

Glossary of terms

Below is a glossary of various terms around mental ill-health and suicide. For more comprehensive information, see the major sections of this website on mental ill-health and suicide.

Adverse life event: a stressful or difficult event in a person's life, which may increase the risk of mental health problems or illness, e.g. separation or divorce, losing a job, death of a friend or family member.

Advocates: people given the power by consumers to speak on their behalf.

Affective Disorders: a group of disorders including depression which have a negative impact upon a person's mood or 'affect'.

Aetiology: all the factors that contribute to the development of an illness or disorder.

Agoraphobia: fear about being in places or situations from which escape might be difficult (or embarrassing) or in which help may not be available if a panic attack occurs. Fears can include situations such as being outside the home alone; being in a crowd or standing in a line; being on a bridge; and travelling in a bus, train, or car.

Antisocial Personality Disorder: one type of personality disorders (Cluster B), which is characterised by a pervasive pattern of disregard for, and violation of, the rights of others including deceitfulness; irritability and aggressiveness; consistent irresponsibility, reckless disregard for the safety of self or others; and a lack of remorse.

Anorexia nervosa: a serious eating disorder whose core feature is self-induced weight loss by starvation, exercise and purging. Individuals experience a distorted body image and an intense fear of becoming fat even when severely underweight.

Anxiety: a set of physical, mental and behavioural changes experienced in response to danger or a threat, when the brain sends signals to the body to prepare for 'fight or flight'.

Anxiety disorder: a disorder characterised by extreme sense of fear and worry with intense psychological sensations in situations where there is no real danger or threat. The sensations and intense fear are such that the individual is unable to function effectively in the feared situation.

Assessment: the systematic and ongoing evaluation of information about a consumer to determine his or her diagnosis, needs and the desired outcome of care.

Attempted suicide: Self-inflicted harm where death does not occur but the intention of the person was to die. There are three types of attempted suicide: without injury, with injury, and with a fatal outcome (suicide).

Bereavement: the grief and sadness experienced after a significant loss, such as the death of a loved one.

Best practice: the use of evidence-based methods to achieve optimal outcomes.

Bipolar disorder: the more recent name for the mood disorder manic depressive illness. It is characterised by the presence of history of manic (or hypomanic) episodes usually alternated with depressive episodes although some individuals do not experience the depressed mood.

Borderline Personality Disorder: one type of personality disorders (Cluster B), which is characterised by high sensitivity to emotional triggers, inappropriate and intense anger, a strong fear of abandonment, dissociation, problems in interpersonal relationships, impulsive self-destructive behaviour, frequent suicidal ideation and self-harm.

Bulimia nervosa: an eating disorder characterised by eating binges during which the person feels a loss of control and self disgust. To compensate for the binges and to avoid weight gain, individuals use self-induced vomiting and/or the abuse of laxatives and fluid tablets.

Bullying: repeated attacks on a person (verbal, physical, social or psychological) which cause distress at the time and also cause distress because of the possibility of future attacks.

Capacity building: capacity building is about increasing the abilities and resources of individuals, organisations and communities to manage change.

Carer: a person whose life is affected by a close relationship with a consumer, or who has chosen and contracted a caring role.

Child abuse: a pattern of inappropriate treatment of a child, which may include physical or sexual abuse, emotional abuse, or neglect of the child's care.

Chronic: of long duration or recurring frequently, often with progressive seriousness.

Conduct disorder: recurrent behaviour over at least 6-12 months showing no regard for social norms or rights of others; may include aggression toward people or animals, property damage, violation of rules, deceitfulness or theft.

Consumer/client (of mental health service): a person who has experienced mental illness and has received services or has been significantly affected by a mental health service.

Delusions: beliefs or thoughts which are bizarre and are different from most people in that person's culture, e.g. a person believing they are being persecuted or plotted against, that their thoughts are being broadcast aloud, or that they are someone else, such as a famous person or religious figure. It is a common symptom of schizophrenia and other psychoses.

