Mental Health Guide

Not Just Another

IEHP
Inland Empire Health Plan
Taking care of your mind is one of the best things you can do for yourself. Your mental health can affect your whole body. It can also affect how you enjoy life!

Mental health is all about how we think, feel and act. It affects all parts of our lives from relationships to school to even being able to have fun.

We all have times where our mental health is not in tip-top shape, and that is okay. But when our mental health is not doing well for a long time, it is important to get help.

Mental health disorders are types of conditions that affect how we feel, how we think and how we act. Mental health disorders are more common than heart disease, lung disease and cancer combined. One in five teens will have a mental health disorder at some point during their life. When and if this happens to you or someone you care about, help is out there.

In this guide, you will find:
- Facts on common mental health disorders
- How you can notice them
- Ways you can get better
- Other helpful tips about mental health
- Resources
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The exact cause of many mental health disorders is not known. We do know that each of us has:

- Our own genetics - traits we were born with and can be passed down in families; and
- Experiences, or things that may happen to us throughout our lives, such as:
  - Brain injury (from sickness or accidents)
  - Substance use
  - Painful or hard times, such as witnessing violence, going through neglect or abuse, changing jobs or schools, having problems in our family, death of a loved one, divorce, and so on
- Poor diet or contact with poisons

Throughout our lives these things can interact. For some of us, it may lead to mental health disorders. Having a mental health disorder is not a weakness or flaw. Any of us can have a mental health disorder. They can be treated and getting better is possible.

Note:
This booklet serves as an informational guide and should not replace the advice of a Doctor or Mental Health Professional.
While stress is not a mental health disorder, it is important to talk about stress because it can take a toll. Stress is a feeling of mental and physical tension. Stress is the body’s response to a threat, pressure or challenge. We can often feel stressed when we are angry, nervous or upset. It can come in short bursts or last a long time. Feeling stress is normal. It can be helpful to us – like when we need to run from danger or meet a due date, but it can also hurt us when we stress too much or for too long.

There are two main types of stress:

1) **Acute Stress** comes from day-to-day life pressures. This kind of stress lasts a short time. Acute stress can be exciting in small doses, but too much is very tiring. We feel acute stress when we go on a big roller coaster, before a test, when we argue with a friend or partner, or when we slam on the brakes to avoid a car crash. It helps keep us safe. All people feel acute stress from time to time.

2) **Chronic Stress** is when stress lasts a long time – like weeks or months. Some causes of chronic stress could be problems at home, having unhappy relationships or worrying about the future. Over time, it can be bad for our health. It can lead to problems like high blood pressure, heart disease, diabetes, and more. It can also lead to mental health disorders like depression and anxiety. To prevent this, we need to control stress.
Symptoms:

- Diarrhea or constipation
- Headaches
- Trouble sleeping or sleeping too much
- Drug or alcohol use to relax
- Frequent aches and pains
- Feeling angry, overwhelmed or moody
- Forgetting things
- Feeling tired
- Weight loss or gain
- Upset stomach
- Sexual problems
- Stiff jaw or neck

Treatment:

We can control our stress in healthy ways. Here are some methods from the American Psychological Association that research has shown to help lower stress:

- Take a break from the stressor. Allow yourself to step away from what is stressing you out. It is best not to avoid a stressor, but to give yourself short breaks from it. Spending just 20 minutes doing something else can give you a new attitude and help you feel less overwhelmed.

- Exercise! It helps your mind and your body! A regular workout routine is great, but anything counts. Even 20 minutes of walking, dancing, running, or swimming can help you feel better.

- Smile and laugh! Our brains, feelings and facial expressions are all linked. When we stress, a lot of it gets held in the face. Laughing or smiling can help ease some of the tension and make us feel better.

- Get social support. Talk to someone you trust and who gets you. Just sharing what is stressing you helps.

- Meditate. Mindfulness, meditation and mindful prayer can help the mind and body relax and focus. It can also help us be easier on ourselves and form positive attitudes. Even a short meditation can make you feel better right away.
We all feel anxiety now and again. It can be normal to feel anxious before an exam, before making a big life decision or after losing a close loved one. Anxiety disorders are more than short times of worry. Having an anxiety disorder means that anxiety does not go away and gets worse over time. They can take a toll on relationships, school, work, and can get in the way of daily activities.

