Research Article

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Knowledge and attitudes about mental disorder amongst media practitioners in Southwest Nigeria

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ABSTRACT

Background: The mass media, described as the most important source of information about mental health issues, touch all aspects of everyday live. Media professionals remain a potent and unique factor in conveying positive messages about mental health that educate the public. This study sought to assess knowledge and attitudes about mental disorders amongst the media practitioners.

Methods: Study population consists of media practitioners in a southwest Nigerian city. The World psychiatric association questionnaire measuring attitudes towards schizophrenia was modified and administered to the study group.

Results: Some socio-demographic factors including years of experience and educational attainment were significantly related to attitudes shown by this group of professionals towards people with mental disorder.

Conclusions: Consequent expression of negative attitudes by media practitioners towards the mentally ill suggests a need for educational program be organized for media practitioners to change their misconceptions about mental disorder and the mentally ill.

Keywords: Knowledge, Attitudes, Mental disorder, Media, Nigeria

INTRODUCTION

Some of the most pervasive and most debilitating disorders are mental disorders.¹ Stigma directly affects the stigmatized via mechanisms of discrimination, expectancy confirmation, and automatic stereotype activation, and indirectly via threats to personal and social identity.² Public stigma robs people with mental illnesses from rightful opportunities related to work and other important life goals.³ The stigma attached to mental disorders, and to the people who have it, is a major obstacle to better care and to the improvement of their quality of lives.⁴

The mass media, as a power group, are too important to ignore or avoid. The mass media's power to impact public perception and the degree to which people are exposed to media representations makes the mass media one of the most significant influences in developed societies.⁵ Stigma change is most effective when it includes all the components that describe how a specific power group impacts people with mental illness.⁶

The stigmatization of mental disorder impacts negatively, not only on the level of services provided but also on the quality of the services; it compromises access to the care because policy makers and the public believe that persons with mental disorder are dangerous, lazy, unreliable, and unemployable.⁷

Kismet Baun (2009) observed stigma, in relation to people with mental disorder, is often a combination of lack of relevant knowledge (ignorance), attitudes (prejudice), and behavior (discrimination).⁵

One study found that media representations of mental disorder are so powerful that they can override people's own personal experiences in relation to how they view mental disorder.⁸

It is natural to fear what one does not understand. As such, mental disorder is feared by many people and, unfortunately, still carries a stigma. Because of this, many of the mentally ill hesitate to get help for their mental health problem for fear of being looked down upon. In his book "Media madness: public images of mental disorder", Wahl states that inaccurate information in the media about mental disorder (even if the portrayal of the character is positive) results in misunderstandings regarding various mental disorders and can have considerable practical consequences.⁹

In three representative Western Nigerian community studies, Gureje et al.¹⁰ claimed that there was a widespread negative view of mental disorder in Nigerian communities and, as they argued, about 96.5% of the respondents in their study felt mentally ill persons were violent and dangerous.

METHODS

The entire population of media practitioners in a southwest Nigerian state was invited to take part in the study following permission from the Nigerian union of media practitioners and individual informed oral consent.

The media practitioners were administered the questionnaires at their respective chapels (locations) in turns over a period of two weeks. The media practitioners were assured of the confidentiality of the exercise.

The instrument used was adapted from a tool kit developed for the World Psychiatric Association (WPA) program to reduce stigma and discrimination because of schizophrenia.^{10,11}

In the study, the original questionnaire was modified by substituting the term "mental disorder" for 'schizophrenia', and specific items relating to the symptoms of schizophrenia were deleted.

Data analysis was done using the sixteenth version of Statistical Package for Social Sciences program (SPSS-16).

RESULTS

Of the 205 questionnaires administered to the media practitioners, 162 (79.0%) were returned. Eight media practitioners did not fully complete the questionnaires and therefore were excluded from analysis.

Thus a total of 154 analyzable questionnaires from the media practitioners were considered.

Socio-demographic characteristics of respondents

The respondents' ages ranged between 20 and 62 years. The mean age of the media practitioners was 34.7 (SD 8.7) years.

