



Teen Mental Health Glossary

Written for youth, families and friends of those living with a mental disorder. Created to help young people and families understand the terms commonly used by doctors and nurses.



Presented by the Sun Life Financial Chair in Adolescent Mental Health
teenmentalhealth.org

TEEN MENTAL HEALTH GLOSSARY

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This glossary* was written for youth, families and friends of those living with a mental disorder. It was created because young people and families were telling us that they were having difficulty finding definitions of words commonly used by doctors and nurses that were written in a youth and family friendly manner. It was developed collaboratively, involving the members of Sun Life Financial Chair in Adolescent Mental Health's Youth Advisory Council (YAC) and mental health professionals as well as the project coordinator, Holly Huntley. The mental health terms defined in this glossary were chosen by youth. Mental health professionals also suggested some further terms for inclusion. These were then defined by the project coordinator using a number of key mental health references (see the end of the glossary for a list). Following this, a number of mental health professionals (including: Dr. Iliana Garcia-Ortega and Dr. Alan McLuckie) reviewed and revised the definitions. These definitions were then reviewed and "translated" by youth into youth friendly language. Once youth had "translated" the terms they requested that , Dr. Stan Kutcher (the Sun Life Financial Chair in Adolescent Mental Health) "back translate" them all: to ensure correct technical usage and consistency with medical terminology. The entire document was then sent to Megan Schellenberg with the Child and Youth Advisory Committee of the Mental Health Commission of Canada for any additional edits and inputs. Finally, the terms were reviewed and edited by Meghan McCarther and then finalized by Dr. Stan Kutcher.

The Sun Life Financial Chair in Adolescent Mental Health Team is pleased to provide you with this youth friendly glossary.

*Note: The glossary is organized alphabetically. It was written not to be gender specific by avoiding gendered pronouns (he/she, him/her, etc.), as recommended by the APA style of writing (www.apastyle.org). Therefore, plural pronouns (they, their, etc.) are used even though this may be grammatically incorrect.



Acute: means that something (usually a disorder or a symptom) has come on quickly with a high degree of impact on a person.

Addiction: is continuing to use a substance (for example alcohol or cocaine) for non-medical purposes despite wanting or trying to stop using it. Addictions have a negative impact on many areas of a person's functioning in life. For example if a person's substance use gets in the way of positive relationships with friends or family; success at school or work, it is interfering with their life. An addiction is characterized by: Abuse of a chemical; Behaviour of drug seeking and daily focus on the drug; Craving for the substance. People who are addicted will often experience withdrawal when they stop using a substance. But, withdrawal does not equal addiction. Withdrawal is a common physical response to quickly stopping a chemical that affects the brain.

Agoraphobia: a fear and avoidance of situations where you might feel unsafe or unable to escape if you have a panic attack.

Anhedonia: is a word used to describe a lack of pleasure. Sometimes, people suffering with depression will experience anhedonia. For example the person doesn't feel good when they are doing the things that normally make them feel good, such as playing a favourite game, swimming, watching movies, etc. Anhedonia due to depression will get better once the depression has been successfully treated.

Anorexia Nervosa (commonly referred to as Anorexia): is a type of eating disorder. The main features that a person with Anorexia will experience are: refusing to maintain a minimally reasonable body weight, intense fear of gaining weight, and an unrealistic perception of their body image (for example: they think or feel that they are much larger or heavier than they actually are).. The word "anorexia" means loss of appetite but many youth with anorexia actually struggle to suppress their appetite. Anorexia Nervosa can be effectively treated with various psychological and family focused therapies.

Antidepressant medicine: a medicine that is usually used to treat the symptoms of depression or anxiety disorders. The antidepressant called "fluoxetine" is considered to be the most useful for helping in adolescent depression. It usually takes 6 to 8 weeks for an antidepressant medicine to work in treating depression.

Anti-social personality disorder: is a type of personality disorder. People with anti-social personality disorder have a long pattern of violating the rights of others. It begins in childhood or early adolescence and continues into adulthood. Other common terms for anti-social personality disorder are sociopath or psychopath. People with this personality disorder will often harm others without feeling remorse or guilt.

Anxiety: is a type of body signal, or group of sensations that are generally unpleasant. A person with anxiety experiences a variety of physical sensations that are linked with thoughts that make them feel apprehensive or fearful. A person with anxiety will often also think that bad things may happen even when they are not likely to happen. For example you may be thinking about your puppy falling and getting hurt when it is on the bed and this makes you

feel anxious. Anxiety is normal and everyone experiences it. It is a signal that we need to adapt to life's challenges by learning how to cope. When you have so much anxiety that it interferes with your normal routine or many parts of your life such as, school, work, recreation, friends or family—that is when it becomes a problem and maybe even a disorder. Typical sensations of anxiety include: worry; ruminations; "butterflies"; twitchiness; restlessness; muscle tension; headaches; dry mouth; feeling as if air is not coming into your lungs; etc.

Anxiety Disorders: are a group of common mental disorders. People with an Anxiety Disorder will experience things like mental and physical tension about their surroundings, apprehension (negative expectations) about the future, and will have unrealistic fears (see **anxiety**). It is the amount and intensity of the anxiety sensations and how they interfere with life that makes them Disorders. Some common types of Anxiety Disorders are; Social Anxiety Disorder; Panic Disorders; Separation Anxiety Disorder; Generalized Anxiety Disorder. Anxiety Disorders can be effectively treated with psychological therapies or medications.

