

MEDIA RELEASE

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IMH study shows an increase in mental health literacy and reduction in stigma among Singapore residents

1. Mental health literacy in Singapore has improved with more people being able to correctly identify common mental health conditions. The percentage of Singapore residents who were able to recognise common mental health conditions¹ increased from 42.3% to more than half the population at 58.9% between the first and second Mind Matters studies conducted eight years apart². Stigma or negative perceptions towards people with mental health conditions have also improved significantly.
2. These are some of the key findings from the second Mind Matters: A Study of Mental Health Literacy, conducted by the National Healthcare Group's Institute of Mental Health (IMH). This nationwide cross-sectional survey was initiated in 2022 to examine public knowledge and awareness of common mental health conditions, as well as the perceptions and stigma associated with them.
3. The scope of the second Mind Matters study has been expanded to include two new mental health conditions – Depression with Suicidality and Gambling Disorder, in addition to the five conditions examined in the first Mind Matters study – Dementia, Depression, Schizophrenia, Alcohol Abuse and Obsessive Compulsive Disorder (OCD). Taking the two new conditions into account, recognition of the seven mental health conditions among Singapore residents is 63.3%.
4. “The lack of awareness and fear of judgement by the people around us are key barriers to help-seeking. Left untreated, the conditions may worsen, leading to more severe outcomes. If we can correctly recognise mental health conditions, know the importance of early treatment, and are aware of appropriate avenues of help, we are more likely to seek help for ourselves or encourage others to do so. Mental health literacy plays a big role in this. It not only improves awareness but helps to build a culture where seeking help is seen as a strength rather than a weakness. Our first Mind Matters study provided us with baseline information on our population's knowledge and attitudes towards common mental health conditions. In the last eight years, various mental health awareness and anti-stigma initiatives have been introduced to improve mental health literacy in Singapore. We are gratified that our study findings show that we are moving in the right

¹ Dementia, Depression, Schizophrenia, Alcohol Abuse and Obsessive Compulsive Disorder.

² The first Mind Matters study was conducted between 2014 and 2015, and the second study between 2022 and 2024.

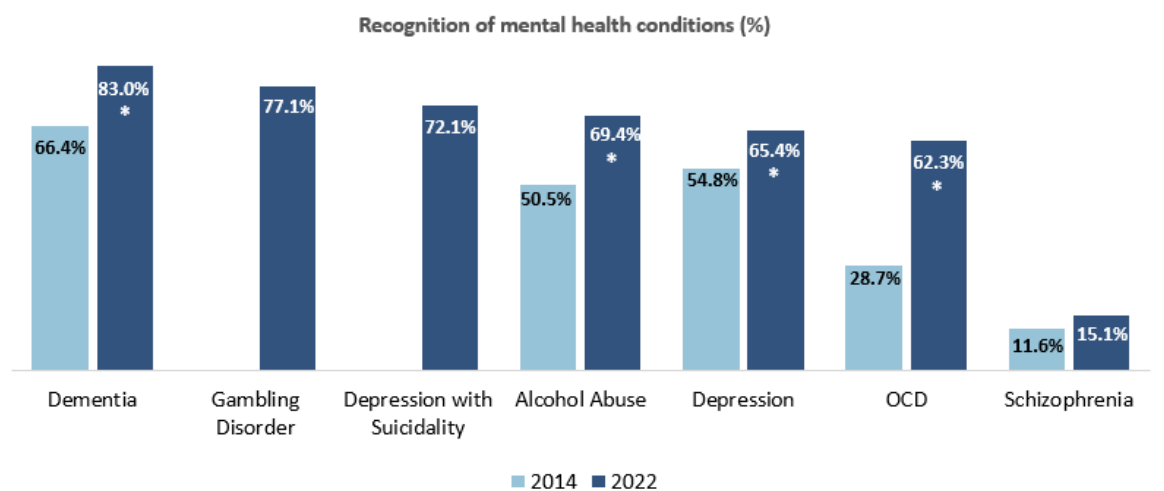
direction,” says Professor Chong Siow Ann, Principal Investigator and Senior Consultant, Research Division and Department of Psychosis, IMH.

5. The Mind Matters study was funded by the National Medical Research Council and Tote Board, and included collaborators from Silver Ribbon (Singapore), MOH Office of Healthcare Transformation and University of Leipzig.
6. The study involved 4,195 Singapore Citizens and Permanent Residents aged between 18 and 67 years, who were randomly selected from a national administrative database. The participants were interviewed face-to-face from September 2022 to February 2024 using a vignette-approach (short story of a hypothetical person with a mental health condition) to assess their recognition of the mental health condition, attitudes towards the character, and beliefs regarding appropriate sources of help. [See Annex B for a vignette example]. The survey also collected respondents’ socio-demographic information, as well as self-reported data on whether they themselves, their family members, or close friends had problems similar to the character in the vignettes.

