

## **Symposium OSPI-Europe**

***Public attitudes toward depression & seeking  
professional help:***

***Baseline survey prior to OSPI intervention***

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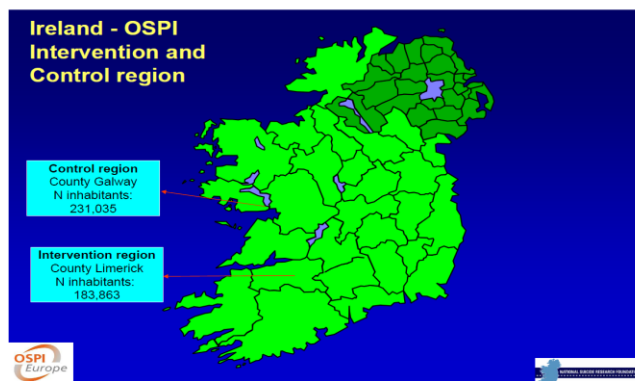
**Safety 2010 Conference, London, 22th September 2010**

# Method

- **Survey method**
    - representative general population survey
      - by means of phone interviews
      - stratified sample: gender & quota ~ population distribution
      - adult population (18+)
    - in 4 OSPI intervention countries
      - Germany, Hungary, Ireland, Portugal
      - intervention and control regions (n=500 each)
      - Total sample: N=4011
    - baseline assessment before intervention period
      - same survey repeated after intervention
- => assess effects of intervention in controlled design

# OSPI intervention regions

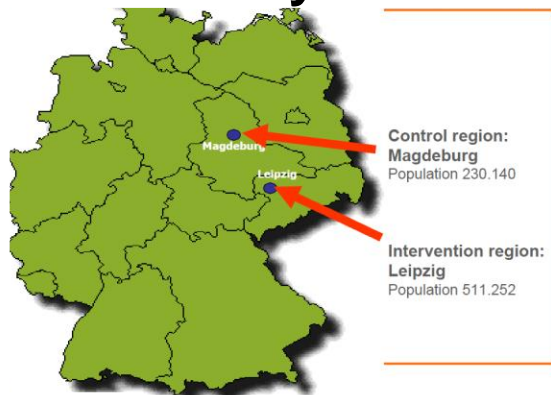
## Ireland



## Hungary



## Germany



## Portugal



# Method

- **Survey instrument**
  - Sociodemographics
    - gender, age, education, marital status, occupational status
  - Mental health
    - self-reported depression, core symptoms, MHI-5, DSH
    - experience mental ill-health relatives, alcohol abuse, social support
  - Mental health care use
    - ever discussed psychological problems (GP or MH professional)
    - ever received treatment (in case of depression / DSH)
    - intention to seek professional help (in case of)
  - Attitudes toward mental health
    - Depression Stigma Scale (DSS)
      - 2 scales: personal stigma < > perceived stigma (social norm)
    - Attitude toward seeking profess. psychological help (ATSPPH-SF)
      - 2 scales: openness to help < > value of help