Asperger's: is often considered to be a developmental disorder that can usually be diagnosed prior to adolescence. People with Asperger's experience repetitive and restrictive behaviours and interests that may lead to impaired functioning at work and socially. Asperger's is considered one of the several disorders on the Autism Spectrum and is unique because there is no significant delay in language development. Many people with Asperger's live full and productive lives without any (or minimal) treatment. Recent research is challenging the idea that Asperger's is a disorder but much more study of this is needed.

Attention Deficit Disorder (ADD): is a term used in the past to diagnose what is now called ADHD (see attention deficit hyper-activity disorder).

Attention Deficit Hyper-Activity Disorder (ADHD): is a mental disorder that is usually lifelong and associated with a delay in how the brain matures and how it processes information. People with ADHD usually have varying degrees of difficulty paying attention, being impulsive, and being over active which causes problems at home, in school, and in social situations. There are three kinds of ADHD: Inattentive Type, Hyperactive-impulsive Type and Combined Type. People with Inattentive Type mostly have problems paying close attention to things or being able to pay attention for long periods of time, so it is harder for them to focus on schoolwork or things that take a lot of concentration for more than a short period of time. People with Hyperactive-Impulsive means being on the go and are often not very good about thinking things through before they act. People with Combined Type have problems with inattention and hyperactivity/impulsivity. ADHD can be treated effectively with medication and behavioural techniques. About 1/3 of young people with ADHD may have a learning disability, so anyone who is diagnosed with ADHD should have special learning tests done.

Antipsychotics: are medicines that are often used to help treat psychosis. Sometimes they can also be used to treat mood swings (such as severe depression or mania) or extreme behaviours (such as aggressive outbursts). This can be confusing if a person is being treated with an antipsychotic medicine and does not have a psychosis. If you are being treated with an antipsychotic medicine make sure you understand why it is being used and its risks

and benefits. Check out the “Evidence Based Medicine for Teens” on: www.teenmentalhealth.org.

Affect: Is the emotional experience that someone feels inside of themselves that can be recognized by others. For example: if you are looking/acting sad you can be recognized by someone else as you are feeling sad.

Atypical antipsychotics: are newer types of medicines that help treat psychosis. Sometimes they can be used to treat mood swings (such as severe depression or mania) or extreme behaviours (such as aggressive outbursts). See “Antipsychotics” above.

Autism Spectrum Disorder (ASD): is a life-long mental disorder in which the person suffers with significant abnormal development of social interaction, verbal and non-verbal communication. A person with Autism has trouble understanding the feelings of others (empathy) and usually does not understand many social norms (rules that tell us what is socially acceptable). Language difficulties range from the inability to speak to automatic sounding repetitive phrases to normal language that sounds formal and emotionless. People with Autism Disorder may also display repetitive behaviours (for example, continuous flapping of hands) and strong need to follow a precise daily schedule and routine. In Autism symptoms can vary from extremely severe to mild. Numerous treatments are available to help improve many of the symptoms of Autism but as yet there is no single best treatment for Autism. The causes of Autism are complex and not well understood but the popular perception that vaccinations cause Autism is not correct.

Avolition: means having little or no motivation or drive to do things. For example, not getting dressed or not wanting to go out with family or friends, this is not the same thing as “lazy”.

Axon: is the long, fibre like part of a nerve cell (neuron) in the brain or spinal cord by which information is carried to other nerve cells.

Benzodiazepines: are medications that are used to treat a number of different mental disorders – most commonly anxiety. They can also be used to treat severe restlessness and agitation. When properly used they can be very helpful.

Bipolar Disorder (manic depression): is a mood disorder. People with Bipolar Disorder have experienced at least one full depressive episode and at least one manic episode. Most people with Bipolar Disorder have their first episode before age 25 and it is usually a depression. Bipolar Disorder can be effectively treated with medications and various psychological therapies.

Bipolar Disorder type 2 (hypo-manic depression): is a mood disorder. People with Bipolar Disorder type 2 experience at least one full depressive episode and at least one hypo-manic episode. Hypo-manic episodes are similar to manic episodes but are not as severe. These episodes may last days to months. Bipolar Disorder type 2 can be effectively treated with medications and psychological therapies.

Borderline personality disorder (BPD): is a personality disorder. People with borderline personality disorder have difficulty in regulating their emotions and can experience intense bouts of anger, depression, and anxiety that may last from hours to days or longer. These bouts occur over and over again, often in response to minor life stressors or just on their own. People with BPD have unstable moods, stormy relationships, poor self-image, and self-harming behaviours which can lead to impulsive aggression, self-injury, risk taking and substance abuse.

Brain: is the center of: adaptation, exploration, procreation and civilization. It is the master control of you and your body. You are what your brain is. Your mind is what your brain does. The brain is made up many different parts that are all connected with each other. Here is a very brief overview of some of the parts and some of what they do.

Amygdala: is responsible for emotional memories, responses to fear, emotions and arousal, as well as being involved in the release of hormones that prepare the body for action.

Brain stem: relays messages from the body to the rest of the brain (cerebrum & cerebellum) and vice versa. It also helps control many of the body's vital functions, such as, breathing, digestion, heart rate, sleep and arousal.

Cerebellum: is important for coordinating movement, controlling balance and muscle tone.

Cerebrum: is the largest part of the brain responsible for "higher functions" such as concentration, reason and abstract thinking. It consists of two connected hemispheres (halves) that are divided into the following four lobes:

Frontal lobe: is important in controlling movement, planning behaviour (actions), reasoning, emotions, and problem solving.

Gray matter: is the part of the brain that is dark in color. It is mostly made up of nerve cells (neurons).

Hippocampus: is involved in turning emotional information into memory, learning, and regulating (controlling) emotional responses.

