
The Concepts Of Normality And Abnormality As Well As The Categorization Of Abnormal Behavior

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ABSTRACT

One of the most fundamental difficulties that contemporary civilization must contend with is unusual. The situation is becoming increasingly dire with each passing day. Those who make their living in the field of psychology do all in their ability to assist folks in dealing with issues of the sort we just discussed. Because of this, it is of the utmost importance to educate oneself on deviant patterns of behavior. Coleman was of the opinion that outstanding behavioral research had the potential to make a significant contribution to the enhancement of individual correction as well as the reduction of the amount of stress caused by mental illness and malpractice in today's society. He expressed this opinion in a quote that can be found in the following paragraph. In this part of the discussion, we will make an effort to develop a grasp of ideas that are common as well as ideas that are less popular.

Keywords: Normality, Abnormality, Categorization - Abnormal Behavior.

Introduction

Abnormalities is a phrase that can have multiple meanings, and one of those meanings is "abnormalities." The development of normal mental behavior that is either excessive or perverted to an abnormal degree. According to the words of Girishbala Mohanty, "the odd or inappropriate behavior of most people who do not correspond to our norms of behavior is commonly considered as strangemorals" (The strange or unsuitable behavior of most people who do not conform to our norms of behavior).

According to Brown (1940), abnormal attitudes are nothing more than common psychological events that have been magnified (either excessively or under developmentally) or suppressed. This view may be found in Brown's article "Analysis of Abnormal Attitudes" (i.e., distorted developmentally). For example, it is realistic to assume that a normal person's reaction to the presence of a snake will be to instantly evacuate the area in order to avoid being bitten by the snake. If, on the other hand, a person is observed playing with a snake while deriving a great deal of pleasure in doing so, this is a symptom of deviant behavior that may be deemed uncommon as long as past information or training does not play a role in this case. A person who has been trained professionally to deal with snakes from the time they are children will not be afraid of snakes, and if he does not remove the snake from his home, he will not be considered a normal person. If someone has been trained professionally to deal with snakes from the time they are children, they will not be afraid of snakes.

According to Coleman (1981), aberrant behavior is considered unethical because it is harmful not only to society but also to the individual. Because of this, it is considered unethical to engage in such behavior. An inappropriate behavior is not only harmful to the well-being of the individual but also the well-being of the group, and it also produces stress for the individual. Additionally, it causes individuals as well as groups to disagree with one another. Page (1976) states that those with poor IQ, emotional instability, personality disorders, and moral deficiencies made up the extraordinary group. Also included in this category were those who suffered from personality disorders. These people, for the most part, lived lives that were deplorable and unacceptable in the eyes of society, and they were in financial distress.

The Condition of Being Abnormal or Abnormality

The State of Being Normal

- The phrase "common sense" refers to the typical actions carried out by the vast majority of people. People from everyday life are those.
- Please indicate a workload that is satisfactory.
- You need to make enough money.
- Adherence to established social norms.
- You should create a social network.
- Capability of forming relationships with other people that are both acceptable and satisfying.
- Have the ability to respond emotionally in the manner that is most appropriate given the circumstances.
- Get a handle on their feelings.
- Even though they may experience disagreements and frustrations now and then, this does not change who they are as a person.
- Be of a satisfactory level of intelligence, as well as social adaptability and mental steadiness. According to Coleman, "normal behaviour will represent the full development and functioning of the individual in relation to the long life and progress of the group." [Cesar Chavez] "Normal behaviour will represent the full development and functioning of the individual in relation to the long life and progress of the group"

Signs And Symptoms of a Mental Disorder

The following is a list of symptoms that a person with a mental disorder might exhibit:

- You have a low tolerance for insults,
- You have a negative outlook on life and experience bouts of depression on a regular basis.
- A person who struggles with mental health often demonstrates remarkable adaptability. His attitude shifts dramatically from moment to moment.

- A person who suffers from a mental illness also lacks the courage to confront their physical health issues.
- When compared to the other people in her immediate environment and surroundings, she experiences feelings of inferiority.
- She has apprehensions about her present and future physical wellbeing throughout her life.
- These individuals have a peculiar preoccupation with sexual activity. People who commit crimes like sexual assault and rape, among other similar offences, fall under this category. 8. People who are like this also have an abnormal propensity to starve or feel hungry all the time.

