Module 2 Glossary Terms

**Biopsychosocial approach:** A comprehensive set of strategies in which service providers collaborate with young people to address all aspects of their well-being: biological, psychosocial, and social/cultural.

**Empowerment:** The process of young people gaining control and mastery of their lives in order to improve equity and quality of life. Jennings and her colleagues (2006) identified six dimensions of critical youth empowerment: 1) a welcoming safe environment; 2) meaningful participation and engagement; 3) equitable power sharing between youth and adults; 4) engagement in critical reflection on interpersonal and sociopolitical processes; 5) participation in sociopolitical processes to effect change; and 6) integrated individual- and community-level empowerment (p. 41).

**Inclusion:** All individuals have opportunities to participate in every aspect of life to the fullest extent possible. Inclusion is important for building capacities (CDC, 2015).

**Informed consent:** Provision of information about all of the factors to be considered in deciding whether to consent to a new diagnostic or treatment process. Youth can only give if they are of legal age to give consent and are involved in a discussion of potential risks, benefits and alternatives and have time to process and ask questions.

**Motivational Interviewing (MI):** A collaborative approach that acknowledges the tendency to be ambivalent about change and aims to elicit and strengthen young people’s motivation for change (Miller & Rollnick, 2013).

**Psychotropic medication:** Psychiatric medications that alter chemicals in the brain which impact mood or emotion, such as antipsychotic medications and anti-depressants.

**Recovery:** A process by which people who have a mental illness are able to work, learn, and participate fully in their communities (New Freedom Commission on Mental Health).

**Self-determination:** A belief that people should be able to arrange their lives in accordance with their own preferences (Gambrill, 2006, p. 45). Self-determination involves people having real influence over the quality of their lives and involvement in making decisions that affect them.

**Self-efficacy:** A person’s belief about his or her ability to perform certain behaviors that lead to expected outcomes.
Shared decision making: The process of involving young people (and if they wish, their support system) in making decisions about treatment options. Shared decision making requires Informed Consent. Shared decision making affirms youth autonomy and reinforces their self-determination.

Stigma: We distinguish between social and public or perceived stigma (Moses, 2010, p.985). Social stigma refers to negative attitudes or discriminating behavior towards a person because of certain attributes such as a mental health condition. Public or perceived stigma is the subjective experience of a person with a mental health condition that society as a whole or that specific people discriminate and devalue a person with mental health conditions.

Stigmatizing: Moses (2010, p.986) refers to stigmatization as the process of treating someone differently including discriminating and devaluing behaviors because of his/her mental health condition.