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Research paper

Assessment of Demographic Variables on Mental Illness in Malaysia

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Abstract

One of the growing mental illnesses experienced in Malaysia is depression. There was once when one stage was among Malaysians at a critical and higher stage until the attempt to commit suicide. This study has observed a survey conducted by the Ministry of Health Malaysia to identify and understand the vulnerability experienced by every state in Malaysia focuses on the effect of demographic on mental patients by state, age, ethnicity and gender. The data was collected from the Malaysian Health and Morbidity Survey. The findings showed that the highest state of mental illness was the state of Selangor. The overall depression of Malaysians was increasing at an all-time high. The action taken by the Ministry of Health to address mental illness is by using a positive action plan instead of negative. In conclusion, depression at the highest level is one of the first causes of Malaysians to experience mental disorders in every state. This study suggested some proposals as follow-up action at the end of this study.

Keywords: *Demographic; depression; mental health; mental illness; stress.*

1. Introduction

Demography is a science that studies the uniqueness of human population [1, 2]. Demographics include the size, structure, and distribution of the population, and how the population changes over time due to birth, death, migration, and aging. Population analysis can refer to community as a whole or a specific group based on criteria such as education, citizenship, religion, or ethnicity [3]. While the meaning of mental illness is a disease that interferes with the functioning of the brain that can cause a change in the process of thinking, feeling and behaviour of a person who causes disturbance to perform daily activities well [4]. According to the Ministry of Health through the My Health portal [5], mental illness does not have an official term or a fixed definition but it can be accessed through cultural differences, subjective judgments and professional theories have influenced how mental health is defined. Mental health is a prosperous condition in which an individual is aware of his / her ability, can handle stress well, can work productively and contribute to society. This means that mental health is the basis of individual well-being and the ability of society to function effectively. Mental health is an expression of emotion and symbolizes the ability to adapt to various stresses and demands of life. According to the World Health Organization (WHO) report [6], mental illness is among the five major diseases that cause worldwide disability and it is expected that in 2020 this disease will be the second highest cause. Besides that, Changes in social landscape today have contributed significantly to the improvement of health problems and psychological disorders such as marriage, family, work stress, alcohol abuse, drug abuse and so on. This condition can lead to depression, anxiety, stress and various psychological disorders that have an impact on the quality and well-being of a holistic life [6, 7].

Mental health can also be affected by socio-economic problems, sudden changes in environmental or social conditions, stress at work, and physical illness [8, 9]. Unlike mental health problems, those with mental illness also experience a situation in which ones mental stages lead to function. The day-to-day basis of the individual is affected either by social or occupation. A Psychologist describes mental illness as a 'silent killer' and must be treated accordingly, especially when the patient is young [10]. The additional financial constraints as well as family and career problems are among the key factors contributing to the improvement of mental health problems. Other than that, some people will experience stress in their daily work. For example, the work of a person who does a heavy and complicated work will have the pressure to maintain performance at work. Furthermore, the stress of teaching occurs as it strives to achieve excellence. Stress among students is usually due to parents who want their child to succeed in a lesson or a teacher who wants to ensure that their teaching and learning objectives are achieved [11]. Thus, life problems result in mental stress that tend to encourage psychological illness.

Did you know the problem of mental stress treated? Mental stress can be overcome through healthy lifestyle practices which is a

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harmonious life practice can reduce anger and stress. While, the attitude of tolerance, patience and cheerfulness in everyday life can prevent conflict. In addition, time management on a regular basis and work divisions can reduce workload. Individuals can exercise and consume to relieve mental stress. In terms of day-to-day nutritional care, we should avoid fatty and starchy foods but increase the consumption of vegetables and fruits. So, healthy lifestyle practices are effective in avoiding heavy mental stress problems. Other than that, religious or moral education is also capable of addressing mental stress problems. Religion is seen as an essential element of cultivating noble characteristics of humanity. Parents should have religious education to their children since childhood because 'children are like white cloth, parents who make it'. Individuals who have the purity of pure values are able to control their desires in order to stay in a right path. Moral and religious education can overcome problems on mental disorder and empty soul problems [12]. At the same time, this education can create awareness on how to control their desires and help people to continuing their life without any problem involving mental illness. Hence, people will always be grateful for the gift of God for everything that had revolved in their life. Religious or moral education can also reduce mental stress through desire control. Therefore, the purpose of this study was to understand the vulnerability experienced by every state in Malaysia.

2. Methodology

The study will collect the data through two methods including a secondary data derived from Ministry of Health Malaysia (National health and morbidity survey) which is a population based data and article review.