Here are common anxiety disorders:

**Generalized Anxiety Disorder (GAD)** – GAD causes excessive worry or anxiety most days for at least six months. Worrying about things like grades, your health, social events, and other routine life events is common. Symptoms of GAD can include:

- Feeling on edge or high-strung
- Getting tired easily
- Having a hard time focusing
- Being moody
- Having sore or tense muscles
- Having a hard time controlling feelings of worry
- Having sleep problems, like not being able to sleep or not feeling rested after sleep

Anxiety disorders are the most common mental health disorders in the United States.
**Obsessive Compulsive Disorder (OCD)** – OCD causes the person to have unrealistic thoughts and fears that turn into obsessions. These obsessions cause repeat behaviors that become compulsive. If the repeat behaviors are not done, it makes the person’s anxiety or fear toward the obsession even worse. OCD can make daily activities very hard. OCD often centers around a certain theme such as:

- Fear of being dirty or contaminated
- The need for order or exactness
- Safety issues
- Aggressions
- Sexual impulses
- Religion

Some of the compulsive habits common to OCD are washing, checking, repeating, counting, hoarding, or touching things over and over.

**Panic Disorders** – Panic disorders cause panic attacks. Panic attacks are periods of intense fear that come on quickly without warning. They can be triggered by a feared object or situation. They tend to peak within 10 minutes. Worries about when they will strike are sometimes constant. It can affect quality of life a lot of the time. Some signs of a panic attack are:

- A fast heart rate or a pounding heartbeat
- Sweating
- Shaking
- Being short of breath
- Feelings of being out of control
- Feelings of doom

Signs of a panic attack can look like a heart attack or other medical problem. Only a Medical Professional can tell if the signs are something more serious.
Phobias – A phobia is having a very strong fear of an object, place or situation. Symptoms of phobias are:

- Worrying a lot about “running into” a feared object, place or situation
- Doing things to avoid a feared object, place or situation
- Having very strong anxiety when running into the feared object, place or situation

There are many types of phobias. Some common ones are:

Specific or Simple Phobias
- Having a fear specific to a certain situation or object.
  
  Some common specific phobias are the fear of:
  - Heights
  - Needles
  - Blood
  - Spiders or snakes
  - Flying

Social Anxiety Disorder
- Having strong anxiety or fear of social situations. It is common to avoid social situations because fear that others will notice and judge the anxiety. Social anxiety can be based on certain settings. Fears may center around social interactions such as at work, at school, or when going to parties.

Agoraphobia
- Strong fears of having a panic attack. It may also cause worries of feeling shame if a panic attack happens, or that getting out of the place it happens in might be hard. This may cause avoidance of certain places or situations like crowds, small spaces, driving, and so on.
Post-Traumatic Stress Disorder (PTSD) occurs after a very unsettling, terrible event such as:

- War
- A car crash or other type of accident
- An assault – physical, robbery, rape, or family violence
- A terrorist attack
- A shooting
- Very bad weather events like earthquakes, tsunamis and so on

These events can cause feelings of helplessness, horror and very strong fear. These feelings raise the risk of having PTSD. In PTSD, anxiety caused by the event lasts for longer than a month. PTSD can make the mind relive the event over and over. It may also cause bad dreams or flashbacks of the event. Things that remind the person of the event may cause worry and a need to avoid things related to what happened. Other symptoms are:

- Feeling emotionally numb
- Having little interest in other things or people
- Being alert and on-guard all the time
- Being moody
- Being scared easily or jumpy
- Having outbursts of emotions
- Not being able to sleep

A person can have more than one type of anxiety at the same time.

**Treatment:**

Anxiety disorders can be treated with medicines and therapy.
Attention Deficit Hyperactivity Disorder (ADHD) is a mental health disorder that is identified by inattention, hyperactivity and impulsivity. ADHD is most often diagnosed in young people. The CDC states that about 9% of children ages 3-17 years have ADHD. Even though ADHD is diagnosed in childhood, it does not mean that only children are affected. About 4% of adults have ADHD. With treatment, people with ADHD can live successful and productive lives.
Symptoms:
While some behaviors linked to ADHD are normal, someone with ADHD will have trouble with these things:

Signs of inattention:
• Getting easily distracted
• Getting bored with a task very quickly
• Trouble focusing or finishing a single task

Signs of hyperactivity:
• Having a hard time sitting still
• Having a hard time doing quiet tasks or activities

Signs of impulsivity:
• Impatience
• Having a hard time taking turns
• Interrupting others

*This is not the full list of symptoms. Getting a diagnosis of ADHD can be hard because the symptoms of ADHD can overlap with common normal behavior in children. There is no single test that can diagnose someone with ADHD. It is important to see a Doctor or a Mental Health Professional to get all the right information to make a diagnosis.

