

GLOSSARY OF KEY TERMS, ACRONYMS, AND LAWS

Those interested in psychosocial and mental health concerns encounter a host of specialized terms, acronyms, and references to legislation. On the following pages, you will find a brief resource aid and references to the sources from which they were drawn should you want to pursue more extensive glossaries.

Included here are:

Excerpts from:

American Psychiatric Glossary (seventh edition; 1994) published by the American Psychiatric Press (Washington, DC)

a glossary of acronyms and laws related to emotional and behavior disorders compiled by the Institute for Adolescents with Behavioral Disorders, Arden Hills, MN

Also included is a copy of

Children's and Adolescents' Mental Health: A Glossary of Terms prepared and circulated by the U.S. Dept. of Health and Human Services, Substance Abuse and Mental Health Services Administration) Center for Mental Health Services

Some Key Terms Related to Mental Health and Psychosocial Problems

The following is a sampling of key terms from the American Psychiatric Glossary (7th edition, edited by Jane Edgerton and Robert Campbell, III [1994]. Washington, DC-. American Psychiatric Press, Inc.). It provides a user-friendly definition for quick referral. For a more extensive listing of terms, see the original source.

- abnormality** In psychological terms, any mental, emotional, or behavioral activity that deviates from culturally or scientifically accepted norms.
- abreaction** Emotional release or discharge after recalling a painful experience that has been repressed because it was not consciously tolerable (see *conscious*). A therapeutic effect sometimes occurs through partial or repeated discharge of the painful *affect*. See also *systematic desensitization*.
- academic disorders** In DSM-IV, this is a major group of *infancy, childhood, and adolescence disorders* that includes *reading disorder, mathematics disorder, and disorder of written expression*.
- acculturation difficulty** A problem in adapting to or finding an appropriate way to adapt to a different culture or environment. The problem is not based on any coexisting *mental disorder*.
- acting out** Expressions of *unconscious* emotional conflicts or feelings in actions rather than words. The person is not consciously aware of the meaning of such acts (see *conscious*). Acting out may be harmful or, in controlled situations, therapeutic (e.g., children's play therapy).
- adaptation** Fitting one's behavior to meet the needs of one's environment, which often involves a modification of impulses, emotions, or attitudes. **adjustment** Often transitory functional alteration or accommodation by which one can better adapt oneself to the immediate environment and to one's inner self See also *adaptation*.
- adjustment disorder** An imprecise term referring to emotional or behavioral *symptoms* that develop in response to an identifiable stressor. The symptoms, which may include *anxiety*, depressed mood, and disturbance of conduct, are clinically significant in that the distress exceeds what would be expected under the circumstances, or significant impairment in social or occupational functioning is produced. Duration of symptoms tends to be self-limited, not persisting more than 6 months after termination of the stressor or its consequences. Sometimes the disorder is designated as "acute" if duration is 6 months or less, and as "persistent" or "chronic" if symptoms endure beyond 6 months.
- affect** Behavior that expresses a subjectively experienced feeling state (*emotion*); affect is responsive to changing emotional states, whereas mood refers to a pervasive and sustained emotion. Common affects are euphoria, anger, and sadness. Some types of affect disturbance are:
- blunted** Severe reduction in the intensity of affective expression.
- flat** Absence or near absence of any signs of affective expression such as a monotonous voice and an immobile face.
- inappropriate** Discordance of voice and movements with the content of the person's speech or ideation. **labile** Abnormal variability, with repeated, rapid, and abrupt shifts in affective expression.
- restricted or constricted** Reduction in the expressive range and intensity of affects. **affective disorder** A disorder in which mood change or disturbance is the primary manifestation. Now referred to as *mood disorder*. See depression.
- aggression** Forceful physical, verbal, or symbolic action. May be appropriate and self-protective, including healthy self-assertiveness, or inappropriate as in hostile or destructive behavior. May also be directed toward the environment, toward another person or *personality*, or toward the self, as in *depression*.
- agitation** Excessive motor activity, usually nonpurposeful and associated with internal tension. Examples include inability to sit still, fidgeting, pacing, wringing of hands, and pulling of clothes. See *psychomotor agitation*.

agoraphobia *Anxiety* about being in places or situations in which escape might be difficult or embarrassing or in which help may not be available should a *panic attack* occur. The fears typically relate to venturing into the open, leaving the familiar setting of one's home, or of being in a crowd, standing in line, or traveling in a car or train. Although agoraphobia usually occurs as a part of *panic disorder*, agoraphobia without a history of panic disorder has been described.

Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) An agency in the U.S.

Department of Health and Human Services that was replaced in 1992 by the Substance Abuse and Mental Health Services Administration (SAMHSA). In reorganizing ADAMHA into SAMHSA, the three ADAMHA research institutes, the National Institute on Alcohol Abuse and Alcoholism (NIAAA), the National Institute on Drug Abuse (NIDA), and the National Institute of Mental Health (NIMH), were moved to the *National Institutes of Health*. What remains in SAMHSA are the substance abuse and mental health services programs.

alcohol use disorders In DSM-IV, this group includes alcohol dependence, alcohol abuse, alcohol intoxication, alcohol withdrawal, alcohol delirium, alcohol persisting dementia, alcohol persisting amnesic disorder, alcohol psychotic disorder, alcohol mood disorder, alcohol anxiety disorder, alcohol sleep disorder, and alcohol sexual dysfunction. See *abuse, substance; dependence, substance; intoxication, alcohol, withdrawal symptoms, alcohol*.

ambivalence The coexistence of contradictory emotions, attitudes, ideas, or desires with respect to a particular person, object, or situation. Ordinarily, the ambivalence is not fully conscious and suggests psychopathology only when present in an extreme form.

amphetamine use disorders In DSM-IV, this group includes amphetamine (or related substance) dependence, amphetamine abuse, amphetamine intoxication, amphetamine withdrawal, amphetamine delirium, amphetamine psychotic disorder, amphetamine mood disorder, amphetamine anxiety disorder, amphetamine sexual dysfunction, and amphetamine sleep disorder.

androgyny A combination of male and female characteristics in one person.

anhedonia Inability to experience pleasure from activities that usually produce pleasurable feelings. Contrast with *hedonism*.

anniversary reaction An emotional response to a previous event occurring at the same time of year. Often the event involved a loss and the reaction involves a *depressed* state. The reaction can range from mild to severe and may occur at any time after the event.

anomie Apathy, alienation, and personal distress resulting from the loss of goals previously valued. Emile Durkheim popularized this term when he listed it as a principal reason for suicide.

anorexia nervosa An *eating disorder* characterized by refusal or inability to maintain minimum normal weight for age and height combined with intense fear of gaining weight, denial of the seriousness of current low weight, undue influence of body weight or shape on self-evaluation, and, in females, amenorrhea or failure to menstruate. Weight is typically 15% or more below normal, and it may decrease to life-threatening extremes. In the restricting subtype, the person does not engage regularly in binge eating. In the binge eating/purging, or bulimic, subtype, the person engages in recurrent episodes of *binge eating* or purging during the episode of anorexia nervosa. See also *bulimia nervosa*.

Antabuse (disulfiram) A drug used in treatment of alcohol *dependence* to create an aversive response to alcohol. It blocks the normal metabolism of alcohol and produces increased blood concentrations of acetaldehyde that induce distressing *symptoms* such as flushing of the skin, pounding of the heart, shortness of breath, nausea, and vomiting. With more severe reactions, hypertension, cardiovascular collapse, and, sometimes, convulsions may occur.

antisocial behavior Conduct indicating indifference to another's person or property; criminal behavior, dishonesty, or abuse are examples. In DSM-IV, childhood or adolescent antisocial behavior and adult antisocial behavior (in contrast to antisocial personality disorder, etc.) are included as "other conditions that may be a focus of clinical attention."

anxiety Apprehension, tension, or uneasiness from anticipation of danger, the source of which is largely unknown or unrecognized. Primarily of *intrapsychic* origin, in distinction to fear, which is the emotional response to a consciously recognized and usually external threat or danger. May be regarded as pathologic when it interferes with effectiveness in living, achievement of desired goals or satisfaction, or reasonable emotional comfort.

anxiety disorders In DSM-IV, this category includes panic disorder without agoraphobia, panic disorder with agoraphobia, agoraphobia without history of panic disorder, specific (simple) phobia, social phobia (social anxiety disorder), obsessive-compulsive disorder, posttraumatic stress disorder, acute stress disorder, generalized anxiety disorder (includes overanxious disorder of childhood), anxiety disorder due to a general medical condition, and substance-induced anxiety disorder. (The inclusion of mixed anxiety-depressive disorder into this category awaits further study.) See *agoraphobia*; *generalized anxiety disorder*; *mixed anxiety-depressive disorder*; *obsessive-compulsive disorder*; *panic disorder*; *phobia*; *posttraumatic stress disorder*.

Asperger's disorder A disorder of development characterized by gross and sustained impairment in social interaction and restricted, repetitive, and stereotyped patterns of behavior, interests, and activities occurring in the context of preserved cognitive and language development.

attachment disorder, reactive A disorder of infancy or early childhood, beginning before the child is 5 years old, characterized by markedly disturbed and developmentally inappropriate social relatedness. In the inhibited type of reactive attachment disorder, failure to respond predominates, and responses are hypervigilant, avoidant, or highly ambivalent and contradictory. *Frozen watchfulness* maybe present. In the disinhibited type, indiscriminate sociability is characteristic, such as excessive familiarity with relative strangers or lack of selectivity in choice of attachment figures. The majority of children who develop this disorder (either type) are from a setting in which care has been grossly pathogenic. Either the caregivers have continually disregarded the child's basic physical and emotional needs, or repeated changes of the primary caregiver have prevented the formation of stable attachments.

attention-deficit/hyperactivity disorder (ADHD) A child whose inattention and hyperactivity/impulsivity cause problems may have this disorder. *Symptoms* appear before the age of 7 years and are inconsistent with the subject's developmental level and severe enough to impair social or academic functioning.

In the predominantly inattentive type, characteristic symptoms include distractibility, difficulty in sustaining attention or following through on instructions in the absence of close supervision, avoidance of tasks that require sustained mental effort, failure to pay close attention to details in schoolwork or other activities, difficulty in organizing activities, not listening to what is being said to him or her, loss of things that are necessary for assignments, and forgetfulness in daily activities.

