

MENTAL HEALTH GLOSSARY



DEVELOPING A COMMON LANGUAGE AROUND MENTAL HEALTH

INTRODUCTION

This glossary contains common mental health terminology. It is a great jumping-off point to learn more about terms you may hear when engaging in conversation about mental health.

In Judaism, we read the same weekly parshiot (portions) from the Torah in the same order each year. While we may be familiar with the parsha (portion) of the week, we reread it to refresh ourselves with the story and glean something new as we approach it with fresh eyes and an open heart. In a similar vein, you may be familiar with many of the terms in this glossary. We encourage you to continue to learn and explore mental health terminology, so you can make connections to mental health in a way that supports where you are on your journey.

We want to acknowledge it can be challenging to talk about something you are in the process of learning about. As you dig deeper into mental health terminology, know it is okay to make mistakes. The fields of psychology and mental health are constantly evolving. The process of breaking down the stigma around mental health includes having conversations and learning together.

You can find a number of resources, both Jewish and non-Jewish, online and/or in person. The Blue Dove Foundation has compiled a list of resources in the Jewish community

thebluedovefoundation.org/jewishresources

as well as one of general mental health resources

thebluedovefoundation.org/generalresources.



INTRODUCTION

LANGUAGE MATTERS

The language we use makes a difference. As you continue to learn mental health terminology, it is important to think about which words and phrases are helpful to say and which should be avoided. This is not an exhaustive list; rather, it serves as a starting point to help us think about the way we are using language and how it affects others.

Person-first language



Avoid using:

- Mentally ill person
- Schizophrenic person



Try using:

- Person with a mental illness
- Person with schizophrenia

Person-first language allows individuals with mental illness to be seen as people rather than being defined by their mental illness. Using person-first language helps prevent us from labeling individuals by their life experiences, allowing us to break down stigma.

**Note: Not everyone prefers person-first language. Follow the lead of the person you are talking with. If they do not use person-first language when referring to themselves, follow suit.*

Typical behavior



Avoid using:

- Normal or regular behavior



Try using:

- Typical behavior

There is no clear definition of what is “normal” or “regular” behavior. What is normal for one person might not be for another. Typical describes behavior that is developmentally appropriate or appropriate based on one’s diagnosis. This terminology is often less judgemental, because it refers to developmental stages.

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Suicide



Avoid using:

- Committed suicide
- Successful/unsuccessful suicide attempt



Try using:

- Died by suicide
- Suicide attempt
- Suicide survivor

When talking about suicide or suicide-related behaviors, we stay away from “committed suicide” as well as “successful/unsuccessful suicide attempt.” It is a common, and harmful, idea that those who die by suicide “commit” something wrong — a crime, a sin, etc. — against themselves. This blame only furthers the stigma that already exists. Instead, we use terms such as “suicide attempt,” “suicide survivor,” or “died by suicide.”

Mental health diagnosis or illness as a noun/adjective



Avoid using:

- I am so OCD.
- My day was so crazy/psychotic.
- The weather is being bipolar.



Try using:

- I like things to be done a certain way.
- My day was hectic or didn’t go as planned.
- The weather has changed a lot today.

Using mental health diagnoses to describe matters unrelated to mental health inaccurately depicts mental illnesses and further perpetuates stigma. People with mental illness are often labeled unfairly by their diagnoses, and trivializing them in our vernacular makes that even more challenging.

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Value judgment language around food



Avoid using:

- I am going to be bad and have dessert.
- I feel so fat.



Try using:

- I would like dessert.
- I am feeling bloated/full.

Individual food items do not have moral value; all food has the ability to nourish us and provide enjoyment, and all foods have a place in our daily lives. In addition, body weight and size are not aspects of our worth, value, or emotional state. They are part of our physical being and do not define who we are as humans.



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ADDICTION [SEE SUBSTANCE USE DISORDER]

A chronic disorder involving complex interactions among the brain, genetics, the environment, and an individual's life experiences. Addiction can involve substances, or it can refer to behaviors that become compulsive and continue even despite harmful consequences. Substance use disorders do not always turn into addiction.

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ATTENTION DEFICIT/ HYPERACTIVITY DISORDER (ADHD) [SEE BEHAVIORAL DISORDERS]

An ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with function or development.

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ADVOCATE

Someone who promotes the human rights of people with mental disorders in order to reduce stigma and discrimination. Advocates take various actions aimed at changing the major structural and attitudinal barriers to achieving positive mental health outcomes in populations.