Depression: feelings of extreme sadness and grief, perhaps in response to a negative event or situation; if feelings are severe or persistent they may indicate an illness, which may also be called Depression or may be differentiated by the terms Clinical Depression, Depressive Illness, or Mood Disorder.

Depressive illness: a diagnosable disorder characterised by severe or persistent feelings of depression often with other symptoms, such as anxiety, guilt, changes in sleep and eating patterns, hopelessness, loss of energy, poor concentration.

Diagnosis: a decision based on the recognition of clinically relevant symptomatology, the consideration of causes that may exclude a diagnosis of another condition, and the application of clinical judgement.

Drugs: substances which have an effect on the human body, the use of which may be legal or illegal. Drugs may include over-the-counter medications, prescription medications, cigarettes, alcohol, heroin, cocaine, marijuana, etc. See also substance use and substance abuse.

Early Intervention: in mental health, this term means picking up the early signs of a mental health problem and providing support before the situation worsens, e.g. a teacher referring a troubled student to the school counsellor.

Eating disorders: a group of illnesses characterised by disturbed eating patterns and a preoccupation with body image. See also anorexia nervosa and bulimia nervosa, which are two of the major types of eating disorders.

Emotional abuse: a pattern of abuse in which the person's sense of self and emotional security is undermined, e.g. by verbal abuse, threats of maltreatment and severe punishment, rejecting the person and withholding affection, creating a climate of fear, or keeping the person socially isolated. See also Child abuse.

Evidence-based: Approaches that use and are based on clear evidence from existing literature.

General Anxiety Disorder (GAD): one type feelings of constant apprehension and a general tendency to be worried about many areas of life e.g. health, work and finances.

Hallucinations: sensing or feeling something which is not there, even though it seems real, e.g. hearing voices, seeing people or things which aren't there, feeling or smelling something which is not real. It is a common symptom of schizophrenia and other psychoses.

Health: a state of physical, emotional, social and spiritual wellbeing, which is more than simply the absence of an illness.

Help-seeking behaviour: a willingness and ability to seek personal and/or professional support when facing health or personal difficulties.

Hypomania: an episode of illness that resembles mania but is less intense and less disabling. The state is characterised by an euphoric mood, an unrealistic optimism, increased speech and activity, and a decreased need for sleep. For some, there is increased creativity, while others experience reduced judgement and functioning.

Incidence: The number of cases identified in a given period, usually a year, i.e. the number of people who die by suicide. Incident rate is usually expressed per 100 000 population.

Intervention: To provide a service so as to produce an outcome or modify a situation; to take action or to improve health or change the course of or treat a disease or dysfunctional behaviour.

Maintenance treatment: treatment designed to prevent a recurrence of illness or maintain maximum health.

Mania/manic episode: an episode of illness characterised by extreme mood swing where a person feels extremely high, energetic, and agitated, has less need for sleep and experiences rapid speech and thought. Some people also experience hallucinations and delusions.

Manic depression: a term previously used for bipolar disorder.

Mental disorder: a diagnosable illness that significantly interferes with an individual's cognitive, emotional or social abilities. Often used interchangeably with the term mental illness.

Mental health: holistic sense of well being and the capacity of people within groups and an environment to interact in a way that promotes subjective well-being and optimal development to achieve individual and collective goals.

Mental health literacy: 'The ability to recognise specific disorders; knowing how to seek mental health information; knowledge of risk factors and causes, of self-treatments and of professional help available, and attitudes that promote recognition and appropriate helpseeking.' 1)

Mental health problem: reduced emotional, social, cognitive ability or well-being but not to the extent that the criteria for a mental disorder are met; disruption in the interactions between the individual, the group and the environment producing a reduced state of mental health.

Mental health professional: professionally trained person working specifically in mental health such as a social worker, psychologist, psychiatrist, psychiatric nurse and occupational therapist.

Mental health promotion: activity to maximise mental health and well-being among populations and individuals.

Mental health service: public or private service in which the primary role is to provide treatment, rehabilitation or community support for people affected by mental disorder or psychiatric disability.