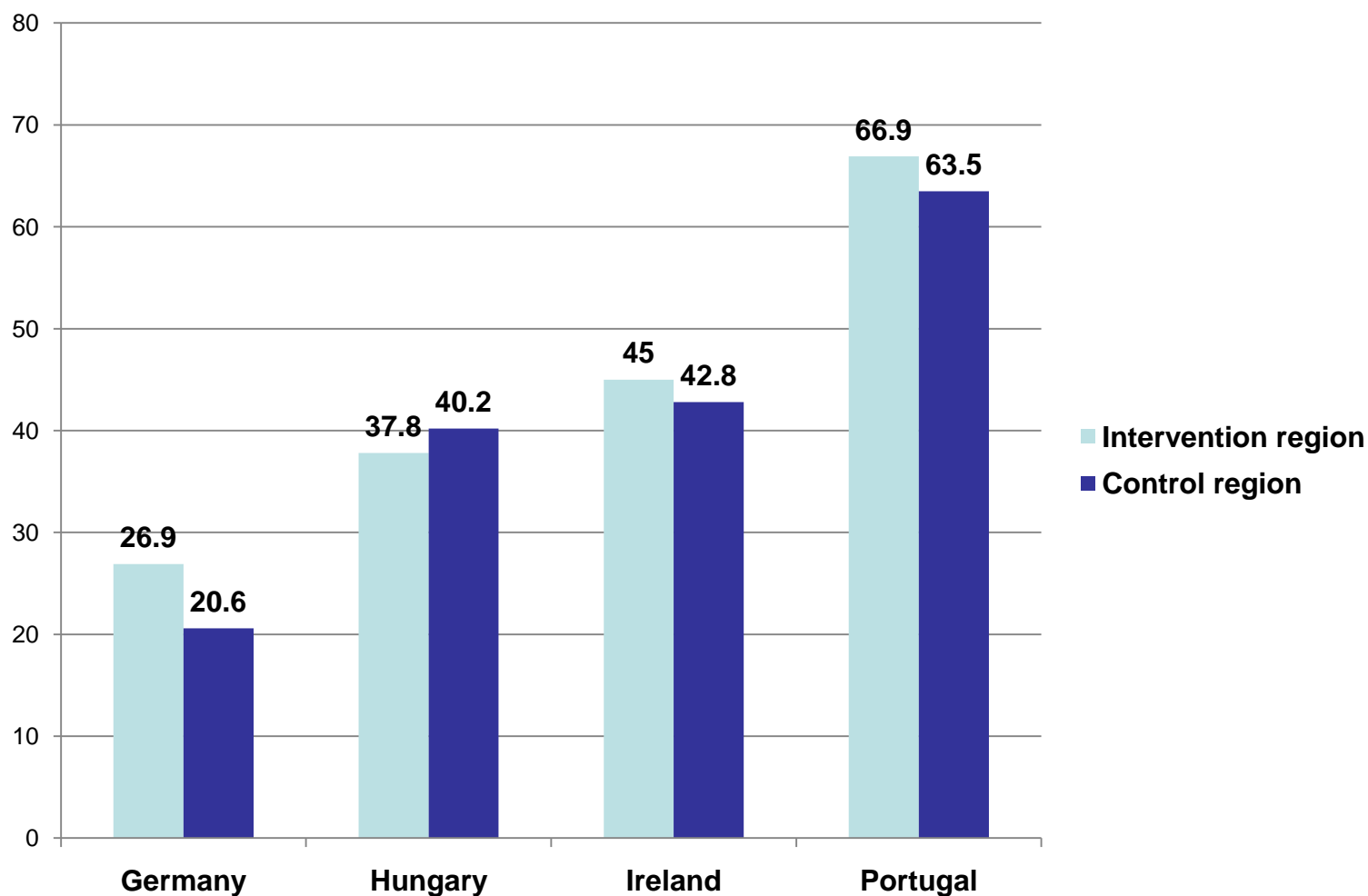
# Results

- **Sociodemographics**
  - gender and age quota fairly achieved
    - 52% females - 48% males
    - mean age: 47.8 years old
  - education
    - 13,0 years of schooling (mean)
    - country differences (Hungary 14,9 – Portugal 11,7)
  - marital status
    - **41%** living alone (mean)
    - slightly elevated in intervention regions
  - occupational status
    - **8,1%** unemployment (mean)
    - country differences (Ireland 12.0% - Hungary 5.6%)

# Results

- **Experienced mental ill-health in relatives** (ever)
  - depression: **43%**
  - deliberate self-harm: **17%**
  - suicide: **13%**
    - large country differences (Germany 24% < > Portugal 65%)
- **Alcohol abuse** (last year)
  - **7%** „yes“ *any* alcohol abuse item
    - higher rate (10%) in Germany
- **Social support** (currently)
  - **85%** reports „great deal“ of social support from *any* source