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ANXIETY DISORDERS

More than temporary worry or fear. For people with an anxiety disorder, the anxiety does not go away and can get worse over time. The symptoms can interfere with daily activities such as job performance, schoolwork, and relationships. Common anxiety disorders include social anxiety, specific phobias, and generalized anxiety.

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AUTISM SPECTRUM DISORDER (ASD)

A neurological and developmental disorder that affects how people communicate, learn, behave and interact with others. Although autism can be diagnosed at any age, it is described as a “developmental disorder” because symptoms generally appear in the first two years of life.

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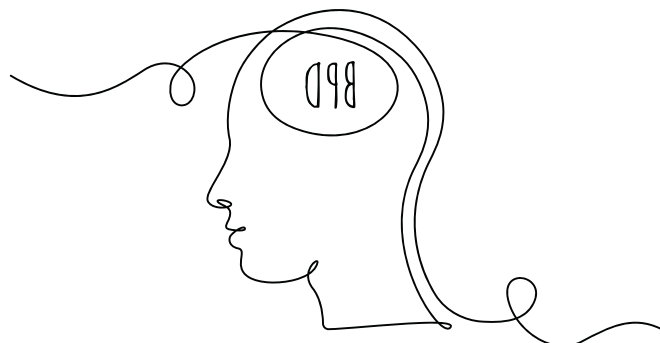
BEHAVIORAL DISORDERS

Any persistent and repetitive pattern of behavior that violates societal norms or rules, seriously impairs a person’s functioning, or creates distress in others. The term is used in a very general sense to cover a wide range of disorders or syndromes. Common behavioral disorders include attention-deficit/hyperactivity disorder, oppositional defiant disorder, and conduct disorder.

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BIPOLAR DISORDER

A mental health condition that causes severe and unusually high and low shifts in mood, energy, and activity levels as well as unusual shifts in the ability to carry out day-to-day tasks.

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CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC)

The United States' leading science-based, data-driven, service organization that protects the public's health. The CDC works around the clock to protect America from health, safety, and security threats, both foreign and in the United States. Whether diseases start at home or abroad, are chronic or acute, are curable or preventable, or result from human error or deliberate attack, the CDC fights disease and helps communities and citizens do the same.

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CERTIFIED PASTORAL COUNSELOR (CPC)

Holds an advanced theology or mental health degree that involved in-depth religious and/or theological training and experience in counseling.

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CHRONIC

Persisting for a long time or constantly recurring. More serious mental illnesses may be considered chronic. Additionally, individuals with chronic physical illnesses are more likely to develop mental health conditions.

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CLINICAL TRIAL

A scientific study using human volunteers, or participants, to look at new ways to prevent, detect, or treat disease. Treatments might be new drugs or new combinations of drugs, new surgical procedures or devices, or new ways to use existing treatments.

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COMORBIDITY

The existence of two or more illnesses in the same person. These illnesses can be physical or mental.

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DEPRESSION

Lack of interest or pleasure in daily activities, sadness, and feelings of worthlessness or excessive guilt that are severe enough to interfere with working, sleeping, studying, eating, and enjoying life.

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DIAGNOSTIC AND STATISTICAL MANUAL OF MENTAL DISORDERS, FIFTH EDITION, TEXT REVISION (DSM-5-TR)

Provides the standard language by which clinicians, researchers, and public health officials in the United States communicate about mental disorders. The current edition of the DSM-5 was published in May 2013, marking the first major overhaul of diagnostic criteria and classification since the DSM-IV in 1994.

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DUAL DIAGNOSIS

Having a mental health disorder and an alcohol or drug problem at the same time, which happens frequently. The interaction of the two conditions can make both of them worse.

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EARLY INTERVENTION

Diagnosing and treating a mental illness when it first develops.

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EATING DISORDERS

Serious and often fatal illnesses that are associated with severe disturbances in people's eating behaviors and related thoughts and emotions. Preoccupation with food, body weight, and shape may also signal an eating disorder. Common eating disorders include anorexia nervosa, bulimia nervosa, and binge-eating disorder.

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EVIDENCE-BASED PRACTICE (EBP)

A term initially used in relation to medicine, it has been adopted by many fields, including education, child welfare, mental health, and criminal justice. The Institute of Medicine (2001) defines evidence-based medicine as the integration of best-researched evidence and clinical expertise with patient values. EBP is a process in which the practitioner combines well-researched interventions with clinical experience, ethics, client preferences, and culture to guide and inform the delivery of treatments and services.

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INTELLECTUAL AND DEVELOPMENTAL DISABILITIES (IDDS)

Differences that are usually present at birth and uniquely affect the trajectory of the individual's physical, intellectual, and/or emotional development. Many of these conditions affect multiple body parts or systems. Intellectual disability starts any time before a child turns 18, characterized by differences with intellectual functioning and adaptive behavior. The term "developmental disabilities" is a broader category of often lifelong challenges that can be intellectual, physical, or both.