Hypothalamus: communicates with the limbic system to influence behaviour and emotions, controlling body functions such as temperature, sleep, appetite, sexual drive, stress reactions. Also helps control hormone release from the pituitary gland of the brain-endocrine system.

Limbic system: is made up of a group of brain parts that help control emotions, memory, motivation, appetite, and arousal.

Locus Coeruleus: is a small area in the brain stem containing nerve cells that activate the norepinephrine system that signals anxiety and fear.

Myelin: is a kind of insulation that covers axons and helps nerve signals move more quickly. Myelin is also often called "white matter" because it looks white.

Occipital lobe: is responsible for vision.

Parietal lobe: is responsible for recognition (i.e. knowing what things are), body movement in space, as well as taste and some touch.

Temporal lobe: is important in the processing (i.e. knowing what things mean) and recognition (i.e. knowing what things are) of sounds, as well as, the recognition and memory of objects and faces.

Thalamus: receives information from all parts of the nervous system and relays it to the appropriate parts of the brain that deal with sensation and motor (movement) signals. It also helps to regulate sleep and wakefulness.

TO LEARN MORE ABOUT THE BRAIN CHECK OUT THE BRAIN INFORMATION SECTIONS ON THIS WEBSITE: WWW.TEENMENTALHEALTH.ORG.

Bulimia Nervosa: is an eating disorder often just called Bulimia characterized by excessive uncontrollable eating (binges of large amounts of food) over a short period of time, which is then followed by actions that try to get rid of the calories consumed (e.g. vomiting, laxative abuse, excessive exercise). This behaviour is repetitive and often followed by feelings of depression, self-disgust, and guilt. Bulimia can be effectively treated with psychological therapy or medications.

Calorie (also known as kilocalorie): a unit of measurement to calculate heat expenditure or energy. It is often used to determine how much energy is in food or how much energy is used in physical activity. For example an apple may contain 80kcal of energy or a person may use 50kcal walking down stairs.

Cerebellum: look under **Brain**.

Cerebrum: look under **Brain**.

Chronic: means something that is there most of the time for a long time. Often used to describe a disorder that lasts for years or more.

Circadian Rhythm is the body's biological clock with a cycle of about 24 hours. It helps control our sleep and wake cycle as well as temperature and hormone variations.

Clinic: is a setting where various health professionals work directly with patients.

Clinical: an activity that takes place between a health provider and a patient (for example: diagnosis, treatments; etc.).

Cognition: the mental processes associated with thinking, learning, planning, memory etc.

Cognitive Symptoms: are disruptions in normal thoughts. Some medical disorders can interfere with cognition. For example: negative thoughts in depression ("I am a useless person") or delusions (see below) in psychosis ("The FBI is plotting against me") or difficulties in planning or problem solving, etc.

Cognitive Behavioural Therapy: is a form of psychotherapy (talk therapy), designed to help treat various mental disorders. It focuses on changing the persons' thoughts and behaviours to help reverse the person's symptoms and help increase the person's functioning.

Community treatment: this means providing various kinds of treatments and services in the community instead of in the hospital. For example: in the doctor's office; in a health clinic or health center; in a school; etc.

Completed suicide: is the death of a person following a purposeful self-inflicted act with the intent to die. However, a more clear way of saying this is "die by suicide". It is important not to confuse self-harm with suicide attempts.

Computed Axial Tomography (CAT) Scan: is a special kind of X-ray that creates a picture of the structures of the brain – what the brain looks like.

Community Treatment Order: is a legal document that allows or stipulates that a person with a mental disorder will receive treatment while they live in the community.

Comorbidity (also known as dual diagnosis): describes the presence of two disorders that may be associated in a person. For example someone who has been diagnosed with a Substance Abuse Disorder of Alcohol and Depression.

Compulsions: are repetitive behaviours used to suppress (push out of thought) obsessive thoughts or to follow strong urges. Some types of compulsions include: counting; checking; tapping; etc. While mild and occasional compulsions are common, severe and persistent compulsions can be part of Obsessive Compulsive Disorder.

Concussion –A concussion is a brain injury that is caused by a blow to the head or body that leads to problems with brain function due to brain damage. It can occur without a loss of consciousness and can be caused by what seems to be a mild blow or bump. A concussion can occur in any sport or recreational activity, as a result of a fall or a collision or other mishap. A concussion can lead to many difficulties in thinking, emotions or behaviour and sometimes can lead to a mental disorder such as Major Depressive Disorder or Dysthymia. A concussion requires proper medical treatment. You can find out more about concussions in young people here: www.teenmentalhealth.org.

Conduct Disorder (CD): is a disruptive behaviour disorder. The individual with CD shows a persistent pattern of aggressive behaviours lasting over 6 months that are unacceptable to society. Examples include stealing, fighting, starting fires, etc.). Young people with CD often get into difficulty with the law.

Consent: means to give approval or permission to someone to do something. For example a patient must give consent to receive treatment or to be a participant in a research study.

Delusion: is a disturbance of cognition where a person has fixed false beliefs that something has occurred or will occur that is not real. A common delusion is the belief that someone is trying to harm them, even though nobody is. Delusions are often associated with psychosis.

Dendrite: are the specialized fibres that extend from a neuron's cell body and receive messages from other neurons (nerve cells).

Depressant: any substance (medication or drug) that slows down a person's thinking and/or physical functioning. Examples include some pain killers and alcohol.

Depression: is a term used to describe a state of low mood or a mental disorder. This can be confusing because people may often feel depressed but will not have the mental disorder called Depression. People with a Depression could be experiencing either Major Depressive Disorder or Dysthymic Disorder. The most common type of Depression as a mental disorder is a Major Depressive Disorder (MDD). A person with MDD feels very low /sad/depressed or irritable and also experiences: lack of interest; less pleasure; hopelessness; fatigue; sleep problems; loss of appetite; suicidal thoughts. MDD has a negative impact on a person's life; home; family; school/work; friends etc. Depression can also be part of a Bipolar Disorder (see above). MDD can be effectively treated with psychological therapies or medications.