Mental illness/disorder: a recognised, medically diagnosable illness which results in a significant impairment of an individual's thinking and emotional abilities and may require intervention.

Mood disorder: a term used to describe depression and related disorders, which have a negative effect on a person's mood; sometimes also called affective disorders.

Multidisciplinary team: the identifiable group of mental health personnel comprising a mix of professionals responsible for the treatment and care of people with mental illness.

National Mental Health Strategy: comprises the National Mental Health Policy and Plan adopted by Commonwealth, State and Territory Health Ministers in 1992 and the Statement of Rights and Responsibilities. The strategy commits all governments to improve the lives of people with a mental illness.

National Suicide Prevention Program: A \$48 million whole-of-government and whole-of-community approach to suicide prevention, building on the National Youth Suicide Prevention Strategy. The NSPP supports national suicide prevention activities across the lifespan, with a continuing focus on young people. Activities include education and training within communities, building networks between primary care providers such as general practitioners and community organisations, and initiatives that aim to address risk and protective factors for suicide, including media activities and community development.

National Youth Suicide Prevention Strategy: A \$31 million coordinated approach to youth suicide prevention (which ended in June 1999) that involved all Australian governments, health professionals, carers, researchers and others. Funding was provided for rural youth counselling, enhanced telephone counselling, programs for parents, the education and training of professionals and for research activities.

Non-psychotic illnesses: mental illnesses which do not generally include psychotic symptoms, such as phobias, anxiety disorders, depression, eating disorders, obsessive compulsive disorder.

Obsessive-compulsive disorder: mental health disorder characterised by constant unwanted thoughts; often results in the performance of elaborate rituals in an attempt to control or banish the persistent thoughts. For example, people affected may have an obsession about contamination may drive a person to the compulsive ritual of washing their hands excessively after contact with others.

Panic attack: a feeling of panic, with associated physical symptoms, which often starts suddenly and for no apparent reason, and is not associated with a particular event or situation: symptoms include shortness of breath, chest pain, dizziness, feeling faint, shaking, dry mouth, pounding heart, tingling, sweating, an urge to flee, nausea, blurred vision, difficulty gathering thoughts.

Panic disorder: people with this disorder experience more than one panic attack, which is not associated with a particular event or situation, and then become worried about having another attack.

Personality Disorder: a pattern of thoughts, feelings and behaviour (such as paranoid or antisocial behaviour) which is very different from other people in that person's culture and which causes distress or poor functioning. See also borderline personality disorder.

Phobia: intense fear of specific objects/ situations where there is no real danger. Phobias interfere significantly with the individual's ability to function effectively in the feared situation.

Postnatal depression: a serious depressive disorder that affects about one in eight women after the birth of a baby and involves mood changes, appetite and sleep disturbance, feelings of inadequacy, anxiety and guilt, and loss of concentration and memory.

Prevalence: the proportion of the population with the disease/disorder.

Protective factors: refers to a range of factors that appear to have the capacity to protect individuals who might otherwise be at risk of developing mental illnesses.

Psychiatric disability: loss or deficit in a person's day-to-day functioning which is the result of having or having had a mental disorder. The level of psychiatric disability may be minimal or nonexistent if the disorder is well managed or if the individual has fully recovered.

Psychiatrist: a doctor who has undertaken additional training to become a specialist in mental illness and can prescribe medications as well as providing or referring people to other forms of treatment and support.

Psychologist: a professional trained in assessing people's behaviour, who can offer advice and/or counselling in regard to certain situations; a clinical psychologist specialises in mental health problems and illness, rather than other aspects of people's behaviour.

Psychosis/psychotic episode: a period of mental illness when the person loses contact with reality. The ability to make sense of thoughts, feelings and external information is seriously affected.

Post-traumatic stress disorder (PTSD): many people who have experienced major trauma such as war, torture, motor accidents, fires or violence continue to feel terror long after the event. They may experience nightmares or flashbacks for years.