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LICENSED CLINICAL SOCIAL WORKER (LCSW)

Holds a master's degree and is licensed in social work. Addresses individual and family problems such as serious mental illness, substance abuse, and domestic conflicts.

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LICENSED MARRIAGE AND FAMILY THERAPIST (LMFT)

Holds a master's or doctoral degree in marriage and family therapy and often provides treatment within the context of one's family or relationship.

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LICENSED PROFESSIONAL COUNSELOR (LPC)

Holds a master's degree and assists people with many concerns, including mental health issues.

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MENTAL HEALTH

Includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.

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MENTAL HEALTH CRISIS

Any situation in which a person's behavior puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community.

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MENTAL HEALTH PROFESSIONAL

Many types of mental health care professionals can help individuals achieve their recovery goals. These professionals work in inpatient facilities, such as general hospitals and psychiatric facilities, and outpatient facilities, such as community mental health clinics, schools, and private practices. Health care professional job titles and specialties can vary by state. Common professionals or providers include psychologists, psychiatrists, counselors, clinical social workers, and psychiatric nurse practitioners.

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MENTAL ILLNESS

Refers to a wide range of mental health conditions — disorders that affect one's mood, thinking, and behavior. (Also called mental health disorders.)

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MENTAL WELLNESS

A positive state of mental health. It is more than the absence of mental illness; it enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community. It is an integral component of health and well-being that underpins our individual and collective abilities to make decisions, build relationships, and shape the world we live in.

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MINISTRY OF HEALTH OF ISRAEL

Responsible for ensuring the health of the population of Israel. The ministry determines policy on matters of health and medical services and is in charge of planning, supervision and control, licensing and coordination of the health system's services.

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MOOD DISORDER

A mental health condition in which one experiences long periods of extreme happiness, extreme sadness, or both. Certain mood disorders involve other persistent emotions, such as anger and irritability. Common mood disorders include, but are not limited to, depression and bipolar disorder.

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NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI)

The United States' largest grassroots mental health organization. NAMI is one of more than 80 national nonprofit organizations that participate in the National Institute of Mental Health Outreach Partnership Program.

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NATIONAL INSTITUTE OF MENTAL HEALTH (NIMH)

The United States' lead federal agency for research on mental disorders. NIMH is one of the 27 institutes and centers that make up the National Institutes of Health (NIH), the nation's medical research agency. NIH is part of the U.S. Department of Health and Human Services.

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OBSESSIVE-COMPULSIVE DISORDER (OCD)

This is a common, chronic, and long-lasting disorder in which a person has uncontrollable, reoccurring thoughts (obsessions) and/or behaviors (compulsions) they feel the urge to repeat over and over.

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PANIC ATTACK

Sudden, unreasonable feelings of fear and anxiety that cause physical symptoms like a racing heart, fast breathing, and sweating. This experience can be frightening, and sufferers often feel physically out of control. Some people become so fearful of these attacks that they develop panic disorder, a type of anxiety disorder.

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POST-TRAUMATIC STRESS DISORDER (PTSD)

A disorder that develops in some people who have experienced a shocking, scary, or dangerous event, often referred to as a traumatic event.

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PROTECTIVE FACTORS [SEE RISK FACTORS]

Characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.

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PSYCHIATRIC MEDICATIONS

Psychiatric medications influence the brain chemicals that regulate emotions and thought patterns. They are usually more effective when combined with psychotherapy. In some cases, medicines can reduce symptoms so other methods of a treatment plan can be more effective.

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PSYCHIATRIST

Medical doctor (M.D. or D.O.) who specializes in the diagnosis, treatment, and prevention of mental illnesses, including substance use disorders.

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PSYCHIATRIC NURSE PRACTITIONER

Holds an associate's or bachelor's degree in nursing and works with individuals, families, groups, and communities.

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PSYCHOLOGIST

Holds a doctoral degree (Ph.D. or Psy.D.) and has special training in mental health conditions.

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PSYCHOSIS

Describes conditions that affect the mind and cause some loss of contact with reality. During a period of psychosis, a person's thoughts and perceptions are disturbed, and the individual may have difficulty understanding what is real and what is not.

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PSYCHOTHERAPY

The treatment of mental illness through talking about problems rather than by using medication. Treatment for first-episode psychosis is based on cognitive behavioral therapy principles and emphasizes resilience training, illness and wellness management, and coping skills. Treatment is tailored to each client's needs.