In the predominantly hyperactive-impulsive type, characteristic symptoms are that the person inappropriately leaves his or her seat in classroom or runs about, fidgets or squirms, has difficulty in engaging in leisure activities quietly, has difficulty in awaiting turn in games, and blurts out answers to questions before they are completed. The two types may be combined.

autistic disorder A disorder of development consisting of gross and sustained impairment in social interaction and communication; restricted and stereotyped patterns of behavior, interest, and activities; and abnormal development prior to age 3 manifested by delays or abnormal functioning in social development, language communication, or play. Specific *symptoms* may include impaired awareness of others, lack of social or emotional reciprocity, failure to develop peer relationships appropriate to developmental level, delay or absence of spoken language and abnormal nonverbal communication, stereotyped and repetitive language, idiosyncratic language, impaired imaginative play, insistence on sameness (e.g., nonfunctional routines or rituals), and stereotyped and repetitive motor mannerisms.

aversion therapy A *behavior therapy* procedure in which associated with undesirable behavior are paired with a painful or unpleasant stimulus, resulting in the suppression of the undesirable behavior.

biofeedback The use of instrumentation to provide information (i.e. feedback) about variations in one or more of the subject's own physiological processes not ordinarily perceived (e.g., brain wave activity, muscle tension, blood pressure). Such feedback over a period of time can help the subject learn to control certain physiological processes even though he or she is unable to articulate how the learning was achieved.

bipolar disorders In DSM-IV, a group of *mood disorders* that includes bipolar disorder, single episode; bipolar disorder, recurrent; and *cyclothymic disorder*. A bipolar disorder includes a manic episode at some time during its course. In any particular patient, the bipolar disorder may take the form of a single manic episode (rare), or it may consist of recurrent episodes that are either manic or depressive in nature (but at least one must have been predominantly manic).

bisexuality Originally a concept of *Freud*, indicating a belief that components of both sexes could be found in each person. Today the term is often used to refer to persons who are capable of achieving orgasm with a partner of either sex. See also *gender role*; *homosexuality*.

blocking A sudden obstruction or interruption in spontaneous flow of thinking or speaking, perceived as an absence or deprivation of thought.

bonding The unity of two people whose identities are significantly affected by their mutual interactions. Bonding often refers to the attachment between a mother and her child.

brief psychotherapy Any form of *psychotherapy* whose end point is defined either in terms of the number of sessions (generally not more than 15) or in terms of specified objectives; usually goal-oriented, circumscribed, active, focused, and directed toward a specific problem or *symptom*.

bulimia nervosa An *eating disorder* characterized by recurrent episodes of *binge eating* followed by compensatory behavior such as purging (i.e., self-induced vomiting or the use of diuretics and laxatives) or other methods to control weight (e.g., strict dieting, fasting, or vigorous exercise).

burnout A stress reaction developing in persons working in an area of unrelenting occupational demands. *Symptoms* include impaired work performance, fatigue, *insomnia*, *depression*, increased susceptibility to physical illness, and reliance on alcohol or other drugs of abuse for temporary relief.

catatonia Immobility with muscular rigidity or inflexibility and at times excitability. See also *schizophrenia*.

catharsis The healthful (therapeutic) release of ideas through "talking out" *conscious* material accompanied by an appropriate emotional reaction. Also, the release into awareness of repressed ("forgotten") material from the *unconscious*. See also *repression*.

character disorder (character neurosis) A *personality disorder* manifested by a chronic, habitual, maladaptive pattern of reaction that is relatively inflexible, limits the optimal use of potentialities, and often provokes the responses from the environment that the person wants to avoid. In contrast to symptoms of *neurosis*, character traits are typically *ego-syntonic*.

clanging A type of thinking in which the sound of a word, rather than its meaning, gives the direction to subsequent associations. Punning and rhyming may substitute for logic, and language may become increasingly a senseless compulsion to associate and decreasingly a vehicle for communication. For example, in response to the statement "That will probably remain a mystery," a patient said, "History is one of my strong points."

cluster suicides Multiple *suicides*, usually among adolescents, in a circumscribed period of time and area. Thought to have an element of contagion.

cocaine use disorders In DSM-IV, this group includes cocaine dependence, cocaine abuse, cocaine intoxication, cocaine withdrawal, cocaine delirium, cocaine psychotic disorder with delusions or hallucinations, cocaine mood disorder, cocaine anxiety disorder, cocaine sexual dysfunction, and cocaine sleep disorder.

codependency A popular term referring to all the effects that people who are dependent on alcohol or other substances have on those around them, including the attempts of those people to affect the dependent person. The term implies that codependence is a psychiatric disorder and hypothesizes that the family's actions tend to perpetuate (enable) the person's dependence. Empirical studies, however, support a stress and coping model for explanation of the family behavior.

cognitive Refers to the mental process of comprehension, judgment, memory, and reasoning, in contrast to emotional and volitional processes. Contrast with conative.

cognitive-behavioral psychotherapy Cognitive therapy, a short-term psychotherapy directed at specific target conditions or *symptoms*. (*Depression* has been the most intensively investigated to date.) The symptoms themselves are clues to the patient's verbal thoughts, images, and assumptions that account for both the symptomatic state and the psychological vulnerability to that state. Initial treatment is aimed at symptom reduction. The patient is taught to recognize the negative cognitions that contribute significantly to the development or maintenance of symptoms and to evaluate and modify such thinking patterns. The second phase of treatment concerns the underlying problem.

comorbidity The simultaneous appearance of two or more illnesses, such as the co-occurrence of *schizophrenia* and substance abuse or of *alcohol dependence and depression*. The association may reflect a causal relationship between one disorder and another or an underlying vulnerability to both disorders. Also, the appearance of the illnesses may be unrelated to any common etiology or vulnerability.

compensation A *defense mechanism*, operating unconsciously (see unconscious), by which one attempts to make up for real or fancied deficiencies. Also a *conscious* process in which one tries to make up for real or imagined defects of physique, performance skills, or psychological attributes. The two types frequently merge. See also *Adler; individual psychology; overcompensation*.

complex A group of associated ideas having a common, strong emotional tone. These ideas are largely *unconscious* and significantly influence attitudes and associations. See also *Oedipus complex*.

compulsion Repetitive ritualistic behavior such as hand washing or ordering or a mental act such as praying or repeating words silently that aims to prevent or reduce distress or prevent some dreaded event or situation. The person feels driven to perform such actions in response to an *obsession* or according to rules that must be applied rigidly, even though the behaviors are recognized to be excessive or unreasonable.

conduct disorder A *disruptive behavior disorder* of childhood characterized by repetitive and persistent violation of the rights of others or of age-appropriate social norms or rules. *Symptoms* may include bullying others, truancy or work absences, staying out at night despite parental prohibition before the age of 13, using alcohol or other substances before the age of 13, breaking into another's house or car, firesetting with the intent of causing serious damage, physical cruelty to people or animals, stealing, or use more than once of a weapon that could cause harm to others (e.g., brick, broken bottle, or gun).

conversion disorder One of the *somatoform disorders* (but in some classifications called a *dissociative disorder*), characterized by a *symptom* suggestive of a neurologic disorder that affects sensation or voluntary motor function. The symptom is not consciously or intentionally produced, it cannot be explained fully by any known *general medical condition*, and it is severe enough to impair functioning or require medical attention. Commonly seen symptoms are blindness, double vision, deafness, impaired coordination, paralysis, and seizures.

coping mechanisms Ways of adjusting to environmental stress without altering one's goals or purposes; includes both *conscious and unconscious* mechanisms.

coprophagia Eating of filth or feces.

counterphobia Deliberately seeking out and exposing oneself to, rather than avoiding, the object or situation that is consciously or unconsciously feared.

countertransference The therapist's emotional reactions to the patient that are based on the therapist's unconscious needs and conflicts, as distinguished from his or her *conscious* responses to the patient's behavior. Countertransference may interfere with the therapist's ability to understand the patient and may adversely affect the therapeutic technique. Currently, there is emphasis on the positive aspects of countertransference and its use as a guide to a more empathic understanding of the patient.

crack Freebase or alkaloidal *cocaine* that is named for the cracking sound it makes when heated. Also known as "rock" for its crystallized appearance. It is ingested by inhalation of vapors produced by heating the "rock."

cyclothymic disorder In DSM-IV, one of the *bipolar disorders* characterized by numerous hypomanic episodes and frequent periods of depressed mood or loss of interest or pleasure. These episodes do not meet the criteria for a full manic episode or major depressive disorder,

decompensation The deterioration of existing defenses (see *defense mechanism*), leading to an exacerbation of pathological behavior.

defense mechanism *Unconscious* intrapsychic processes serving to provide relief from emotional *conflict and anxiety*. *Conscious* efforts are frequently made for the same reasons, but true defense mechanisms are unconscious. Some of the common defense mechanisms defined in this glossary are *compensation, conversion, denial, displacement, dissociation, idealization, identification, incorporation, introjection, projection, rationalization, reaction formation, regression, sublimation, substitution, symbolization, and undoing*.

delusion A false belief based on an incorrect inference about external reality and firmly sustained despite clear evidence to the contrary. The belief is not part of a cultural tradition such as an article of religious faith. Among the more frequently reported delusions are the following: delusion of control The belief that one's feelings, impulses, thoughts, or actions are not one's own but have been imposed by some external force...

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grandiose delusion An exaggerated belief of one's importance, power, knowledge, or identity.

nihilistic delusion A conviction of nonexistence of the self, part of the self, or others, or of the world. "I no longer have a brain" is an example.

persecutory delusion The conviction that one (or a group or institution close to one) is being harassed, attacked, persecuted, or conspired against.

somatic delusion A false belief involving the functioning of one's body, such as the conviction of a postmenopausal woman that she is pregnant, or a person's conviction that his nose is misshapen and ugly when there is nothing wrong with it.