KEY FINDINGS

7. Recognition of mental health conditions

- Overall, 63.3% of respondents in the current Mind Matters study correctly identified the condition across the seven vignettes. The top three mental health conditions that respondents were able to correctly identify were Dementia (83.0%), Gambling Disorder (77.1%) and Depression with Suicidality (72.1%).
- Compared to the first Mind Matters, the second study showed an improvement in recognition of the five common mental health conditions. The condition that showed the greatest improvement was OCD, with an increase of 33.6%.
- Nonetheless, OCD and Schizophrenia remained the two least recognised conditions in both studies.



*Sig. differences between 2022 and 2014

8. “Mental health literacy is important as it provides clarity on what constitutes a mental disorder, and how that may differ from mental health difficulties we face in our daily lives. It can alert us to early signs and symptoms of strains on our mental health and certain mental health disorders. Such knowledge empowers us to practise better self-care and seek timely help for ourselves and our family and friends. It also helps us to overcome stigma. I observed that many affected youths hesitate to ask their parents for help, preferring to turn to digital resources and social media instead. We can streamline and increase accessibility to resources, to ensure appropriate and accurate information is being communicated to youths. We can also reach out to parents to create more effective dialogue around mental health, and be better equipped to support their children,” says Dr Tan Weng Mooi, Director of Integrated Health Promotion at MOH Office for Healthcare Transformation.

9. Factors associated with recognition of mental health conditions

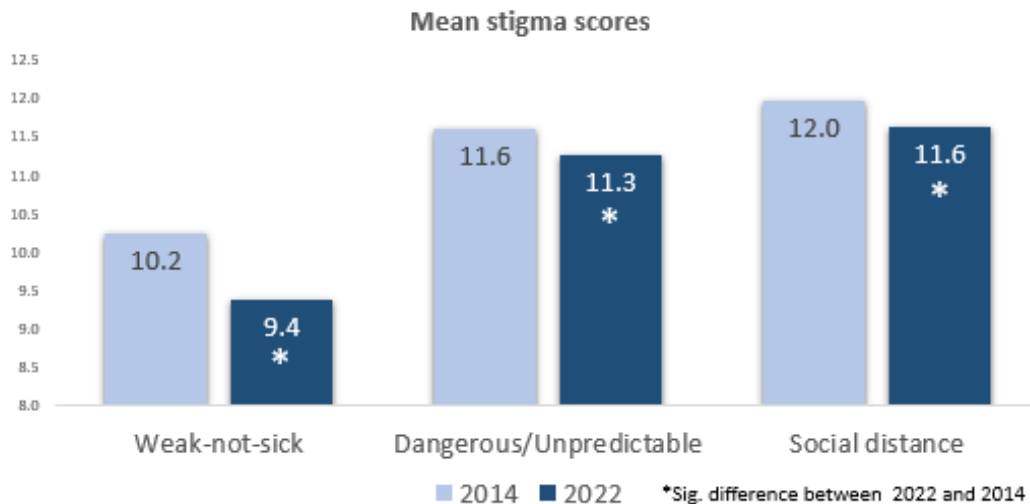
- Respondents aged 35-49 and 50-67 years were less likely to recognise Schizophrenia compared to younger respondents aged 18-34. Only respondents in the 35-49 age group were less likely to recognise Dementia.
- Females were more likely to recognise OCD but less likely to recognise Gambling Disorder.
- Those of Malay ethnicity were more likely to recognise OCD, while those of Indian ethnicity were less likely to recognise Dementia and Depression with Suicidality.
- Those with primary education level or less were less likely to recognise Schizophrenia and Depression with Suicidality compared to those with university education.
- In comparison to respondents who earned \$10,000 or more a month, those in the lower income brackets were less likely to recognise Schizophrenia, OCD, and Dementia.
- Respondents who reported experiencing Schizophrenia and Gambling Disorder symptoms were less likely to recognise these conditions. In contrast, those who reported experiencing Depression symptoms were more likely to recognise it.
- Respondents who had family members or close friends with Schizophrenia and Dementia were more likely to recognise these conditions.

10. Stigma

Stigma towards persons with the condition was assessed through three dimensions: (a) perceiving them as ‘weak-not-sick’, (b) perceiving them as dangerous or unpredictable, and (c) having the desire to socially distance from them. Stigma was measured using a scoring system based on respondents’ agreement ratings for a list of statements, where higher scores signify greater stigma.

