevance and accuracy. Health literacy also helps an individual to engage to promote health in a socially meaningful ways. According to the WHO, health literacy is limited even in economically advanced areas such as Europe. There exists inequality in terms of health literacy based on various social and demographic factors. Health literacy is a collec-

tive responsibility of the individual, government, civic society and health services organizations and Non-governmental organizations, private institutions to enable access to trustworthy information on various dimensions of illnesses. If Health literacy itself is facing challenges, Mental Health Literacy is facing severe knowledge gap regarding mental illnesses.

Mental Health Literacy

'Mental health literacy' (MHL) describes an individual's understanding and awareness of mental health conditions, including the ability to identify, manage, and prevent such disorders. It goes beyond merely identifying mental illnesses or psychological distress. It also involves understanding and believing in the factors and causes that influence mental health and being aware of available professional treatment options, adopting positive attitudes toward seeking help, and knowing reliable mental health information. The concept of mental health literacy has evolved with time, earlier it was conceptualized as including knowledge and awareness about various mental illnesses, its causal factors, risk factors etc. However, MHL now encompasses the people's understanding about ways to maintain sound mental health various through appropriate actions. The concept of MHL has gone beyond the previous notions of knowledge to knowledge plus action.

Method

The paper attempts to highlight and emphasize an area of mental health literacy and stigmatic attitude towards

it which has long been overlooked by researchers and mental health professionals. When the concept emerged in the mid-1990s, efforts to raise public awareness about mental illness were just beginning, with the goal of encouraging people to take proactive steps toward better mental health.

The key terms used for search strategy included mental health literacy, positive mental health, mental health stigma and attitude, positive mental health, mental health competence etc. Various databases available online were searched with these key terms. The papers reviewed were limited to the researches published in the last 30 years. The papers published in English were only reviewed. Non-English papers were excluded in the screening. Both primary and review based researches were studied.

Status of Mental Health Literacy

India, with a population exceeding one billion, faces significant mental health challenges. A 2015 WHO report predicted that almost one in 5 Indians—around two hundred million people—may additionally experience melancholy in some unspecified time in the future of their lives. However, due to persistent stigma, lack of knowledge, perception of confined admission during treatment, a significant number of people are reluctant to take a remedial action to resolve mental health issues.

The Live Love Laugh Foundation (TLLLF) and Kantar Public (2018) conducted a study on mental health literacy. TLLLF is a non-profit organization dedicated to addressing stress, anxiety, and depression, works to raise awareness and combat stigma surrounding mental illness in India. To better understand public attitudes toward mental health, TLLLF conducted five-month study involved 3,556 participants across eight cities in India and explored individuals' awareness of mental health illnesses, their perceptions, attitudes toward it, and the social stigma that often surrounds these issues. The study identified that 62% people described people who had mental illnesses by using terms such as mad, stupid, retard, careless, crazy. Almost 60% of people were of the opinion that mentally ill people should form their own groups so that they do not contaminate other people. A percentage of people ranging between 28% to 43% people in the sample expressed feeling of hatred, disgust, annoyance and anger towards mentally ill in the 'always' and sometimes' category. The majority of remaining percentage of people responded in the 'Never' category for the above mentioned emotions.

Wickstead and Furnham (2017) described that the idea of health literacy i.e. physical or general health literacy (HL) is widely recognized and studied, but mental health literacy (MHL) did not get the same level of recognition in terms of public awareness. The studies examining the relationship between MHL and HL have indicated that individuals generally demonstrate greater awareness and understanding of physi-

cal health compared to mental health. White & Casey (2017) stated that the widespread prevalence of mental health disorders poses a major concern for public health experts, given their numerous consequences for individuals, families, and the broader socioeconomic burden they place on national economies. Despite this, a substantial proportion of individuals experiencing mental health conditions do not get any professional assistance.

Jorm (2015) emphasized public awareness and understanding of mental illnesses, as well as being aware of where and how to get treatment. The concept has gained so much attention that articles are now being titled according to very specific "literacy," such as schizophrenia literacy and dementia literacy, which refer to understanding of a particular illness. He explained how the concept's adoption has influenced policy and sparked the creation of several initiatives.