In this study, the Descriptive Statistics Analysis will be analyzed using XLSTAT by using the data derived from Ministry of Health Malaysia (National health and morbidity survey). Based on National Health and Morbidity Survey 2015, 3752 people were admitted because of mental illness problem. The data gathered from Ministry of Health Malaysia comprise of demographic effects on mental patients by state, age, ethnicity and gender. Then, through article review the accurate information regarding mental illness were obtained.

3. Results and Discussion

The analysis of this study showed how the socio-demographic variables influenced the number of mental illness in Malaysia. The study revealed that the number of mental illness of Malaysians were different in terms of several socio-demographic factors in form of state, type of location, gender, age and ethnicity. This research also conducted to obtain the percentage of prevalence of mental health status by socio-demographic characteristics.

Figure 1 shows the prevalence percentage of mental illness among adult for each state in Malaysia in the year 2015.

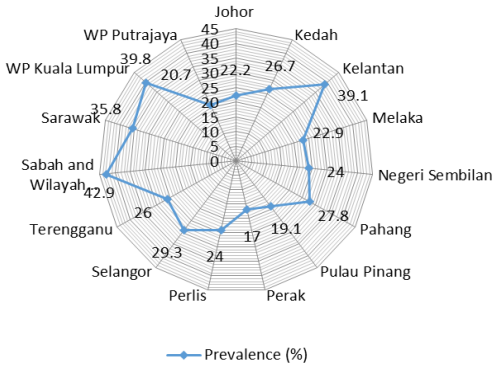


Fig. 1: The prevalence percentage of mental illness among adult for each state in Malaysia

Figure 2 shows the box plots for prevalence percentage of mental illness among adult for each state in Malaysia. The result obtained varied for each states. The highest prevalence percentage of mental illness was in Wilayah Persekutuan (WP) Kuala Lumpur that is 39.8 %, while Perak recorded the lowest prevalence with only 17 %. There was significant different between the highest prevalence and the lowest prevalence.

Based on the result, Sabah has the highest prevalence (42 %) compared to Perak with only (17 %). This is supported by the latest National Health and Morbidity Survey report which stated that 40 % of population in Sabah was currently affected. These findings indicated that many people in Sabah are struggling with this mental health issue. This is due to limited access for mental health care service. People who lived in Perak or Kuala Lumpur can easily get professional help because there was a lot of government hospital which provided help.

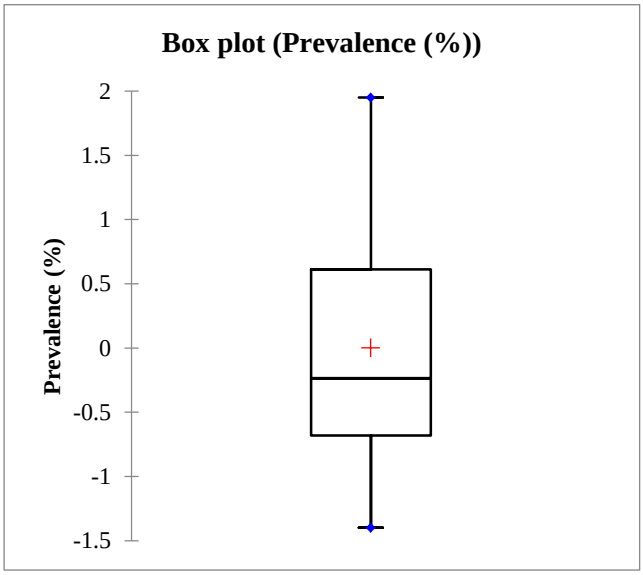


Fig. 2: Box plots for prevalence percentage of mental illness among adult for each state in Malaysia

Based on this study, Figure 3 shows the prevalence percentage of mental illness among adult for different location in Malaysia which is urban and rural location in year 2015. People living in rural area obtained 30 % prevalence of mental illness which is slightly more than prevalence percentage in urban area that is 28.8 %.