Depressive Episode: describes a period of depression in MDD or Bipolar Disorder. It includes at least 5 or more of these symptoms being present most of the time, mostly every day for 2 or more weeks: depressed mood; a clear decrease in interest or pleasure in most or all (once enjoyable) activities; a significant weight gain or loss without dieting or loss of appetite; unable to get enough sleep or too much sleep (Insomnia or Hypersomnia); slow movements or purposeless movements from mental tension such as, nervousness or restlessness, which is observable by others (also known as psychomotor agitation or retardation); feeling tired or having less than a normal amount of energy; feeling worthless or a lot of inappropriate guilt; diminished ability to think or concentrate, or indecisiveness (have difficulties making decisions); recurrent (happening again and again) thoughts of death, suicidal ideation (thoughts and/or ideas about death or dying), suicide plan, or suicide attempt.

Development: is physical and psychological (emotional and cognitive) growth throughout life.

Diagnosis: is a description that identifies a medical or mental disorder or illness. In North America a diagnosis is determined by the Diagnostic and Statistical Manual of Mental Disorders (DSM) and by the International Classification of Diseases (ICD). A diagnosis is a medical act provided by doctors, psychologists and others trained in diagnosis. A diagnosis is not a label.

Disorder: an abnormality in mental or physical health; disorder is often used as another name for illness.

Distress: is mental or physical suffering. Distress is a part of normal life. Distress is not a mental disorder.

Double Depression: is a mental disorder which is characterized by the presence of both Major Depressive Disorder and a less severe depression known as Dysthymic Disorder in one individual.

DSM IV –TR: is a diagnostic manual published by the American Psychiatry Association that names and describes mental disorders. It divides mental disorders into categories called diagnoses based on lists of criteria (signs and symptoms). Its name is the Diagnostic and

Statistical Manual (DSM) the IV-TR refers to the version of the manual as it is updated over time.

Dysthymic Disorder: is a mood disorder. People with Dysthymic Disorder experience persistent low mood for two or more years (or one year for children) but experience fewer depressive symptoms than in Major Depressive Disorder. This low grade depression can result in many difficulties at home; school/work; with family; with friends. Dysthymia can be effectively treated with psychology therapies or medication.

Eating Disorders: are a group of mental disorders related to eating. People with (an) eating disorder(s) excessively control their eating, exercise and weight. These disorders include Bulimia, Anorexia Nervosa, Binge Eating Disorder, and Eating Disorder Not Otherwise Specified. Eating disorders can be effectively treated using various psychological and medical treatments.

Electro Convulsive Therapy (ECT): is a form of treatment for mental disorders in which improvements in the disorder are produced by the passage of an electric current through the brain. ETC is given with anaesthetic and is most often used to treat severe mood disorders. Its name has the word convulsion in it which means “uncontrollable shaking”. This used to occur in the past but does not happen now because the electric current is given while the person is under anaesthetic.

Electro-Encephalography (EEG): this is a technique that measures the electrical activity occurring in the brain by putting electrodes on top of a person’s scalp. It is often used to assess sleep disorders or to diagnose epilepsy.

Euphoria: this word means a much exaggerated sense of happiness or joy. In a mental disorder this can be found in Bipolar Disorder.

Evidence Based Medicine (EDM): is the standard of medical care that happens when the health provider uses the best available scientific information to provide the kind of care the patient needs. For how you can be sure that your health care provider (doctor, nurse, social worker psychologist, etc.) is using EBM check out the EBM materials (for young people and for parents) at www.teenmentalhealth.org.

Extraversion: this is personality type where someone is very outgoing and sociable. People with this personality feature are often called “extroverts”.

Frontal lobe: look under **Brain**.

Functional Impairment: is a state in which a person is not functioning as they usually would or not functioning well in one or more area of life (i.e. family, friends, intimate relationships, work, school, etc.).

Functional Magnetic Resonance Imaging (fMRI): this is a method for studying how the brain is working. Pictures are taken of different changes that are created when blood flows through

different parts of the brain. They help us better understand how the brain works when it is healthy and when it is sick (such as with a mental disorder).

Generalized Anxiety Disorder (GAD): is a mental disorder which is characterized by excessive anxiety and worry about numerous possible events (not any single, specific event) that leads to problems with daily functioning. People with GAD worry all the time and experience many physical symptoms because of the worry (headaches; stomach aches; sore muscles; etc.). GAD can be effectively treated with psychological therapies or medications.

Genetic disposition: this describes the probability that a disorder may be due to genetic factors passed on from parents to their children.

Grandiosity: is having a highly exaggerated and unsubstantiated belief in your importance, ideas or abilities. Unrealistic amounts of grandiosity can be found in Mania and Hypomania.

Grief: is normal emotional suffering experienced by a person from a loss of a loved one (e.g. it is experienced when a family member dies). It is different from a depressive disorder. Grief is not a mental disorder.

Hallucination: is a disturbance of how your brain perceived the world. A person with an hallucination experiences senses that aren't real (i.e. sound, sight, smell, taste, or touch). For example, a person with psychosis is hallucinating if they hear voices that aren't occurring in reality.

Health: is a state of physical, mental, social, and spiritual wellbeing and not just the absence of disease or infirmity. It includes mental health.

Health Care Professionals: are the trained professionals who help with the care of people who are sick or who help people and communities stay well. Examples include: doctors, nurses, psychiatrists, psychologists, occupational therapists, social workers, etc.

