

## Course introduction

Mental health concerns how we think, feel and behave. Although people often take their mental health for granted, like our physical health, it can change over our lifetime. We all occasionally feel 'low' or 'stressed'. Usually, these feelings pass after a short period of time. However, if these feelings persist or are allowed to get worse, it may mean that we are experiencing mental ill-health (or what some may call mental health 'problems').

Mental ill-health can happen to anybody. In fact, one in four of us will be diagnosed with some kind of a mental health problem at some point in our lives. Statistics such as these mean that most people will have first-hand experience of mental distress, whether it is their own or that of someone they know.

Given how common mental health problems are, one would expect society to be tolerant and sympathetic. Sadly, this is often not the case. People who experience mental distress are often subject to abuse, stigma, discrimination and even ridicule. So much so, that many people are even reluctant to tell family members and friends about their difficulties and experiences.

This course is aimed at enhancing your knowledge and understanding of mental health and mental ill-health. It will give you an insight into how mental health conditions can affect people's day-to-day lives. It will also help you to appreciate how to look after your own mental health. Like our physical health, we need to protect our mental health and avoid the things that put it at risk. Good mental health is vital to all of us. It enables us to fulfil our potential and to perform well in a number of areas, whether it is at school or college, in our work life or in our relationships.



## Aims

On completion of this course, you should:

- Understand the meaning of mental health and mental ill-health and the potential causes of mental distress.
- Be able to identify a range of mental health conditions.
- Understand how mental ill-health can affect people's lives.
- Appreciate the role the mass media plays in creating and reinforcing negative stereotypes about mental ill-health.
- Understand how people can positively respond to their condition and how others can provide appropriate support.
- Be able to outline various ways in which positive mental health can be protected and promoted.
- Appreciate the needs of different cultures and minority groups in relation to mental health issues.

## Content

This course has four sections:

**Section 1: Understanding mental health and mental ill-health**

**Section 2: The effects of mental ill-health**

**Section 3: Responding to mental ill-health and supporting people with mental health issues**

**Section 4: Being aware of cultural diversity in relation to mental health issues**

## Assessment

As you work through each section, you will come across a number of learning activities. These are intended to help you reflect upon certain issues or your own practice.

If you are working towards the Level 1 Award in Mental Health Awareness you should have received a Candidate Workbook from the awarding body, NCFE. At the end of each section you will need to complete the relevant tasks in the Candidate Workbook. When you have completed all of the tasks, you should submit the workbook to your tutor, who will then give you feedback on your work. If you are unsure, please ask your tutor for help.

*Good luck  
with your  
studies!*



## Glossary

**Anorexia nervosa** – this may be diagnosed when a person refuses to maintain a minimal, healthy body weight. The condition is characterised by emaciation (extreme thinness), an intense fear of gaining weight, a lack of menstruation among girls and women and extremely disturbed eating behaviour. Some people with anorexia lose weight by dieting and exercising excessively; others lose weight by self-induced vomiting, or misusing laxatives or diuretic drugs which are used to reduce fluid in the body.

**Antidepressants** – a group of drugs primarily used to relieve the symptoms of depression. They are also used in the treatment of anxiety, panic attacks, obsessive compulsive disorder and eating disorders. Examples include fluoxetine (Prozac®) and paroxetine (Seroxat®).

**Antipsychotics** – a group of drugs used to treat psychotic symptoms, such as the hallucinations experienced by people with schizophrenia. Because they have a tranquilising effect they may also be used to treat extreme agitation.

**Anxiety disorder** – a name given to a range of disorders that are characterised by excessive anxiety. Obsessive compulsive disorder (**OCD**), generalised anxiety disorder, panic disorder, post-traumatic stress disorder, social anxiety disorder and phobias are all types of anxiety disorder.

**Aromatherapy** – a type of alternative or complementary therapy that involves the use of aromatic, highly concentrated essential oils.

**Binge-eating disorder** – this is characterised by recurrent binge-eating episodes during which a person feels a loss of control over their eating. Unlike bulimia nervosa (see next page), binge-eating episodes are not followed by purging, excessive exercise or fasting. As a result, people with binge-eating disorder often are overweight or obese. They also experience guilt, shame and/or distress about the binge-eating, which can lead to more binge eating.

Useful  
definitions



**Bipolar disorder** – previously known as ‘manic depression’, is a serious mental illness that causes dramatic mood swings – from being extremely depressed to being extremely high (called ‘mania’), and then sometimes back again, often with periods of normal mood in-between.

**Black and minority ethnic groups (BME)** – an official term that includes people of Irish, African Caribbean, African, Asian and Chinese descent.

**Bulimia nervosa** – this is characterised by a ‘binge-purge cycle’. It involves recurrent and frequent episodes of eating unusually large amounts of food (binge eating) and feeling a lack of control over the eating. This binge eating is followed by a type of behaviour that compensates for the binge, such as purging, vomiting, excessive use of laxatives or diuretics, fasting and/or excessive exercise.

**Common mental health problems** – this term is sometimes used to describe less severe and disabling mental health conditions. They tend to include things like stress and mild depression. However, this is not to diminish their importance or impact. Like the more severe conditions, common mental health problems can also be disabling and can significantly affect work and home life.

**Cognitive behaviour therapy (CBT)** – a short-term talking treatment which teaches people to change unhelpful aspects of how they think (‘cognition’) and what they do (‘behaviour’). In clinical trials, it has been shown to be effective for a wide range of problems, such as anxiety, depression and eating problems.

