Mental Health Europe Glossary

Mental Health

People with mental health problems: People who experience or have experienced mental distress, some of whom may have a psychiatric diagnosis, such as depression, schizophrenia, or psychosis.

People with lived experience: People who experience or have experienced mental distress. The term is broader and more descriptive than ‘mental health problems’. Its underlying assumption is that mental distress is a meaningful human experience, and that it is for the individual to make sense of their own experiences within the context of their personal story. It positions the person as having expertise in their own experience (hence the equivalent term ‘expert by experience’). It can be used on its own, or in conjunction with specific experiences, for example ‘lived experience of hearing voices’ or ‘lived experience of unusual beliefs.’

Psychosocial disabilities: An internationally recognised term used in policy work, in particular the United Nations Committee on the Rights of Persons with Disabilities, to describe the experience of people who have long-term mental impairments which, in interaction with various societal barriers, may hinder the full realisation of their rights. MHE uses this term in policy work when referring to persons who fit the definition and are therefore protected by the UN CRPD (see below).

Recovery: Recovery is self-defined, but broadly means living a meaningful and satisfying life, with hope for the future. Recovery is not the eradication of the experiences or symptoms accompanying mental distress, as it would be used in the context of physical health. It can mean living with and managing these experiences, whilst having control over and input into your own life. Please see MHE’s video on recovery HERE.

Service user: Refers to people who use mental health services.

Survivor: A rights-based term mostly used by mental health/survivor advocates. The term survivor seeks to show that some psychiatric treatments can be abusive (e.g. forced treatment) and may not comply with human rights. It can also refer to a person who has been living/is still living with mental distress.

Deinstitutionalisation: The process of developing a range of services in the community regulated by rights-based and outcomes-oriented standards, including prevention, in order to eliminate the need for institutional care. (See The Common European Guidelines on the Transition from Institutional to Community-based Care)

Community-based care: The spectrum of services that enable individuals to live in the community. It encompasses mainstream services, such as housing, healthcare, education, employment, culture and leisure, which should be accessible to everyone regardless of the nature of their issues or impairment or the required level of support. (See The Common European Guidelines on the Transition from Institutional to Community-based Care)

Independent living: Independent Living is the right for people with disabilities or mental health problems to have control over their own lives, including decisions about where to live, with whom to live and how to live. These choices can be enabled through a combination of advocacy, support and adaptation of the environment (for example making housing or transport more accessible).

DSM-V: The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) is the 2013 update to the American Psychiatric Association’s (APA) classification and diagnostic tool used by health and mental health professionals in the US and globally. DSM-V is a diagnostic manual firmly positioned in the bio-medical approach to mental distress, and is therefore controversial within the wider mental health world. (See MHE’s position on DSM-V).

ICD-11: The most recent version of the International Classification of Diseases (ICD), which is the standard diagnostic tool for epidemiology, health management and clinical purposes. This includes the analysis of the general health situation of population groups. It is used to monitor the incidence and prevalence of diseases and other health problems (WHO Definition). ICD-11 was released in June 2018. MHE had serious concerns about the revision process and what it means for the treatment of mental ill health. See MHE’s work on the ICD-10 revision.
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Policy

UNCRPD: Stands for the United Nations Convention on the Rights of Persons with Disabilities which was adopted in 2006 and opened for signature in 2007. It is the first comprehensive human rights treaty of the 21st century and is the first human rights convention to be opened for signature to regional integration organisations such as the European Union (in 2010).

CRPD REVIEW: The Committee on the Rights of Persons with Disabilities, established by the UNCRPD, is responsible for reviewing State Party compliance with the UN CRPD. As a party to the UN CRPD, the EU came under review in September 2015 through a constructive dialogue with the Committee and the result was a set of recommendations known as the Concluding Observations. Many of the recommendations are important for the rights of persons with psychosocial disabilities.

MAINSTREAMING: Mental Health mainstreaming can be defined as the systematic integration of the priorities and needs of people with mental health problems in all policies and general measures, from the planning stage, through the implementation, monitoring and evaluation.

OPEN LETTER: Often used as a policy tool to raise awareness on a specific topic (e.g. upcoming legislation, new EU Commission, presidency or government). It consists of a letter addressed to the EU institutions, other bodies or national governments intended for publication in the media. Open letters can have from one to hundreds of signatories who show support.

REGULATIONS: Are binding legislative acts adopted by the Council. Regulations must be applied in their entirety across the EU. Example: Dublin II Regulation on reception and treatments of asylum applications.

DIRECTIVE: A legislative act that sets out a goal that all EU countries must achieve. However, it is up to the individual countries to devise their own ways of how to reach these goals. Example: The EU Crossborder Directive on patients’ rights in cross-border healthcare.

TRANSPOSITION: Is a process by which EU Member States give force to a directive by passing appropriate implementation measures at national level.

HEARING: European parliament committees are allowed to organise hearings with experts, where this is considered essential to their work on a particular subject. Hearings can also be held jointly by two or more committees. Most committees organise regular hearings, as they allow them to hear from experts and hold discussions on key issues.

PARLIAMENTARY REPORT: A Parliamentary report prepares the Parliament’s position. Drawn up by a Member of European parliament (MEP) chosen from within the competent Parliamentary committee (the “rapporteur”), it contains suggested amendments and a statement of reasons explaining the proposed amendments.

COMPETENCE: The founding treaties of the European Union (EU) outline the division of competences between the EU and its Member States. There are three main types of competences: exclusive competences, shared competences and supporting competences.

PROPOSAL: In the standard decision-making procedure for most EU policy areas, the European Commission submits a proposal for a specific legislative act to the European Parliament and the Council.

WRITTEN DECLARATION: A written declaration is a text of a maximum of 200 words relating exclusively on a matter falling within the competence of the European Union. They do not, however, bind the EU Parliament. Therefore, they cannot be considered as an act of the Parliament representing its position, but only those of its authors and signatories.

CIVIL DIALOGUE: Civil dialogue groups assist the Commission and help to hold a regular dialogue on all matters relating to specific policy areas (e.g. social policies, employment and social affairs, migration etc.)

CO-PRODUCTION: Co-production is an inclusive working practice between service users and organisations, where all stakeholders are continuously involved in the design, development and delivery of the service, policy or activity.

EXPERT GROUP: Expert groups are consultative bodies that advise the Commission on the preparation of legislative proposals and policy initiatives, the implementation of legislation, programmes and existing Union policies, and the preparation of delegated acts.