# % depression in close family or friends

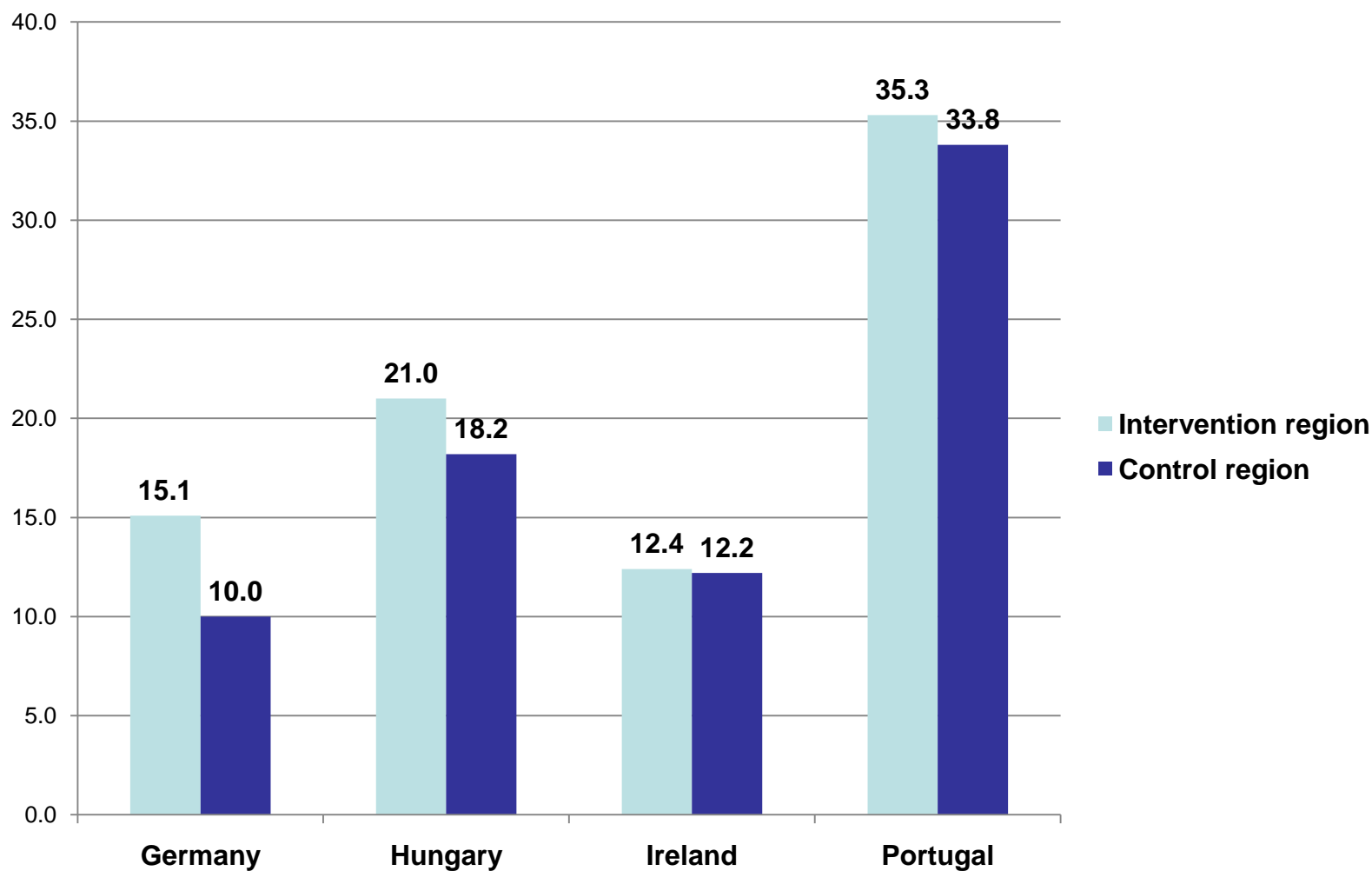


## Mental health

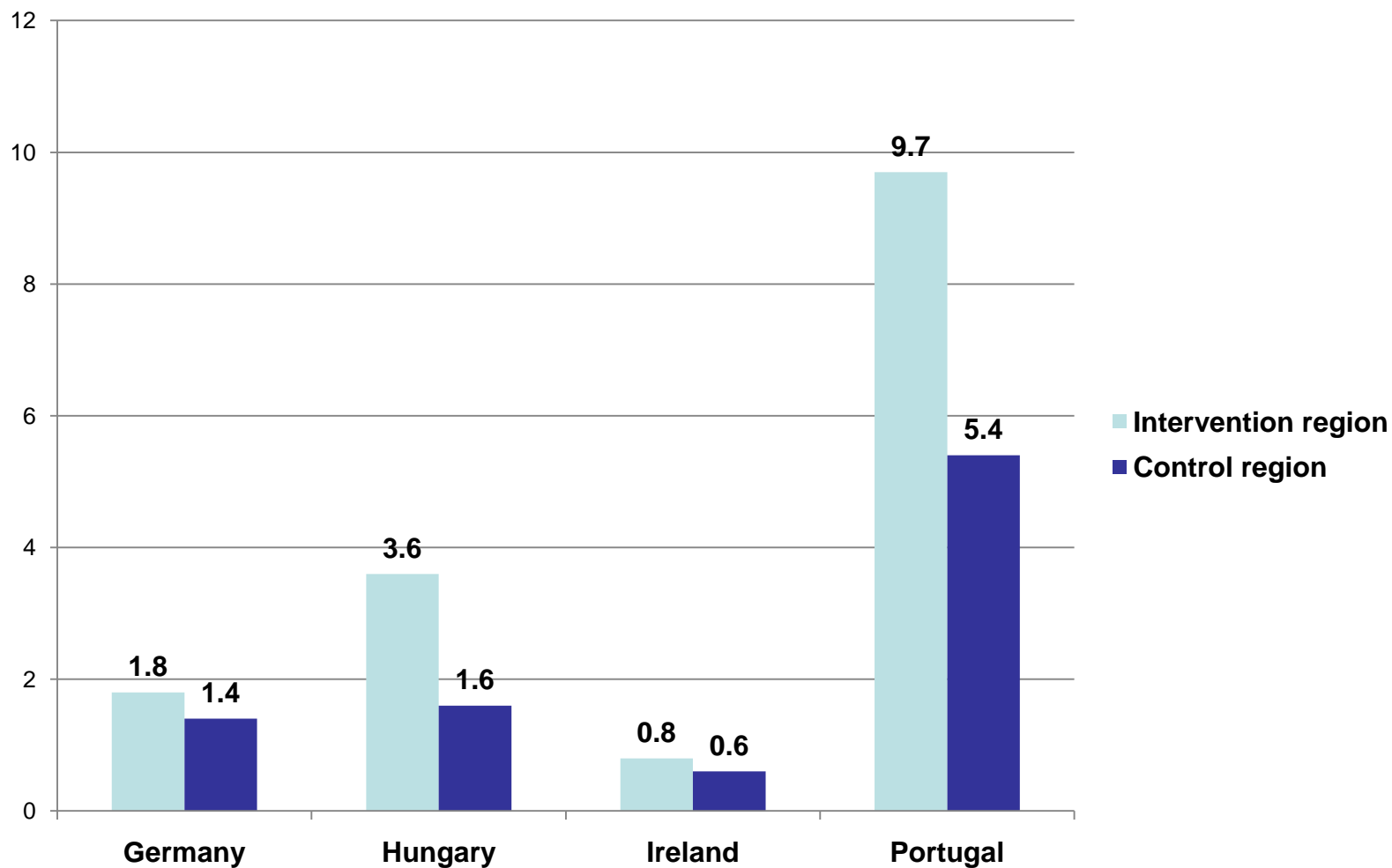
- **Self-reported depression: 19,8%**
- **Symptoms of depression** („sad“ „lost interest“)
  - **35%** *any* symptom
  - **20%** *both* symptoms
- **Deliberate self-harm: 3,1%**
- **For all measures:**
  - high rates in Portugal
  - elevated rates in intervention regions (esp. Germany)



