

STARTING TO THINK ABOUT MENTAL HEALTH

Mental health refers to our emotional and social well-being and impacts how we think, feel, and behave. It plays a role in connecting with others, making decisions, handling stress, and many other aspects of daily life. Everyone has mental health, and it deserves your attention just as much as your physical health does.

WHAT IS A MENTAL HEALTH CONDITION?

A mental health condition, or mental illness, refers to a set of symptoms that have been identified by the mental health community. Mental health conditions are described in the Diagnostic and Statistical Manual of Mental Disorders (DSM-V), the International Classification of Diseases (ICD-11), or by people with lived experience.

People with mental health conditions deal with changes in emotions, thinking, and/or behavior. For some, this means extreme and unexpected changes in mood – like feeling much more sad or worried than usual. For others, it means not thinking clearly, pulling away from friends and activities you used to enjoy, or hearing voices that others do not. No matter what kind of mental health condition someone is facing, it's always possible to recover.

IS POOR MENTAL HEALTH THE SAME THING AS HAVING A MENTAL HEALTH CONDITION?

No. We all have tough days and weeks and struggling with your mental health doesn't automatically mean you have a mental health condition. To be diagnosed, the changes in your thinking and emotions must be seriously hurting your ability to do the things you want to do; and sticking around longer than they should – weeks or months, depending on the condition.

TERMS TO KNOW

SYMPTOMS:

physical or mental features that indicate the potential existence of a concern, condition, or diagnosis

LIVED EXPERIENCE:

first-hand, personal experience dealing with a mental health or substance use challenge

STRESS:

a feeling of emotional or physical tension in response to being overwhelmed or unable to cope with mental or emotional pressure

TRAUMA:

an emotional response to a disturbing, scary, or shocking experience that overwhelms an individual's ability to cope

COPING SKILLS:

a strategy to help you deal with difficult situations and lessen unpleasant emotions, thoughts, or behaviors

MENTAL HEALTH SCREEN:

an evaluation of your mental health and wellbeing through scientifically validated assessment tools

CONDITION		FOR DIAGNOSIS SYMPTOMS MUST LAST AT LEAST:
ANXIETY		6 MONTHS
DEPRESSION		2 WEEKS
BIPOLAR	DEPRESSIVE EPISODE AND MANIA OR HYPOMANIA	2 WEEKS 1 WEEK 4 DAYS
SCHIZOPHRENIA		6 MONTHS
PTSD		1 MONTH
OCD		2 WEEKS

You can have times of poor mental health without having a diagnosable condition – just like you can be generally physically unhealthy without having a particular illness.

WHO NEEDS TO LOOK AFTER THEIR MENTAL HEALTH?

Everyone! Mental health is important for all of us. Taking care of yourself is critical to prevent your mental health from worsening – factors like nutrition and gut health, stress, sleep, relationships, trauma, and more can contribute to poor mental health. If your mental health is in a good spot, it is a great time to practice coping skills – ways to help you deal with hard feelings – so that you're better able to handle tough times when they happen.



IF YOU'RE CONCERNED ABOUT YOUR MENTAL HEALTH OR JUST WANT TO CHECK IN WITH YOURSELF, TAKE A SCREEN AT MHASCREENING.ORG.

FAST FACTS

21% OF ALL U.S. ADULTS LIVE WITH A MENTAL HEALTH CONDITION.¹

↑ THE PREVALENCE OF MENTAL HEALTH CONDITIONS IS HIGHEST AMONG ADULTS REPORTING TWO OR MORE RACES (35.8%).²

46% OF AMERICANS WILL MEET THE CRITERIA FOR A DIAGNOSABLE MENTAL HEALTH CONDITION AT SOMETIME IN THEIR LIFE.³

SOURCES

¹ Substance Abuse and Mental Health Services Administration. (2021). Key substance use and mental health indicators in the United States: Results from the 2020 National Survey on Drug Use and Health (HHS Publication No. PEP21-07-01-003, NSDUH Series H-56). Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from <https://www.samhsa.gov/data/report/2020-nsduh-annual-national-report>.

² Ibid.

³ Kessler, R.C., Berglund, P., Demler, O., et al. (2005). Lifetime prevalence and age-of-onset distributions of DSM-IV disorders in the National Comorbidity Survey Replication. *Arch Gen Psychiatry*, 62(6), 593-602. doi:10.1001/archpsyc.62.6.593.