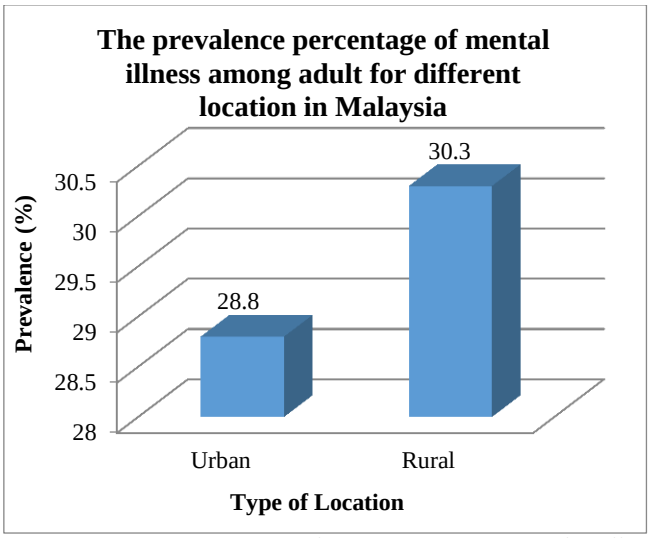


Fig. 3: The prevalence percentage of mental illness among adult for different location in Malaysia

The prevalence of mental illness in rural area is 30.3 % meanwhile in urban area is only 28.8 %. The result proved people who lived in rural area have high tendency for having mental illness compared with someone who stay in urban area. The higher number of mental illness patient in rural area is due to several factors including cultural factor, economic issue, and the lack of mental psychiatrist and hospital that treat mental illness. The culture of self-reliance in rural area can made people reluctant to seek help. It much better in city compare to rural region. People in rural area tend to have a negative judgment toward this illness [13, 14].

Therefore, the patients in rural area choose to keep quiet instead of reporting their problem. This can lead to the serious mental illness. A study by [15] had found that poor socio-economic status was a significant cause of mental illness in rural community. In addition, low income also one of the reason of this issue. Besides that, people who live in rural area also have the trouble while looking for help and treatment because the government hospital always overcrowded [16, 17].

Figure 4 shows the prevalence percentage of mental illness among adult Malaysian female and adult Malaysian male in the year 2015. Female obtained 30.8 % prevalence. This amount was slightly more prevalence percentage of mental illness compared to male which obtained 27.6 %. The different between prevalence percentage of adult male and adult female was not significant as the different is merely about 3.2 %.

The prevalence in female who were having mental illness (30.8%) was slightly higher than males (27.6%) but the difference was not significant. Female were often expose to some factors such as biology, psychosocial and culture. All that factors can lead to bad mental health if not take seriously and no treatment given. According to previous research, some of the women in Malaysia have to face physical abuse, discrimination, and divorcement. In addition, after they married, they had to take a lot of responsibility. They need to work and at the same time they also need to do house chores. This can cause to stress and finally lead to depression. If there is no treatment, they will end up to severe mental illness. Men also had the same type of problem. They had to earn a lot of money for their families and if they fail they will feel a lot of burden. Normally, Mental illness happened to men who were jobless.

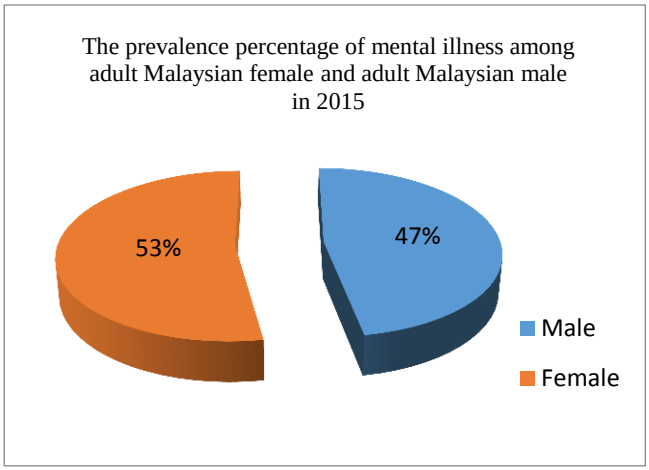


Fig. 4: The prevalence percentage of mental illness among adult Malaysian female and adult Malaysian male in 2015

Based on Figure 5, the prevalence percentage of mental illness among adult in different age range in 16 years old until above 75 years old in Malaysia on year 2015. The result varied for each range of age. Result stated that people in early adult which age range 16-19 years had the highest prevalence percentage of mental illness compared to other range of age. People in age range 65-69 years old recorded the lowest prevalence percentage of mental illness with only 17 %. There was significant different between the highest prevalence and the lowest prevalence.

The findings showed that the teenager tend to have serious mental illness compare to the adult. The prevalence for teenage in range of 16 to 19 years old who were having mental illness (34.7 %) is higher than the prevalence for adult in the range of 50 to 54 years old (24.8%). The mental health problem affected about 1 in 10 children and young people. According to the survey, many teenagers severe mental illness due to the changes in the way of their life now and how that affected the experiences of growing up. Teenagers often experience emotional turmoil as their minds and bodies develop. Some may involve in drugs or alcohol that also affected their mental health. In the previous studies, the level of education also became the risk factor that increased the number of mental illness among young people.

