In summer 2005, members of the Mental Wellness Campaign for Anoka County, a group of consumers, family members, community leaders, and human services professionals, began working with Wilder Research to measure the beliefs and knowledge of Anoka County residents regarding mental health.

With funding from Anoka County and Connexus Energy, Wilder Research developed a survey that used both established and original survey questions. Between November 2005 and February 2006, 1,123 Anoka County residents completed the survey (yielding a margin of error of +/-3 percentage points). Survey methods included a well-advertised online survey, in-person interviews at public locations and community gatherings, and a random telephone survey of county residents. These results will help guide educational efforts to reduce stigma in the county over the next several years.

Who took the survey?
The 1,123 survey participants comprise a broad, representative sample of Anoka County residents:

- 21% were age 14-24; 33% were age 25-44; 33% were age 45-64; 13% were over age 65.
- 89% were White (the overall county population was 91% White in 2004). Other survey participants were Black, American Indian, Hispanic, Asian, African-born, and other race/ethnicity.
- Participants represented 22 Anoka County cities or towns, although 44% lived in either Blaine or Coon Rapids. In 2000, 41% of the county lived in these two municipalities.
- Educational backgrounds included a high school diploma or less (36%), some college (24%), two-year or four-year degree (31%), and graduate degree (10%).
- 15% of the participants were retired, and 10% were current high school students. At least 5% of participants were working in each of these occupational categories: medical/health, teacher/education, clerical/secretary, food/service industry, and managerial/executive.
- Gender is one way in which the survey sample does not reflect the overall county population. Half of the county’s residents, but only 30 percent of survey respondents, are male.

How familiar are you with mental illness?
About two-thirds of the residents were very familiar with mental illness through personal connections; most others had only seen mental illness through media portrayals or casual observation. The two-thirds with high familiarity reported that mental illness had affected a relative, someone they lived with, or themselves.

Other residents had only casual exposure to mental health issues. Most have 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. Only 5 percent have never observed anyone who had a mental illness.

How do you define mental illness?
Most residents recognized that serious bouts of depression, bipolar disorder, and schizophrenia reflected a potential mental illness. They were less likely to say that someone who cannot be held responsible for his or her own actions and someone prone to violence may have a mental illness.

Certain survey participants were more likely to identify a wide range of issues as potential mental health concerns. These groups included those who had high personal familiarity with mental health issues, female participants, those between age 26 and 50, those with at least some college education, and White survey participants.

How common is mental illness?
Many residents underestimated the proportion of the population that experiences mental health concerns. While there are no specific figures about the proportion
of Anoka County residents who will have a mental health issue at some point in their lives, other research suggests that approximately 1 in 5 people experience mental health concerns. Twenty-seven percent of the respondents felt that the proportion of Anoka County residents that would have a mental illness at some point in their lives was 1 in 5. An additional 25 percent felt the proportion was 1 in 10. However, a significant percentage (42%) gave much lower estimates, ranging from 1 in 25 to 1 in 250. People who had less personal contact with someone experiencing mental illness were especially likely to give a lower estimate.

**ATTITUDES TOWARD PEOPLE WITH MENTAL ILLNESS**

<table>
<thead>
<tr>
<th>Percentage &quot;strongly agreeing&quot; or &quot;agreeing&quot;</th>
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<tbody>
<tr>
<td>I feel sorry for people who have a mental illness</td>
</tr>
<tr>
<td>I would trust someone with a mental illness to take care of loved ones, such as my children or parents</td>
</tr>
<tr>
<td>People with a mental illness should be excluded from positions of public leadership, such as elected officials</td>
</tr>
<tr>
<td>I try to avoid people who have a mental illness</td>
</tr>
<tr>
<td>I feel unsafe around people with mental illness</td>
</tr>
<tr>
<td>People with a mental illness are a burden on society</td>
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What do you think about mental illness?

In several areas, perceptions of Anoka County residents already reflect viewpoints consistent with the messages of the Mental Wellness Campaign for Anoka County.

- 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 (96%), and mental illness can be effectively treated (92%).
- Most respondents “strongly disagreed” or “disagreed” that they try to avoid people with a mental illness (86%), feel unsafe around people with a mental illness (86%), or would be uncomfortable if someone with mental illness lived in their neighborhood (87%).

Although most people said they are comfortable around someone with a mental illness, only 29 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-nine percent also “agreed” or “strongly agreed” that people with a mental illness should be excluded from public leadership, such as holding an elected office.

On some questions, views varied significantly by life experience, gender, age, education level, or racial background:

- Those who were more personally familiar with mental illness were generally more accepting of others with mental illness.
- Men were somewhat more likely than women to avoid people with mental illness, feel that they belong in a hospital, and believe that they should be excluded from leadership positions; they were less likely to say that mental illness is caused by factors outside of someone’s control and that more mental health services are needed.
- Younger residents (up to age 25) were less likely to feel that mental illness can be effectively treated and to trust someone with a mental illness to take care of loved ones; they were more likely to feel that people with a mental illness belong in a hospital.
Residents with at least a two-year college degree were less likely to agree that people with a mental illness belong in a hospital and that they should be excluded from positions of public leadership.