Treatment:
ADHD is best treated and managed with medicines and therapy.
Feeling sad or feeling blue is something we can all go through when bad things happen. At times, we all may have a depressed mood, but we can cope and get better without any treatment. However, a major depressive disorder lasts for more than two weeks and it can affect our daily activities, our grades and relationships.

Depression is not a sign of weakness and you cannot “snap” out of it. Depression is treatable. Most people living with depression feel better by taking medication, talking to a therapist or both.

Depression often occurs at the same time as an anxiety disorder or substance use disorder.
Health Disorders

Symptoms:
- Sad, anxious or “empty” mood
- Feeling hopeless
- Loss of interest or joy in activities that once made you happy
- Having a hard time sleeping or sleeping too much
- Eating too much or eating too little

Other kinds of depression:
- **Postpartum Depression:** Feeling sad or blue after having a baby is something that can happen to many women. If those feelings last more than two weeks, it may be a sign of Postpartum Depression. Any woman can have symptoms of depression after giving birth. It is not a sign of the mother’s ability to be a good mother. It is important to get treatment if someone thinks they have Postpartum Depression. Getting treatment will help both mother and child.

- **Seasonal Affective Disorder (SAD):** Some people will have times of depression when there are changes in seasons like Fall or Winter. The symptoms of depression start getting better in Spring and Summer. The reason this happens is that due to the season change, there is less natural light. People who live in northern latitudes are more likely to go through this.

Treatment:
Medicines and therapy can help most people living with depression.
This mental health disorder causes extreme mood swings and times of depression or mania. Between these cycles, mood can be normal for a long time.

**Symptoms:**

- At times, symptoms of depression (see pages 11-12)
- During mania symptoms can be:
  - Having a lot of energy
  - Feeling very happy and very strong
  - Not sleeping much
  - Being upset if others don’t see things their way
  - Talking a lot
  - Have riskier habits like spending a lot of money or being very sexually active
  - Have a very high self-esteem like thinking they are superhuman
  - Not recognizing that they have a mental health disorder

**Treatment:**

They include medicines, education and therapy. The earlier help is received, the better it can work.
It is a mental health disorder that changes thinking, feelings and behavior. How things are perceived becomes disordered, so it may seem like the person has lost touch with reality. Schizophrenia may only cause symptoms sometimes. The length of the mental health disorder can differ from person to person. Some people only have one episode of symptoms in their life and get better. Others may have the mental health disorder for life.

**Symptoms:**

- Having strange thoughts that are untrue but seem very real to the person. They might believe they are on a secret mission, feel guilty for no reason, or think they are under outside control.
- Hearing voices or seeing things that aren’t there. They may feel, taste or smell things that are not there.
- Having trouble with focus, memory, making plans, or interacting with other people.
- Having a hard time taking care of themselves.

**Treatment:**

Recovery from schizophrenia is possible. It may be treated with medicines, therapy and education. The earlier help is given, the better it can work.
Different substances (alcohol or other drugs) affect the body and brain in different ways. People may use substances to help relax or to cope with feelings of pain. Just because a person uses alcohol or other drugs does not mean they have a substance use disorder.

It becomes a substance use disorder when:
• The person uses the substance on a daily and routine basis
• The person cannot control their use
• The person is dependent on the substance (needs it to get through the day)

Having a mental health disorder (like anxiety or depression) and facing a substance use disorder can happen at the same time. Either one – substance use disorder or mental health disorder – can happen first. People that have a mental health disorder may use substances as a way to deal with their mental health symptoms. Studies have shown that substances can worsen the symptoms of mental health disorders.
Symptoms:

- Feeling that the substance of choice needs to be used regularly
- Having strong urges to use the substance
- Using more of the substance of choice to get the same feeling
- Spending money on the substance, even if they cannot afford it
- Having withdrawal symptoms when trying to stop taking the drug

These are common substances:

- **Alcohol**: Alcohol makes people less alert and it can affect coordination and focus. At times, alcohol can help people relax and make them feel more confident. However, drinking too much can cause health problems.