There was a preponderance of males (64.9%) among the media practitioners. All the respondents were either Christians or Muslims.

The respondents were predominantly Yoruba tribe of southwest Nigeria. The media practitioners have significantly higher educational qualifications with fourfifth of the media practitioners being holders of Higher Diploma, first degree, and postgraduate degree.

Among the media practitioners who participated in the study about half (48.1%) were engaged in the electronic media only (i.e. radio and television). One third was engaged in print media only while only a fifth worked in both print and electronic media. The mean number of years of experience for the media practitioners was 8.91(SD 7.6) years.

Exposure of respondents to mental illness and people with mental illness

About half of the media practitioners, [70 (45.5%)] have come in contact with either adverts or promotions about mental illness.

Less than half (42.9%) of those who had come in contact with information on mental illness had done so through television; about a quarter got information through newspaper while a fifth did so through radio. The least sources of information are the internet, books, billboards and pamphlets.

Causes of mental illness

Environmental related causes were the most cited by respondents (48.1%). Stress is the most mentioned among the environmental causes.

Drug related causes were the most cited among the medical causes (29.2%). About a tenth of the respondents cited supernatural factors, such as afflictions by evil doers, as possible causes of mental illness. Genetic cause of mental illness was mentioned by six per cent of respondents.

Respondents' feelings about people with mental disorders

Tables 1 (a) and (b) show the various relationships between the socio-demographic characteristics of the media practitioners and their feelings towards the mentally ill.

Table 1 (a): Relationship	between socio-demographic characteristics and	d attitudes of respondents towards the mentally ill.

Attitudes towards	Age (years)		Sex			Marital status			Religion		
someone with mental	≤40 years >40 years		Male	Male Fema		Single	Married	Christianity		Islam	
disorder	n ₁ =124 n ₂ =30		$n_{1=}100$		n=54	$n_1 = 54$ $n_2 = 100$		n ₁ =124		n ₂ =30	
