

MODULE 2

Activity #3 Handout

Definitions

Mental Health

There are many different definitions of mental health. They all try to capture one important thing. That is, that a healthy brain is what gives us mental health. The brain is an important part of the body and the body and brain are linked. It is really not possible to consider them separately. We know that what is good for your body will be good for your brain as well, and vice-versa.

Basically, mental health means having the capacity to be able to successfully adapt to the challenges that life creates for people. These challenges are both positive and negative. In order to adapt to them our brains need to apply all of their capacities of: emotions, cognition/thinking, signaling functions and behaviours. Our brains learn how to apply these capacities over time and as we grow and develop we are able to take on more and more challenges and become successful in dealing with them.

Sometimes people forget that negative emotions are a part of good mental health. Crying, feeling sad, getting annoyed or angry, etc. are all normal responses to life challenges. So are negative thoughts such as: “this is too hard for me” or “I am not a good person” or “people don’t like me”. So are negative behaviours, such as yelling at somebody or avoiding a situation that makes us feel stressed. Just because we feel stressed does not mean that we don’t have good mental health. Indeed, being able to identify stress and learn how to successfully overcome it in a way that solves the problem causing it is fundamental to having good mental health.

For example: feeling stressed about writing an examination could lead to a negative behaviour – such as going out to party with friends to drink and “forget” about the stress. Or it could lead to a neutral behaviour – such as going for a run or meditating to “release” the stress but not studying for the exam. But if that is your entire adaptive response you likely will not do well on your exam. The important coping strategy that your stress response should be eliciting from you here is to study or to get help from your teacher to assist you in understanding something that you may not know very well. If you add this coping strategy to your stress “releasing” activity you will be much more likely to succeed and that is a sign of good mental health. More on this important topic in Module 6.

It is important to understand that everyone has mental health just like everyone has physical health. And, just like a person can have good physical health and at the same time have a physical illness, people can have good mental health and a mental illness at the same time.

To understand mental health it is necessary to understand the three related components of mental health: mental distress, mental health problems and mental disorder. These are illustrated in the triangle diagram.

Mental Distress

Mental distress is the inner signal of anxiety or “stress” that a person has when something in their environment is demanding that they adapt to a challenge (for example: writing a test, giving a presentation in front of the class, asking a person to go out on a date, failing to make a school sports team, etc.). This is called a “stress signal” or “stress response”. A stress signal has different components to it: emotions/feelings (such as worrying, unhappiness, feeling energized, annoyance), cognitions/thinking (negative thoughts such as “I am not good at anything”, “I wish I did not have to do this”, or positive thoughts such as “this is something I need to solve”, “it may be difficult but I can do this”, “I should ask my friend for their advice”), physical symptoms (such as stomach aches and headaches, the stomach “butterflies”) and behaviours (such as avoidance of the situation, engagement of the challenge, positive energy, withdrawal from others, yelling at someone or helping someone). As we can see, the response to distress can have both negative and positive components! We need to make sure we don’t always focus on the negative ones.

Everybody experiences mental distress (often called “stress”) every day. It is a part of good mental health. It is a signal that tells us to try something new to solve the challenge we are facing. As the person who feels distress tries to develop solutions or strategies to solve the challenges (often called “stressors”) they figure out what works and what does not work well. Successfully dealing with the stressor (also called solving the problem) leads to learning what strategy worked and use of that strategy in similar situations in the future. Once the person has successfully overcome the challenge, the distress goes away. But the learning and skill sets remain, ready to be used another time. This process is called adaptation or resilience building.

Young people experiencing everyday mental distress do not require counselling, they are not “sick” and they do not need treatment. They most often learn how to manage stress and how to use the “stress signal” to develop new skills. They learn these skills by trial and error, by obtaining advice from friends, parents, teachers and trusted adults and from other sources (such as the media). They can also use techniques that are part of general health management, such as: exercise, having enough sleep, being with friends and family, eating properly and staying away from drugs and alcohol. Sometimes what the young person tries does not work (for example: instead of studying for an exam they go out and party with their friends, instead of getting a good night’s sleep before an exam they try to stay up all night and study) and as a result their distress may increase. But making wrong choices is part of learning how to make good choices. This is a normal part of growing up. Allowing young people to avoid everyday mental distress, or to focus only on teaching them how to modulate the stress response instead of how to use it to learn new skills, can have negative impacts on their development of skills that they need to learn in order to have successful adult lives.

Mental Health Problems

Mental health problems may arise when a person is faced with a much larger stressor than usual. These occur as part of normal life and are not mental illnesses. For example: death of a loved one, moving to a new country, having a serious physical illness, etc. When faced with these large stressors, everyone experiences strong negative emotions (such as: sadness, grief, anger, demoralization, etc.). These emotions are also accompanied by substantial difficulties in other domains such as: cognitive/thinking (for example: “nothing will ever be the same”, “I don’t know if I can go on in my life”, etc.), physical (for example: sleep problems, loss of energy, numerous aches and pains), and behavioural (for example: social withdrawal, avoidance of usual activities, angry outbursts, etc.).

Sometimes the young person experiencing a mental health problem will exhibit noticeable difficulties in everyday functioning - at school and outside of school. In addition to the distress management skills and general health enhancing activities that are useful in decreasing mental distress, young people experiencing a mental health problem will often need additional support to help them through the difficult situation or assist them with problems in functioning (such as extra time for academic activities, time away from school to be with their families, etc.). In such cases, this support can come from a counsellor, a religious leader, or another person that has the skills needed to help effectively. Medical treatment (medication or psychotherapy) is usually not necessary. The presence of a supportive adult (such as a teacher or neighbour) is a key component that can help young people deal with mental health problems.