- **Tobacco**: Tobacco is a leafy plant that is grown all over the world. The addictive substance in tobacco is Nicotine. Tobacco is commonly used. Many people may not think that it is a substance. Some people living with a mental health disorder may use tobacco to cope with their symptoms. Tobacco and nicotine products come in many forms such as cigarettes, cigars, chewing tobacco, and vapes.

- **Marijuana (cannabis)**: Marijuana is a mixture of shredded, dried cannabis leaves, stems and flowers. People use cannabis by smoking, eating or inhaling it. The active ingredient in Marijuana is THC (delta-9 tetrahydrocannabinol). The effects of Marijuana depend on how much THC it has. Marijuana use is common. Most users will not get a substance use disorder.

- **Opioids**: Opioid drugs include heroin, fentanyl, morphine, opium, and codeine. These drugs are very addictive. When someone uses these kinds of drugs, it is likely that they will get a substance use disorder.
• **Cocaine:** Cocaine is an addictive drug that is made from coca leaves. People use cocaine by snorting or injecting it. Users can get a substance use disorder.

• **Methamphetamines:** Methamphetamine is a very addictive stimulant drug. People use methamphetamine by smoking, inhaling, swallowing (pill), snorting, and injecting the drug. Users can get a substance use disorder.

• **MDMA (Ecstasy/Molly):** MDMA is a stimulant and hallucinogenic drug. Some people use this drug as a “party drug.” People that use MDMA usually take it by swallowing a tablet or pill or snorting it. Many people take MDMA with other drugs. There is not enough evidence that MDMA is addictive.

• **Prescription medicines:** Prescription medicines, when prescribed by a Doctor, can be very helpful in treating many health problems. When prescription medicines are abused, they can cause health problems. The three classes of medications that are abused are:
  - **Opioids:** They are most often used to treat pain.
  - **Central Nervous System (CNS) Depressants:** They are used to treat anxiety and sleep disorders.
  - **Stimulants:** They are used to treat attention-deficit hyperactivity disorder (ADHD).
When to Get Medical Help for Someone Under the Influence of Drugs or Alcohol. Call an ambulance or get medical help if the person:

- Will not wake up or is unconscious
- Has irregular, shallow or slow breathing
- Has irregular, weak or slow pulse rate
- Has cold, clammy, pale, or bluish skin
- Is throwing up a lot
- Shows signs of a head injury
- Has seizures

There are different treatments to help people with substance use disorders. Each treatment depends on the substance used and if the person has a mental health disorder.

- **Detoxification ("detox")** – The goal of going through a detoxification program is to stop using a substance as safely as possible. Some detox programs can be outpatient, where you don’t have to stay in a hospital. Inpatient detox treatments require a person to stay in a hospital or residential facility. Treatment options differ based on the person and the substance.

- **Therapy** – Therapy involves meeting with a Mental Health Professional. This kind of therapy can be individual, group or family therapy. With the help of a Mental Health Professional, a person can learn to cope with substance cravings and set up a plan to prevent relapse.

- **Medicines** – Some medicines can help people having substance use disorder with withdrawal symptoms during the detoxification process.

- **Support groups** – Dealing with a substance use disorder can be tough and isolating. Support groups can give the help and resources people need to stay substance-free. Some well-known ones are Alcoholics Anonymous (AA) and Narcotics Anonymous (NA).
Someone who has an eating disorder can be underweight, normal weight or overweight. When someone has an eating disorder, they become worried about food, body image and weight. These worries make it hard for someone to do their normal daily activities. They can be deadly if not treated.

- **Anorexia Nervosa:** Someone living with anorexia nervosa can be underweight and use extreme weight loss methods. They may diet, fast, over exercise, use weight loss pills, and throw up to control their weight.

- **Bulimia:** Someone living with bulimia may have frequent events of eating large amounts of food in a short time and then rid themselves of the extra calories by throwing up, laxatives or over exercise. This becomes a cycle and can control many aspects of someone’s life and has harmful emotional and physical results. Someone living with bulimia can be slightly underweight, normal weight or overweight.