Afraid to have conversation	Yes 74 (59.7%)	19 (63.3%)	Yes	62 (62.0%)	31 (57.4%)	Yes 32 (59.3%)	61 (61.0%)	Yes	77 (62.1%)	16 (53.3%)	
	No 50 (40.3%)	11 (36.7%)	No	38 (38.0%)	23 (42.6%)	No 22 (40.7%)	39 (39.0%)	No	47 (37.9)	14 (46.7%)	
	$\chi^2 = 0.135$ df=1 P = 0.713		$\chi^2 = 0.309 \text{ df} = 1 \text{ P} = 0.578$		$\chi^2 = 0.044$ df = 1 P = 0.833		$\chi^2 = 0.776$ df=1 P = 0.379				
Upset about working on same job	Yes 85 (68.5%)	21 (70.0%)	Yes	67 (67.0%)	39 (72.2%)	Yes 38 (70.4%)	68 (68.0%)	Yes	85(68.5%)	21 (70.0%)	
	No 39 (31.5%)	9 (30.0%)	No	33 (33.0%)	15 (27.8%)	No 16 (29.6%)	32 (32.0%)	No	39 (31.5%)	9 (30.0%)	
	$\chi^2 = 0.024$ df=1 P = 0.878		$\chi^2 = 0.446$ df=1 P = 0.504		$\chi^2 = 0.092$ df=1 P = 0.762		χ^2 =0.024 df=1 P = 0.878				
Would maintain	Yes 78 (62.9%)	19 (63.3%)	Yes	65 (65.0%)	32 (59.3%)	Yes 33 (61.1%)) 64 (64.0%)	Yes	78 (62.9%)	19 (63.3%)	
	No 46 (37.1%)	11 (36.7%)	No	35 (35.0%)	22 (40.7%)	No 21 (38.9%)	36 (36.0%)	No	46 (37.1%)	11 (36.7%)	
friendship	χ^2 =0.002 df=1 P =	$\chi^2 = 0.496$ df=1 P = 0.481			$\chi^2 = 0.126$ df=1 P = 0.723		$\chi^2 = 0.002$ df=1 P = 0.965				
Ashamed of family	Yes 53 (42.7%)	14 (46.7%)	Yes	38 (38.0%)	29 (53.7%)	Yes 20 (37.0%)	47 (47.0%)	Yes	59 (47.6%)	8 (26.7%)	
member having mental illness	No 71 (57.3%)	16 (53.3%)	No	62 (62.0%)	25 (46.3%)	No 34 (63.0%)	53 (53.0%)	No	65 (52.4%)	22 (73.3%)	
	$\chi^2 = 0.151 \text{ df}=1 \text{ P}$	$f^2 = 0.151 \text{ df}=1 \text{ P} = 0.697$		χ^2 =3.518 df=1 P = 0.061		$\chi^2 = 1.416$ df=1 P = 0.234		$\chi^2 = 4.299 \text{ df} = 1 \text{ P} = 0.038^*$			
Would marry	Yes 14 (11.3%)	2 (6.7%)	Yes	12 (12.0%)	4 (7.4%)	Yes 6 (11.1%)	10 (10.0%)	Yes	12 (9.7%)	4 (13.3%)	
someone with mental illness	No 110 (88.7%)	28 (93.3%)	No	88 (88.0%)	50 (92.6%)	No 48 (88.9%)	90 (90.0%)	No	112 (90.3%)	26 (86.7%)	
	$\chi^2 = 0.555$ df = 1 P = 0.456		$\chi^2 = 0.794$ df=1 P = 0.373		$\chi^2 = 0.046$ df=1 P = 0.829		$\chi^2 = 0.347$ df=1 P = 0.556				
Would be upset sharing a room.	Yes 32 (25.8%)	14 (46.7%)	Yes	28 (28.0%)	18 (33.3%)	Yes 14 (25.9%)	32 (32.0%)	Yes	36 (29.0%)	10 (33.3%)	
	No 92 (74.2%)	16 (53.3%)	No	72 (72.0%)	36 (66.7%)	No 40 (74.1%)	68 (68.0%)	No	88 (71.0%)	20 (66.7%)	
	χ^2 =5.018 df=1 P=	χ^2 =0.476 df=1 P = 0.490			$\chi^2 = 0.618$ df=1 P = 0.432			χ^2 =0.213 df=1 P = 0.644			