.....
denial A *defense mechanism*, operating unconsciously, used to resolve emotional *conflict* and allay *anxiety* by disavowing thoughts, feelings, wishes, needs, or external reality factors that are consciously intolerable.

depersonalization Feelings of unreality or strangeness concerning either the environment, the self, or both. This is characteristic of *depersonalization disorder* and may also occur in *schizotypal personality disorder, schizophrenia*, and in those persons experiencing overwhelming anxiety, stress, or fatigue.

depression When used to describe a mood, depression refers to feelings of sadness, despair, and discouragement. As such, depression may be a normal feeling state. The overt manifestations are highly variable and may be *culture specific*. Depression may be a *symptom* seen in a variety of mental or physical disorders, a *syndrome* of associated symptoms secondary to an underlying disorder, or a specific *mental disorder*. Slowed thinking, decreased pleasure, decreased purposeful physical activity, guilt and hopelessness, and disorders of eating and sleeping may be seen in the depressive syndrome. DSM-IV classifies depression by severity, recurrence, and association with *hypomania or mania*. Other categorizations divide depression into reactive and endogenous depressions on the basis of precipitants or symptom clusters. Depression in children may be indicated by refusal to go to school, *anxiety*, excessive reaction to separation from parental figures, antisocial behavior, and somatic complaints.

disruptive behavior disorder A disturbance of conduct severe enough to produce significant impairment in social, occupational or academic functioning because of symptoms that range from oppositional defiant. to moderate and severe conduct disturbances.

oppositional defiant symptoms may include losing temper-, arguing with adults and actively refusing their requests; deliberately annoying others- blaming others for one's mistakes; being easily annoyed, resentful, or spiteful-, and physically fighting with other members of the household.

conduct disturbance (moderate) symptoms may include truancy or work absences, alcohol or other substance use before the age of 13, stealing with confrontation, destruction of others' property, firesetting with intent of causing serious damage, initiating fights outside of home, and being physically cruel to animals.

conduct disturbance (severe) symptoms may include running away from home overnight at least twice, breaking into another's property, being physically cruel to people, stealing with confrontation, repeatedly using a dangerous weapon, and forcing someone into sex" activity.

dissociation The splitting off of clusters of mental contents from conscious awareness, a mechanism central to hysterical conversion and *dissociative disorder*; the separation of an idea from its emotional significance and affect as seen in the inappropriate *affect of* schizophrenic patients.

dysphoria Unpleasant mood.

dysthymic disorder One of the *depressive disorders*, characterized by a chronic course (i.e., seldom without symptoms) with lowered mood tone and a range of other symptoms that may include feelings of inadequacy, loss of self-esteem, or self-deprecation: feelings of hopelessness or despair; feelings of *guilt*, brooding about past events, or self-pity; low energy and chronic tiredness; being less active or talkative than usual; poor concentration and indecisiveness; and inability to enjoy pleasurable activities.

eating disorder Marked disturbance in eating behavior. In DSM-IV, this category includes *anorexia nervosa*, *bulimia nervosa*, and eating disorder not otherwise specified.

echolalia Parrot-like repetition of overheard words or fragments of speech. It may be part of a developmental disorder, a neurologic disorder, or *schizophrenia*. Echolalia tends to be repetitive and persistent and is often uttered with a mocking, mumbling, or staccato intonation.

encopresis, functional An elimination disorder in a child who is at least 4 years of age, consisting of repeated passage of feces into inappropriate places (clothing, floor, etc.) and not due to a *general medical condition*.

enuresis, functional An elimination disorder in a child who is at least 5 years of age, consisting of repeated voiding of urine into bed or clothing, not due to any general medical condition.

fetal alcohol syndrome A *congenital* disorder resulting from alcohol teratogenicity (i.e., the production, actual or potential, of pathological changes in the fetus, most frequently in the form of normal development of one or more organ systems; commonly referred to as birth defects), with the following possible dysmorphic categories: *central nervous system* dysfunction, birth deficiencies (such as low birth weight), facial abnormalities, and variable major and minor malformations. A safe level of alcohol use during pregnancy has not been established, and it is generally advisable for women to refrain from alcohol use during pregnancy.

fetishism One of the *paraphilias*, characterized by marked distress over, or acting on, sexual urges involving the use of nonliving objects (fetishes), such as underclothing, stockings, or boots.

flashback Hallucinogen persisting perception disorder or posthallucinogen perception disorder; reexperiencing, after ceasing the use of a hallucinogen, one or more of the perceptual symptoms that had been part of the hallucinatory experience while using the drug.

flight of ideas An early continuous flow of accelerated speech with abrupt changes from one topic to another, usually based on understandable associations, distracting stimuli, or playing on words. When severe, however, this may lead to disorganized and incoherent speech. Flight of ideas is characteristic of *manic episodes*, but it may occur also in *organic mental disorders*, *schizophrenia*, *other psychoses*, and, rarely, acute reactions to stress.

flooding(implosion) A behavior therapy procedure for phobias and other problems involving maladaptive anxiety, in which anxiety producers are presented in intense forms, either in *imagination* or in real life. The presentations, which act as desensitizers, are continued until the stimuli no longer produce disabling anxiety.

gender identity disorder One of the major groups of sexual and gender identity disorders, characterized by a strong and persistent identification with the opposite sex (cross-gender identification) and discomfort with one's assigned sex or a sense of inappropriateness in that gender role. Although onset is usually in childhood or adolescence, the disorder may not be presented clinically until adulthood. Manifestations include a repeated desire to be of the opposite sex, insistence that one has the typical feelings and reactions of the opposite sex, a belief that one was born the wrong sex, and transsexualism or preoccupation with one's primary and secondary sex characteristics in order to simulate the opposite sex.

hallucination A sensory perception in the absence of an actual external stimulus; to be distinguished from an *illusion*, which is a misperception or misinterpretation of an external stimulus. Hallucinations may involve any of the senses....

hyperactivity Excessive motor activity that may be purposeful or aimless; movements and utterances are usually more rapid than normal. Hyperactivity is a *prominent feature* of attention-deficit disorder, so much so that in DSM-IV the latter is called *attention-deficit/hyperactivity disorder (ADHD)*.

hypomania A psychopathological state and abnormality of *mood* falling somewhere between normal *euphoria* and *mania*. It is characterized by unrealistic optimism, pressure of speech and activity, and a decreased need for sleep. Some people show increased creativity during hypomanic states, whereas others show poor judgment, irritability and irascibility.

identity crisis A loss of the sense of the sameness and historical continuity of one's self and an inability to accept or adopt the role one perceives as being expected by society. This is often expressed by isolation, withdrawal, extremism, rebelliousness, and negativity, and is typically triggered by a sudden increase in the strength of instructional *drives* in a milieu of rapid social evolution and technological change.

impulse control disorders Failing to resist an *impulse*, drive, or temptation to perform some act that is harmful to oneself or to others. The impulse may be resisted consciously, but it is consonant with the person, immediate, conscious wish. The act may be premeditated or unplanned. The person may display regret or guilt for the action or its consequences. In DSM-IV, this category includes *pathological gambling, kleptomania, -pyromania, intermittent explosive disorder, and trichotillomania*.

labile Rapidly shifting (as applied to *emotions*); unstable.

mania *Bipolar disorder*; a mood disorder characterized by excessive elation, inflated self-esteem and grandiosity, hyperactivity, agitation, and accelerated thinking and speaking. *Flight of ideas* may be present. A manic syndrome may also occur in *organic mental disorder*.

-mania Formerly used as a nonspecific term for any type of "madness." Currently used as a suffix to indicate a morbid preoccupation with some kind of idea or activity, and/or a *compulsive* need to behave in some deviant way. Some examples are as follows:

egomania Pathological preoccupation with self.

kleptomania Compulsion to steal.

nymphomania Abnormal and excessive need or desire in the woman for sexual intercourse; see *satyriasis*.

pyromania Compulsion to set fires; an *impulse control disorder*.

trichotillomania Compulsion to pull one's own hair out; an *impulse disorder*.

manic episode A distinct period of time (usually lasting at least 1 week) of abnormally and persistently elevated, expansive, or irritable mood accompanied by such *symptoms* as inflated self-esteem or *grandiosity*, decreased need for sleep, overtalkativeness or *pressured speech*, *flight of ideas* or feeling that thoughts are racing, inattentiveness and distractibility, increased goal-directed activity (e.g., at work or school, socially or sexually), and involvement in pleasurable activities with high potential for painful consequences (e.g., buying sprees, sexual indiscretions, foolish business ventures). See *bipolar disorders*.

manic-depressive illness A term often used synonymously with *bipolar disorder*, as defined in DSM-IV.

mental health A state of being that is relative rather than absolute. The best indices of mental health are simultaneous success at working, loving, and creating, with the capacity for mature and flexible resolution of conflicts between *instincts*, *conscience*, important other people, and reality.

mental status examination The process of estimating psychological and behavioral function by observing the patient, eliciting his or her self-description, and using formal questioning. Included in the examination are 1) evaluation and assessment of any psychiatric condition present, including provisional diagnosis and prognosis, determination of degree of impairment, suitability for treatment, and indications for particular types of therapeutic intervention; 2) formulation of the personality structure of the subject, which may suggest the historical and developmental antecedents of whatever psychiatric condition exists; and 3) estimation of the subject's ability and willingness to participate appropriately in treatment. The mental status is reported in a series of narrative statements describing such things as affect, speech, thought content, perception, and cognitive functions. This examination is part of the general examination of all patients, although it may be markedly abbreviated in the absence of psychopathology.

mood disorders In DSM-IV, this category includes *depressive disorders*, *bipolar disorders*, *mood disorder due to a general medical condition*, and substance-induced (intoxication/ withdrawal) mood disorder.

mood swing Fluctuation of a person's emotional tone between periods of elation and periods of depression.

mutism, selective Elective mutism; a disorder of infancy, childhood, or adolescence characterized by persistent failure to speak in specific social situations by a child with demonstrated ability to speak. The mutism is not due to lack of fluency in the language being spoken or embarrassment about a speech problem.

negativistic personality disorder A type of *passive-aggressive personality disorder* characterized by passive resistance to demands for adequate social and occupational performance and a negative attitude. Typical manifestations include inefficiency, procrastination, complaints of being victimized and unappreciated, irritability, criticism of and scorn for authority, and personal discontent. The person with this disorder alternates between hostile assertions of independence and contrite, dependent behavior.

obsessive-compulsive disorder An *anxiety disorder* characterized by obsessions, compulsions or both, that are time-consuming and interfere significantly with normal routine, occupational functioning, usual social activities, or relationships with others. See *compulsion*; *obsession*.

oppositional defiant disorder A pattern of negativistic and hostile behavior in a child that lasts at least 6 months. *Symptoms* may include losing one's temper; arguing with adults or actively refusing their requests; deliberately annoying others; being easily annoyed, angry, and resentful; being spiteful or vindictive.

overanxious disorder An anxiety disorder of childhood and adolescence, sometimes considered equivalent to the adult diagnosis of *generalized anxiety disorder*. Symptoms include multiple, unrealistic anxieties concerning the quality of one's performance in school and in sports; hobbies; money matters; punctuality; health; or appearance. The patient is tense and unable to relax and has recurrent somatic complaints for which no physical cause can be found.

panic attack A period of intense fear or discomfort, with the abrupt development of a variety of symptoms and fears of dying, going crazy, or losing control that reach a crescendo within 10 minutes. The symptoms may include shortness of breath or smothering sensations-, dizziness, faintness, or feelings of unsteadiness; trembling or shaking; sweating; choking; nausea or abdominal distress; flushes or chills; and chest pain or discomfort.