- **Binge Eating Disorder:** Someone living with Binge Eating Disorder (BED) will lose control over their eating and will eat a large amount of food in a short time. They can also eat a large amount of food if they are not hungry or if they may be full. As a result, that person will feel embarrassed, disgusted and guilty about their eating. Someone living with BED will not purge or over exercise after a binge eating event.
Symptoms:

Some things that may suggest an eating disorder are:

- Skipping meals or making excuses for not eating
- Using very strict diets
- Making their own meals instead of eating the same foods as their family
- Constant worry about being fat or losing weight
- Use of weight-loss aids like laxatives
- Over exercising
- Eating large amounts of sweets or high-fat foods often
- Eating in secret
- Having shame or guilt about their eating habits

Signs of an eating disorder can differ. Talk to a medical professional if you are worried about an eating disorder.

Treatment:

There are choices to help someone living with an eating disorder. Each treatment depends on the type of eating disorder. Treatment may involve therapy, medicine and nutritional counseling.
Self-harm or non-suicidal self-injury means hurting yourself on purpose. People who self-harm can cut themselves, burn themselves, pull out hair, hit things with their hands or head, or pick at wounds. Those that hurt themselves do so for many reasons.

Such as:
- Escape from mental or emotional pain
- Change the actions of others
- Feel a sense of control over their bodies, feelings or life situations
- Escape from a situation or painful emotions
- Express feelings to the outside world

Self-harm is a way of coping with problems. Easing pain and solving problems can help the person get better.
Warning Signs:

- Unexplained, frequent wounds
- Scars, often in patterns
- Fresh cuts, scratches or other wounds
- Hiding wounds with clothing, such as wearing long sleeves or pants in hot weather
- Difficulty or avoidance of relationships
- Feeling helpless, hopeless or worthless

Treatment:

People who self-harm can get professional help. Medical and Mental Health Professionals can treat self-injury with medicines and therapy. The goal of treatment is to confront the problems or emotional state that causes someone to self-harm.

What to do when someone self harms:

If you are worried a friend or family member might be hurting themselves, do not ignore it. Let them know that you have noticed their wounds. Try not to react in a negative way and be ready to listen to them. One of the best things you can do is say that you are there to help and encourage them to get treatment.
Suicide is the act of causing one’s own death on purpose. The results of suicide go beyond the person who acts to take his or her own life. It can also have a major impact on family, friends, and communities. Any person can be at risk of suicide. Having a mental health disorder can raise the risk of a person killing himself or herself.

Other risk factors are:
- A prior suicide attempt – when a person tries to end his or her life but does not die
- Family history of a mental health or substance use disorder
- Family history of suicide
- Family violence, such as physical or sexual abuse
- Having guns in the home
- Being in prison or jail
- Being exposed to others’ suicidal actions, such as a family member, peer or public figure
- Medical illness
- Being between the ages of 15-24 years or over age 60

Just because someone has a risk factor for suicide does not mean they will try to commit suicide. It is hard to predict who will act on suicidal thoughts.

Never agree to keep someone’s suicide plan a secret.
Warning Signs:

- The person threatens to hurt or kill himself or herself
- The person looks for ways to kill himself or herself (like seeking pills, weapons and so on)
- Talking or posting thoughts of death, dying or suicide on social media
- Expressing hopeless feelings
- Rage, anger, seeking revenge
- Acting recklessly
- Feeling trapped
- Increasing alcohol or drug use
- Staying away from friends, family and society
- Anxiety, being upset, change in sleep habits (not able to sleep or sleeping all the time)
- Dramatic changes in mood
- Talking about having no reason or a purpose for living

People may show one or many of these signs, and some may show no signs.
• **Talk to them.** Tell them that you care and want to help. Ask directly if they are thinking of killing themselves. If they say yes, listen to their feelings and reasons for wanting to die. Let the person know there is hope. Just because they are having thoughts of suicide does not mean they need to act on them. Thoughts of suicide are often linked to a treatable mental health disorder. Try not to judge and be as kind as you can.

• **Link the person to help.** Give the person a safety contact that is always ready, such as the National Suicide Prevention Hotline number (1-800-273-TALK). You can also talk to the person about people that may have helped them in the past – like a Doctor, Mental Health Professional, parents, other family, friends, or a community group. Don’t use guilt or threats to prevent suicide.