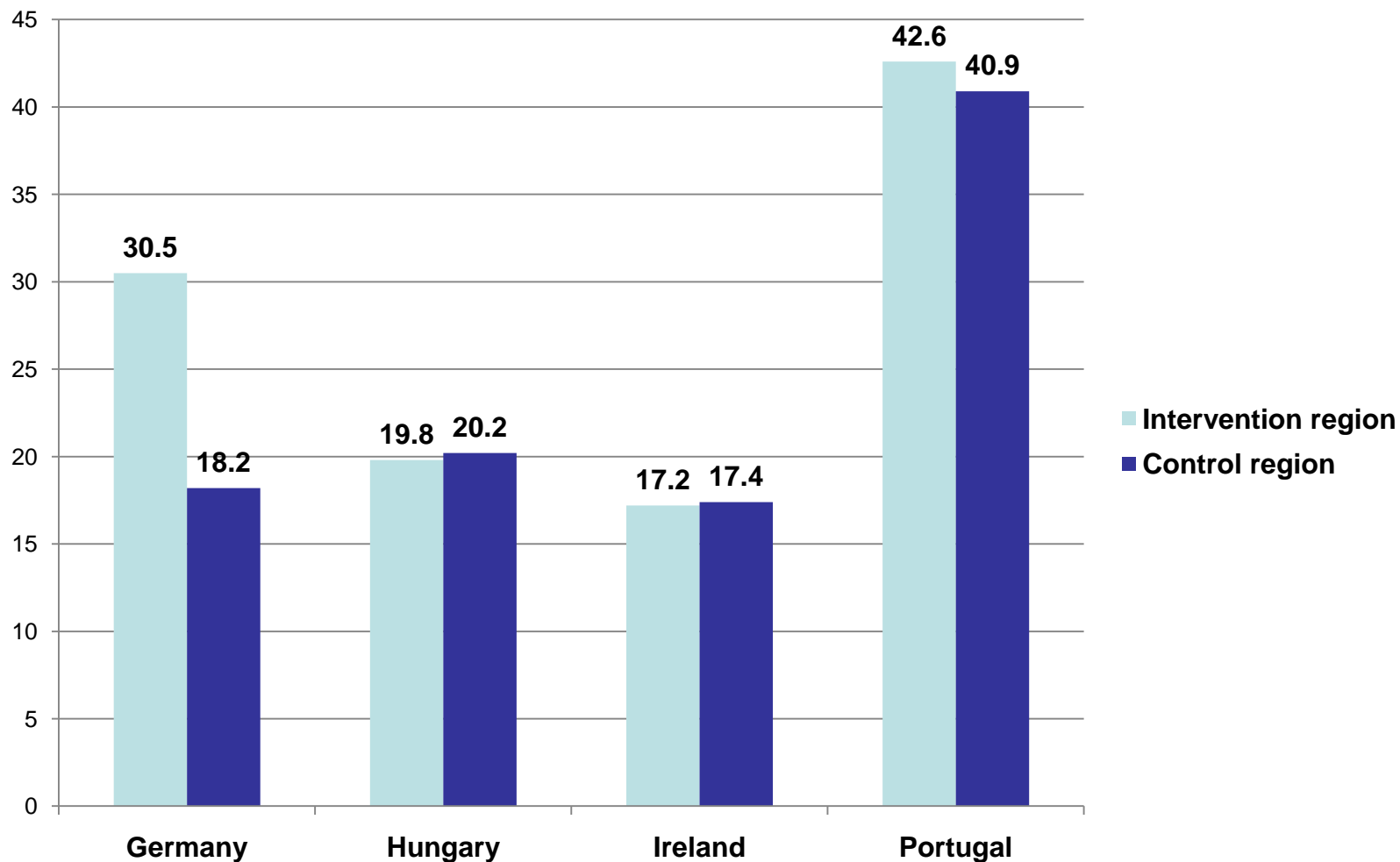
# % Self-reported depression (ever)



