The Mental Wellness Campaign for Anoka County is a diverse group of community partners with a mission to “promote increased public awareness, understanding and acceptance of mental health care.” In 2006, to inform their efforts to increase awareness and reduce stigma, they partnered with Wilder Research to survey county residents about their attitudes and beliefs about mental health. In 2009, the Campaign asked Wilder Research to repeat the survey, to obtain more current information about residents’ attitudes and to determine whether perceptions of mental health have changed over time.

For both assessments, Wilder Research worked with Campaign members to implement a multi-faceted approach to data collection. In an effort to reach a representative group of residents, data were collected through an advertised online survey, opportunities for residents to call Wilder Research to be interviewed, in-person data collection at public locations and community gatherings, and a phone survey to reach a random sample of 100 residents.

Who took the survey?
Between November 2009 and February 2010, Anoka County residents completed 1,377 surveys (yielding a margin of error of three points). The respondents comprise a diverse sample of residents:

- A wide age distribution was obtained (19% were age 14-24, 31% were age 25-44, 39% were age 45-64, and 11% were over age 65).
- Comparable to the county population, 91 percent were White; other respondents were Black, American Indian, Hispanic, Asian, African-born, and other races/ethnicities.
- Participants represented 23 Anoka County cities or towns.
- Educational background included a high school diploma or less (29%), some college (27%), two-year or four-year degrees (31%), and graduate degrees (13%).
- Sixty-three percent of the respondents worked outside of the home. Twelve percent were retired, 11 percent were students, and 7 percent were unemployed.

Gender is the only way in which the sample does not reflect the overall county population. Men made up only 27 percent of the final sample, although they represent 50 percent of the county population.

Are residents aware of the Mental Wellness Campaign?
Prior to completing the survey, 15 percent of the respondents were familiar with the Campaign. They were most likely to be familiar with newspaper articles, flyers or brochures, resource fairs/booths, and posters or displays. Residents were more likely to be aware of the Campaign if they were older and more educated.

“The 2010 survey data is important to the Campaign because we can compare the results to those from 2006 in order to see how we are trending in terms of creating awareness, understanding and acceptance of mental health issues. The survey results will help us shape our strategic plan, allowing us to target our outreach and education efforts in the community.”

Tammy Ferguson – Chairperson, Mental Wellness Campaign for Anoka County
How familiar are county residents with mental illness?
About seven in ten residents (71%) were very familiar with mental illness, saying that it had affected a relative, someone they lived with, or themselves. The percentage of residents classified as very familiar increased from 64 percent in 2006.

Other residents had only casual exposure to mental health issues. Most had seen movies or television shows with a character affected by mental illness, have made a passing observation of someone they thought had a mental illness, or have seen a television documentary about mental illness.

How do residents assess the prevalence of mental illness?
Many residents underestimated the prevalence of mental health concerns. Research suggests that approximately one in five people experience mental health concerns. Almost six in ten respondents (57%) felt that the proportion of County residents was either 1 in 5 or 1 in 10. However, a significant percentage (37%) gave much lower estimates, ranging from 1 in 25 to 1 in 250. Lower estimates were given by individuals who were non-White, had less than a two-year college degree, were age 25 or younger, or had less personal contact with someone experiencing mental illness.

While most people are comfortable around people with a mental illness, only 36 percent “agreed” or “strongly agreed” that they would trust someone with a mental illness to take care of their loved ones, such as children or parents. Twenty-three percent “agreed” or “strongly agreed” that people with a mental illness should be excluded from public leadership, such as holding an elected office.

<table>
<thead>
<tr>
<th>ATTITUDES TOWARD PEOPLE WITH MENTAL ILLNESS</th>
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<tbody>
<tr>
<td>Mental health is as important as physical health</td>
</tr>
<tr>
<td>I feel sorry for people who have a mental illness</td>
</tr>
<tr>
<td>Mental illness can be effectively treated</td>
</tr>
<tr>
<td>I would trust someone with a mental illness to take care of loved ones</td>
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<tr>
<td>People with a mental illness should be excluded from public leadership</td>
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<tr>
<td>I feel unsafe around people with mental illness</td>
</tr>
<tr>
<td>I would be uncomfortable if someone with a mental illness lived in my neighborhood</td>
</tr>
<tr>
<td>People with mental illness belong in a hospital or institution</td>
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</table>

What do residents think about mental illness?
Attitudes about mental health were generally positive. For example, almost all respondents “strongly agreed” or “agreed” that mental health is as important to someone’s well-being as their physical health (98%), mental illness can happen to anyone (97%), and mental illness can be effectively treated (92%). Relatively few respondents “strongly agreed” or “agreed” that they try to avoid people with a mental illness (14%), feel unsafe around people with a mental illness (14%), or would be uncomfortable if someone with a mental illness lived in their neighborhood (10%).

On some questions, views varied significantly based on respondent background. While not every question showed significant variation, in general, people had more positive attitudes if they:
- Were more familiar with mental illness
- Were women
- Were White
- Had at least a two-year college degree

Age had a mixed effect. Younger residents (up to age 25) were less likely to feel that mental illness can be effectively treated, that mental health is as important as physical health, and that mental illness can happen to anyone. However, they were also less likely to feel
that people with mental illness are a burden on society and to avoid people with a mental illness. Adults age 51 or older were most likely to feel that people with a mental illness should be excluded from positions of public leadership and least likely to trust someone with a mental illness to take care of their loved ones.