O'Connor, Casey and Clough (2014) elaborated the field of MHL by examining more than 400 publications and have identified several concerns affecting mental health literacy. Vignette tactics have been criticized by several. Several scholars have been more critical, pointing to the construct's ambiguity and underdeveloped theoretical foundation. Similarly, the diversity of approaches used to measure MHL is considerable.

The studies on mental health literacy (MHL) consistently indicate that the lack of adequate public knowledge about mental health serves as a significant obstacle, discouraging many from pursuing or accessing proper care. Goldner, Waraich, and Hsu (2006) noted that the occurrence of mental disorders differs depending on the specific condition and demographic factors. The prevalence of mental health issues also shows variation across genders, with women typically reporting higher rates than men. Findings from a World Health Organization (WHO) survey conducted in 26 countries further revealed that while substance use and impulse-control disorders are relatively less common globally, anxiety and mood disorders continue to be the most widespread mental health conditions. Furthermore, there seem to be regional, national, and cultural variations; prevalence rates are often lowest in Asian countries and highest in Western countries; however, this could be due to MHL. But crucially, low self-reporting rates and inadequate diagnosis (especially in nations with less access to mental health treatments) are thought to be the main reasons why reported prevalence rates are thought to be underestimates. For instance, general population surveys conducted in the United States have revealed that about 50% of people have a lifetime mental health issue.

Clarke et al. (2006) explored those systemic obstacles that prevent people from getting treatment, like financial difficulties, restricted access to mental health services, or ignorance about available resources. Alonso et al. (2004) examined the prevalence of mental health disorders across multiple countries

over recent decades, providing valuable estimates of their occurrence. Although these studies employed differing definitions and severity criteria, most community-based surveys consistently indicate that mental health issues are common across various cultural settings. According to the World Health Organization (WHO), over one-third of the global population experiences a mental health disorder at some stage in their life. Likewise, cross-European analyses suggest that nearly one in three people will face a mental health condition at some point during their lifetime.

Demyttenaere et al. (2004) examined that in the year before the survey, over half of cases of major mental illness in affluent countries and around four out of five cases in less developed countries did not receive any treatment. This is especially concerning since it has been demonstrated that seeking help for mental health concerns early on encourages early action and improves long-term effects.

Link et al. (1999) stated that the social environment, especially recent stressors, is the etiology of schizophrenia. On the other hand, the etiology of schizophrenia seems to place a lot less stress on elements like genetic inheritance and chemical abnormalities in the brain. Similar studies have demonstrated that when attempting to explain the etiology of several mental health illnesses, including depression, greater emphasis is often placed on social environments and life experiences rather than biological factors when understanding mental health. Although this tendency varies across different conditions, there is a growing public shift toward recognizing biological explanations for mental health issues.

Jorm et al. (1997) described mental health literacy (MHL) as the knowledge and beliefs about mental disorders that aid in their recognition, management, and prevention. Among various mental health conditions, schizophrenia and depression have been the most extensively examined in related research.

Helman (1989) emphasized that research in this field has largely focused on the explanatory models people use to interpret the maintenance of health and the causes of illness. These models generally represent the beliefs and perceptions of laypersons, offering insight into how non-professionals conceptualize health and disease.

The research that has been reviewed above provides us with a wealth of information about mental health literacy. It was required to read earlier studies to comprehend mental health literacy and to analyse relevant data for subsequent readings and research. The studies mentioned above provide a foundation for the following analyses of mental health literacy:

Prevalence of Mental Health Literacy

A sound physical health and a sound mental health condition constitute an overall healthy individual. Mental illness is defined as a therapeutic relevant change in individual's behaviour, affective modulation, or

thought processes that are usually accompanied by distress or functional impairment. The prevalence of various mental health illnesses such as depression, anxiety, personality disorders, schizophrenia among others is high. Sources of information on mental health illnesses play an important role in shaping correct perception and impression among the public.