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PUBLIC HEALTH AGENCY OF CANADA

Part of Canada's federal health portfolio. Its activities focus on preventing disease and injuries, responding to public health threats, promoting good physical and mental health, and providing information to support informed decision making.

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RECOVERY

The process by which people with mental illness return or begin to work, learn, and participate in their communities. For some individuals and their families, recovery means the ability to live a fulfilling and productive life.

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RESILIENCE

The process and outcome of successfully adapting to difficult or challenging life experiences, especially through mental, emotional, and behavioral flexibility and adjustment to external and internal demands. Different factors (such as protective factors) can contribute to how well people adapt to adversities.

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RISK FACTORS [SEE PROTECTIVE FACTORS]

Characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes.

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SCHIZOPHRENIA

A severe mental disorder that tends to appear in late adolescence or early adulthood. People with schizophrenia may have hallucinations, delusions, loss of personality, confusion, agitation, social withdrawal, psychosis, and/or extremely odd behavior.

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SELF-HARM/NONSUICIDAL SELF-INJURY (NSSI) [SEE SUICIDE, SUICIDAL IDEATION]

Hurting oneself on purpose as a way to release painful emotions, distract from emotional pain with physical pain, express self-hatred or low self-esteem, punish oneself for perceived wrongs, or regain a sense of control. Self-harm is not a suicide attempt but rather a sign the individual is trying to cope with intense emotions.

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SHAME

An emotion that arises when one is seen and judged by others (whether they are present, possible or imagined) to be flawed in some crucial way, or when some part of one's self is perceived to be inadequate, inappropriate or immoral. Shame is called a self-conscious emotion because the object of shame is oneself.

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SIGN [SEE SYMPTOM]

Something other people can observe or measure that indicates an individual may be struggling with a mental health challenge.

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STIGMA

The negative or discriminatory attitudes others have about mental illness. Stigma often comes from fear or a lack of understanding. Inaccurate or misleading media representations of mental illness contribute to both those factors.

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SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMSHA)

The agency within the U.S. Department of Health and Human Services that leads public health efforts to advance the behavioral health of the nation. SAMHSA's mission is to reduce the impact of substance abuse and mental illness on America's communities.

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SUBSTANCE USE DISORDER (SUD)

A mental disorder that affects a person's brain and behavior, leading to a person's inability to control their use of substances such as legal or illegal drugs, alcohol, or medications.

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SUICIDE

A death caused by self-directed injurious behavior with intent to die as a result of the behavior.

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SUICIDE ATTEMPT

A nonfatal, self-directed, potentially injurious behavior with intent to die as a result of the behavior. A suicide attempt might not result in injury.

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SUICIDE CRISIS AND LIFELINE - 988

988 is now active across the United States. This new, shorter number will make it easier for people to remember and access mental health crisis services by phone or text. (Please note, the previous 1-800-273-TALK (8255) number will continue to function indefinitely.) We can all help prevent suicide. The Lifeline provides around the clock, free and confidential support for people in distress, prevention and crisis resources for individuals or their loved ones, and best practices for professionals in the United States.

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SUICIDAL IDEATION; ACTIVE AND PASSIVE

- Active suicidal ideation is marked by actual, imminent, or emergent detailed thoughts and plans to die.
- Passive suicidal ideation is marked by thoughts about suicide or a preoccupation with death without intent to act on it immediately.
- These two states exist on a spectrum, and people may also experience suicidality that moves between active and passive states.

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SUPPORT SYSTEM

Many factors contribute to recovery, including having a good support system of respected and trusted people. They can be family members, friends, teachers, faith leaders, neighbors or peers — anyone the affected individual feels comfortable talking to about what they're experiencing and who provides the support they need. Research has shown having a social support system can have a positive impact on our overall mental health, especially for women, older adults, patients, workers, and students.

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SYMPTOM [SEE SIGN]

Can affect emotions, thoughts, and behaviors. It is something only the person experiencing it can observe.

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TRAUMA

Individual trauma is an event or circumstance resulting in physical, emotional, and/or life-threatening harm. The event or circumstance has lasting adverse effects on the individuals physical health, mental health, emotional health, social well-being, and/or spiritual well-being. A risk factor for most mental health disorders, trauma has no boundaries when it comes to age, gender, socioeconomic status, race, ethnicity, or sexual orientation.

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WORLD HEALTH ORGANIZATION (WHO)

The United Nations' agency dedicated to global health and safety connects nations, partners, and communities to promote health and serve the vulnerable. The WHO works with its member states to achieve the highest level of health for all people by pursuing universal health coverage.

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