Behavioral Disorders Divided into Categories

The most typical departure can be broken down into four primary categories, which are:

- 1) Psychoneurotic
- 2) Psychoses
- 3) Mental Retardation
- 4) Anti-Social

Psychoneurosis

The term "neurosis" most frequently refers to psychoneurosis. It is a form of mental illness that is on the less severe end. William Cullen first proposed the concept of neurosis in 1769. He defined it as a disorder of the feelings associated with the nervous system. Later on, the World Health Organization (WHO), psychoanalysts, psychiatrists, and other medical professionals attempted to expand Freud's research on hysterics and other types of neurotics in order to learn more about psychoneuroses.

The condition known as psychoneuroses can be described in layman's terms as an attitude in which a patient becomes less anxious as a result of the increased emotional stress and frustration in their lives. Individuals who fall into this category have a difficult time adjusting to a wide range of health conditions. On the other hand, these individuals are aware of the peculiar symptoms that manifest on their bodies. They are also able to carry out the activities that are a normal part of their lives. People

in this situation are unable to make personal or social adjustments, so they are constantly struggling with significant conflicts. The descriptions provided by a variety of psychologists allow us to comprehend them without any difficulty.

Coleman is of the opinion that the roots of psychoneurosis can be traced back to childhood. Typically, it starts in the relationship that exists between the child and their parents. The development of immature and distorted personalities, as well as the world around them, can result from relationships that are so emotionally unstable.

In addition, **Wolpe** is of the opinion that fear is a very significant factor in emotional behaviour, as well as a factor that is gradually becoming more prevalent in other behaviours.

Neuroses Characteristics

Psychologists are of the opinion that a negative outcome in a child's conflicts is the root cause of many of the symptoms of neuroses. A child's ego is very fragile when they are younger. As a result, they are unable to pass judgement or find a solution to the issue. They try to repress certain unpleasant feelings in order to save themselves from feelings of frustration, pain, and anxiety. However, this can lead to the development of neuroses later in life if the stress is prolonged. The following characteristics of neuroses are amenable to treatment as a result of the discoveries made by psychologists:

(a) A Pessimistic Attitude: It is only natural for people to want to be loved and cared for throughout their lives. However, there are some people who have the desire to receive love and affection from everyone they come in contact with. According to Karen Horney, this demonstrates that one is using their senses. People like that can never be content with the love they get from anyone. They want more love, but it can be too much if they have it for someone else; in other words, they can have too much hatred for someone.

(b) Excessive Reaction: When neurotic people's desires are not granted, they can experience anxiety, which can cause them to react excessively at times. It is normal to feel frustrated when one's hopes and dreams are not realized, but acting out in an excessive manner is most definitely a symptom of a neurotic disorder.

c) The Idea of a Sense of Insecurity: Individuals who have neurotic disorders frequently report having a sense of insecurity. As a consequence of this, they are perpetually searching for additional love and affection. However, the irony is that despite the fact that they want to be liked and approved of by other people, they do not want to give the same to other people. They are extremely self-centered and do not have sincere feelings for other people.

(d) Inferiority Complex: Individuals who suffer from neurotic disorders frequently have the perception that they are worthless. They attempt to fool others into thinking they are better than they are, which is a strategy known as futility. Even though it makes them feel safe, this show has a significant negative impact on the development of their personalities.

(e) Criticism of Other People: People who have neuroticism are more likely to criticise, insult, and criticise other people. They are very judgmental of other people, which can be interpreted as a form of self-defense on their part.

(f) Dissatisfaction: Individuals who have a neurotic disorder are likely to continue to express dissatisfaction with everything and everyone in the world.

(g) A Detrimental Tendency: People who have neurotic tendencies have a greater propensity to exert their authority over others. They are attempting to muster compassion for others even as they work to conceal themselves from the truth by turning to illness.

Symptoms Of Neuroses

The fact that psychoneuroses are more than just mental disorders is something that we are already aware of. They are under the mistaken impression that they are afflicted with a disease when, in fact, this is not the case. Psychologists believe that the symptoms of neuroses manifest themselves when the ego is unable to keep a healthy equilibrium between the id and the super ego. In the following section, we will talk about the symptoms that a psychoneurotic patient exhibits, as described by Coleman.

Psychoneuroses' Root Causes and Triggers

The following have been suggested as potential contributors to the development of individual psychoneuroses:

Aspects of Our Physical Selves: It is common knowledge that our minds and bodies are interconnected. Therefore, the presence of certain physical characteristics plays a significant part in the evolution of psychoneuroses. It is possible for a person to exhibit neurotic symptoms if they become mentally weak as a result of physical fatigue.