Hippocampus: look under **Brain**.

Holistic: is used to describe an a type of care that focuses on the whole person, which takes into account their physical and mental state as well as their social background rather than just treating the symptoms of an illness alone.

Hormones: are chemicals formed in one part of the body and carried to another body part or organ where they have an impact on how that part functions. They are important in growth, development, mood, and metabolism (food uptake and break down). For example, serotonin is a hormone in the brain that affects mood; growth hormone comes from the pituitary gland to many parts of the body and affects growth; testosterone affects sexual functioning; etc.

Hospitalization: being kept or staying in a hospital as a patient for doctors and other health care professionals to decide on a diagnosis and implement a treatment plan for the patient.

Hospitalization for a mental disorder is usually used only if the disorder is severe or the person is in a crisis situation.

Hypomanic Phase (hypomania): is a milder form of a manic phase. It is usually a part of bipolar disorder. Hypomania can be effectively treated with medication and psychological therapies.

Hypothalamus: look under **Brain**.

Illness: has the same meaning as disease. However, having an illness can mean you have one disease or multiple diseases.

International Classification of Diseases of the World Health Organization (ICD): is a book that classifies medical conditions (disorders and diseases) and groups of conditions. These conditions are determined by an international expert committee. This system is used worldwide for all medical diagnoses including mental disorders.

Introversion: means to look inward, for a person to mostly focus on their inner selves and less on their social surroundings. People that have this personality characteristic are often called “introverts”.

Involuntary Psychiatric Treatment Act (Nova Scotia): is a law that was passed by Nova Scotia in October 2005. The Act makes sure that those unable to make treatment decisions for themselves, due to their severe mental disorder, receive appropriate treatment. This act is used when someone with and due to a mental disorder:

- a. Has been or is threatening/attempting to be a danger to their self or others OR is likely to suffer serious physical harm or serious mental harm or both.
- b. Does not have the ability to make decisions about their own care.
- c. Requires care in a psychiatric facility and cannot be admitted voluntarily.

Every province in Canada has a similar law.

Involuntary status: is a term used to describe someone who has been admitted into a psychiatric facility (usually a hospital) against their will or without their consent, under the authority and protection of the law.

Knowledge Translation: is similar to changing a document from English to French. It is usually used in reference to changing scientific information into a format that can be easily understood for a specific group of people. (E.g. children, adolescents, teachers, adults not in a scientific professional setting, etc.). It is also used to describe how best scientific evidence can be used to improve the care of patients by health professionals.

Locus Coeruleus: look under **Brain**.

Manic Phase: is one of the two phases of bipolar disorder (the other is Depression). It is a period of time during which the person with mania experiences very high energy and

excessive activity elevated to the point where they may have difficulty controlling themselves or acting in an expected manner. Three or four of the following symptoms must be present for an episode to be considered to be a manic phase: Inflated (really high) self-esteem or grandiosity; Decreased need for sleep; More talkative than usual or pressure to keep talking; Racing thoughts; Distractibility; Increase in goal-directed activity; Excessive involvement in pleasurable activities that have a potential for painful or negative consequences, such as spending sprees or gambling. A manic phase often requires hospitalization for treatment. It can be effectively treated with medications plus other therapies.

Medication: is another word for medicine and is in most cases prescribed by a medical doctor. Medications are regulated by government authorities (in Canada that is Health Canada, in the United States that is the Food and Drug Agency). There are many different classes of medications that are used to treat mental disorders (such as: antidepressants; antipsychotics; anti-anxiety). Medications can also be used to treat specific symptoms that are part of a disorder (such as: aggression).

Mental Disorder: is a disturbance of brain function that meets internationally accepted criteria (DSM or ICD) for a diagnosis. Mental disorders occur as a result of complex interaction between a person's genetic makeup and their environment. Many effective treatments (provided by health professionals) for mental disorders are available. Sometimes people use the term "mental health disorder" when they mean mental disorder. This is not necessary.

Mental Health: is a state of emotional, behavioural, and social wellbeing, not just the absence of mental or behavioural disorder. It does not mean lack of distress. A person can have a mental disorder and mental health at the same time. For example: a person may have a Major Depressive Disorder that has been effectively treated and is still taking treatment for the disorder. Now they have mental health as well as a mental disorder.

Mental Health Issue: is a broad term used to describe mental distress, mental suffering or mental disorder. It is so broad that many researchers and health professionals think it is meaningless. We advise not using this term, but instead being clear about what you are talking about.

Mental Health Nurse (clinical nurse with a specialty in psychiatry): is a registered nurse who specializes in the maintenance of mental health and the treatment of mental disorders. This type of nurse usually works directly with people in a clinical setting, such as in a hospital or community clinic. Mental Health nurses have many skills used in the diagnosis and treatment of people with mental disorders.

Mental Health Professional: is a broad category of health care workers who work to help other people improve their mental health or treat mental disorders. . Examples are psychiatrists, clinical social workers, psychiatric nurses, psychologists, mental health counsellors, child and youth workers, etc. They have all received training in working with people who are living with a mental disorder.

Mental Health Promotion: these are activities that try to improve the mental health of people or try to reduce risk for the development of various mental health or social problems.

Mental Illness: refers to a range of brain disorders that affect mood, behaviour, and thought process. Mental illnesses are listed and defined in the DSM and the ICD. The terms mental illness and mental disorder are often used interchangeably.

Mental retardation: is the below average general mental functioning that can be first noticed during childhood and is associated with problems in adjusting to different environments. A diagnosis of mental retardation means that the person has shown to perform lower than average (compared to others their age) in two areas: measured intelligence (IQ) and an overall rating of the individual's level of performance in school, at work, at home and in the community.