# % Deliberate self-harm (ever)



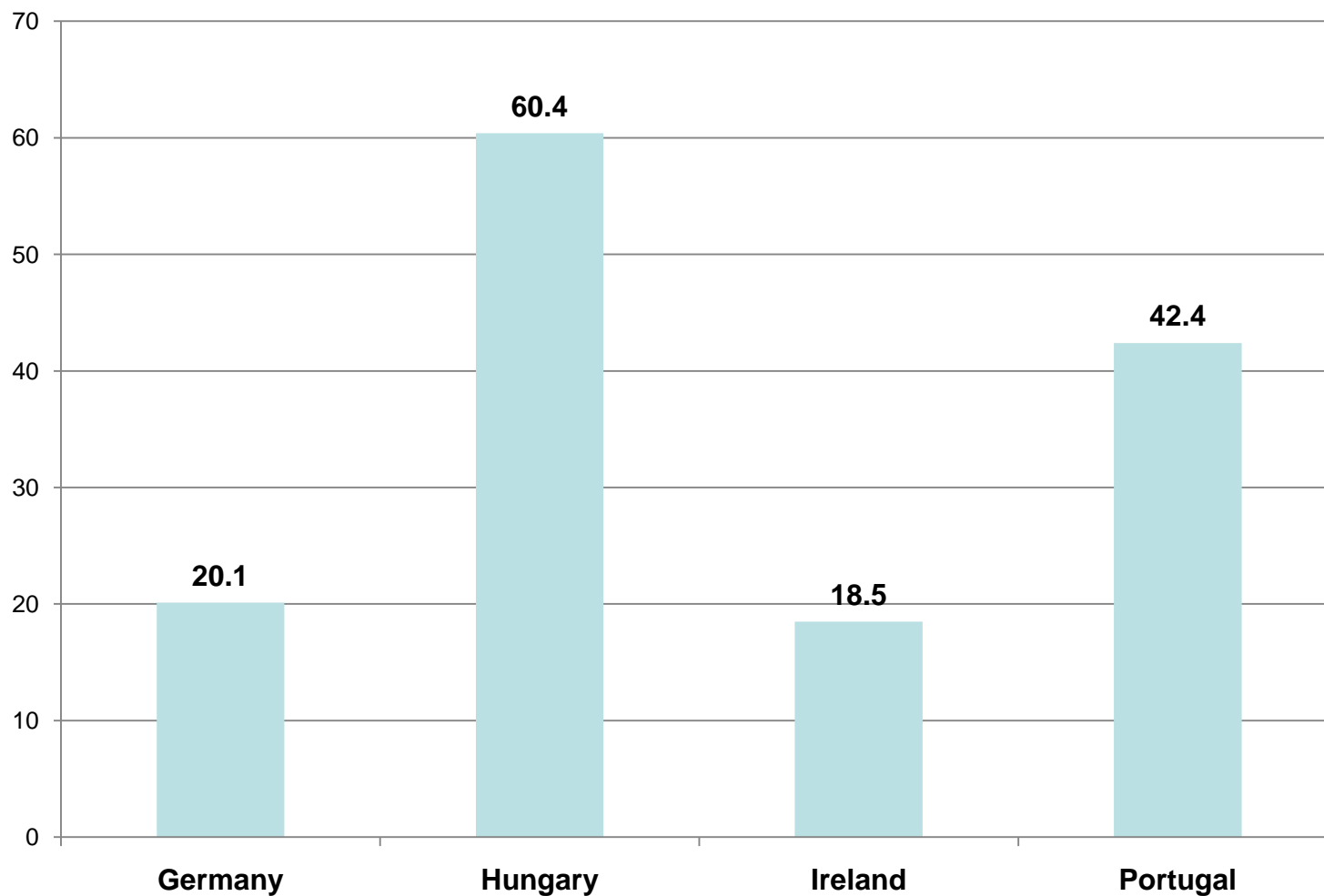
# % ever discussed psychological problems



# Attitudes toward mental health

- **Attitude toward depression (DSS)**
  - Personal stigma scale
    - about **30%** agrees with stigmatising items
      - personal weakness, not real illness, better avoid, better not tell, ...
    - higher personal stigma in Hungary
      - 60% “snap out”
      - 46% “personal weakness”
    - some signs of lower personal stigma in Ireland
    - strange pattern in Portugal
      - higher score (42%) for “snap out” (although higher care use)