On the other hand, it cannot be denied that the symptoms of psychoneuroses are more closely linked to psychological processes than they are to physical ones. Because of the patient's physical condition or nerve damage, the disease has not been diagnosed. An example is the most effective way to demonstrate this point. Take for example a person who is struggling with a mental illness. To get away from that, he might start working excessive hours, which could eventually lead to neurosis. Now, even though it might appear that a person has neurosis as a result of overworking themselves, the actual cause was something else. Insomnia, anorexia, and other reactions are common in people who suffer from the mental illness neurosis.

Various kinds of Psychoneuroses

Disorders of the nervous system in general can be divided into the following four categories:

1. Hysteria
2. Neurasthenia
3. Disorders Related to Anxiety
4. Psychasthenia or obsessive-compulsive neurosis.

In the following paragraphs, we will go into further detail regarding each of them.

1. Hysteria

Hysteria is a mental state in which the patient loses function, either physically or mentally, and can be described as a state of mind. Some of the most common physical reactions to it include a loss of

sensitivity in the skin to touch, vision loss, hearing loss from hearing sounds, paralysis, stuttering or other speech impairment, excessive sweating, vomiting, loss of appetite, cramps, and so on. Memory loss, either partial or complete, and an isolated personality are two of the psychological symptoms that may be present. Patients with mental illness frequently lose all memory of their previous existence. It's possible that they won't be able to recall their name, address, family organizations, or other similar details. On the other hand, they do not forget their names or social customs or anything like that, so they appear to have a normal behaviour.

2. Neurasthenia

One of the symptoms of neurasthenia is an overwhelming feeling of exhaustion. Patients who have this type of disorder frequently experience symptoms such as weakness, difficulty concentrating, persistent mental and physical exhaustion, problems with the stomach and intestines, as well as aches and pains in the muscles. People who work long hours without taking breaks are typically the ones who suffer from this condition. These patients frequently present with complaints of daytime sleepiness in addition to nocturnal obstructive sleep apnea. They frequently exhibit resentment, and it is difficult for them to concentrate on any given activity. The symptoms of fatigue include a rapid variation in heart rate, profuse sweating, and a quickening of the rate at which the heart beats.

3. Disorders Related to Anxiety

Anxiety can manifest itself in a number of ways, including a hyperactive reaction. People who are obese almost always suffer from this form of neurosis, making it the most prevalent form of the condition. To paraphrase what Ross has to say about anxiety, "Anxiety is a series of symptoms, emerging from negative self-harm caused by more than just trying to cope with these problems."

Anxiety is the most prominent symptom of an anxious state, and it frequently takes the form of a variety of other symptoms as well, such as a fear of dying, feelings of insecurity, and so on. The majority of patients exhibit symptoms such as fatigue, insomnia, gastrointestinal disorders, depression, and other similar conditions. Many patients also suffer from mood swings, feelings of depression, headaches, panic attacks, a loss of interest, difficulty concentrating, and impaired cognitive function. The number of times an individual experiences an anxiety attack varies from

person to person. Some people experience this attack on a daily basis, while others might only have it once in a while.

4. Psychotic Asthenia or Obsessive-Compulsive Neuroses

Psychological asthenas are a group of behavioural disorders that are characterized by the fact that individuals who suffer from them report having the experience of being forced to think or behave in ways that they are aware of being typical. The most prominent signs of psych asthenia are major depressive disorder, anxiety disorders, phobias, and manic episodes. Let's get some more information about them, shall we?

Patients suffering from lust often have ideas and thoughts that come to them unexpectedly and over which they have no control. These kinds of people have mental health issues. They have unanswered questions or doubts about the existence of God, the meaning of truth, or how they can make amends for their previous actions; in other words, they have questions or doubts about something. Some of them even have an intense need to physically interact with things or other people, or to utter particular phrases. They are preoccupied with the idea that they have committed an offence that cannot be forgiven, and they are always apologizing for their transgressions.

Phobias

One definition of the term "phobia" refers to an abnormal fear of something that lacks significance and cannot be overcome. The following are some of the most common types of phobias:

- a) The fear of heights, also known as acrophobia
- b) Nyctophobia, also known as a fear of the dark
- c) Claustrophobia, or the fear of being in small or enclosed spaces
- d) Ochlophobia: the fear of being in large groups
- e) Zoophobia Concern for animals or animal cruelty
- f) A fear of open areas, also known as agoraphobia.

