

HMC Evidence Enquiry Response

Mental Health First Aid

Issue/Question(s)

Patient/population – The public

Intervention(s) – Mental Health First Aid Education Programme

Comparator – No intervention

Policy context -

Mental health problems are major contributors to the global burden of disease and the prevalence of mental illness in all populations is high. Only a minority of people suffering with mental health problems receive treatment. The reasons for low treatment rates may vary by country or region, but often include limitations in the available services, uncertainty about how services can be accessed, and the social stigma that continues to surround mental illness.

The value of such interventions in different cultural settings is unknown. In Muslim communities, social stigma and behaviours in help-seeking by people with mental health problems may require specific consideration. Even where Muslims have positive attitudes toward mental healing, social stigma associated with mental illness remains strong. Concerns about family social standing mean that disclosure may be regarded as 'shameful', and those suffering mental illness may be more likely to seek help from family members or religious leaders than from formal health services.

Question(s) -

- (i) Do those undertaking Mental Health First Aid education experience a change to their understanding of mental illness and attitudes towards those suffering from mental health problems?
- (ii) Does Mental Health First Aid education improve rates of treatment of those suffering mental health problems?

Findings

A recent systematic review and meta-analysis (Hadlaczký, et al., 2014) has examined the effects of Mental Health First Aid educational programmes on improving mental health knowledge, attitudes and behaviours. The review included 15 relevant studies and examined three outcome measures: change in knowledge, attitudes and helping behaviours.

The results of the review demonstrated that Mental Health First Aid education increases participants' knowledge regarding mental health, decreases their negative attitudes, and increases supportive behaviours towards those with mental health problems.

The review did not identify studies that examined the effects of Mental Health First Aid education on actual rates of treatment or on treatment outcomes of those suffering from mental illness, and we have not identified any such studies from a simple supplementary search.

Sources searched to identify relevant information

Medline (Ovid), PubMed and CENTRAL were searched with no methodology filters and using a search strategy shown in the appendix. Three searches were undertaken:

- Batch 1 (MEDLINE, PubMed, CENTRAL) = specific search using term 'MHFA'
- Batch 2 (MEDLINE only) = mental health literacy / stigma etc
- Batch 3 (MEDLINE only) = key MeSH Headings for MHFA

The search identified 343 published reports (available as a separate xls file), including two systematic reviews. The most recent one of these systematic reviews (Hadlaczky, et al., 2014) was used to answer the questions for this evidence enquiry response.

References

Hadlaczky, G. et al., 2014. Mental Health First Aid is an effective public health intervention for improving knowledge, attitudes, and behaviour: A meta-analysis. *International Review of Psychiatry*, 26(4), pp. 467-475.

Date of response:

May 2015

Appendix

Search strategy

OVID MEDLINE

1. exp MENTAL DISORDERS/
 2. exp MENTAL HEALTH SERVICES/
 3. FIRST AID/
 4. (1 or 2) and 3
 5. (mental health first aid).ti,ab.
 6. MHFA.ab.
 7. (mental adj3 first aid).mp.
 8. (4 or 5 or 6 OR 7)
 9. HEALTH KNOWLEDGE, ATTITUDES, PRACTICE/
 10. STEREOTYPING/
 11. (stigma*1 or stigmati* or vignette).mp.
 12. HEALTH LITERACY/
 13. MENTAL HEALTH/ed [education]
 14. 1 and (9 or 10 or 11) and (12 or 13)
 15. ((public adj3 (engage* or educat*)) or awareness campaign*).ti,ab.
 16. *1 and 9 and 15
 17. 8 or 14 or 16 [n=332]
- Batch1: (5 or 6 or 7) [n=64]*
- Batch2: (14 or 16) [n=133]*
- Batch3: 17 (not 20 or 21) [n=135]*