- a) **Weak-not-sick dimension:** Measures the extent to which the condition was perceived as sign of personal weakness rather than a medical condition (sickness). Participants' scores on this dimension ranged from 3.0 to 15.0.
- Gambling Disorder and Alcohol Abuse were rated the highest as a personal weakness (mean scores of 10.5 and 10.1 respectively) while Dementia was rated the lowest on this dimension (mean score of 8.2).
 - Older individuals aged 35-67 years, those of Malay or Indian ethnicity, individuals who had less than university education or earned a monthly income of less than \$10,000 were more likely to rate the seven mental health conditions as a sign of personal weakness than a medical condition.
- b) **Dangerous or Unpredictable dimension:** Measures the extent to which persons with the condition were perceived as dangerous or unpredictable. Respondents' scores on this dimension ranged from 4.0 to 20.0.
- Alcohol Abuse, Gambling Disorder, and Schizophrenia were rated the highest on dangerousness and unpredictability (mean scores of 13.0, 12.2 and 12.2 respectively) while OCD was rated the lowest on this dimension (mean score of 9.4).
 - Older individuals aged 35-67 years, those who had Secondary level education or less, or those who earned a monthly income of less than \$6000 were more likely to rate the seven mental health conditions more highly as dangerous or unpredictable.
 - In contrast, females, those of Indian ethnicity, or those who ever had similar problems were less likely to perceive persons with the condition as dangerous or unpredictable.
- c) **Social distance dimension:** Measures the extent to which respondents want to socially distance themselves from persons with the condition. For example, they are unwilling to live next door, work closely or spend an evening with the person. Respondents' scores on this dimension ranged from 5.0 to 20.
- Respondents reported the strongest desire to socially distance themselves from persons with Schizophrenia, Alcohol Abuse and Gambling Disorder (scores of 13.1, 12.6 and 12.6 respectively). They were least likely to want to do so with persons experiencing Depression with Suicidality, Depression, and OCD (10.5, 10.7 and 10.7 respectively). Social distancing scores towards people with Dementia fell in between with a mean of 11.4.
 - Individuals who earned a monthly income of less than \$2000 were more likely to desire social distance from persons with these seven conditions.

- Females, those of Malay or Indian ethnicity, those who had Secondary level or A-level, Diploma or ITE certification, or those with family members, close friends or themselves had experience similar problems were less likely to do so.

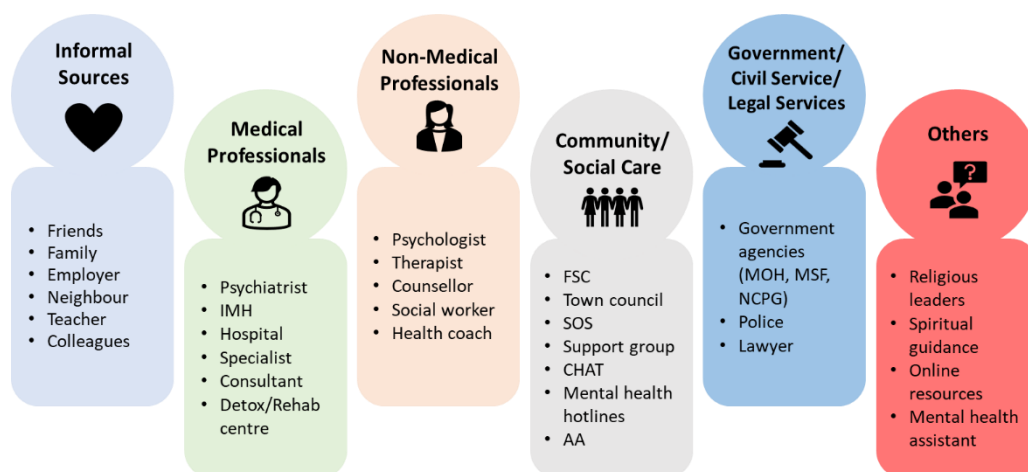


11. “These findings are extremely encouraging and helpful as we are often asked about the extent of stigma in Singapore at our events, meetings and talks. It is heartening to note the improvement in public perception towards persons with mental health conditions. In fact, our government, mental health agencies and other stakeholders took prompt action in supporting the community through collaborative effort during the pandemic and continue to invest their time and effort in mental health advocacy and promotion. In addition, the study has enabled us to better understand which groups we should focus on in our outreach efforts as we develop our mental health programmes and services,” says Ms Porsche Poh, Executive Director of Silver Ribbon (Singapore).