Have attitudes changed since 2006?
There were a few notable changes in responses between 2006 and 2010. The percentage of respondents who “strongly agreed” or “agreed” that they would trust someone with a mental illness to take care of loved ones increased (from 29% to 36%), while the percentage who “strongly agreed” or “agreed” that people with mental illness should be excluded from public leadership decreased (from 29% to 23%). There were smaller, but still significant, decreases in the percentage of respondents who agreed that people with a mental illness belong in a hospital or institution and that they would be uncomfortable if someone with a mental illness lived in their neighborhood.

The percentage of respondents with high familiarity of mental illness increased significantly between 2006 and 2010. Because familiarity is a strong predictor of attitudes, additional analyses were conducted to determine whether changes in ratings between years can be explained by increased familiarity. The results suggest that increased familiarity did not solely account for the differences.

Who are residents comfortable discussing mental health concerns with?
At least 9 in 10 respondents “strongly agreed” or “agreed” that they would feel comfortable discussing their own or their child’s mental health issues with doctors, and 8 in 10 would talk to clergy members or other religious/spiritual leaders. In addition, most parents (86%) would feel comfortable discussing concerns about their child with someone at their child’s school, such as teachers and counselors.

Informal support was also important. Most residents would feel comfortable discussing their own mental health issues, or those of their children, with family members (8 in 10 respondents) and friends (7 in 10 respondents). Overall, people were least likely to feel comfortable discussing issues with co-workers and neighbors (4 in 10 respondents).

People with higher levels of familiarity with mental illness were more comfortable disclosing mental health concerns. Individuals age 25 or younger were less comfortable talking to doctors, neighbors, and especially clergy members about their mental health.

Where would residents go for help?
Seven in 10 respondents “agreed” or “strongly agreed” that they knew how to find out what mental health services are available in their community. They were more likely to say that they would try to solve the problem on their own, rather than seeking treatment, when it comes to their own mental health (62%) as opposed to that of their child (46%). Men, younger residents, and residents with at least a two-year degree were more likely to say that they would first try to solve problems on their own.

Do residents want to know more?
Just over half (52%) of the residents surveyed were interested in learning more about mental health. Women, non-White residents, and residents age 51 or older expressed higher interest.

Responding to an open-ended question, respondents said their preferred ways to receive information are the Internet (34%), newspapers (32%), and flyers or brochures (27%). The percentage of respondents who requested information through newspapers or flyers declined, while the percentage requesting information via the Internet increased.

<table>
<thead>
<tr>
<th>“I WOULD FEEL COMFORTABLE TALKING ABOUT MY OWN MENTAL HEALTH ISSUES WITH…”</th>
<th>Percentage &quot;strongly agreeing&quot; or &quot;agreeing&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td>My doctor</td>
<td>90%</td>
</tr>
<tr>
<td>My family</td>
<td>82%</td>
</tr>
<tr>
<td>Clergy members</td>
<td>78%</td>
</tr>
<tr>
<td>My friends</td>
<td>67%</td>
</tr>
<tr>
<td>My co-workers</td>
<td>35%</td>
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<tr>
<td>My neighbors</td>
<td>32%</td>
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</table>
Have residents seen recent publicity?
Approximately 6 in 10 survey respondents had seen recent publicity about mental health or mental illness issues. Residents were more likely to have seen publicity if they were female and if they were older.

Almost two-thirds of these respondents (63%) had seen the information in a television commercial. Other prevalent sources of information were television news, newspapers, and magazines. Between 2006 and 2010, there were significant increases in the percentage of respondents who had obtained information about mental health through television commercials, billboards, and posters.

Does society need to be more accepting of people with mental illness?
Almost all respondents (95%) said that society needs to be more accepting of people with a mental illness. They were less likely to agree with this item if they were male or less familiar with mental health issues.

When asked an open-ended question about what messages would increase public acceptance, residents suggested the following themes:
- Mental illness can be effectively treated
- Mental illness can happen to anyone
- Mental illness has a biological basis similar to other medical conditions
- There are different types of mental illness, with a wide range of symptoms and effects

Recommendations based on survey results
Overall, many of the results remained relatively stable across the two survey administrations. However, there were some changes, most of which reflected a positive shift in attitudes and beliefs. Many of the recommendations established in 2006 still apply based on these findings, and the Campaign is encouraged to continue their efforts.

The following recommendations emerge from the 2010 survey results:
- Share information with residents about the prevalence of mental illness, and the percentage of county residents who report knowing someone with an illness.
- Provide easy-to-find resources for friends and family members who may not know how to talk with or help loved ones with mental health concerns.
- Provide residents with information about how to recognize potential signs of mental health issues and provide positive models of recognizable individuals with mental illness, such as celebrities or respected leaders.
- Share examples of individuals with mental illness who successfully carry out roles involving a high degree of trust, responsibility, or leadership.
- Use creative and proactive strategies to share information with men and engage them in conversations about mental health.
- Provide age-appropriate education and resources to younger residents, especially children.
- Provide targeted information to assist doctors, clergy, and teachers in providing accurate information, support, and local resources related to mental health.
- Continue to publicize information about available mental health services and resources.
- Promote messages that encourage residents to identify concerns and to seek help right away, rather than attempting to address concerns on their own.
- Work with employers to distribute information about mental health and community resources.
- Consider partnering with culturally-based organizations in the community to provide culturally-appropriate and relevant information and resources.
- Continue to highlight key messages that resonate strongly with residents, focusing on the effectiveness of treatment, the underlying biological basis of mental illness, the broad range of resulting symptoms and effects, and the fact that mental illness can happen to anyone.

For more information
This summary presents highlights of the 2009-10 Community Survey for the Mental Wellness Campaign for Anoka County. For more information about this report, contact Cheryl Holm-Hansen at Wilder Research, 651-280-2708. For more information about the Mental Wellness Campaign, please call Bill Pinsonnault, 763-422-7007

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