Panic attacks occur in several *anxiety disorders*. In *panic disorder* they are typically unexpected and happen "out of the blue." In *social phobia* and *simple phobia* they are cued and occur when exposed to or in anticipation of a situational trigger. These attacks occur also in *posttraumatic stress disorder*.

phobia Fear cued by the presence or anticipation of a specific object or situation, exposure to which almost invariably provokes an immediate *anxiety* response or *panic attack* even though the subject recognizes that the fear is excessive or unreasonable. The phobic stimulus is avoided or endured with marked distress. In earlier psychoanalytic literature, phobia was called *anxiety hysteria*.

Two types of phobia have been differentiated: specific phobia (simple phobia) and social phobia. Specific phobia is subtyped on the basis of the object feared. The natural environment (animals, insects, storms, water, etc.); blood, injection, or injury; situations (cars, airplanes, heights, tunnels, etc.); and other situations that may lead to choking, vomiting, or contracting an illness are all specific phobias.

In social phobia (social anxiety disorder), the persistent fear is of social situations that might expose one to scrutiny by others and induce one to act in a way or show anxiety symptoms that will be humiliating or embarrassing. Avoidance may be limited to one or only a few situations, or it may occur in most social situations. Performing in front of others or social interactions may be the focus of concern. It is sometimes difficult to distinguish between social phobia and *agoraphobia* when social avoidance accompanies panic attacks. *Avoidant disorder* has been used to refer to social phobia occurring in childhood and adolescence.

Some of the common phobias are (add "abnormal fear of" to each entry):

achluophobia Darkness, **acrophobia** Heights, **agoraphobia** Open spaces or leaving the familiar setting of the home, **ailurophobia** Cats, **algophobia** Pain, **androphobia** Men, **autophobia** Being alone or solitude, **bathophobia** Depths, **claustrophobia** Closed spaces, **cynophobia** Dogs, **dernophobia** Crowds, **erhthrophobia** Blushing; sometimes used to refer to the blushing itself, **gynophobia** Women, **hypnophobia** Sleep, mysophobia Dirt and germs, **panphobia** Everything, **pedophobia** Children, **xenophobia** Strangers

posttraumatic stress disorder (PTSD) An *anxiety disorder* in which exposure to an exceptional mental or physical stressor is followed, sometimes immediately and sometimes not until 3 months or more after the stress, by persistent reexperiencing of the event, avoidance of stimuli associated with the trauma or numbing of general responsiveness, and manifestations of increased arousal. The trauma typically includes experiencing, witnessing, or confir(-iting an event that involves actual or threatened death or injury, or a threat to the physical integrity of oneself or others, with an immediate reaction of intense fear, helplessness, or horror.

Reexperiencing the trauma may take several forms: recurrent, intrusive, and distressing recollections (images, thoughts, or perceptions) of the event; recurrent distressing dreams of the event; sudden feeling as if the event were recurring or being relived (including dissociative flashback episodes); or intense psychological distress or physiological reactivity if exposed to internal or external cues that symbolize or resemble some part of the event.

The affected person tries to avoid thoughts or feelings associated with the event and anything that might arouse recollection of it. There may be *amnesia* for an important aspect of the trauma. The person may lose interest in significant activities, feel detached or estranged from others, or have a sense of a foreshortened future.

The person may have difficulty falling or staying asleep, be irritable or have angry outbursts, experience problems concentrating, and have an exaggerated startle response.

schizophrenia A group of idiopathic *psychotic disorders* characterized by both positive and negative *symptoms* associated with disturbance in one or more major areas of functioning such as work, academic development or achievement, interpersonal relations, and self-care. Positive symptoms include *delusions*, which may be bizarre in nature; hallucinations, especially auditory; disorganized speech, inappropriate affect, and disorganized behavior. Negative symptoms include flat affect, *avolition*, *alogia*, and *anhedonia*. Duration is variable: ICD-10 requires that continuous signs of the disturbance persist for at least 1 month; DSM-IV requires a minimum of 6 months.

separation anxiety disorder A disorder with onset before the age of 18 consisting of inappropriate *anxiety* concerning separation from home or from persons to whom the child is attached. Among the *symptoms* that may be seen are unrealistic concern about harm befalling or loss of major attachment figures-, refusal to go to school (school phobia) in order to stay at home and maintain contact with this figure; refusal to go to *sleep* unless close to this person; clinging; nightmares about the theme of separation; and development of physical symptoms or mood changes (apathy, *depression*) when separation occurs or is anticipated.

sleep terror disorder One of the *parasomnias* characterized by *panic* and confusion when abruptly awakening from *sleep*. This usually begins with a scream and is accompanied by intense *anxiety*. The person is often confused and disoriented after awakening. No detailed dream is recalled, and there is *amnesia* for the episode. Sleep terrors typically occur during the first third of the major sleep episode. Contrast with *nightmare disorder*.

steroids, anabolic Synthetic derivatives of testosterone used medically to promote protein anabolism. They can be drugs of abuse used to aid in body building. They sometimes produce an initial sense of well-being replaced after repeated use by lack of energy, irritability, and unhappiness. Continued use may lead to such serious complications as severe *depression*, outbursts of violence, and liver disease.

systematic desensitization A *behavior therapy* procedure widely used to modify behaviors associated with *phobias*. The procedure involves the construction of a hierarchy of anxiety-producing stimuli by the subject, and gradual presentation of the stimuli until they no longer produce anxiety. Also called desensitization. See also *reciprocal inhibition*.

Tarasoff decision A California court decision that essentially imposes a duty on the therapist to warn the appropriate person or persons when the therapist becomes aware that the patient may present a risk of harm to a specific person or persons.

thought disorder A disturbance of speech, communication, or content of thought, such as *delusions*, *ideas of reference*, poverty of thought, *flight of ideas*, *preservation*, *loosening of associations*, and so forth. A thought disorder can be caused by a functional emotional disorder or an organic condition. A formal thought disorder is a disturbance in the form of thought rather than in the content of thought (e.g., loosening of associations).

tic An involuntary, sudden, rapid, recurrent, nonrhythmic stereotyped motor movement or vocalization. A tic may be an expression of an emotional conflict, the result of neurologic disease, or an effect of a drug (especially a stimulant or other *dopamine agonist*).

tic disorders In DSM-IV, this category includes *Tourette's disorder*, chronic motor or vocal tic disorder, transient tic disorder, and tic disorder not otherwise specified; all beginning before the age of 18 years. Chronic tics may occur many times a day, nearly every day, or intermittently over a period of more than a year. Transient tics do not persist for longer than 12 consecutive months.

Tourette's disorder A *tic disorder* consisting of multiple motor and vocal tics that occur in bouts, either concurrently or separately, almost every day or intermittently over a period of more than 12 months.

trichotillomania Pathological hair pulling that results in noticeable hair loss. As in other *impulse control disorders*, an increasing sense of tension or affective arousal immediately precedes an episode of hair pulling, which is then followed by a sense of pleasure, gratification, or relief

Glossary of Acronyms and Laws For Special Educators Of Students with Emotional/Behavioral Disorders*

A	
AA	ACHIEVEMENT AGE
	ALCOHOLICS ANONYMOUS
AABT	ASSOCIATION FOR THE ADVANCEMENT OF BEHAVIOR THERAPY
AACAP	AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY
ADA	ALCOHOL AND DRUG ABUSE
AASA	AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS
ABA	AMERICAN BAR ASSOCIATION
	APPLIED BEHAVIOR ANALYSIS
	ASSOCIATION FOR BEHAVIOR ANALYSIS
A-B-C	ANTECEDENT-BEHAVIOR-CONSEQUENCE
A-B-C-D	ACTIVATING EVENT-BELIEFS-CONSEQUENCES-DISPUTATION (RATIONAL EMOTIVE THERAPY)
ABLE	ADULT BASIC LEARNING EXAMINATION, 2nd ed (KARLSEN & GARDNER)
ACA	AMERICAN COUNSELING ASSOCIATION
ACCH	ASSOCIATION FOR THE CARE OF CHILDREN'S HEALTH
ACLD	ASSOCIATION FOR CHILDREN WITH LEARNING DISABILITIES
ADA	AMERICANS WITH DISABILITIES ACT (P.L. 101-336,1990)
ADAA	ANTI-DRUG ABUSE ACT (P.L. 100-790,1988)
ADD	ATTENTION DEFICIT DISORDER
ADDES	ATTENTION DEFICIT DISORDER EVALUATION SCALE (MCCARNEY)
ADHD	ATTENTION DEFICIT/HYPERACTIVITY DISORDER
AE	AGE EQUIVALENT
AFDC	AID TO FAMILIES WITH DEPENDENT CHILDREN
AFT	AMERICAN FEDERATION OF TEACHERS
AG	ATTORNEY GENERAL
AMI	ALLIANCE FOR THE MENTALLY ILL
AMI-CAN	ALLIANCE FOR THE MENTALLY ILL-CHILD AND ADOLESCENT NETWORK
AOA	AMERICAN ORTHOPSYCHIATRIC ASSOCIATION
AOM	ASSURANCE OF MASTERY
AP	ADVANCED PLACEMENT

* Compiled by the Institute for Adolescents With Behavioral Disorders

APA AMERICAN PSYCHIATRIC ASSOCIATION
AMERICAN PSYCHOLOGICAL ASSOCIATION
APE ADAPTIVE PHYSICAL EDUCATION
ARC ASSOCIATION FOR RETARDED CITIZENS
ARRC AREA REGIONAL RESOURCE CENTER
ASA AUTISM SOCIETY OF AMERICA
ASCD ASSOCIATION FOR SUPERVISION AND CURRICULUM DEVELOPMENT
AVA AMERICAN VOCATIONAL ASSOCIATION
AYPF AMERICAN YOUTH POLICY FORUM

B

BBRS BURKS'BEHAVIOR RATING SCALES
BD BEHAVIOR/BEHAVIORAL DISORDER/DISORDERED
BDRS BEHAVIOR DIMENSIONS RATING SCALE (BULLOCK & WILSON)
BES BEHAVIOR EVALUATION SCALES (MCCARNEY, LEIGH & CORNBLEET)
BIA BUREAU OF INDIAN AFFAIRS
BIP BEHAVIOR INTERVENTION PLAN
BPC BEHAVIOR PROBLEM CHECKLIST (QUAY & PETERSON), [(R)BPC -REVISED)
BMOD BEHAVIOR MODIFICATION
BOT BOARD OF TEACHING
BP BEHAVIOR PROBLEM(S)
BRP-2 BEHAVIOR RATING PROFILE (BROWN & HAMMILL)
BUO BEHAVIOR UNIT OBSERVATION
BVMGT BENDER VISUAL-MOTOR GESTALT TEST