Mood: is the ongoing inner emotional feeling experienced by a person.

Mood Disorders: are a group of mental disorders related to problems in how the brain is controlling emotions. A person with a mood disorder experiences an abnormal change in mood. These include: MDD; Bipolar Disorder; and Dysthymia.

Mood stabilizers: medicines used to help normalize mood. They are usually used to treat Bipolar Disorder. Some of these are: lithium; valproate; carbamazepine. Some of these medicines are also commonly used in the treatment of epilepsy.

Myelin: look under **Brain**.

Narcissistic: is a quality or trait of a person who interprets and regards everything in relation to their own self and not to other people. It is associated with an unrealistic and highly inflated self worth.

Negative symptoms: are symptoms of Schizophrenia that follow a lessening of executive functioning (conscious choice, intention, decision making; problem solving) in the brain. The person either has less of something (for example energy) or is unable to do something (for example unable to get out of bed). These symptoms include: inertia (inability to get one's self going), lack of energy, lack of interaction with their friends and family members, poverty of thought (significantly fewer thoughts), social withdrawal, and blunted affect (less emotionally responsive).

Neurodevelopment: is how the brain grows and changes over time.

Neuron (nerve cell): is a unique type of cell found in the brain and the spinal cord that processes and transmits information within the nervous system.

Neuroscience: is the scientific study of the brain and the nervous system.

Neurotransmission: is the process that occurs when a neuron releases special chemicals called neurotransmitters that relay a signal to another neuron across the synapse (a gap between parts of nerve cells).

Neurotransmitters: are chemicals used to communicate messages that are being sent from one brain cell to another in the spaces between those cells. When the production, release, or uptake of any of these chemicals is impaired the brain may show problems in how it is working. Some examples of neurotransmitters are: dopamine, serotonin, noradrenalin, etc.

Obsessions: are repetitive, persistent, unwanted thoughts that the person cannot stop and which cause significant distress and impair the person's ability to function. Mild and occasional obsessive thoughts are normal, but when they become severe and persistent they can be part of Obsessive Compulsive Disorder.

Obsessive-Compulsive Disorder (OCD): is a type of mental disorder. People with obsessive-compulsive disorder experience persistent unwanted and recurring thoughts (obsessions) and/or persistent and unwanted repetitive behaviours (compulsions). Repetitive behaviours are carried out with the goal of preventing or getting rid of the obsessions or of releasing a strong feeling of inner tension. These behaviours may provide temporary relief for the person while not performing them can cause extreme anxiety. Examples of obsessions include repetitive thoughts of germs or contamination. Examples of compulsions include repetitive or excessive touching, counting, hand washing, and cleaning. OCD can be effectively treated with medications and psychological therapies.

Occupational Therapist: is a trained health professional that focuses on increasing a person's independent functioning, improving social skills, and preventing disability using self-care, employment, and recreational (fun) activities. For example helping someone with a mental or physical disability develop job competencies or improve their daily living skills.

P.R.N (as needed): is a Latin abbreviation used for prescriptions. Pro re nata, translates to: when necessary.

Panic Attack: is a sudden experience of intense fear or psychological and physical discomfort that develops for no apparent reason and that includes physical symptoms such as dizziness, trembling, sweating, difficulty breathing or increased heart rate. Occasional panic attacks are normal. If they become persistent and severe, the person can develop a Panic Disorder.

Panic Disorder: is a mental disorder. A person with panic disorder has panic attacks, expects and fears the attacks and avoids going to places where escape may be difficult if a panic attack happens. Sometimes, people with Panic Disorder can develop Agoraphobia. Panic Disorder can be effectively treated with psychological therapies or medications.

Patient advocate: is a person who helps a patient (or a patient's family) with problems and complaints in relation to care or help that they are getting from any agency or institution (hospital, clinic, psychiatric clinic, etc.). Patient advocates can speak on behalf of the patient (or family) and can often be helpful during times of disagreement between the patient (or family) and health care professionals. Many hospitals employ people who act as patient advocates.

Perception: is the mental process of becoming aware of or recognizing information that comes from the five senses: sight, sound, smell, touch or taste. Proprioception (knowing where your body parts are without looking) is also a type of perception.

Personality Disorders: is a general term for a group of behavioural disorders characterized by lifelong behaviour patterns. People with Personality Disorders don't adjust or function well in changing social environments. Signs of these patterns may include poor judgment; emotional control; impulse control; relationship functioning; etc.

Positive symptoms: are symptoms found in psychosis, often in Schizophrenia. They include hallucinations, delusions, loose associations (unclear connections between ideas or disorganized flow of conversation topics), ambivalence (wanting to act one way but act in a way that is opposite to that), or unstable or quickly changing emotions.

Positron Emission Tomography (PET) scans: a technique using radioactive substances for studying how the brain is working by measuring different chemicals involved in the brain's work.

Postsynaptic neuron: is the nerve cell (neuron) that receives messages from other neurons across a synapse.

Posttraumatic Stress Disorder (PTSD): This mental disorder can happen to people who experience a really scary, painful, or horrific event in which they felt scared or helpless and during which they were in danger of death or severe injury. People who develop PTSD will have flashback memories, or nightmares, of the event and will avoid things that remind them of the event. For example, if a person was assaulted in a park they may be too fearful to go to parks and have to find new routes to work. PTSD can be effectively treated with psychological interventions or medications.

Presynaptic neuron: is the nerve cell (neuron) that sends messages to other neurons across a synapse.

