

The problem with mental health awareness

Lucy Foulkes¹

¹Department of Experimental Psychology, University of Oxford, Oxford, UK;

lucy.foulkes@psych.ox.ac.uk

Word count: 730

In the past fifteen years, considerable amounts of money and time have been spent on mental health awareness efforts in the UK. These include campaigns run by public health bodies and charities and initiatives run by workplaces, universities and schools. These efforts promote a variety of content, such as explaining symptoms, destigmatising specific disorders, stating that mental health problems are common and encouraging people to seek help. Thousands of social media accounts run by clinicians or lay people promote similar messages. The overarching aim of these efforts is to convey that anyone can experience problems with their mental health, that this should not be stigmatised, and that help is available if people seek it.

On the face of it, these are important, useful messages to disseminate. Some people will undoubtedly have benefited from this shift in public discourse, and there is evidence that stigma has reduced since awareness campaigns began¹. However, beneath the surface, there are a number of issues with mental health awareness efforts, which mean that in some cases they may be unhelpful and perhaps even actively harmful. This must be urgently addressed: some of the funding and time that is channelled into creating and sharing awareness materials should be spent on understanding what impact they have.

The first issue is that mental health awareness efforts have not been matched by improved access to treatment. Referrals and waiting lists for mental health services continue to increase, particularly among young people². These increases are likely due to a combination of factors: more people experiencing symptoms, more people seeking help, and/or reduced funding to services. Whatever the explanation, the upshot is the same: people are being told to seek help and the help is often not there. If someone is made aware that they are experiencing mental health problems, or are encouraged to view their distress in this way, and they ask for help only to be told there is none, this may exacerbate their distress.

The second issue is that mental health awareness efforts may encourage overpathologising. To start, some mental health problems are responses to exceptionally difficult external circumstances (e.g. poverty, bullying). Many awareness campaigns aim to empower individuals to improve their symptoms by changing the way they think and behave, but this message can inaccurately imply that individuals are the root cause of their symptoms, ignoring systemic hardships and societal issues that need addressing instead.

Separately, there is a concern that overpathologising can become a self-fulfilling prophecy³.

There is extensive evidence that when individuals are encouraged to notice or label unpleasant symptoms, these symptoms can increase⁴. There is emerging evidence that viewing mental health awareness materials can affect how people interpret and report their own symptoms^{5,6}.

The concern here is that if awareness efforts lead individuals to label mild and transient levels of distress as symptomatic of a mental disorder, this could mean those symptoms are exacerbated or maintained over time³.

The third issue with mental health awareness efforts is that they may alienate the very people they were originally trying to support. Individuals with the most severe mental health problems feel they have been left out of the public conversation, with all the oxygen taken up by individuals who have milder symptoms, and they feel that their debilitating disorders are being misrepresented and dismissed⁷. In addition, legitimate concerns about overpathologising mean that some individuals now think *all* young people who say they have mental health problems have misunderstood their symptoms⁸. And yet some individuals who self-diagnose with these issues are accurate; they have a level of distress and dysfunction equivalent to those with a clinical diagnosis⁹. It is a simple irony: after all this mental health awareness, and perhaps even because of it, some people with mental health problems are still not being believed.

What ties these concerns together is one single, overarching problem: we do not have clear evidence about the impact of mental health awareness efforts. It may be that these efforts are merely a waste of time or that they are actively harmful. Or it may be that, despite the above concerns, there is still a net gain that makes these efforts worthwhile. To date we do not know, because there has been limited empirical research on this topic. As we approach another annual mental health awareness week, as a field we must consider what can be done to answer this urgent question.

Conflicts of interest statement

The author declares no conflicts of interest.

Author contributions

LF conceived of the manuscript and drafted, edited and finalised it.

Funding statement

LF is a Prudence Trust Research Fellow (CQR02370) and an NIHR Senior Research Fellow (CQ7660).

References

- 1 Henderson C, Robinson E, Evans-Lacko S, Thornicroft G. Relationships between anti-stigma programme awareness, disclosure comfort and intended help-seeking regarding a mental health problem. *Br J Psychiatry* 2017; **211**: 316–22.
- 2 NHS 75 Digital. Referrals and care contacts for children and young people aged 0 to 18. Leeds, UK: NHS Digital, 2023 <https://digital.nhs.uk/data-and-information/data-tools-and->

services/data-services/mental-health-data-hub/dashboards/mental-health-services-monthly-statistics#what-the-data-covers.

- 3 Foulkes L, Andrews JL. Are mental health awareness efforts contributing to the rise in reported mental health problems? A call to test the prevalence inflation hypothesis. *New Ideas Psychol* 2023; **69**: 101010.
- 4 Webster RK, Weinman J, Rubin GJ. A systematic review of factors that contribute to nocebo effects. *Health Psychology* 2016; **35**: 1334–55.
- 5 Hasan F, Foster MM, Cho H. Normalizing Anxiety on Social Media Increases Self-Diagnosis of Anxiety: The Mediating Effect of Identification (But Not Stigma). *Journal of Health Communication* 2023; **28**: 563–72.
- 6 Whitted WM, Southward MW, Howard KP, Wick SB, Strunk DR, Cheavens JS. Seeing is believing: The effect of subtle communication in social media on viewers' beliefs about depression and anxiety symptom trajectories. *J Clin Psychol* 2024; : jclp.23647.
- 7 Dixon-Ward KC, Chan SWY. 'Faking it': Exploring adolescent perceptions of depression (in)authenticity and 'attention seeking'. *British J Clin Psychol* 2022; **61**: 177–96.
- 8 Underhill R, Foulkes L. Self-diagnosis of mental health problems: A qualitative study of attitudes from Reddit. in prep.
- 9 Rutter LA, Howard J, Lakhan P, Valdez D, Bollen J, Lorenzo-Luaces L. "I Haven't Been Diagnosed, but I Should Be"—Insight Into Self-diagnoses of Common Mental Health Disorders: Cross-sectional Study. *JMIR Form Res* 2023; **7**: e39206.