12. Perceptions about Help-seeking

- When asked where someone with these mental health conditions should seek help, Medical Professionals (54.1%) were the most frequently recommended sources of help by respondents. This was followed by Informal Sources (37.1%), Non-Medical Professionals (23.4%), Community/Social Care (8.9%), Others (2.1%), and Government/Civil Service/Legal Services (1.8%).
- There were significant increases in the recommendation of Informal Sources (37.1% in 2022 from 30.8% in 2014), Non-Medical Professionals (23.4% in 2022 from 17.8% in 2014), and Community/Social Care (8.9% in 2022 from 5.2% in 2014) in the second Mind Matters study compared to the first.
- Informal Sources were the most frequently recommended help-seeking source for Depression (59.3%), Depression with Suicidality (57.5%), and Gambling Disorder (39.7%).

On the other hand, Medical Professionals were the most frequently recommended source for Dementia (85.7%), OCD (72.2%), Schizophrenia (63.1%) and Alcohol Abuse (49.6%).



Full forms of abbreviated sources of help are listed in the footer³

13. “The results were a pleasant surprise to all of us. IMH and other agencies have been consistently working to improve the mental health literacy of the population, and it was reassuring that the efforts were effective. The significantly increased recognition noted across almost all disorders and the reduction in stigma scores both point to the improved mental health literacy of Singaporeans. These results also help in the recovery journey of those coping with mental health conditions. The increased recognition should hopefully translate into a better understanding of their symptoms and a better ability to signpost people to the right care, while the reduced stigma scores are a right step towards a more inclusive Singapore,” says Associate Professor Mythily Subramaniam, Co-investigator and Assistant Chairman, Medical Board (Research), IMH.

14. Perceptions about recovery

Respondents were asked what they think would happen if persons with the conditions sought appropriate help. The five options were: (i) Full recovery with no further problems; (ii) Full recovery, but problems may come back; (iii) Partial recovery, but problems may come back; (iv) No improvement and; (v) Get worse.

- Majority of the respondents believed that with appropriate help, persons with the following conditions would have a ‘Full recovery, but problems may come back’: Depression (59.0%), Alcohol Abuse (55.8%), Schizophrenia (57.9%), and OCD (50.7%). This pattern is not significantly different from the first study.

³ FSC: Family Service Centre; YMCA: Young Men’s Christian Association; SOS: Samaritans of Singapore; CHAT: Community Health Assessment Team; AA: Alcoholics Anonymous; MOH: Ministry of Health; MSF: Ministry of Social and Family Development, NCPG: National Council on Problem Gambling

- For the two new conditions assessed in the study, majority of the respondents similarly believed that individuals with Depression with Suicidality (58.0%) and Gambling Disorder (57.5%) will have a 'Full recovery, but problems may come back'.
- About half the respondents (50.3%) believed that with appropriate help, persons with Dementia would only have a 'Partial recovery, but problems may come back'. This was higher than the first study, which was 47.4%. There was also a higher percentage of respondents who believed that there will be no improvement even with appropriate help being sought (2.5% in 2022 compared to 0.1% in 2014).

– END –

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About the Institute of Mental Health (IMH)

The Institute of Mental Health (IMH), a member of the National Healthcare Group, is the only tertiary psychiatric care institution in Singapore. Located on the sprawling 23-hectare campus of Buangkok Green Medical Park in the north-eastern part of Singapore, IMH offers a multidisciplinary and comprehensive range of psychiatric, rehabilitative and therapy services in hospital-based and community-based settings. The 2,000-bedded hospital aims to meet the needs of three groups of patients – children and adolescents (aged below 19 years), adults and the elderly. Besides providing clinical services, IMH dedicates resources to carry out mental health promotion and raise mental health literacy. IMH also leads in mental health research and training the next generation of mental health professionals in Singapore. For more information, please visit www.imh.com.sg.

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ABOUT MIND MATTERS

The second Mind Matters: A Study of Mental Health Literacy was funded by the National Medical Research Council and Tote Board. It was led by Professor Chong Siow Ann and Associate Professor Mythily Subramaniam from the Institute of Mental Health, and involved local collaborators from Silver Ribbon (Singapore), MOH Office for Healthcare Transformation and international expert, Professor Georg Schomerus, from University of Leipzig.

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Collaborators

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- Ms Porsche Poh, Silver Ribbon (Singapore)
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VIGNETTE EXAMPLE

Mr Tan⁴ is 30 years old. He/She has been feeling unusually sad and miserable for the last three weeks. Friends noticed he/she is no longer his/her usual cheerful self and he/she has declined all social gatherings over the past two weeks. Even though he/she is tired all the time, he/she has trouble sleeping almost every night. Mr Tan doesn't feel like eating and has lost weight. He/She can't focus on his/her work and puts off making decisions. Mr Tan feels worthless and even everyday tasks seem too much for him/her. This has come to the attention of his/her boss, who is concerned about his/her poor work performance.

⁴ The name of the person in the vignette was changed to match to respondents' gender and ethnicity to facilitate identification with the person in the vignette.