Suicidal thoughts are often a call for help and a desperate attempt to escape problems and distress.

*If you are worried about the person’s immediate safety - call 911. Never leave a person who is actively suicidal. If you cannot stay, arrange for someone else to.*
Sometimes people with a mental health disorder are seen in a negative way. We call this stigma. Stigma can lead to discrimination – the unfair treatment of people who are different. Discrimination can be direct, like someone making fun of the person’s mental health disorder. It can also be indirect, like someone avoiding the person with a mental health disorder because they are afraid of them. Stigma towards people with mental health disorders can be harmful.

It can lead to:
- A person not getting treatment for his or her mental health disorder
- The person not being able to get a job, go to school or have a safe place to live
- Bullying and harassment
- The person blaming himself or herself or feeling like he or she will never get better
- Other people not understanding mental health disorders

If you have experienced stigma, you are not alone. Mental health stigma tends to happen because people don’t understand mental health disorders.

These are some ways we can overcome and prevent stigma:
- Teach others about mental health. When you see mental health stigma, speak up.
- Get help. Use treatment for mental health disorders, join a support group, ask for help at school.

All these things can give relief. Millions of people go through mental health disorders. Help is out there.
At points in life many of us may question if we have a mental health disorder. In general, a mental health disorder is a diagnosable condition that:

- Affects a person’s thinking, emotional state, and behavior
- Disrupts the person’s ability to:
  - Work
  - Carry out daily activities
  - Have satisfying relationships

Keep in mind, each person and each condition can be different. Talk to your health care Provider when you think you have signs or symptoms of a mental health disorder. Most mental health disorders won’t get better on their own and may get worse over time if left untreated.

Mental health services, such as therapy or medicines, are a covered benefit for IEHP Members. To find out how to access mental health services, please contact IEHP Member Services at 1-800-440-IEHP (4347), Monday – Friday, 8am-5pm. TTY users should call 1-800-718-4347.
Many types of professionals can help someone going through a mental health disorder. They are:

- **Doctors** can help to identify mental health disorders, explain the condition to their patient, and refer the person to a Mental Health Professional. They may also prescribe medication and link the person to community support.

- **Mental Health Professionals** can help people and families cope with problems to improve their lives. Licensed Mental Health Professionals like Licensed Clinical Social Workers (LCSW), Licensed Marriage and Family Therapists (LMFT), Psychiatric Nurse Practitioners, Psychologists and licensed counselors can provide care for someone with a mental health disorder. In some cases, they can prescribe medication.

- **Certified Peer Specialists** have lived experience with mental health disorders – either themselves or through a loved one. They are trained to use their own experiences to help others. They promote hope, education, empowerment, independence, and personal responsibility.

- **Psychiatrists** are medical Doctors who can diagnose mental health disorders, prescribe medication and provide therapy.
Living with a mental health disorder can be hard for the person – as well as their family and other people close to them. While there is no replacement for establishing a treatment plan with a Mental Health Professional, these tips may help support you during this time.

1. Exercise

2. Relaxation/Meditation/
   Deep breathing

3. Peer support groups

4. Family support groups

5. Self-help books

6. Talking to family members or
   other people you trust when you
   are feeling down

7. Spending time in social groups
   like clubs, sports teams or faith-based gatherings

8. Avoiding alcohol and other non-prescribed drugs

If you think you have a mental health disorder, help is out there.

Remember – mental health disorders can be treated. If you think you have one, make sure to talk to your Doctor about getting help.
Mental Health America
Go to Mental Health America for more information on mental health and how to get help.
www.mentalhealthamerica.net

NAMI (National Alliance on Mental Illness)
NAMI is an organization that gives resources and support to those living with a mental health disorder and their families.
www.nami.org/

National Institute of Mental Health (NIMH)
This website gives up-to-date information on mental health.
www.nimh.nih.gov

Substance Abuse and Mental Health Services Administration (SAMHSA)
This website gives information on substance use for individuals, families and health professionals. This website also has treatment locators.
www.samhsa.gov/

HelpGuide
HelpGuide gives education on mental health and wellness.
www.helpguide.org

