



# Mental health

## Best practice guidelines

### Definitions

The umbrella term '**mental health**' may be used to refer to a number of things depending on context, but is usually related to general mental wellbeing, or the presence or absence of **mental illness**. Mental health should be discussed alongside physical health, given that though not all mental illnesses manifest in physical symptoms, a mental illness that is causing distress to an individual will impact their life just as significantly.

### Medical diagnosis

Many people may experience periods of mental ill-health, like short-term stress or sadness over the loss of a loved one, but that differs from the experience of someone living with a mental illness. A clinical disorder\*, or syndrome\*, is typically diagnosed by a qualified psychologist or psychiatrist, and requires an individual to meet the criteria outlined for a specific illness in either the *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, or the *International Classification of Diseases (ICD-11)*, depending on where you are in the world. Being diagnosed with a recognised condition can give an individual access to particular treatments, including therapies or subsidised medication.

For classifications and criteria of recognised disorders, seek information from the DSM-5 and ICD-11.

### Self-diagnosis

**Self-diagnosis** is the process of diagnosing your own condition based on freely available information, such as the experiences of others or articles found online. Reading about conditions that you feel you might have—especially in academic and peer-reviewed sources—can be informative and even empowering. It can allow people who are financially unable to access treatment to receive some amount of guidance and can provide people with strategies to improve their wellbeing.

However, if a person suspects they have a mental illness, they should receive professional assistance as soon as they are able to. Many mental health conditions have similar symptoms and different treatments—including some that can only be facilitated by or prescribed by a doctor.

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It can help to think of mental illness like any other illness. Although over-the-counter and alternative approaches can help treat an illness, it is still important to go to a doctor, be professionally tested and diagnosed, and receive a personalised and well-researched treatment plan.

## Treatment and management

People with mental health conditions are not broken. They may be experiencing dysfunction, distress, or discomfort from symptoms caused by their diagnosed condition, but they do not need to be 'fixed'. Many people just need help to manage the distressing elements of their condition so they can function the way they would like to in the world.

Each person deals with their mental illness in different ways. Some people use forms of therapy or medication, while others do not. Medications can perform a wide range of functions, including (but not limited to) moderating moods, boosting focus capabilities, pain relief, and other symptom reduction. People use medication for a variety of reasons, and taking medication should not incur the judgement of anyone. Medication is typically not used to 'cure' a mental illness, but rather to manage its symptoms.

It's also important to remember that neurodiversity and mental illness are not the same thing. Chronic conditions and learning difficulties—such as autism and ADHD—are sometimes incorrectly referred to as mental illnesses.

## Stigma

**Stigma** can be defined as 'stereotypes or negative views attributed to a person or groups of people when their characteristics or behaviors are viewed as different from or inferior to societal norms' (Dudley 2000). The media generally plays a large role in perpetuating stereotypes and stigmatising mental illness, which a wealth of research has suggests can be harmful to individuals (Corrigan & Watson 2002), and can even deter them from seeking treatment (Barney et al 2006). Internalisation of stigma can also lead to a sense of shame and a reduction in the effectiveness of treatment (Perlick et al 2001).

## Stereotypes and cultural context

When discussing mental illness, please consult with appropriate individuals. These might be qualified psychology professionals, or people with lived experience of the disorder that you are representing or discussing. While there are guidelines and diagnostic criteria for the collection of symptoms an individual with a particular disorder may be experiencing, do not assume that all people diagnosed with a particular

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disorder experience it the same way. To be sure that you are being accurate and respectful, please involve experts.

Avoid hurtful and ableist language, including descriptors like 'crazy', 'unhinged' or 'psycho'. People with mental health conditions are not inherently violent, dangerous, unintelligent or antisocial, and perpetuating language that suggests they are is harmful. Conflating mental illness with these traits can be damaging to those who live with it.

Those with stigmatised mental illnesses are not inherently bad. Those who have more uncommon mental health conditions like dissociative disorders and personality disorders are not bad people because of them. There is a lot of stigma around these disorders which is furthered by inaccurate representations in the media. When exploring these disorders please keep an open mind and learn more about why certain symptoms occur.

Consider cultural context. What is seen as a 'normal' way of functioning in one culture or society may not be considered to be such in another culture. Professionals and laypeople alike must consciously acknowledge their cultural biases when approaching these topics, and remember that their image of what society should look like and how people should behave might not be universal.

## Resources

### **American Psychiatric Association: DSM-5 Fact Sheets**

<https://www.psychiatry.org/psychiatrists/practice/dsm/educational-resources/dsm-5-fact-sheets>

Information from the DSM-5.

### **Checkpoint: Local Websites And Emergency Contact Numbers**

<https://checkpointorg.com/global/>

Resources about mental health in games and details for local organisations in various regions.

### **ICD-11 for Mortality and Morbidity Statistics (Version : 05/2021)**

<https://icd.who.int/browse11/l-m/en#/http%3a%2f%2fid.who.int%2f%2fid%2f%2f334423054>

Ability to browse the ICD-11 for data and statistics.

### **National Alliance on Mental Illness**

<https://www.nami.org/Learn-More/Mental-Health-Conditions>

Information on specific mental illnesses.

### **Our World in Data: Mental Health**

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<https://ourworldindata.org/mental-health>

Data about the prevalence of mental illnesses globally.

**SANE: Reducing stigma**

<https://www.sane.org/information-stories/facts-and-guides/reducing-stigma>

Information about stigma.

**The Trevor Project: Mental Health**

[https://www.thetrevorproject.org/trvr\\_support\\_center/mental-health/](https://www.thetrevorproject.org/trvr_support_center/mental-health/)

Resources about queer mental health specifically.

**World Health Organization: Mental health: strengthening our response**

<https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

General facts about and tips for improving mental health.

**World Federation for Mental Health**

<https://wfmh.global/>

Global events and resources about mental health.

## References

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\*Some people may disagree with the use of the words 'disorder' or 'syndrome'. They are used here to refer to specific conditions outlined by the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) and International Classification of Diseases (11) commonly used by mental health professionals to diagnose conditions.

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