Even regular people have irrational fears of things like water, closed spaces, and so on, but these phobias can be overcome with therapy because they stem from unfortunate experiences in childhood friendships or social situations. These kinds of people cannot be categorized as neurotics in any way. It is extremely unfortunate that patients who suffer from neurotic phobias do not even know the origin of their irrational fears. Bagby and Shaffer observed that people who suffer from phobias share certain characteristics, such as

- (a) Phobias stem from a single traumatic experience, which typically takes place during childhood and is characterized by extreme anxiety.
- b) A prohibited or dishonourable behaviour is linked to the unpleasant experiences that follow it. Because of this, the patient tries not to think about it and is unable to have honest conversations about it with other people. The event is blocked from the memory, either intentionally or unintentionally, in order to protect the mind from further trauma.
- (c) The fear continues to exist because the incident that was associated with the initial fear situation prevents the recall of the episode, and the intense fear of the object prevents subsequent positive organizations from reducing the initial sensation of fear.
- (d) When a person maintains a healthy relationship with his or her parents or with other counsellors, the fear response to stress is not formed in that person's nervous system.
- (e) Phobias can spread to other areas of life, even though they initially manifest as anxiety in response to a specific situation.
- (f) When the patient's traumatic stress experience is remembered with the assistance of free association, dream interpretation, or any other psychological technique, and is matched with the patient, the severity of the phobia significantly decreases.

Psychoneurotic Disorders and Their Treatment

When it comes to diagnosing and treating psychoneurotic patients, the Case History Method is by far the approach that is recommended the most. All information pertaining to the patient must be

provided. Information that can be used to identify an individual, including but not limited to their name, age, marital status, previous home background, relationships with parents, siblings, and other family members, etc., is gathered. In addition, information is gathered about the individual's educational background, workplace, attitude toward work, relationship with the manager, health records, and social history, which includes things like relationships with friends, the total number of friends, and so on.

Psychoses

The serious personality disorder known as psychosis is characterized by the patient's mental and emotional exhaustion to the point where it is difficult for them to maintain control of their lives and adjust to the norms of society. The terms "insanity" and "dementia" are frequently used to refer to psychoses. "Madness" is a legal term that refers to a person who is so confused and confused as a result of a mental illness that he or she is not legally responsible for his or her actions, as stated by James D. Page.

Patients suffering from psychosis exhibit strange behaviours that annoy those around them. In addition to this, they exhibit behaviours consistent with depression and confusion, and they have suicidal tendencies. Some of them are also hostile, destructive, and anti-social to other people. In addition to this, they exhibit symptoms of mental retardation, speech impairment, memory impairment, and emotional and social disorders.

CLASSIFICATION OF PSYCHOSES

In most cases, psychiatric disorders can be classified into one of two broad categories.

- Patients with mental disorders who exhibit functional impairment make up the first category of patients in this category-based classification system. These conditions should not be treated, nor should they be admitted to the hospital. These mental disorders are frequently brought on by either unhealthy genes or negative experiences with one's health. Patients who suffer from schizoaffective disorder, manic-depressive psychosis, paranoid disorder, and involution melancholia are included in this group.

- Patients who are suffering from psychiatric disorders that are more likely to be caused by demonstrable organic or toxic pathology make up the second group. These conditions are also referred to as toxic-organic psychoses in some circles. Patients suffering from dementia, psychosis associated with cerebral arteriosclerosis, general paresis, alcoholic psychoses, and other related conditions are included in this category.

Now, let's make an effort to understand the behaviour of both types of toxic living psychos - living and non-toxic individuals individually.

1. Schizophrenia

There is another name for this condition, which is dementia praecox. A person who is affected by one of these forms of psychosis can be categorized as simple, hebephrenic catatonic, or paranoid.

The most straightforward category of patients diagnosed with schizophrenia is those who do not engage in deception or hallucinations. utterly uninterested, uninterested, well-organized, and unchanging.

2. Paranoia

Patients who suffer from paranoia often feel as though they are being persecuted. They present their ideas in a way that is both logical and logical in the context of a false sense of an actual event. Emotions are used to express opinions in a consistent manner. The patient is suspicious, and there is a possibility that he will try to attack the people he views as his oppressors. These patients typically have high levels of intelligence, which they successfully preserve throughout their lives, and even if the psychosis continues for an extended period of time, their personality is not ornamental.

3. Situations Marked by Paranoia

A paranoid condition is a mental health issue that lies somewhere between schizophrenia and paranoia. Patients are more likely to express their views in a balanced manner and their personalities are also more likely to be preserved in these kinds of situations. The patient with paranoia, on the other hand, may have an altered perception of reality, a pessimistic worldview, and aberrant behavioural patterns.