*P value is significant

A significantly greater proportion (46.7%) of media practitioners above age 40 years, more than the younger ones (25.8%), would feel upset about sharing a room with someone who is mentally ill (P = 0.025).

There was no association between the sex and marital status of the respondents and their feelings towards someone with mental disorder. However, significant proportion of media practitioners who are Muslims (73.3%), more than their Christian counterparts (52.4%), would not be ashamed of having a family member being mentally ill (P = 0.038).

Significantly, more graduates (67.4%) than those with less qualifications (40.0%) would maintain friendship with someone who has mental illness (P = 0.009). A

higher percentage of the more experienced media practitioners (53.2%) than the less experienced (33.8%) would be ashamed of having a family member being mentally ill (P = 0.015). Significantly, more media practitioners who had exposure to either a promo or advertising on mental illness 30 (42.9%) than those who were not so exposed 16 (19.0%) would be upset about sharing a room with someone who has mental illness (P = 0.001).

Table 1 (b): Relationship	between socio-demographic characteristics a	and attitudes of respondents towards the	e mentally ill.
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Attitudes towards	Religion		Education		Experience (years)			Exposure			
someone with mental	Christianity Islam		Undergraduate G		Graduate	≤5 years		>5 years	No		Yes
disorder	$n_1 = 124$ $n_2 = 30$		n ₁ =25		n ₂ =129	$n_1 = 77$ $n_2 = 77$		n ₂ =77	n ₁ =84		n ₂ =70
Afraid to have conversation	Yes 77 (62.1%)	16 (53.3%)	Yes	15 (60.0%)	78 (60.5%)	Yes	48 (62.3%)	45 (58.4%)	Yes	52 (61.9%)	41 (58.6%)
	No 47 (37.9)	14 (46.7%)	No	10 (40.0%)	51 (39.5%)	No	29 (37.7%)	32 (41.6%)	No	32 (38.1%)	29 (41.4%)
	$\chi^2 = 0.776$ df=1 P = 0.379		$\chi^2 = 0.002$ df = 1 P = 0.965		$\chi^2 = 0.244 \text{ df} = 1 \text{ P} = 0.621$		$\chi^2 = 0.177$ df=1 P = 0.74				
	Yes 85 (68.5%)	21 (70.0%)	Yes	17 (68.0%)	89 (69.0%)	Yes	56 (72.7%)	50 (64.9%)	Yes	58 (9.0%)	48 (68.6%)
Upset about working	No 39 (31.5%)	9 (30.0%)	No	8 (32.0%)	40 (31.0%)	No	21 (27.3%)	27 (35.1%)	No	26 (31.0%)	22 (31.4%)
on same job	$\chi^2 = 0.024$ df=1 H	=1 P = 0.878		$\chi^2 = 0.010$ df=1 P = 0.922		$\chi^2 = 1.090$ df=1 P = 0.297		$\chi^2 = 0.004$ df=1 P = 0.949			
XX7 11 1.	Yes 78 (62.9%)	19 (63.3%)	Yes	10 (40.0%)	87 (67.4%)	Yes	44 (57.1%)	53 (68.8%)	Yes	52 (61.9%)	45 (64.3%)
Would maintain	No 46 (37.1%)	11 (36.7%)	No	15 (60.0%)	42 (32.6%)	No	33 (42.9%)	24 (31.2%)	No	32 (38.1%)	25 (35.7%)
friendship	χ^2 =0.002 df=1 H	$\chi^2 = 0.002$ df=1 P = 0.965		$\chi^2 = 6.764$ df=1 P = 0.009 [*]		$\chi^2 = 2.256$ df=1 P = 0.133		$\chi^2 = 0.093$ df=1 P = 0.761			
Ashamed of family	Yes 59 (47.6%)	8 (26.7%)	Yes	8 (32.0%)	59 (45.3%)	Yes	26 (33.8%)	24 (31.2%)	Yes	38 (45.2%)	29 (41.4%)
member having mental illness	No 65 (52.4%)	22 (73.3%)	No	17 (68.0%)	70 (54.3%)	No	51 (66.2%)	36 (46.8%)	No	46 (54.8%)	41 (58.6%)
	χ^2 =4.299 df=1 H	99 df=1 $P = 0.038^*$		$\chi^2 = 1.608$ df=1 P = 0.205		$\chi^2 = 5.944$ df=1 P = 0.015 [*]		$\chi^2 = 0.225$ df=1 P = 0.635			
Would marry	Yes 12 (9.7%)	4 (13.3%)	Yes	5 (20,0%)	11 (8.5%)	Yes	9 (11.7%)	7 (9.1%)	Yes	10 (11.9%)	6 (8.6%)
someone with mental illness	No 112 (90.3%)	26 (86.7%)	No	20 (80.0%)	118 (91.5%)	No	68 (88.3%)	70 (90.9%)	No	74 (88.1%)	64 (91.4%)
	χ^2 =0.347 df=1 H	P = 0.556	$\chi^2 = 2.961$ df=1 P = 0.085		$\chi^2 = 0.279$ df=1 P = 0.597		$\chi^2 = 0.456$ df=1 P = 0.500				
Would be upset sharing a room.	Yes 36 (29.0%)	10 (33.3%)	Yes	6 (24.0%)	40 (31.0%)	Yes	22 (28.6%)	24 (31.2%)	Yes	16 (19.0%)	30 (42.9%)
	No 88 (71.0%)	20 (66.7%)	No	19 (76.0%)	89 (69.0%)	No	55 (71.4%)	53 (68.8%)	No	68 (81.0%)	40 (57.1%)
	χ^2 =0.213 df=1 H	P = 0.644	$\chi^2 = 0.491$ df=1 P = 0.484		= 0.484	$\chi^2 = 0.124$ df=1 P = 0.725		$\chi^2 = 10.333$ df=1 P = 0.001*			

*P value is significant

DISCUSSION

Socio-demographic features of the respondents

The study set out to determine among the media practitioners their knowledge about cause of mental disorder, respondents' exposure to mental disorder; and their feelings towards people with mental disorder.