Connect IE
Find social services and resources in your area.
www.connectie.org
National Suicide Prevention Lifeline
A 24-hour toll free confidential hotline for anyone that is suicidal or in emotional distress.
1-800-273-TALK (8255)
If you feel more comfortable chatting online, please go to:
https://suicidepreventionlifeline.org/chat/

Crisis Text Line
A 24-hour confidential text message service for people in crisis.
Text HOME to 741741
https://www.crisistextline.org/

2-1-1
A free and confidential service that helps connect you to local resources.
2-1-1 or www.211.org/

The Trevor Project
A 24-hour toll free confidential suicide hotline for LGBTQ youth.
1-866-488-7386
https://www.thetrevorproject.org
GLOSSARY

**Acute Stress:** Stress that comes from day-to-day life pressures and lasts a short time.

**Agoraphobia:** An anxiety in which a person has a strong fear of situations that would cause them to panic or feel trapped.

**Anorexia Nervosa:** An eating disorder that causes someone to excessively worry about their weight and restrict the amount of food they eat.

**Anxiety:** An intense and persistent worry and fear about everyday situations.

**Attention Deficit Hyperactivity Disorder (ADHD):** A mental health disorder that causes someone to have a hard time paying attention, control impulsive behavior or be overly active.

**Binge Eating Disorder:** An eating disorder that causes a person to lose control over their eating and eat a large amount of food over a short period of time.

**Bipolar Disorder:** A mental health disorder that causes a person to have extreme mood swings and changes in energy levels.

**Bulimia:** An eating disorder that causes a person to eat large amounts of food and then rid themselves of the extra calories by throwing up, using laxatives, or over exercising.

**Chronic Stress:** Stress that lasts a long time.

**Coping:** The act of facing a problem or difficulty in an effective and calm way.
Depression: A mental health disorder that causes a person to have a lack of interest in things that once made them happy, sadness and feelings of hopelessness that affect their daily activities.

Dependent: Relying on a substance to function.

Disorder: Condition(s) that affect a person’s mood, thinking and behavior.

Distress: Extreme anxiety or pain.

Generalized Anxiety Disorder (GAD): An anxiety disorder that causes excessive worry and anxiety most days for at least six months.

Genetics: Traits we are born with. They can be passed down in families.

Mania: A period of extreme high energy or mood.

Mental Health: A state of emotional, psychological and social well-being. It affects how we think, feel and act.

Obsessive Compulsive Disorder (OCD): An anxiety disorder that causes a person to have unrealistic thoughts and fears that turn into obsessions. Those obsessions lead to repetitive behaviors that become compulsive.

Panic Attack: Periods of intense fear that come quickly without warning. They can be triggered by an object or situation the person is afraid of and tend to peak (or begin to get better) within ten minutes.

Panic Disorder: An anxiety disorder in which a person has frequent panic attacks or feelings of terror.
Phobia: An anxiety disorder in which a person has strong fear of an object, place or situation.

Post-Traumatic Stress Disorder (PTSD): An anxiety disorder that develops when a person has been through a very upsetting, scary or terrible event.

Postpartum Depression: Depression that occurs within 12 months after childbirth.

Relapse: Using a substance again after quitting.

Schizophrenia: A mental health disorder in which people interpret reality abnormally.

Seasonal Affective Disorder (SAD): A mental health disorder that causes a person to have symptoms of depression during the winter months.

Self-Harm: Hurting yourself on purpose.

Social Anxiety Disorder: An anxiety disorder that causes a person to have an intense fear of social situations.

Specific Phobia: An anxiety disorder where the person has a fear of a certain situation or object.

Stigma: An attitude or belief that leads a person to reject or fear those who they think are different.

Stress: Stress is a feeling of mental and physical tension. Stress is the body’s response to a threat, pressure or challenge.
Stressor: Something that causes tension.

Substance Use Disorder: A disorder that happens when regular use of alcohol and/or drugs causes impairment and a person is not able to meet their responsibilities at work, school and home.

Suicide: The act of taking one’s own life on purpose.

Symptoms: A sign of an illness.

Toxins: A harmful substance that can cause disease.

Therapy: A term for different treatment techniques that help a person identify and change their emotions, thoughts and behavior. Most therapy takes place with a licensed Mental Health Care Professional and can be delivered in an individual or group setting.