C

CA CHRONOLOGICAL AGE
CADCA COMMUNITY ANTI-DRUG COALITION OF AMERICA
CAI CAREER ASSESSMENT INVENTORY
C&I CURRICULUM AND INSTRUCTION
CAI CAREER ASSESSMENT INVENTORY
CAP CLIENT ASSISTANCE PROGRAM
COMMUNITY ACTION PROGRAM
CAPP COLLABORATION AMONG PARENTS & HEALTH PROFESSIONALS
CASE COUNCIL FOR ADMINISTRATORS OF SPECIAL EDUCATION (CEC)
CASSP CHILD & ADOLESCENT SERVICE SYSTEM PROGRAM

CAT CALIFORNIA ACHIEVEMENT TEST
CHILDREN'S APPERCEPTION TEST
COGNITIVE ABILITIES TEST
CONSULTATION ASSISTANCE TEAM

CBA CURRICULUM-BASED ASSESSMENT

CBCL CHILD BEHAVIOR CHECKLIST (ACHENBACH)

CBE CURRICULUM-BASED EVALUATION

CBM CURRICULUM-BASED MEASUREMENT

CCBD COUNCIL FOR CHILDREN WITH BEHAVIORAL DISORDERS (CEC)

CCSSO COUNCIL OF CHIEF STATE SCHOOL OFFICERS

CD CHEMICALLY DEPENDENT
CONDUCT DISORDER

CDC CENTER FOR DISEASE CONTROL

CDF CHILDREN'S DEFENSE FUND

CDT CHILD DEVELOPMENT TECHNICIAN

CE CAREER EDUCATION

CEA CORRECTIONAL EDUCATION ASSOCIATION

CEC COUNCIL FOR EXCEPTIONAL CHILDREN

CEDS COUNCIL FOR EDUCATIONAL DIAGNOSTIC SERVICES (CEC)

CER CONDITIONED EMOTIONAL RESPONSE

CEU CONTINUING EDUCATION UNITS

CFR CODE OF FEDERAL REGULATIONS

CFS CHILDREN AND FAMILY SERVICES

CHADD CHILDREN WITH ATTENTION DEFICIT DISORDER

CHEN COMMUNITY HEALTH EDUCATION NETWORK

CHINS CHILDREN IN NEED OF SERVICES

CHIPS CHILDREN IN NEED OF PROTECTIVE SERVICES

CMHC COMMUNITY MENTAL HEALTH CENTER

CMHRS COMMUNITY MENTAL HEALTH REPORTING SYSTEM

CMHS CENTER FOR MENTAL HEALTH SERVICES

CMHSP CHILDREN'S MENTAL HEALTH SERVICES PROGRAM (P.L. 102-321)

CLD CULTURALLY AND LINGUISTICALLY DIVERSE

CLDES CULTURALLY AND LINGUISTICALLY DIVERSE EXCEPTIONAL STUDENTS

CNCS CORPORATION FOR NATIONAL AND COMMUNITY SERVICE

CNE CRITERION OF THE NEXT ENVIRONMENT

CNS CENTRAL NERVOUS SYSTEM

COBRA CONSOLIDATED OMNIBUS BUDGET RECONCILIATION ACT (1985-MEDICAID)
 COH COMMITTEES OF THE HANDICAPPED
 COTA CERTIFIED OCCUPATIONAL THERAPISTS ASSISTANT
 CPS CHILD PROTECTIVE SERVICES
 CR CONDITIONED RESPONSE
 CRF CONTINUOUS REINFORCEMENT SCHEDULE
 CRS CONNERS' RATING SCALES
 CS CONDITIONED STIMULUS
 CSAVR COUNCIL OF STATE ADMINISTRATORS OF VOCATIONAL REHABILITATION
 CS-CS CHILDREN'S SELF-CONCEPT SCALE (PIERS-HARRIS)
 CSE COMMITTEE ON SPECIAL EDUCATION
 CSP COMMUNITY SUPPORT PROGRAM
 CSPD COMPREHENSIVE SYSTEM OF PERSONNEL DEVELOPMENT
 CSSA COMMUNITY SOCIAL SERVICES ACT
 CSSP COMMUNITY SOCIAL SERVICES PROGRAM
 CST CHILD STUDY TEAM
 CTIC COMMUNITY TRANSITION INTERAGENCY COMMITTEE
 CWLA CHILD WELFARE LEAGUE OF AMERICA

D

DAP DRAW-A-PERSON TEST, GOODENOUGH
 DAPQ DRAW-A-PERSON QUESTIONNAIRE (KARP)
 DAP:SPED DRAW-A-PERSON: SCREENING PROCEDURE FOR EMOTIONAL
 DISTURBANCE(NAGLIERI, McNEISH & BARDOS)
 D/APE DEVELOPMENTAL ADAPTED (ADAPTIVE) PHYSICAL EDUCATION
 DBRS DEVEREUX BEHAVIOR RATING SCALES (NAGLIERE, LEBUFFE & PFEIFFER)
 DISRUPTIVE BEHAVIOR RATING SCALE (ERFORD)
 DCCD DIVISION FOR CHILDREN WITH COMMUNICATION DISORDERS (CEC)
 DCDT DIVISION ON CAREER DEVELOPMENT AND TRANSITION (CEC)
 DD DEVELOPMENTAL DISABILITIES
 Dually Diagnosed (e.g. EBD & CHEMICAL ABUSE)
 DDEL DIVISION FOR CULTURALLY AND LINGUISTICALLY DIVERSE EXCEPTIONAL
 LEARNERS(CEC)
 DEC DIVISION OF EARLY CHILDHOOD (CEC)
 DHS DEPARTMENT OF HUMAN SERVICES
 DISES DIVISION OF INTERNATIONAL SPECIAL EDUCATION SERVICES (CEC)

DJT DEPARTMENT OF JOBS AND TRAINING
DLD DIVISION FOR LEARNING DISABILITIES (CEC)
DODDS DEPARTMENT OF DEFENSE DEPENDENTS
DOE DEPARTMENT OF EDUCATION
DOL DEPARTMENT OF LABOR
DOT DICTIONARY OF OCCUPATIONAL TITLES
DPHD DIVISION FOR PHYSICAL AND HEALTH DISABILITIES (CEC)
DO DEVELOPMENTAL QUOTIENT
DR(O,A,H,I) DIFFERENTIAL REINFORCEMENT PROCEDURES (OTHER, ALTERNATE, HIGH RATES, INCOMPATIBLE --BEHAVIORS)
DREDF DISABILITY RIGHTS EDUCATION AND DEFENSE FUND
DRG DIAGNOIS-RELATED GROUP CLASSIFICATION SYSTEM
DRS DEPARTMENT OF REHABILITATION SERVICES
DSM-III-R DIAGNOSTIC AND STATISTICAL MANUAL-111-REVISED OF MENTAL DISORDERS (1994 DSM-IV)
DT/CEP DIFFERENTIAL TEST OF CONDUCT AND EMOTIONAL PROBLEMS (KELLY)
DTLA-3 DETROIT TESTS OF LEARNING APTITUDE-3rd EDITION (HAMMILL)
DTP DAY TREATMENT PROGRAMS
DVH DIVISION ON VISUAL HANDICAPS (CEC)
DVR DIVISION OF VOCATIONAL REHABILITATION (DEPT OF JOBS & TRAINING)

E

E EXPERIMENTER
EA EDUCATIONAL AGE
EAHC EDUCATION FOR ALL HANDICAPPED CHILDREN ACT (P.L. 94-142,1975) AMENDED (P.L. 99-457,1986-INFANTS/TODDLER PROGRAMS)
EBD EMOTIONAL BEHAVIORAL DISORDERS
EBS ELECTRICAL BRAIN STIMULATION
ECFE EARLY CHILDHOOD FAMILY EDUCATION
ECSE EARLY CHILDHOOD SPECIAL EDUCATION
EC EMOTIONALLY CONFLICTED
ECT ELECTRO-CONVULSIVE THERAPY
ED EDUCATION-DEPARTMENT EMOTIONALLY DISTURBED
EDGAR EDUCATION GENERAL ADMINISTRATIVE REGULATIONS
EEG ELECTROENCEPHALOGRAM
EEOC EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (U.S.)

EH EMOTIONALLY HANDICAPPED
EHA EDUCATION OF THE HANDICAPPED ACT (PART B, PL 94-142)
EI EMOTIONALLY IMPAIRED
EIC EARLY INTERVENTION COMMITTEE
EKG ELECTROCARDIOGRAM
EMH EDUCABLE MENTALLY HANDICAPPED
EMR EDUCABLE MENTALLY RETARDED
EPSDT' EARLY AND PERIODIC SCREENING, DIAGNOSIS AND TREATMENT
ERIC EDUCATIONAL RESEARCH AND IMPROVEMENT CENTER
EDUCATIONAL RESOURCE INFORMATION CENTER
ERT EDUCATIONAL RESOURCE TEACHER
ESEA ELEMENTARY AND SECONDARY EDUCATION ACT (I 965)
ESL ENGLISH AS A SECOND LANGUAGE
ESOL ENGLISH FOR SPEAKERS OF OTHER LANGUAGES
ETA EMPLOYMENT AND TRAINING ADMINISTRATION (DEPARTMENT OF LABOR)
ETS EDUCATIONAL TESTING SERVICE
EXT EXTINCTION SCHEDULE

F

FA FAMILIES ANONYMOUS
FAE FETAL ALCOHOL EFFECT
FAPE FREE APPROPRIATE PUBLIC EDUCATION
FAS FETAL ALCOHOL SYNDROME
FCSS FAMILY COMMUNITY SUPPORT SERVICES
FERPA FAMILY EDUCATIONAL RIGHTS and PRIVACY ACT
FFCM FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH
FFTA FOSTER FAMILY-BASED TREATMENT ASSOCIATION
FI FIXED INTERVAL REINFORCEMENT SCHEDULES
FICC FEDERAL INTERAGENCY COORDINATING COUNCIL
FR FIXED RATIO REINFORCEMENT SCHEDULES
FSA FAMILY SERVICES OF AMERICA
FTE FULL TIME EQUIVALENCY (STAFF POSITION)
FY FISCAL YEAR
FYSB FAMILY & YOUTH SERVICE BUREAU (U.S. DEPT. OF HEALTH & HUMAN SERVICES)

G

GA	GENERAL ASSISTANCE
GA/EA	GENERAL ASSISTANCE/EMERGENCY ASSISTANCE
GATB	GENERAL APTITUDE TEST BATTERY
GATE	GIFTED AND TALENTED EDUCATION
GE	GRADE EQUIVALENT
GED	GENERAL EDUCATION DIPLOMA
GGI	GUIDED GROUP INTERACTION
GLD	GENERAL LEARNING DISABILITY
GSR	GALVANIC SKIN RESPONSE