Compared to residents from other racial or ethnic backgrounds, White residents were more likely to agree that mental illness can be effectively treated and believe that mental illness is caused by factors outside of someone’s control.

**With whom are you comfortable discussing mental health concerns?**

Most respondents felt comfortable talking about mental health issues with doctors, clergy, and school staff. Overall, people were most likely to “strongly agree” or “agree” that they would feel comfortable discussing their own mental health issues with doctors (90%) and clergy members or other religious/spiritual leaders (80%). Residents caring for children were also comfortable discussing their children’s mental health concerns with these individuals (97% for doctors, 83% for clergy). Most parents would feel comfortable telling someone at their child’s school, such as teachers and counselors (89%).

White residents were more comfortable with these formal support systems, compared to those from other racial/ethnic backgrounds. Men and people age 25 or younger were also less comfortable discussing their own mental health issues with religious/spiritual leaders.

Informal support was also important, with many people saying that they would talk to family members or friends. Most residents would feel comfortable discussing their own mental health issues, or those of their children, with family members (81%-84%) and friends (67%-70%). Women and those with more familiarity with mental illness had greater comfort levels regarding talking with friends about mental health concerns.

Overall, people were least likely to feel comfortable discussing mental health issues with co-workers (37%-40%) and neighbors (30%-32%). Residents with a high school education or less were more likely to discuss issues with both neighbors and co-workers. Other groups more likely to discuss issues with co-workers were those very familiar with mental health issues, women, and White residents.

**Where would you go for help?**

While most residents knew how to find out about available services, almost one-third (31%) did not know how they would find services for themselves and one-quarter (24%) did not know how they would find services for their children.

About half of the survey participants said they would try to solve mental health problems themselves, before seeking treatment. People were more likely to feel this way about their own mental health (60%) than that of their child (40%). Also, certain groups were less likely to say that they would first try to solve problems on their own: women, older residents, and non-white residents.

**Do you want to know more?**

Just under half (47%) of the Anoka County residents surveyed were interested in learning more about mental health. Groups that expressed a higher level of interest: women (51%, compared to 39% of men) and non-White residents (60%, compared to 46% of White residents).

The preferred ways to receive this kind of information are newspapers (49%), flyers or brochures (41%), and the Internet (24%). Survey participants were relatively unlikely to say that other formal networks (such as doctors or employers) or informal networks (such as family or friends) would be good ways for them to receive this kind of information.
Have you seen recent publicity about mental health?
Overall, 61 percent of the residents had seen recent publicity about mental health or mental illness issues, especially through the media. Those less likely to recall publicity: men (54%, compared to 65% of females) and younger people (48% for age 25 or younger, compared to 65% of those age 26-50 and 67% of those 51 or older).

More than half of the residents (54%) had seen information about mental health or mental illness in a television commercial. Other common sources were television news (48%), newspapers (44%), and magazines (42%). One-quarter to one-third of the residents obtained information through their school or job, other television programs, billboards, and flyers or brochures.

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. Groups less likely to agree with this: men, people age 25 or younger, and those less familiar with mental health issues.

When asked what messages would increase public acceptance of people who have mental illness, Anoka County residents’ most common suggestions followed these general themes:
- Mental illness can happen to anyone.
- There are different levels of mental illness, with a wide range of symptoms and effects.
- Mental illness has a biological basis similar to other medical conditions.

Recommendations based on survey results
In developing strategies to make Anoka County residents more familiar with mental illness and reduce stigma, emphasize recognizable individuals, such as celebrities or respected leaders, rather than general information.

Share examples of individuals with mental illness who successfully carry out roles involving a high degree of trust, responsibility, or leadership.

Provide accurate, evidence-based information about the prevalence of mental health issues.

Provide targeted information for doctors, clergy, teachers, and family members to assist them in providing accurate information, support, and resources related to mental health.

Work with employers to distribute information about mental health and community resources. Although few residents are comfortable discussing mental health concerns at work, major employers are a strategic conduit for reaching residents, and a well-executed information campaign might help increase comfort levels regarding mental health topics in the workplace.

Continue to publicize information about available mental health services and resources. New people continuously move into every community, and others who have lived there for years might not pay close attention until the need arises.

Emphasize information strategies that take information directly into the home (such as television, newspapers, and magazines) rather than through courses or training programs.

Consider non-traditional strategies to share information with specific target groups, including men, younger residents, and individuals with racial/ethnic backgrounds other than White.

Highlight key messages that resonate strongly with residents, focusing on 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 2005-06 Community Survey for the Mental Wellness Campaign for Anoka County. For more information about this report, contact Cheryl Holm-Hansen at Wilder Research, 651-647-4624. For more information about the Mental Wellness Campaign, please call Bill Pinsonnault, 763-422-7007

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