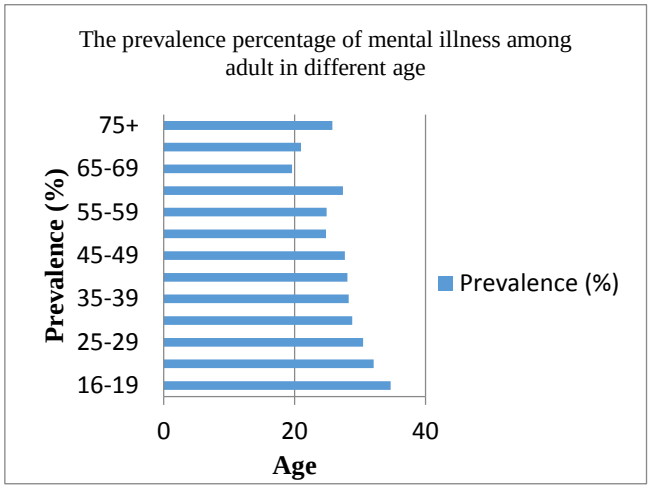


Fig. 5: The prevalence percentage of mental illness among adult in different age

Figure 6 shows the percentage prevalence of mental illness among Malaysian adult with different ethnicity in the year 2015. Result shows that the prevalence percentage of mental illness varied in each ethnicity. Other Bumiputera has the highest prevalence percentage of mental illness while Chinese has the lowest prevalence percentage of mental illness. The different of prevalence percentage in other Bumiputera was quite significant compared to other ethnics.

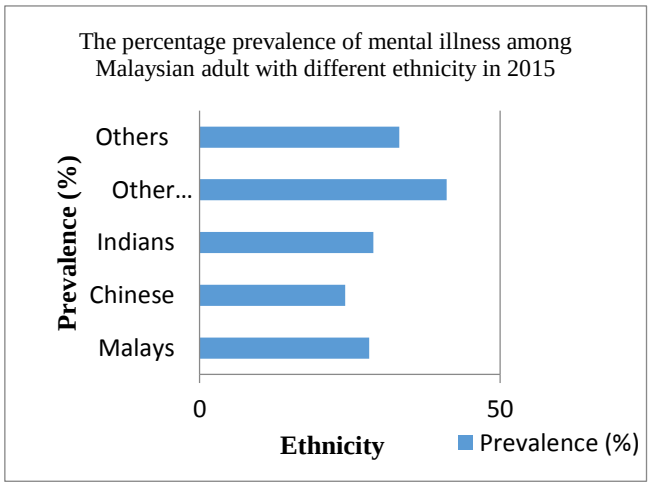


Fig. 6: The percentage prevalence of mental illness among Malaysian adult with different ethnicity in 2015

Looking at ethnicity factor, Malays had the lowest prevalence with (28.8 %) while other Bumiputera had the highest prevalence of mental illness (41.1 %). Racial discrimination still happened in our country. Discrimination in schools, universities and workplaces can lead to serious mental health problem. Other Bumiputera may be subjected to racial discrimination by majority group indi-

viduals or be discriminated against on their religious belief. This type of factor gave the impact especially towards group of minority ethnic in Sabah or Sarawak.

Different type of socio-demographic factors gave the different types of amount of people who severe mental illness. So it can be said that, these influenced each other. The suggested ways to reduce this mental illness is the governments have to build a lot of hospital that has mental health specialist, gives the education to the children since the early stage of age and gives help to those who are using drug or severe depression and anxiety immediately.

4. Conclusion

Based on this study, it would be fruitful to pursue further research about the analysis on demographic and mental illness in Malaysia in order to improve a better lifestyle and a better community towards a better life. These findings showed that female tend to have a higher risk to suffer from mental illness rather than male. This is because of the demographics on female itself. Another finding that we can stress on is the fact that people in rural areas appear to have a higher risk on having mental illness than those people in urban area. The findings are useful for the design to reduce the count of mental patients in Malaysia. It is also useful to implement the intervention strategies in order to help those people in need especially for those who are facing the mental illness problem. Hence, the evidence from this study suggests that preventive programs should be tailored suits different cultural setting, population subgroups and different demographic element that able to cure this targeted group. We hope this study at least can prevent any increases of mental patients in Malaysia.

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