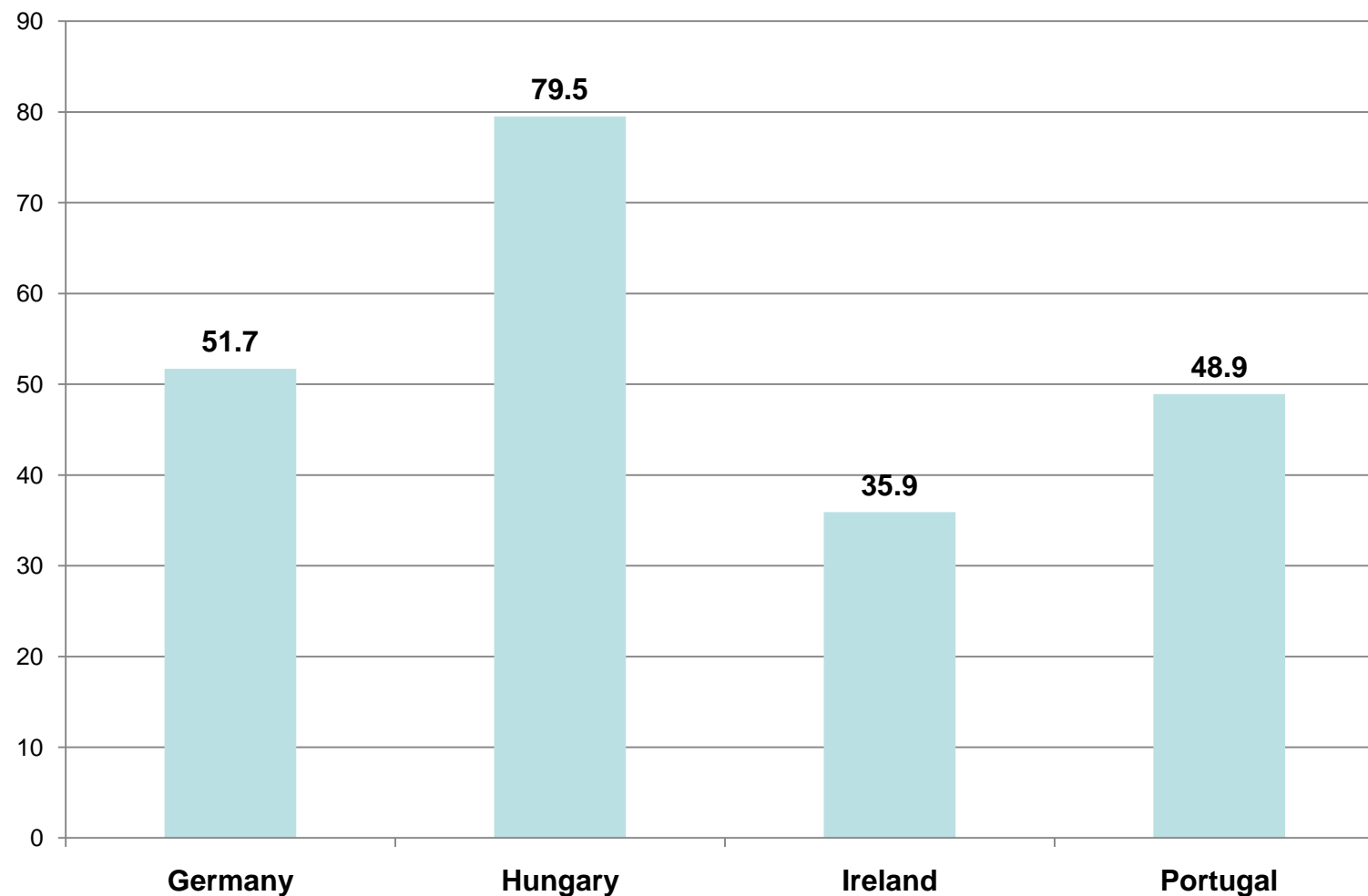
# “People with depression could snap out if they wanted” (% agree)



# Attitudes toward mental health

- **Attitude toward seeking professional help** (ATSPPH-SF)
  - Openness to professional help scale
    - about **70%** agrees with openness items
      - e.g. “I would want ... if upset for long time”
    - large country differences
      - less openness in Hungary
      - more openness in Portugal
  - Value of professional help scale
    - about **45%** agrees with (low) value items
      - e.g. “doubtful value”, “poor way”, “last resort”, ...
    - large country differences
      - lower perceived value in Hungary
      - more favourable attitudes in Ireland

# “People should work out themselves; counselling is last resort” (% agree)



# Conclusions

- **Clear baseline results**
  - Mental health & care use
    - relatively high rates of mental ill-health, esp. in Portugal
    - low degree of past care use in cases of depression / DSH
    - important country differences
    - differences intervention - control region
  - Attitudes toward mental health
    - moderate degree of personal stigma, but high social stigma
    - moderate degree of care use intention
    - relatively open to treatment, but lower perceived value
    - important country differences
    - strong relation between mental health - care use - attitudes
- **Scope for improvement by campaign**
- **Interesting results for further in-depth investigation**