Finding Relevant Information on Mental Health

There is comparatively little evidence available about how people get information and opinions about mental health. Anecdotal evidence from friends and family as well as personal experiences are most likely important sources. In a UK survey, 33% of participants said that their main source of information comes from personal interaction or involvement with a person who has mental illness, with friends and family coming in second at 10%. In fact, it has been discovered that personal experience or interaction is linked to ideas regarding causes, more positive attitudes, treatment preferences, and a better comprehension of any mental illness.

Various reports by journalists, television dramas and the movies featuring mental illnesses are other significant sources that make an impact on mental health perception and attitude. The media was cited by 32% of respondents in the UK as their main source of information. Unfortunately, these media frequently focus on the bad aspects while reporting. According to a general public survey conducted in Germany, 64% of participants said they had read about a mentally ill person. They had read about individual dependent on drugs. Still, a mere 17% reported knowing about someone with mental illness who functioned well because of their medication.

It is apparent that negative news shapes attitudes. According to another German study (Angermeyer and Matschinger, 1996) two assassination incidents' news attempts negative portrayals of people with mental disorders, especially in incidents involving famous politicians, have increased public stigma. Television and films often depict such individuals as violent or unstable, reinforcing harmful stereotypes. Such aggressive and socially violent personality disturbances could be the symptoms of some mental illnesses, there are various other illnesses in which an individual does not harm others. However, such publicized incidents distort the public perception and lead them to focus on these few incidents to form an overall impression about mental illnesses and the people suffering from these illnesses. Considering media reports and its exaggerated depictions, the public definitely overestimates the risk of violence, even though it affects a small percentage of those with serious mental problems.

People with more resources and education have access to study classes, books, libraries, and the internet as knowledge sources. Although some mental health websites receive a lot of traffic and some self-help books are bestsellers, it is unknown how much

of an overall impact these sources have on mental health literacy. It is required to monitor closely as these sources ensure the public is given reliable information. The content on different websites concerning mental illnesses mainly on depression was generally of very low quality when compared to the therapeutic practice.

The WHO (2021) has highlighted the link between suicide, mental illness, and the achievement of sustainable development goals. Alarming, between 2021 and 2022, the number of suicide cases in India rose by 3.3%, highlighting an escalating mental health crisis and a significant shortage of accessible mental health services which is an important component of sustainable development. In low- and middle-income countries (LMICs) like India, treatment gap in mental health conditions remains vast—nearly 76% to 85% of those in need do not receive care. This imbalance primarily arises from limited financial resources, inadequate infrastructure, and a shortage of trained professionals. Although India has made progress in several health parameters, it still carries a disproportionately high share of the global disease burden. Health outcomes remain weaker than those of comparable middle-income nations, and many individuals continue to fall into poverty due to high out-of-pocket healthcare costs and inadequate access to quality medical services.

To address these challenges, experts advocate for task-shifting approaches, where non-specialist community health workers are trained to provide fundamental mental health interventions. Considering the scarcity of psychiatrists, psychologists, psychiatric nurses, and social workers, future mental health strategies should prioritize strengthening primary healthcare systems and implementing community-based, innovative mental health delivery models to bridge the treatment gap and improve access nationwide.

Mental Well-being Awareness

Inadequate awareness and understanding of mental health remain major barriers, as they hinder the implementation of effective behavioural health interventions and, more importantly, reinforce the stigma surrounding mental illness. Both stigma and restricted availability of behavioural health resources act as deterrents, diminishing the likelihood of individuals pursuing or adhering to treatment for psychological well-being. Behavioural health involvement was found to be positively correlated with unfavourable views about mental health care and low mental health literacy, even after socio-demographic characteristics were taken into account.

Education was also associated with the acceptance of the people's medical care as beneficial. Counselors and psychiatrists were the sources of assistance for the respondents. In research conducted in Australia, adults universally assessed professional assistance as helpful, while the majority of young people agreed.

According to Jorm (1997) the general people had a favourable opinion of psychological and lifestyle tactics and approaches but a bad opinion of medical treatment. Similar results were found in research conducted among Australian and Japanese populations.