Predisposing factors: Non-modifiable factors that may increase a person's chance of developing mental illnesses, such as genetic and neurobiological factors, gender, personality, culture, socio-economic background and level of isolation.

Resilience: a person's ability to bounce back after experiencing difficult events or situations, which helps to protect them from developing a mental health problem or illness.

Risk factors: factors associated with higher risk for developing a particular illness, e.g. high cholesterol is a risk factor for heart disease. Some risk factors increase the chance of developing a mental health problem or illness, such as having a parent with a mental illness, being bullied or abused, or experiencing a stressful life event.

Risk taking behaviour: a pattern of behaviour in which a person is attracted to dangerous and possibly illegal activities, such as violence, excessive alcohol or drug use, hanging from moving trains or vehicles, etc.

Schizophrenia: a mental illness that affects one in 100. It interferes with a person's mental functioning and, over the long term, may cause personality changes. The first onset is usually in adolescence or early adulthood. Common symptoms include delusions, hallucinations and confused thoughts, speech and behaviour.

Self-harm: this includes the various methods by which individuals harm themselves, such as self-laceration, self-battering, taking overdoses, or deliberate recklessness. Recent research suggests that self-harm is more common than attempted suicide and is a serious youth health problem.

Sexual abuse: occurs when a person is forced by another to engage in unwanted and/or underage sexual activity. It may be in the form of non-contact sexual abuse (e.g. being forced to watch sex or pornography), contact abuse (e.g. being forced to touch the genitals) or intercourse (rape).

Social and emotional wellbeing: being able to function well socially and feel well emotionally; an alternative term for 'mental health' and the preferred term for some people, including many indigenous communities.

Social phobia/social anxiety: fear that others will judge everything you do or say in a negative way. People may believe they are permanently flawed and worthless if any sign of poor performance is detected. See also anxiety.

Stigma: a mark of shame or disapproval, of being shunned. It emerges when people feel uneasy or too embarrassed to talk about behaviour they perceive as different. Some degree of stigma is associated with all mental illness but is particularly strong when the illness results in unusual behaviour. Stigma can create a wall of silence that is damaging to the person, the community, his or her family and friends.

Stress: a term used to describe the negative feelings of anxiety or depression which a person may experience when they are overly busy or have a number of negative events or situations in their lives; severe or prolonged stress may increase the risk of a mental health problem or disorder.

Substance use or drug use: the deliberate, non-medical use of a drug by a person to alter their own perceptions or behaviour.

Substance use disorders: disorders in which drugs are used to an extent that behaviour becomes maladaptive; social and occupational functioning is impaired, and control or abstinence becomes impossible.

Suicidal behaviour: Acts such as suicide and attempted suicide. This also includes suicide related communications such as verbal or nonverbal statements expressing suicidal intent.

Suicide death: A death is classified as a suicide when a coroner determines that it has occurred as a result of self-inflicted harm where the intention was to die.

Suicidal ideation/thoughts: Thoughts about, or plans for, taking one's own life that may or may not lead to a suicide attempt.

Suicide intent: Implies a conscious desire or wish to die or escape from life. Suicide intent does not necessarily denote that an individual has undertaken an analysis or has knowledge of the medical lethality of different methods or means.

Suicide prevention: Actions or initiatives to reduce the risk of suicide among populations or specific target groups.

Support: support may refer to ongoing care by professionals as part of a therapeutic process or it may refer to support provided by anyone in the community.

Symptom: an observable physiological or psychological manifestation of a disorder or disease, often occurring in a group to constitute a syndrome.

Treatment: an intervention (either medication or therapy) by a recognised health professional such as a psychiatrist, general practitioner or other doctor, nurse, psychologist, occupational therapist, social worker or other professional mental health worker.

Warning sign: a sign which indicates that a person may have a mental health problem or illness, or be thinking about suicide; this is different from a risk factor, which increases the chances of developing a mental health problem or illness.

Werther effect: A term drawn from literature to describe the copycat effect after media reporting of suicide. Relates to the story 'The Trials of Young Werther' by Johan Wolfgang von Goethe.

References

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