Mental Illness

A mental illness is very different from mental distress and from a mental health problem. It arises from a complex interplay between a person’s genetic makeup and the environment in which they live or have been exposed to at different times in their lives. A mental illness (also called a mental disorder) is a medical condition diagnosed by trained health professionals (such as doctors, mental health clinicians, psychiatric nurses and psychologists) using internationally established diagnostic criteria. A person with a mental disorder is best helped by a trained health professional providing best evidence-based treatments. Mental illnesses are the result of changes that arise in usual brain function as a result of a complex interplay between a person’s genes and environment. When a person has a mental disorder, their brain is not working as it should be.

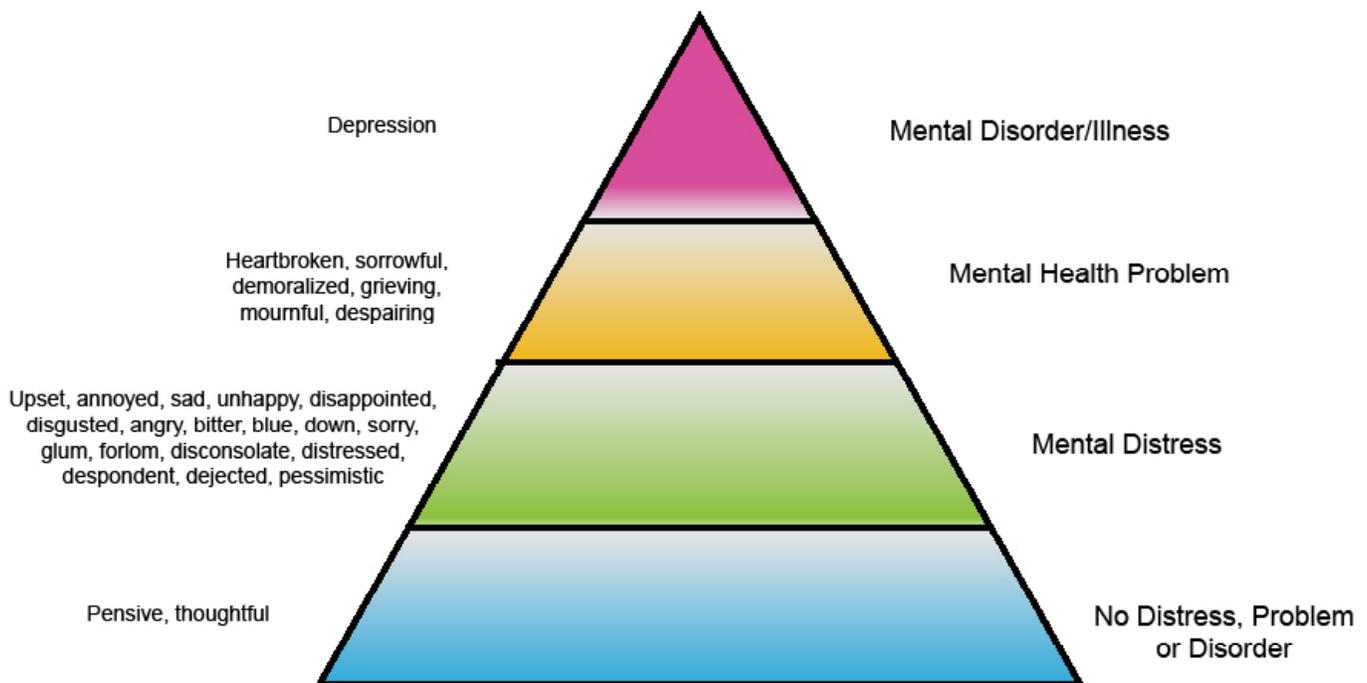
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A person with a mental illness will experience significant, substantial and persistent challenges with emotions/feelings (for example: Depression, panic attacks, overwhelming anxiety, etc.), cognition/thinking (delusions, disordered thoughts, hopelessness, suicidal thoughts, etc.), physical (for example: fatigue, lethargy, excessive movement, etc.), and behaviour (for example: school refusal and withdrawal from family and friends, suicide attempt, poor self-care, etc.). The presence of a mental disorder signifies that an individual needs best evidence-based interventions that may be of many different types (such as medications, psychotherapies, social interventions, etc.), provided by appropriately trained health care providers. While interventions that can help distress and mental health problems can also be used to help a person who has a mental illness, and general health enhancing activities are always useful, a young person with a mental disorder requires a degree of care above and beyond that usually provided for a mental health problem. Mental disorders always require treatment using best evidence-based care by trained health professionals (such as: mental health officers, doctors, psychiatric nurses, psychologists, nurses, etc.).

And: a person can be in each of these states at the same time. For example, over the course of one day a person can be laughing and having fun with their friends (no distress, problem or disorder), can experience distress (lost their house key), be experiencing a mental health problem (their uncle with whom they were close died earlier this week), and have a mental disorder (such as Attention Deficit Hyperactivity Disorder).

The Inter-Relationship of Mental Health States



Check out Dr. Kutcher's video blog, *The Inter-Relationship of Mental Health States: Language Matters* at: <https://www.youtube.com/watch?v=LsowyMnqCRs&t=1s>

Note to teachers:

- *Mental health states are not a continuum. People do not usually progress from mental distress to illness.*
- *People can experience one or more states at the same time. A person can have good mental health and a mental illness concurrently.*
- *Different mental health states should be dealt with differently. For example, daily mental distress may not need any intervention. People are able to adapt by themselves with support from the family or community. People with mental health problems may need extra professional help, such as counselling, in addition to family and community support. People with mental disorders require best evidence-based care from properly trained health care providers.*