4. Bipolar Affective Disorder or Manic Depression

Patients who suffer from this form of psychosis are more likely to experience particular feelings. They could be under a lot of stress or overworked. The mental processes are depicted on a massive scale in both of the provinces. There is a possibility that the patient will be very combative and talkative, as well as exhibit symptoms of irritability and anger. On the other hand, when someone has depression, the patient exhibits signs of grief regardless of whether or not they are talking, thinking, or doing anything. The majority of patients exhibit either happy or depressed behaviour, but some patients show a combination of symptoms at the same time, such as symptoms of restlessness and depression at the same time.

5. The Manifestation of Melancholy

This form of psychosis is comparable to manic-depressive psychosis in that it also involves an altered state of mind. But this kind of psychosis is only associated with people who are depressed. The symptoms of this form of psychosis manifest in later life, and the patient is more likely to feel distressed, scared, and guilty than depressed. The patient is exhibiting symptoms of delusion by committing an unforgivable sin, and as a result, he needs to be severely disciplined for his actions.

6. Senile Dementia

People of advanced age who exhibit severe personality traits and abnormal psychological characteristics are most likely to suffer from this form of psychosis. Symptoms such as chronic memory loss, emotional instability, and instability, among other things. Some patients may also exhibit symptoms of depression and confusion in addition to their other symptoms.

7. Alcohol Psychosis

People who have a history of heavy alcohol consumption are likely to fall into this category. In patients who have actuate cases, symptoms such as memory impairment, strange vision, and significant tremors are present. Karshakal's Psychosis is another name for this condition. In addition, there is a potentially lethal hallucinosis in which patients are aware of their surroundings but have distorted perceptions of the aural environment in which they are immersed.

8. Psychosis Accompanied by Obsessive-Compulsive Disorders

Patients suffering from this category of psychiatric illness often develop epilepsy and display problematic behavioural patterns. People may exhibit a gradual deterioration of mood and mental functioning, which may or may not be accompanied by deception and hallucinations in some cases. This can happen in some people who have schizophrenia. In addition, some people exhibit a weakening attitude that either comes before or after an aggressive act. During this time period, patients frequently exhibit various behavioural and mental disorders, including confusion, irrational excitement or pinking, and other forms of extreme agitation.

CAUSES OF PSYCHOSES

Psychologists, who frequently play a role in the formation of individual attitudes, have isolated the following factors as common contributors to the process.

Age is a factor that can play a role in psychosis. According to psychiatrists' observations, mental illnesses do not develop continuously throughout our lives; rather, they appear at discrete points in our lives at predetermined times. This is an assumption that was derived from research that looked at the ages of patients who were admitted to psychiatric hospitals. It is common for the diagnosis of schizophrenia to take place in later years or during adolescence. Middle age is a common time for people to experience mental health conditions such as manic depression, alcoholic psychosis, involution melancholia, and so on.

PSYCHOSES AND THEIR TREATMENT

Patients diagnosed with psychosis can benefit from a variety of treatments and therapies. Of course-

Hospitalization: Even though there are some forms of mental illness that can be treated at home, the best option for most patients is to remain hospitalized. Patients who frequently exhibit suicidal tendencies or social problems ought to be admitted to the hospital. Patients who are considered to be dangerous should also be hospitalized because they become a burden on their families as a result of their abnormal behaviour and inability to exercise self-control. In addition to this, patients can receive better care and treatment at the hospital, which has medical staff available at all hours of the

day and night in the event that there is an emergency.

As was mentioned earlier, certain patients might have their families take care of them while they are in the hospital. They are able to be treated at home as long as they are supervised by a qualified medical professional.

Care for Medical Conditions: There are instances in which medical professionals are able to make an accurate diagnosis of a patient's body and provide the necessary care for medical conditions. Patients may receive medication and recommendations for special diets from their physicians.

THE DISTINCTION BETWEEN NEUROSES AND PSYCHOSES

The following are some of the key distinctions that can be made between neuroses and psychoses, despite the fact that both are mental disorders and have a similar appearance.

- Psychoneuroses only affect a portion of a person's personality, and personality development is a natural process that occurs in every mind.
- A patient who is mentally disturbed will lose complete and physical contact, whereas a patient who is emotionally disturbed will not change in relation to reality.
- In cases of psychoses, the patient frequently experiences a sense of guilt and expresses it by making educated guesses, whereas in cases of psychoneuroses, this is not the case.
- Patients with mental illness are not affected in their ability to communicate, in contrast to those with mental impairment, who do struggle significantly with language.

Conclusion

When referring to a person's "mental health," one may indicate the person's degree of thinking, the person's emotional well-being, or the absence of mental diseases. All of these are included in the definition of "mental health." According to the tenets of Positive Psychology or Holism, a person's mental health may include the ability to find delight in a variety of healthy activities and to strike a balance between the activities and their attempts to maintain mental stability.

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