Prognosis: is an educated guess, based on previous evidence and scientific study, of how the disorder will affect the person over time. Your health provider will estimate the length of time the disorder will be present and how it may affect you. A prognosis can change over time, for example; if a treatment is very helpful then the prognosis may improve.

Protective factor: is anything that decreases a person's chances of getting a disorder or having a negative outcome. Protective factors can be aspects of a person's health, lifestyle or environment, such as a supporting family or community. Their actual effect in any one person is not easy to predict and it is not clear if they all actually have a direct effect or are just examples taken from healthy people compared to people who are not well.

Psychiatrist: is a doctor who specializes in the practice of psychiatry (the treatment of people who have a mental disorder and the prevention of mental disorders). Psychiatrists are medical doctors who have had many years of additional training in psychiatric medicine.

Psychiatry: is the medical specialty focused on understanding, diagnosing and treating mental disorders.

Psychologist: is a Ph. D level specialist in psychology licensed to practice professional psychology (e.g., clinical psychology), or qualified to teach psychology as a discipline (academic psychology), or whose scientific specialty is a subfield of psychology (research psychology).

Psychomotor: describes the mental process that helps put physical movements into action. For example, a feeling of fatigue may lead to walking very slowly or resting on a couch.

Psychomotor agitation: are movements that happen because of mental tension. It is often described as a way of relieving mental tension. For example, pacing back and forth and peeling or biting skin around fingers.

Psychomotor retardation: are slow thoughts as well as movements that are slowed down.

Psychosis: is a mental state in which a person has lost the ability to recognize reality. Symptoms can vary from person to person but may include changes in thinking patterns, delusions, hallucinations, changes in mood, or difficulty completing everyday tasks (like bathing or shopping). Mental disorders such as schizophrenia can include psychosis as a symptom. Psychosis can be effectively treated with medications and other additional treatments.

Psychotherapy: is a type of treatment for emotional, behavioural, personality, and other psychiatric disorders based mainly on person to person communication. Psychotherapies can be evidence based (supported by many good research studies) or non-evidence based (not supported by many good research studies). It is important for a patient to know what the evidence to support the psychotherapy that they are being treated with is. To find out more about any psychotherapy, check out the Evidence Based Medicine booklet at: www.teenmentalhealth.org.

Receptor: is a special part of a neuron where different chemicals from other neurons (neurotransmitters) or medicines attach, leading to messages going between neurons being sent or blocked.

Recreation Therapist: is a professional that is trained in the specific area of therapy that uses recreational and leisure methods, such as games and activities, to improve a person's physical, mental, emotional, and relationship functioning.

Recreation Therapy: is a type of therapy that uses methods such as games and group activities to improve a person's physical, mental, emotional, and relationship functioning.

Recovery: is when a person with a mental disorder is doing as well as they can be and is feeling mentally healthy – even if they still have a mental disorder.

Relapse: is when a person with a mental disorder who has been in remission or recovery gets sick again.

Remission: is when a person's symptoms decrease and they return to their usual state after having an active phase of a disorder.

Research: is the in-depth study done on a topic to find an answer to a question. (E.g. a study on what is the best treatment for Depression). There are many types of research approaches used: (for example observational, analytical, experimental, theoretical, and applied). Not all research is of the same value. One type of research design called the Randomized Controlled Trial (RCT) is the gold standard for helping us find out what treatments work best.

Results: are the outcomes of a study that support or do not support what the researchers had thought. They are used to guide practice or support further research.

Risk factor: is anything that increases a person's chances of getting a disorder (can be aspects of a person's health, genetics, lifestyle or environment). Remember, risk factors *increase a person's chances of getting* a disorder – they do not cause the disorder. And, risk factors can be weak or strong. So having a specific risk factor may or may not be important for the person.

Safety: is the potential of a treatment or therapy to lead to or cause serious negative effects.

Schizoaffective Disorder: is a psychotic disorder that has symptoms of both Schizophrenia and a major mood disorder. People with Schizoaffective disorder can be effectively treated with medications and other additional treatments.

Schizophrenia: is a mental disorder that can usually be diagnosed between the ages of 15 and 25. People who have Schizophrenia experience delusions and hallucinations (psychotic symptoms) and many other problems that can make day to day living difficult. While schizophrenia runs in families some people can get schizophrenia without a family history of the disorder. Schizophrenia can be treated with medications and additional interventions that can improve the lives of people with the disorder.

Seasonal Affective Disorder (SAD): is a type of Major Depressive Disorder that usually happens to people only or mostly at certain times of year (for example: winter).

Selective Serotonin Reuptake Inhibitors (SSRIs): are a group of medications used to treat depression. These medications work mainly in the serotonin system of the brain.

Self-harm: is any injury that a person inflicts on themselves without the intent to die. Examples of self-harming behaviours include: burning or cutting following an emotionally upsetting event; burning or cutting as a method of manipulation or threat; burning or cutting as a way of solving a problem.

Separation Anxiety Disorder: is an Anxiety Disorder that can be diagnosed in children which makes it very hard for them to be away from their parent. People with Separation Anxiety Disorder can be helped with psychological treatments.

Serotonin: is a neurotransmitter that helps in regulating many different brain functions, including mood, anxiety and thinking.

Single Photon Emission Computed Tomography (SPECT): is a technique that is used to study how the brain is functioning.

Social: is the ability to interact with other people in ways that are commonly accepted and appropriate to the situation / culture.

Social Phobia (also known as Social Anxiety Disorder): is an anxiety disorder regarding the fear of having to be in social situations. A person with Social Anxiety Disorder also avoids the situations that make them feel anxious. Examples include, the fear of public speaking, the fear of going to a party because other people are “judging” them, performing in front of other people. People with Social Anxiety Disorder can be effectively treated with psychotherapy or medication.