**Creative therapies** – creative therapy involves the use of creative arts, such as dance, drama, music, sculpture and modelling, painting, poetry and creative writing. It is used both one-to-one and in groups and is helpful for a wide variety of mental health problems.

**Dementia** – a broad term used to describe a range of symptoms and disorders that involve a progressive decline in a person’s mental abilities. It commonly affects a person’s ability to remember, make rational judgements and communicate. The most common cause and type of dementia is Alzheimer’s disease.

**Depression** – this is defined as a long period of profound joylessness. It is one of the most common types of mental distress. Estimates vary, but about one in seven adults will have depression serious enough to need treating at some point in their lives.

All of us occasionally feel 'blue' or sad; however, these feelings usually pass within a couple of days. When a person has depression, it is persistent and it interferes with their daily life and routine. Symptoms include low mood, loss of interest and pleasure, feelings of worthlessness, tearfulness and poor concentration. There are different levels of depression, with clinical depression being the most severe.

**Generalised anxiety disorder (GAD)** – this is much more than the normal anxiety people experience. It is chronic and fills the person's day with exaggerated worry and tension, even though there is little or nothing to provoke it. Having this disorder means consistently anticipating disaster, often worrying excessively about health, money, family, work or school/college.

**Lithium** – this is a type of mood stabiliser and is used to reduce the number and severity of manic mood swings in bipolar disorder.

**Mental Health Act (MHA)** – three Mental Health Acts have been passed in England and Wales (1959, 1983 and 2007). They have all been major pieces of law in the field of mental health care. Each has aimed to protect the rights of people with mental health difficulties as well as the safety of the general public. Under the MHA, the authorities are allowed to detain somebody against their will for a specified period of time (commonly known as being 'sectioned') if they pose a threat to their own health or safety, or that of others.

**Mental illness (or 'mental ill-health')** – a general term that refers to a group of illnesses that affect a person's ability to think, interact with others, and cope with the everyday demands of life. This may mean that their relationships, their work and quality of life are all affected. Some believe that these terms are too negative and prefer to use terms such as 'mental distress' or 'mental health difficulties' instead.

**Obsessive-compulsive disorder (OCD)** – this has two components: obsessive thoughts and compulsive behaviour. Obsessive thoughts, such as those about cleanliness and a fear of dirt/germs are repetitive, unwanted and obtrusive. These thoughts often lead to compulsions – acts or rituals carried out to stop the obsessive thoughts, for example, repeated hand-washing. However, these only offer temporary relief.

**Panic disorder** – a condition characterised by panic attacks. In a panic attack, the person experiences a sudden increase in anxiety as well as a surge in physical sensations, such as palpitations, dizziness and hot flushes.

**Post-traumatic stress disorder (PTSD)** – this occurs in people who have experienced some kind of horrific event (trauma) or series of events. After the occurrence of the trauma (sometimes much later), the person often experiences 'flashbacks', nightmares and feels 'out of contact' with their life and other symptoms.

**Psychosis** – this is a term used to describe a situation if a person loses contact with the reality experienced by those around them. However, although their sense of reality is changed, it seems perfectly real to the person involved. Symptoms can include visual hallucinations, hearing voices, feelings of being controlled by others, disordered thinking and bizarre beliefs. Schizophrenia and bipolar disorder are commonly described as examples of psychotic disorders.

**Scaremongering** – a term used to describe the creating or spreading of news that is likely to scare or alarm people.

**Schizophrenia** – there are many misconceptions about schizophrenia. Contrary to common belief, the term 'schizophrenia' does not mean 'split personality'. It actually means being 'split' from reality. Not only does the person experience unusual things, they also believe that these things are 'normal' or 'real'. Common symptoms include auditory hallucinations (hearing voices), disordered thinking and emotional flatness.

**Sensationalisation** – a term often used in relation to the tabloid press. It is a style of reporting that exaggerates a story or seeks to whip up strong emotions in the audience.

**Serious, or severe, mental illnesses (SMI)** – a general term used to describe a number of serious mental disorders. They include things like clinical depression, anxiety disorders, schizophrenia, bipolar disorder, schizoaffective disorder and personality disorders.

**Social anxiety disorder** – also called ‘social phobia’, this is believed to be the most common type of anxiety disorder. It is diagnosed when people become overwhelmingly anxious and excessively self-conscious in everyday social situations. People with social phobia have an intense, persistent and chronic fear of being watched and judged by others and of doing things that will embarrass them. They can worry for days or weeks before a dreaded situation. This fear may become so severe that it interferes with work, school and other ordinary activities and can make it hard to make and keep friends.

**Stereotyping** – taking an opinion or viewpoint and applying it to everybody in a certain group. For example, to say that ‘all teenagers are rude or grumpy’ is a stereotype.

**Stigma/stigmatisation** – the word ‘stigma’ originates from Ancient Greece and means ‘a mark’. It was used in the context of marking slaves to identify their position in the society and indicated they were of lesser value. In terms of mental health today, ‘stigma’ or ‘stigmatisation’ refers to the negative way in which society values and ‘brands’ people with mental health problems.

**Trivialise** – to reduce the importance of something. In terms of mental health, the mass media is often accused of trivialising mental distress by making fun of people with mental health difficulties.