H

HCPA	HANDICAPPED CHILDREN'S PROTECTION ACT (P.L. 99-372, 1986, AMENDMENT TO P.L. 94-142, ATTORNEYS FEES)
HEATH	HIGHER EDUCATION AND THE HANDICAPPED
HECB	HIGHER EDUCATION COORDINATING BOARD
HEW	HEALTH EDUCATION AND WELFARE
HF	HOUSE FILE
HHS	HEALTH AND HUMAN SERVICES
Hi	HEARING IMPAIRED
HIO	HEALTH INSURANCE ORGANIZATION
HMO	HEALTH MAINTENANCE ORGANIZATION
HOTS	HIGHER ORDER THINKING SKILLS (REMEDIAL)
HTP	HOUSE TREE PERSON TEST

I

IA	INDUSTRIAL ARTS
IARET	INTERNATIONAL ASSOCIATION FOR THE RIGHT TO EFFECTIVE TREATMENT
ICC	INTERAGENCY COORDINATING COUNCIL
ICD-9-CM	INTERNATIONAL CLASSIFICATION SYSTEM-9-CLINICAL MODIFICATION (1979)
ICF	INTERMEDIATE CARE FACILITY
ICP	INDIVIDUAL CAREER PLAN
IDEA	INDIVIDUALS WITH DISABILITIES EDUCATION ACT (P.L.101-457,1990, AMENDMENTS TO P.L. 94-142)
IDT	INTER-DISCIPLINARY TEAM

IEE INDEPENDENT EDUCATIONAL EVALUATION
IEIC INTERAGENCY EARLY INTERVENTION COMMITTEE
IEP INDIVIDUALIZED EDUCATION PLAN/PROGRAM
IEU INTERMEDIATE EDUCATIONAL UNIT
IFCSP INDIVIDUAL FAMILY COMMUNITY SUPPORT PLAN
IFSP INDIVIDUALIZED FAMILY SERVICES PLAN
IHE INSTITUTION OF HIGHER EDUCATION
IHP INDIVIDUAL HABILITATION PLAN
IIP INDIVIDUALIZED INSTRUCTIONAL PLAN
ILP INDIVIDUAL LEARNING PLAN
IMS INFORMATIONAL MANAGEMENT SYSTEM INSTRUCTIONAL MANAGEMENT SYSTEM
IPP INDIVIDUALIZED PROGRAM PLAN
IQ INTELLIGENCE QUOTIENT
I&R INFORMATION AND REFERRAL
ISD INDEPENDENT SCHOOL DISTRICT
ISP INDIVIDUALIZED SERVICES PLAN
ITBS IOWA TEST OF BASIC SKILLS
ITP INDIVIDUALIZED TRANSITION PLAN INDIVIDUALIZED TREATMENT PLAN
ITPA ILLINOIS TEST OF PSYCHOLINGUISTIC ABILITY
IWRP INDIVIDUALIZED WRITTEN REHABILITATION PLAN

J

JD JUVENILE DELINQUENT
JIT JOB IMPROVEMENT TARGET
JJ JUVENILE JUSTICE
JJDPA JUVENILE JUSTICE AND DELINQUENCY PREVENTION ACT (P.L. 93-415,1974)
JOBS JOB OPPORTUNITIES AND BASIC SKILLS
JTPA JOB TRAINING PARTNERSHIP ACT (P.L. 97-300,1983)
JWB JUVENILE WELFARE BOARD

K

KTEA KAUFMAN TEST OF EDUCATIONAL ACHIEVEMENT

L

LAC	LOCAL ADVISORY COUNCIL (MENTAL HEALTH)
LCC	LOCAL COORDINATING COUNCIL (MENTAL HEALTH)
LCP	LICENSED CONSULTING PSYCHOLOGIST
LD	LEARNING DISABLED
LEA	LOCAL EDUCATION AGENCY
LEP	LIMITED ENGLISH PROFICIENCY
LI	LOW INCIDENCE HANDICAPPING CONDITION
LIA	LOCAL INTERAGENCY AGREEMENT
LIPS	LEITER INTERNATIONAL PERFORMANCE SCALE
LRA	LEAST RESTRICTIVE ALTERNATIVE
LRE	LAW RELATED EDUCATION LEAST RESTRICTIVE ENVIRONMENT
LSD	LYSERGIC ACID DIETHYLAMIDE
LSI	LIFE SPACE INTERVIEWING (OR INTERVENTION)
LST	LEARNER SUPPORT TEAM
LSW	LICENSED SOCIAL WORKER
LTM	LONG TERM MEMORY

M

MA	MEDICAL ASSISTANCE MENTAL AGE
MAT7	METROPOLITAN ACHIEVEMENT TEST 7th ed (BALOW, FARR & HOGAN)
MBD	MINIMAL BRAIN DYSFUNCTION
MCGF-DA	MULTICULTURAL GENDER FAIR-DISABILITY AWARE
MCH	MATERNAL AND CHILD HEALTH
MDC	MULTI-DISCIPLINARY COMMITTEE
MDT	MULTI-DISCIPLINARY TEAM
MH	MENTAL HANDICAP
MI	MENTAL ILLNESS/MENTALLY ILL MENTALLY IMPAIRED
MMPI	MINNESOTA MULTIPHASIC PERSONALITY INVENTORY
MR	MENTALLY RETARDED

N

NACA	NATIONAL ASSOCIATION OF CHILD ADVOCATES
NACHC	NATIONAL ASSOCIATION OF COMMUNITY HEALTH CENTERS
NADAP	NATIONAL ASSOCIATION ON DRUG ABUSE PROBLEMS, INC
NAESP	NATIONAL ASSOCIATION OF ELEMENTARY SCHOOL PRINCIPALS
NAHC	NATIONAL ASSOCIATION OF HOMES FOR CHILDREN
NAMI	NATIONAL ALLIANCE FOR THE MENTALLY ILL
NAPAS	NATIONAL ASSOCIATION OF PROTECTION AND ADVOCACY SYSTEMS
NAPPH	NATIONAL ASSOCIATION OF PRIVATE PSYCHIATRIC HOSPITALS
NAPSEC	NATIONAL ASSOCIATION OF PRIVATE SCHOOLS FOR EXCEPTIONAL CHILDREN
NAPTCC	NATIONAL ASSOCIATION OF PSYCHIATRIC TREATMENT CENTERS FOR CHILDREN
NARF	NATIONAL ASSOCIATION OF REHABILITATION FACILITIES
NASADAD	NATIONAL ASSOCIATION OF STATE ALCOHOL AND DRUG ABUSE DIRECTORS
NASB	NATIONAL ASSOCIATION OF SCHOOL BOARDS
NASBE	NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION
NASMHPD	NATIONAL ASSOCIATION OF STATE MENTAL HEALTH PROGRAM DIRECTORS
NASDSE	NATIONAL ASSOCIATION OF STATE DIRECTORS OF SPECIAL EDUCATION
NASNSA	NATIONAL ASSOCIATION OF SPECIAL NEEDS STATE ADMINISTRATORS
NASP	NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS
NASDE	NATIONAL ASSOCIATION OF STATE DIRECTORS OF SPECIAL EDUCATION
NASSP	NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS
NASW	NATIONAL ASSOCIATION OF SOCIAL WORKERS
NAVESNP	NATIONAL ASSOCIATION OF VOCATIONAL EDUCATION SPECIAL NEEDS PERSONNEL
NCAA	NORTH CENTRAL ACCREDITATION ASSOCIATION
NCAS	NATIONAL COALITION OF ADVOCATES FOR STUDENTS
NCATE	NATIONAL COUNCIL FOR ACCREDITATION OF TEACHER EDUCATION
NCBE	NATIONAL CLEARINGHOUSE FOR BILINGUAL EDUCATION
NCCAFV	NATIONAL COUNCIL ON CHILD ABUSE AND FAMILY VIOLENCE
NCJFC	NATIONAL COUNCIL OF JUVENILE AND FAMILY COURT JUDGES
NCLH	NATIONAL CENTER FOR LAW AND THE HANDICAPPED
NDPC	NATIONAL DROPOUT PREVENTION CENTER
NEA	NATIONAL EDUCATION ASSOCIATION

NFB NATIONAL FEDERATION OF THE BLIND
NFP NOT-FOR-PROFIT
NICHCY NATIONAL INFORMATION CENTER FOR HANDICAPPED CHILDREN AND YOUTH
NIDA NATIONAL INSTITUTE ON DRUG ABUSE
NIDDR NATIONAL INSTITUTE ON DISABILITY REHABILITATION RESEARCH
NIH NATIONAL INSTITUTE OF HEALTH
NIMH NATIONAL INSTITUTE OF-MENTAL HEALTH
NJDA NATIONAL JUVENILE DETENTION ASSOCIATION
NMHA NATIONAL MENTAL HEALTH ASSOCIATION
NMFCA NATIONAL MENTAL HEALTH CONSUMERS ASSOCIATION
NMSA NATIONAL MIDDLE SCHOOL ASSOCIATION
NNPC NATIONAL NETWORK OF PARENT CENTERS
NNRYS NATIONAL NETWORK OF RUNAWAY AND YOUTH SERVICES
NOCCWA NATIONAL ORGANIZATION OF CHILD CARE WORKERS ASSOCIATION
NOICC NATIONAL OCCUPATIONAL INFORMATION COORDINATING COMMITTEE
NORD NATIONAL ORGANIZATION FOR RARE DISORDERS
NPR NATIONAL PERCENTILE RANK
NRCCAN NATIONAL RESOURCE CENTER FOR CHILD ABUSE AND NEGLECT
NSAC NATIONAL SOCIETY FOR CHILDREN & ADULTS WITH AUTISM
NTA NATIONAL TREATMENT ASSOCIATION

O

O OBSERVER ORGANISM
OBE OUTCOME-BASED EDUCATION
OCD OBSESSIVE COMPULSIVE DISORDER
OCR OFFICE OF CIVIL RIGHTS
ODD OPPOSITIONAL DEFIANT DISORDER
OERI OFFICE OF EDUCATIONAL RESEARCH AND IMPROVEMENT
OH ORTHOPEDICALLY HANDICAPPED
OHI OTHER HEALTH IMPAIRMENTS
OJJDP OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION
OJT ON-THE-JOB TRAINING
OMB OFFICE OF MANAGEMENT AND BUDGET
OSEP OFFICE OF SPECIAL EDUCATION PROGRAMS (FEDERAL)
OSERS OFFICE OF SPECIAL EDUCATION & REHABILITATIVE SERVICES