The response rate of 81% among the media practitioners was considered good enough. Not unexpectedly, though, the preponderance of males (male to female ratio of 2:1) among the media practitioners may be because of the adventurous

nature of the profession. Seemingly, men are generally believed to be more adventurous than women.

However, such societal picture is now changing as reports have shown that the percentage of women in Radio and Television is almost equal to men and in some higher ranking position the number of women could be higher.¹²

Exposure of respondents to mental illness

About fifty per cent of the respondents in the study who had information about mental illness did so through audiovisual broadcasting (i.e. television). This is in consonant with reports by Fiske.⁸ Hottentot¹³ 70% as mark of popularity of television newsmagazine amongst the public in the United States. The television has been considered the most popular among the media practitioners perhaps because it allows closer ties with the populace.

The recent upsurge in the use of the internet, notwithstanding, the internet still ranks among the least mentioned sources of information by the respondents (0.6%) about mental illness. This indicates a wide gap from the 25% cited by Hottentot in the United States indicating the internet as a popular source of information about mental illness. The wide gap observed in the use of the internet may be adduced to the challenges of accessibility and affordability in developing countries such as Nigeria.

Media practitioners' socio-demographic characteristics and their feelings towards mental disorder

The media practitioners' years of working experience was associated with the feelings of media practitioners towards the mentally ill. It is apparent from this study that over half of the more experienced (years of experience >5 years.) media practitioners would be less tolerant of the mentally ill than the less experienced media practitioners (years of experience <5 years). Thus the hypothesis that the number of years of experience in journalism has no effect on media practitioners' attitudes towards the mentally ill was rejected in the study. However, majority of respondents found marrying someone with mental illness repulsive.

This study has also shown that regardless of the exposure of the respondents to information on mental illness, majority of them were still not predisposed, positively, towards people with mental illness. They seemed to detest either having a family member who has mental illness; or working on the same job as someone who has mental illness. This perception of the mentally ill by the respondents may be a reflection of the context of the exposure they might have had. Trying to change attitudes towards people with mental illness some authors found public education or information to be ineffective.¹⁴⁻¹⁷

This study has revealed that almost half of the older media practitioners, as against a quarter of the younger ones, would feel upset sharing a room with someone who has mental illness. This, again, buttress the fact that negative beliefs or opinions may enhance negative attitudes. The consequences of the media practitioners, in particular, having these feelings include misperceptions and negative stereotypy of mental illness especially among the 16-24 year olds.¹⁸

CONCLUSION

The findings from the results showed that some sociodemographic factors including years of experience in journalism and educational attainment were significantly related to attitudes shown by this group of professionals towards people with mental illness. It is not unlikely that negative beliefs by the media practitioners were significantly related to the attendant negative feelings cum attitudes expressed by the media practitioners in respect of intimate and non-intimate relationships with the mentally ill.

The questionnaire used in this study had been used with great reliability in larger surveys within and outside the author's country of origin. The questionnaire proved feasible and elicited earnest responses from the respondents. However, the results could have still been biased by a "social desirability response set" while some of the respondents' stated attitudes might not have been correlated with actual behavior.

While notwithstanding the finding from this study, attitudes towards mentally ill persons depend on many variable factors such as age, sex and respondents' knowledge of types of mental disorder. The results from this study are indicative of the need to increase the quality of information presented in the media through mental health experts' input. Educational programs on mental health issues should involve strategies that would encourage participants to develop critical thinking ability towards media messages and their perceptions about mental disorders as a way of possibly influencing their negative impressions and attitudes towards the mentally ill persons. There should be more research into the impact of contributions by mental health experts on media comment on mental health issues.

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