Social Worker: is a professional who is educated to deal with social, emotional, and environmental problems that may be associated with a disorder or disability. Services provided by social workers may include case management (connecting patients with programs that meet their needs), counselling, human service management, social welfare policy analysis, and policy and practice development.

Sociopath (or psychopath): is a person with antisocial personality disorder.

Sociopathy: are the behaviour patterns and personality traits a sociopath displays such as superficial (fake) charm, having a lack of remorse (doesn't feel badly/guilty about doing something wrong), and others.

Somatic: describes the physical body. For example: sore muscles, fatigue, headache, etc. are all somatic (also known as physical) sensations.

Specific Phobia: is an Anxiety Disorder. A person with a specific phobia experiences fear in the presence of an object or situation; snakes; fear of heights; fear of the dark; etc. Specific phobias often do not need to be treated. If they do, behaviour therapy is usually used.

St. John's Wort: is an herb that some people think can help treat Depression. It is not approved by Health Canada for use in treating mental disorders.

Stigma related to mental illness: is attaching negative qualities to mental disorders (for example, thinking people with a mental disorder are dangerous). Stigma is a strong force and is harmful in that it may keep people from speaking about their disorder, getting help, or receiving treatment. It can create a false image of what mental disorders are and may force people to limit their social interactions, work, education, or to not seek help if they have a mental disorder.

Stress: is the body's reaction when forces such as infections or toxins disrupt the body's normal physiological equilibrium (homeostasis). Psychological stress develops in response to when a person perceives a threat, real or imagined, and determines whether they have the skills or resources to cope with the perceived threat. Stress is necessary for learning how to adapt. Too much stress can lead to a variety of health problems.

Stimulants: are a group of medications that improve various aspects of brain function: such as; alertness; concentration; etc. They are often used to treat ADHD.

Substance abuse: is an unhealthy pattern of drug, alcohol or other chemical use that may lead to relationship, education, work, mental and/or physical problems.

Substance dependence: is a pattern of actions, physical, and mental symptoms that develop from abuse of a substance (drug). A person who has a substance dependency may develop tolerance to the substance's effects and may experience withdraw symptoms when they stop using the substance. They crave the substance and engage in behaviour designed to access and use the substance –even if the behaviour or substance is harmful to them. A similar term is “Addiction”.

Substitute decision maker: is a person who is given the authority to make care or treatment decisions on behalf of an involuntary patient. See Involuntary Treatment Act.

Suicide: is death that occurs as a result of an action designed to end one's life.

Suicidality: refers to any thoughts or actions associated with the desire or intent to die. We do not recommend using this term as it is so broad that it cannot convey clearly what a person means. For example: a passing thought about death or an attempt to die are both examples of suicidality.

Suicide Attempt: a purposeful act with the intent to end one's life that does not cause death.

Suicidal Ideation: refers to thoughts, images or fantasies of harming or killing oneself.

Suicidal intent: is the commitment and expectation of death by suicide. (Future tense: the person intends to take their life. Past tense: the person intended to take their life).

Suicidal Plan: is the mentally created plan to attempt to end one's life

Supported decision making: is the process in which a vulnerable person is provided advice, support, and assistance by their support network so they can make and communicate their own decisions.

Symptom: is an occurrence of any type experienced by a person that differs from their normal in structure, behaviour, sensation, emotion or cognition that indicates illness or disease.

Synapse or synaptic space: is a space between neurons (nerve cells). Neurons release chemicals into this space that regulate how messages in the brain operate.

Syndrome: is a collection of signs (what a person observes about another person) and symptoms (what a person experiences) that describes a disease.

Systematic Desensitization: is a type of psychological treatment which gradually introduces things that a person fears so that they gradually overcome their fears.

Teen mental health: is a teen's state of emotional and spiritual wellbeing and not just the absence of disease. Focusing to improve the mental health and ability of teens' academic, social, physical, and other functioning will, in turn, increase their ability to contribute to society in the short term and in the long term in meaningful ways it is based on the brains ability to adapt.

Therapist: is a person who is professionally trained and/or skilled in the practice of a particular type of therapy.

Therapy: is the treatment of disease or disorder by any method.

Tolerance: is when a person becomes less responsive to a medication or other treatment over time.

Trauma: is any painful or damaging injury or event-that harms a person's physical or mental health.

Treatment: medical, psychological, social or surgical management and care of a patient.

Trichotillomania: is a mental disorder. People with Trichotillomania pull out their hair over and over again leaving noticeable hair loss. The person usually experiences tension before pulling the hair or if they try to stop themselves from pulling the hair and feel either pleasure or relief when pulling the hair out. The location of the hair can be anywhere on the body but is commonly from the scalp, eyebrows and eyelashes. Psychological treatments and sometimes medications are usually used to help with this disorder.

Violence: is emotional, sexual and/or physical abuse towards someone usually in an effort to gain power or control of another person or group of people.

Voluntary admission: is being admitted as a patient to a mental health unit for treatment (usually in a hospital) based on a person's agreement to be admitted.

Voluntary patient: is a person who stays in a psychiatric facility (usually a hospital) by their own consent or with the consent of the substitute decision maker.

Withdrawal: is a brain response to a sudden stopping of use of a medication or drug. Symptoms of withdrawal can include: nausea, chills, cramps, diarrhea, hallucinations, etc. Withdrawal often occurs in addiction / substance dependence but most people who experience it are not addicted. Another meaning of withdrawal is the self directed avoidance of social contact. This can be seen in some mental disorders such as: Depression, Schizophrenia; Panic Disorder; etc.

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