OT OCCUPATIONAL THERAPIST/THERAPY

P

P PERCEPTION
PERSON
PA PARENTS ANONYMOUS
P&A PROTECTION AND ADVOCACY (SYSTEM)
PAC PARENT ADVISORY COMMITTEE
PAT PICTURE ARRANGEMENT TEST
PCA PERSONAL CARE ASSISTANT/ATTENDANT
PDD PERVASIVE DEPRIVATION DISORDER PERVASIVE DEVELOPMENTAL DISORDER
PDR PHYSICIANS DESK REFERENCE
PE PHYSICAL EDUCATION
PH PHYSICALLY HANDICAPPED
PHC PUPILS WITH HANDICAPPING CONDITIONS
PHNS PUBLIC HEALTH NURSING SERVICES
PIAT PEABODY INDIVIDUAL ACHIEVEMENT TEST
PINS PERSON IN NEED OF SUPERVISION
PKU PHENYLKETONURIA
P.L. PUBLIC LAW
PMC PARENT OF A MINOR CARETAKER (FOR AFCD)
POHI PHYSICAL AND OTHER HEALTH IMPAIRED
PPC POSITIVE PEER CULTURE
PPST PRE-PROFESSIONAL SKILL TEST
PPT PUPIL PERSONNEL TEAM
PPVT PEABODY PICTURE VOCABULARY TEST
PQ PERCEPTUAL QUOTIENT
PR PERIODIC REVIEW -
PSEN PUPILS WITH SPECIAL EDUCATION NEEDS
PSS PRESCHOOL SCREENING PROGRAM
PT PHYSICAL THERAPIST,
PTA PARENT TEACHER ASSOCIATION
PTIC PARENT TRAINING AND INFORMATION CENTER
PTO PARENT TEACHER ORGANIZATION

PTSA	PARENT TEACHER STUDENT ASSOCIATION
PTSD	POST TRAUMATIC STRESS DISORDER
PY	PLANNING YEAR
Q	
Q&A	QUESTION AND ANSWER
R	
R	RESPONSE
R+	REINFORCEMENT-POSITIVE [UPPER CASE=PRIMARY; LOWER CASE (r)= SECONDARY]
R-	REINFORCEMENT-NEGATIVE
RCF	RESIDENTIAL CARE FACILITY
R&D	RESEARCH AND DEVELOPMENT
RE-ED	RE-EDUCATION
RET	RATIONAL EMOTIVE THERAPY
RFP	REQUEST FOR PROPOSAL
RHVA	RUNAWAY AND HOMELESS YOUTH ACT (P.L. 96-509.1980)
RISC	REGIONAL INTERAGENCY SYSTEMS CHANGE PROJECTS
RSA	REHABILITATION SERVICES ADMINISTRATION
RPM	RAVEN'S PROGRESSIVE MATRICES APM ADVANCED PROGRESSIVE MATRICES CPM COLOURED PROGRESSIVE MATRICES SPM STANDARD PROGRESSIVE MATRICES
RT	RECREATION THERAPY
RTC	RESIDENTIAL TREATMENT CENTER
S	
SAI	SCHOOL ABILITIES INDEX
SAMHSA	SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION
S-BIS	STANFORD-BINET INTELLIGENCE SCALE (TERMAN & MERRILL)
SBST	SCHOOL-BASED SUPPORT TEAM
SD	DISCRIMINATIVE STIMULUS
SAT	SCHOLASTIC APTITUDE TEST
SCH	SERVICES TO CHILDREN WITH HANDICAPS STATE COUNCIL FOR THE HANDICAPPED
SD	STANDARD DEVIATION

SDE	STATE DEPARTMENT OF EDUCATION
SE	SPECIAL EDUCATION SUPPORTED EMPLOYMENT
SEA	STATE EDUCATION AGENCY
SEAC	SPECIAL EDUCATION ADVISORY COMMITTEES
SED	SERIOUS EMOTIONAL DISTURBANCE SERIOUSLY EMOTIONALLY DISTURBED
SEDNET	SERIOUS EMOTIONAL DISTURBANCE NETWORK SPECIAL EDUCATION NETWORK TEAM
SEEC	SPECIAL EDUCATION EARLY CHILDHOOD
SEP	SPECIAL EDUCATION PROGRAMS (OFFICE OF)
SERT	SPECIAL EDUCATION RESOURCE TEACHER
SF	SENATE FILE
SH	SEVERELY HANDICAPPED
SIB	SELF-INJURIOUS BEHAVIOR
SIDS	SUDDEN INFANT-DEATH SYNDROME
SIMS	SYSTEMATIC INSTRUCTIONAL MANAGEMENT STRATEGIES
SIT-R	SLOSSON INTELLIGENCE TEST-REVISED
SLA	SUPPORTED LIVING ARRANGEMENT
SLBP	SPECIAL LEARNING AND BEHAVIOR PROBLEMS
SLD	SPECIAL LEARNING DISABILITY SPECIFIC LEARNING DISABILITY
SM	SOCIALLY MALADJUSTED
SMHRCY	STATE MENTAL HEALTH REPRESENTATIVE FOR CHILDREN AND YOUTH
SOP	STATE OPERATED PROGRAMS
SPED	SPECIAL EDUCATION
S ^R	REINFORCING STIMULI
SR, S-R	STIMULUS-RESPONSE
SSA	SOCIAL SECURITY ADMINISTRATION
SSBD	SYSTEMATIC SCREENING FOR BEHAVIOR DISORDERS (WALKER)
SSI	SUPPLEMENTAL SECURITY INCOME
SST	STUDENT SUPPORT TEAM
ST	SPEECH THERAPIST
STAR	SYSTEM OF TECHNOLOGY TO ACHIEVE RESULTS
STIC	STATE TRANSITION INTERAGENCY COMMITTEE
STM	SHORT TERM MEMORY

SW SHELTERED WORKSHOP
SOCIAL WORKER

T

TA TECHNICAL ASSISTANCE
TRANSACTIONAL ANALYSIS

TAG THE ASSOCIATION FOR THE GIFTED (CEC)

TAM TECHNOLOGY AND MEDIA DIVISION (CEC)

TAPP TECHNICAL ASSISTANCE TO PARENT PROGRAMS

TASH THE ASSOCIATION FOR PERSONS WITH SEVERE HANDICAPS

TAT TEACHER ASSISTANCE TEAM
THEMATIC APPERCEPTION TEST

TBI TRAMATIC BRAIN INJURY

TDD TELECOMMUNICATION DEVICE FOR THE DEAF

TED TEACHER EDUCATION DIVISION (CEC)

TMH TRAINABLE MENTALLY HANDICAPPED

TMR TRAINABLE MENTALLY RETARDED

TO, T-0 TIME OUT / TIME-OUT

TS-CS TENNESSEE SELF-CONCEPT SCALE

TSES TOTAL SPECIAL EDUCATION SYSTEM

TT TECHNICAL TUTOR

TTY TELETYPEWRITER

U

UAP UNIVERSITY AFFILIATED PROGRAM

UPC UNITED CEREBAL PALSY

UCR UNCONDITIONED RESPONSE

UCS UNCONDITIONED STIMULUS

USOE UNITED STATES OFFICE OF EDUCATION

V

VABS VINELAND ADAPTIVE BEHAVIOR SCALE

VAC VOCATIONAL ADJUSTMENT COUNSELOR

VE VOCATIONAL EDUCATION

VH VISUALLY HANDICAPPED

VI	VARIABLE INTERVAL REINFORCEMENT SCHEDULES
	VISUAL IMPAIRMENT
VMI	DEVELOPMENTAL TEST OF VISUAL MOTOR INTEGRATION (BERRY & BUKTENICA)
VR	VARIABLE RATIO REINFORCEMENT SCHEDULES VOCATIONAL REHABILITATION
VRD	VARIABLE-RESPONSE-DURATION SCHEDULE
WAD	WHEPMAN AUDITORY DISCRIMINATION TEST
WBPC	WALKER BEHAVIOR PROBLEM CHECKLIST
WIAT	WECHSLER INDIVIDUAL ACHIEVEMENT TEST
WIC	WOMEN INFANTS AND CHILDREN (NUTRITION PROGRAM)
WIS	WELFARE INFORMATION SYSTEM I
WISC-III	WECHSLER INTELLIGENCE SCALE FOR CHILDREN-3rd EDITION
WJ-R	WOODCOCK-JOHNSON PSYCHO-EDUCATIONAL BATTERY-REVISED
WPPSI	WECHSLER PRESCHOOL & PRIMARY SCALE OF INTELLIGENCE
WRAT-3	WIDE RANGE ACHIEVEMENT TEST (WILKINSON)
WS	WAIVERED SERVICES

Z

Z	STANDARD TEST SCORE
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LAWS

P.L. 89-313	EDUCATION TO IMPROVE OPPORTUNITIES FOR LOW-INCOME UNDERACHIEVERS (CHAPTER 1, TITLE 1)
P.L. 91-230	THE EDUCATION OF THE HANDICAPPED ACT, 1970
P.L. 90-247	PRIVACY RIGHTS OF PARENTS AND STUDENTS IN STATE ADMINISTERED PROGRAMS
P.L. 93-112	SECTION 503-AFFIRMATIVE ACTION FOR EMPLOYMENT, AND 504-PROHIBITS DISCRIMINATION BASED ON HANDICAP, OF REHABILITATION ACT. 1973
P.L. 93-415	JUVENILE JUSTICE AND DELINQUENCY PREVENTION ACT, 1974
P.L. 94-142	EDUCATION FOR ALL HANDICAPPED CHILDREN'S ACT, 1975
P.L. 94-482	VOCATIONAL EDUCATION AMENDMENTS, 1976
P.L. 97-35	CHAPTER 1 CONSOLIDATION AND IMPROVEMENT ACT, 1982
P.L. 97-248	TAX EQUITY AND FISCAL RESPONSIBILITY ACT, 1982
P.L. 97-300	JOB TRAINING PARTNERSHIP ACT, 1983
P.L. 98-524	CARL PERKINS ACT, 1984
P.L. 99-372	HANDICAPPED CHILDREN'S PROTECTION ACT, 1986
P.L. 99-457	EHA AMENDMENTS FOR INFANTS AND TODDLERS, 1986

P.L. 100-790 ANTI-DRUG ABUSE ACT, 1988

P.L. 101-336 AMERICANS WITH DISABILITIES ACT, 1990

P.L. 101-476 INDIVIDUALS WITH DISABILITIES ACT, 1990

P.L. 102-321 CHILDREN'S MENTAL HEALTH SERVICES PROGRAM

Children's and Adolescents' Mental Health: A Glossary of Terms

This glossary contains terms used frequently when dealing with the mental health needs of children. The list is alphabetical. Words highlighted by *italics* have their own separate definitions. The term *service* or *services* is used frequently in this glossary. The reader may wish to look up *service* before reading the other definitions. The terms in this glossary describe ideal services. This help may not be available in all communities. The Comprehensive Community Mental Health Services for Children Program, administered by the Center for Mental Health Services (CMHS), has 22 grantees in 18 States that are demonstrating these services. For more information about children's mental health issues or services, call the CMHS National Mental Health Services Knowledge Exchange Network (KEN): 1.800.789.2647.