Significance of Mental Health Services

The reviews of MHL researches have clearly shown that many populations are not sufficiently literate in mental health. This ignorance has a lot of serious consequences. Low mental health literacy also causes excessive dependence on mental health professionals in both the treatment and prevention of psychological disorders. When individuals lack adequate understanding of mental health issues, less engage in self-help strategies, early identification, or community-based support systems, resulting in an overburdened professional care sector and delayed intervention. However, given the widespread nature of these conditions, the available mental health workforce is limited and primarily focused on severe or chronic cases. To promote prevention, early intervention, self-care, and community support, society needs to cultivate a mental health literate culture.

Research Gap and Further Scope

There is a clear need for more intervention-based research that explores how specific strategies can enhance mental health literacy and to improve overall mental well-being. Such research should also examine how cultural beliefs and values influence individuals' understanding, management, and help-seeking behaviors regarding mental health issues. Age, environment, and socio-cultural background are important factors that shape mental health literacy outcomes, and understanding their effects can help design more effective interventions. Moreover, comparing the effectiveness of short-term versus long-term awareness initiatives and identifying the most suitable screening tools for use in non-Western settings remain crucial research priorities.

Focusing more research efforts on improving mental health literacy could help reduce inequalities in mental health care, especially in low- and middle-income countries that face significant barriers in accessing mental health services. Current evidences suggest that mental health literacy remains particularly low among children, adolescents, and young adults, as well as among older adults and individuals with chronic or mental health-related conditions. Enhancing mental health literacy across all these groups requires the integration of psycho-education programs, which remain underutilized in many clinical and community settings.

There is an urgent need to educate people about various mental health disorders and promote awareness at multiple levels of society. Mental health professionals can play a key role by providing accurate/relevant information for children, adolescents, and adults, helping them recognize symptoms and take proactive steps

to maintain their mental well-being. Implementing structured awareness programs in schools, colleges, and universities can help young individuals identify mental health problems early. Building this foundational knowledge serves as an essential form of “mental health first aid,” empowering individuals to support themselves and others more effectively.

Conclusion

Mental health literacy remains low across populations and age groups worldwide. As mental health disorders become increasingly common due to changing social, environmental, and family dynamics, there is a growing need to enhance awareness of mental health. This need is especially critical in countries with limited availability of mental health services and inadequate healthcare infrastructure. In absence of proper mental health systems not only worsens the overall disease burden but also hinders national economic development, further widening global economic inequalities.

Improving mental health literacy requires policymakers to provide various psychiatric conditions of prevalence at both global and local levels. Such awareness can guide more effective policies and interventions that address the widespread impact of mental health issues on communities. Reducing stigma and misconceptions surrounding mental illness is equally important. Many individuals avoid seeking professional help because they fear social judgment or misunderstanding, even when mental health services are available. Promoting accurate information and open discussions about mental health can encourage people to seek timely support and treatment. Overall, mental health literacy remains a major challenge. Despite progress in some developed nations, low literacy levels persist globally, influencing people’s ability to recognize symptoms, make informed decisions, and engage in help-seeking behaviors.

Enhancing mental health literacy can therefore play a vital factor in improving individual well-being and community health outcomes. The attitudes of the persons toward mental health services and professionals are also one important factor that affects the decision to seek help. The prevalent prejudice regarding mental health propels an individual to sustain a stigmatic attitude towards mental health patients and towards any individual undergoing any psychotherapy or counselling service.

The problems of stigma associated with mental health services could be weakened if the researchers and professionals create and assess the effectiveness of treatments that are useful and cause significant improvement in the mental health of seeking individuals. If such effective mental health interventions prove to be effective and the evidence of effective interventions reaches the public, it further strengthens and restores trust for mental health counseling and therapies, etc. Narrative advertising by the public role models highlighting the importance of mental health care

also nurtures people’s mindset to seek such services for them as well. The printed mental well-being information is also used as a strategy to improve Understanding of mental well-being by some organizations that are working to uplift mental health. Mental health literacy is increasing, at least in some populations, which is a good indication. The positive experiences and impacts of mental health services on the people’s lives will further reinforce other people in the long run to seek services.

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