Accessible Services - Services that are affordable, located nearby, and are open during evenings and weekends. Staff is sensitive to and incorporates individual and cultural values. Staff is also sensitive to barriers that may keep a person from getting help. For example, an adolescent may be more willing to attend a support group meeting in a church or club near home, rather than travel to a mental health center. An accessible service can handle consumer demand without placing people on a long waiting list.

Appropriate Services - Designed to meet the specific needs of each individual child and family. For example, one family may need *day treatment* services while another family may need *home-based services*. Appropriate services for one child or family may not be appropriate for another family. Usually the most appropriate services are in the child's community.

Assessment - A professional review of a child's and family's needs that is done when they first seek services from a *caregiver*. The assessment of the child includes a review of physical and mental health, intelligence, school performance, family situation, and behavior in the community. The assessment identifies the strengths of the child and family. Together, the *caregiver* and family decide what kind of treatment and supports, if any, are needed.

Caregiver - A person who has special training to help people with mental health problems.

Examples of people with this special training are social workers, teachers, psychologists, psychiatrists, and mentors.

Case Manager - An individual who organizes and coordinates services and supports for children with mental health problems and their families. (Alternate terms: service coordinator, advocate, and facilitator.)

Case Management - A service that helps people arrange *appropriate and available services* and supports. As needed, a *case manager* coordinates mental health, social work, education, health, vocational, transportation, advocacy, *respite*, and recreational services. The *case manager* makes sure that the child's and family's changing needs are met. (This definition does not apply to *managed care*.)

U.S. Department of Health and Human Services

Substance Abuse and Mental Health Services Administration w Center for Mental Health Services
5600 Fishers Lane, Room 13-103 - Rockville, Maryland 20857 -Telephone 301.443.2792
CARING FOR EVERY CHILD'S MENTAL HEALTH: Communities Together Campaign
For information about children's mental health. contact the CMHS Knowledge Exchange Network
PO Box 42490 n Washington. DC 20015 - Toll-free 1.800.789.2647 FAX 301.984.8796

Child Protective Services - Designed to safeguard the child when there is suspicion of abuse, neglect, or abandonment, or where there is no family to take care of the child. Examples of help delivered in the home include financial assistance, vocational training, homemaker services, and day care. If in-home supports are insufficient, the child may be removed from the home on a temporary or permanent basis. The goal is to keep the child with his or her family whenever possible.

Children and Adolescents at Risk for Mental Health Problems - Children at higher risk for developing mental health problems when certain factors occur in their lives or environment. Some of these factors are physical abuse, emotional abuse or neglect, harmful stress, discrimination, poverty, loss of loved one, frequent moving, alcohol and other drug use, trauma, and exposure to violence.

Continuum of Care - A term that implies a progression of services that a child would move through, probably one at a time. The more up-to-date idea is one of comprehensive services. See *systems of care* and *wraparound services*.

Coordinated Services - Child-serving organizations, along with the family, talk with each other and agree upon a *plan of care* that meets the child's needs. These organizations can include mental health, education, juvenile justice, and child welfare. *Case management* is necessary to coordinate services. (Also see *family centered services* and *wraparound services*.)

Crisis Residential Treatment Services - Short-term, round-the-clock help provided in a non-hospital setting during crisis. For example, when a child becomes aggressive and uncontrollable despite in-home support the parent can have the child temporarily placed in a crisis *residential treatment service*. The purpose of this care is to avoid *inpatient hospitalization*, to help stabilize the child, and to determine the next appropriate step.

Cultural Competence - Help that is sensitive and responsive to cultural differences. *Caregivers* are aware of the impact of their own culture and possess skills that help them provide services that are culturally appropriate in responding to people's unique cultural differences, such as race and ethnicity, national origin, religion, age, gender, sexual orientation, or physical disability. They adapt their skills to fit a family's values and customs.

Day Treatment - Day treatment includes special education, counseling, parent training, vocational training, skill building-, crisis intervention, and recreational therapy. It lasts at least 4 hours a day. Day treatment programs work with mental health, recreation, and education organizations and may be provided by them.

DSM-IV (*Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition*) - An official manual of mental health problems developed by the American Psychiatric Association. This reference book is used by psychiatrists, psychologists, social workers, and other health and mental health care providers to understand and diagnose a mental health problem. Insurance companies and health care providers also use the terms and explanations in this book when they discuss mental health problems.

Early Intervention - A process for recognizing warning signs that individuals are at risk for mental health problems and taking early action against factors that put them at risk. Early intervention can help children get better more quickly and prevent problems from becoming worse.

Emergency and Crisis Services - A group of services that are available 24 hours a day, 7 days a week, to help during a mental health emergency. When a child is thinking about suicide, these services could save his or her life. Examples: telephone crisis hotlines, crisis counseling, crisis *residential treatment services*, crisis outreach teams, and crisis respite care.

Family-Centered Services - Help designed for the specific needs of each individual child and his or her family. Children and families should not be expected to fit into services that don't meet their needs. See *appropriate services*, *coordinated services*, *wraparound services*, and *cultural competence*.

Family Support Services - Help designed to keep the family together and to cope with mental health problems that affect them. These services may include consumer information workshops, in-home supports, family therapy, parent training, crisis services, and respite care.

Home-Based Services - Help provided in a family's home for either a defined time or for as long as necessary to deal with a mental health problem. Examples include parent training, counseling, and working with family members to identify, find, or provide other help they may need. The goal is to prevent the child from being placed out of the home. (Alternate term: in-home supports.)

Independent Living Services - Support for a young person in living on his or her own and in getting a job. These services can include therapeutic group care or supervised apartment living. Services teach youth how to handle financial, medical, housing, transportation, and other daily living needs, as well as how to get along with others.

Individualized Services - Designed to meet the unique needs of each child and family. Services are individualized when the caregivers pay attention to the child's and family's needs and strengths, ages, and stages of development. See appropriate services *and family-centered services*.

Inpatient Hospitalization - Mental health treatment in a hospital setting 24 hours a day. The purpose of inpatient hospitalization is: (1) short-term treatment in cases where a child is in crisis and possibly a danger to self or others, and (2) diagnosis and treatment when the patient cannot be evaluated or treated appropriately in an outpatient setting

Managed Care - A way to supervise the delivery of health care services. Managed care may specify the caregivers that the insured family can see. It may also limit the number of visits and kinds of services that will be covered.

Mental Health - Mental health refers to how a person thinks, feels, and acts when faced with life's situations. It is how people look at themselves, their lives, and the other people in their lives; evaluate the challenges and the problems; and explore choices. This includes handling stress, relating to other people, and making decisions.

Mental Health Problems - Mental health problems are real. These problems affect one's thoughts, body, feelings, and behavior. They can be severe. They can seriously interfere with a person's life. They're not just a passing phase. They can cause a person to become disabled. Some of these disorders are known as depression, bipolar disorder (manic-depressive illness), attention deficit hyperactivity disorder, anxiety disorders, eating- disorders, schizophrenia and conduct disorder.

Mental Disorders - Another term used for mental health problems.

Mental Illnesses - This term is usually used to refer to severe mental health problems in adults.

Plan of Care - A treatment plan designed for each child or family. The caregiver(s) develop(s) the plan with the family. The plan identifies the child's and family's strengths and needs. It establishes goals and details appropriate treatment and services to meet his or her special needs.

Residential Treatment Centers - Facilities that provide treatment 24 hours a day and can usually serve more than 12 young people at a time. Children with serious emotional disturbances receive constant supervision and care. Treatment may include individual, group, and family therapy; behavior therapy; special education; recreation therapy; and medical services. Residential treatment is usually more long-term than inpatient hospitalization. Centers are also known as therapeutic group homes.

Respite Care - A service that provides a break for parents who have a child with a serious emotional disturbance. Some parents may need this help every week. It can be provided in the home or in another location. Trained parents or counselors take care of the child for a brief period of time. This gives families relief from the strain of taking care of a child with a serious emotional disturbance.

Serious Emotional Disturbance - Diagnosable disorders in children and adolescents that severely disrupt daily functioning in the home, school, or community. Some of these disorders are depression, attention-deficit/ hyperactivity, anxiety, conduct, and eating disorders. Serious emotional disturbances affect 1 in 20 young people.

Service - A type of support or clinical intervention designed to address the specific mental health needs of a child and his or her family. A service could be received once or repeated over a course of time as determined by the child, family, and service provider.

System of Care - A method of delivering mental health services that helps children and adolescents with mental health problems and their families get the full range of services in or near their homes and communities. These services must be tailored to each individual child's physical, emotional, social, and educational needs. In systems of care, local organizations work in teams to provide these services.

Therapeutic Foster Care - A home where a child with a *serious emotional disturbance* lives with trained foster parents with access to other support services. These foster parents receive special support from organizations that provide crisis intervention, psychiatric, psychological, and social work services. The intended length of this care is usually from 6 to 12 months.

Therapeutic Group Homes - Community-based, home-like settings that provide intensive treatment services to a small number of young people (usually 5 to 10 persons). These young people work on issues that require 24-hour-per-day supervision. The home should have many connections within an interagency *system of care*. Psychiatric services offered in this setting try to avoid hospital placement and to help the young person move toward a less restrictive living situation.

Transitional Services - Services that help children leave the system that provides help for children and move into adulthood and the adult service system. Help includes mental health care, *independent living services*, supported housing, vocational services, and a range of other support services.

Wraparound Services - A "full-service" approach to developing help that meets the mental health needs of individual children and their families. Children and families may need a range of community support services to fully benefit from traditional mental health services such as family therapy and special education. See *appropriate services, coordinated services, family-centered services*, and *system of care*.

Important Messages About Children's and Adolescents' Mental Health:

- Every child's mental health is important.
- Many children have mental health problems.
- These problems are real and painful and can be severe.
- Mental health problems can be recognized and treated.
- Caring families and communities working together can help.
- Information is available; call 1.800.789.2647.

For free information about children's and adolescents' mental health-including publications, references, and referrals to local and national resources and organizations---call 1.800.789.2647; TTY 301.443.9006.