

**Indian Institute of Technology Kanpur**

**National Programme on Technology Enhanced Learning (NPTEL)**

**Course Title  
Cognition, Transformation & Lives**

**Lecture-09  
Humans and Madness**

**by  
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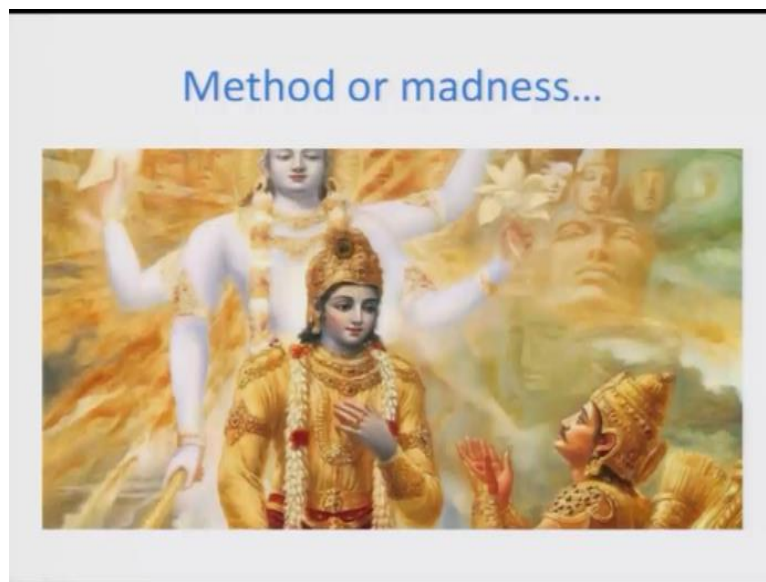
So welcome again to this course on cognition, emotion and transformation, we almost mid-way through when I hope we have got some broad idea in the last four, five lectures on how the growth of self happens, how the cognition develops, how the emotions interplay with and how was the self-placed in the world. Now, the whole background and the need for it was to bring our minds to a point where we start thinking about one very important word called change, change is happening all the time around us and we keep adjusting to it and sometimes we make others and other things adjust to us in the process of assimilation and accommodation.

But is change voluntary or involuntary that is the crux of this course and we will be talking about it in the later lectures. Just to take a small detour and just to place the whole thing in perspective and try to understand that what is this need for change? There are other lot of need, but let us take one or two examples. The biggest need of change comes when you people think that they are not behaving normally.

And what is this definition of normal, society has evolved various mechanisms of defining this normal these are we are not so normal or abnormal. these are the things when is the most commonest thing when people are even a child as we talked that child often looks upon the parents and the parents keep teaching the child and how to behave appropriately. So this appropriate behavior when it does not happen not on one of basis or sporadic incident, but largely on a slightly prolonged for a prolonged period when people are not behaving in a certain way which is expected by the society or by themselves.

Then the conflict starts and that is the biggest trigger of change and people are often asked to change and larger level we have already talked how it happens. And that is how the whole profession of mental health professionals and psychiatry has evolved. So let us look at this whole concept of as an example to what we are talking about, how cognition and emotions interplay, about this issue of what is normal and what is abnormal.

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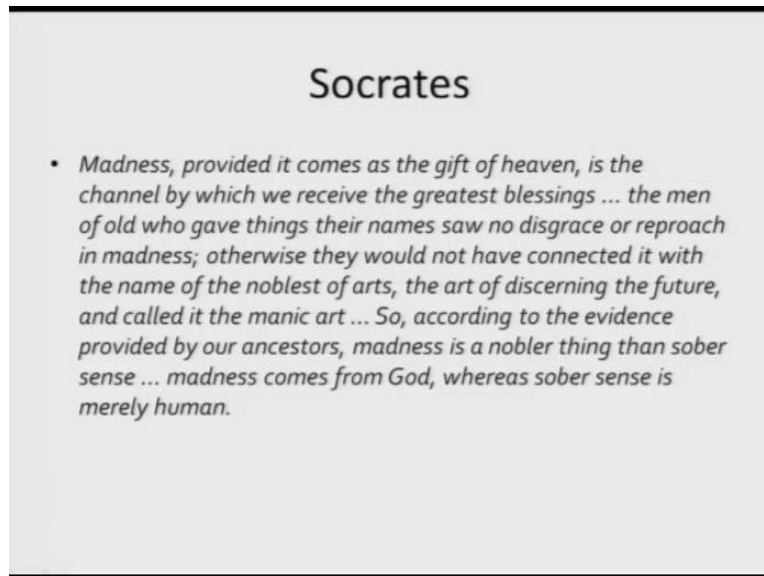


You know this picture very famous drawing and all of us know what will be the product, what is the context of this, the context is, this is arjun who has suddenly developed some feeling of renunciation in during this big battle of Mahabharata and here is Lord Krishna himself, who is teaching him rather answering his questions on issues of life which was later compiled and called as Bhagavat Gita.

Behind this is if you see this, this is what we call Virat Roop or Vishwa Roop of Krishna, which Krishna finally showed to arjun to tell him that all dynamics of the world is within him. Now it may be a mythology, but it points out to very, very important question. Obviously there are certain ways by which we should move in life. So was arjun exhibiting some madness at that

time, what is called madness in Hindi we call it a word called pagal. These are the words which we are being used for very long say and we will talk about it as we go on.

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So Socrates when he was, so we call madness, it is a madness, is it a mental illness or is it just one mode of different type of methodology which is going on in the mind. Socrates has this interesting thing to say, he said madness it comes as a gift of the heaven, is the channel by which we receive the greatest blessing.

So according to the evidence provided by our ancestors madness is the nobler thing than a sober sense, madness comes from god, whereas sober sense if merely human. He was pointing out that what we do and what we think is actually the way we do it is a creation of human, while those people who develop certain amount of misbalance or not behaving in the protocol of the society in which they are living, they maybe having a gift from the God.

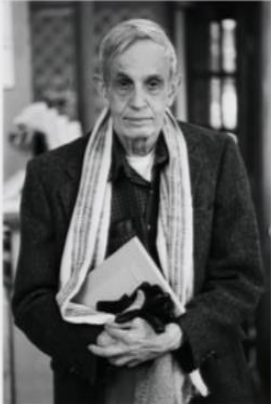
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- “I have found both freedom and safety in my madness; the freedom of loneliness and the safety from being understood, for those who understand us enslave something in us.” — Kahlil Gibran, *The Madman*

Kahlil Gibran also has almost similar thing to say, “I have found both freedom and safety in my madness; the freedom of loneliness and the safety from being understood, for those who understand us enslave something in us.”

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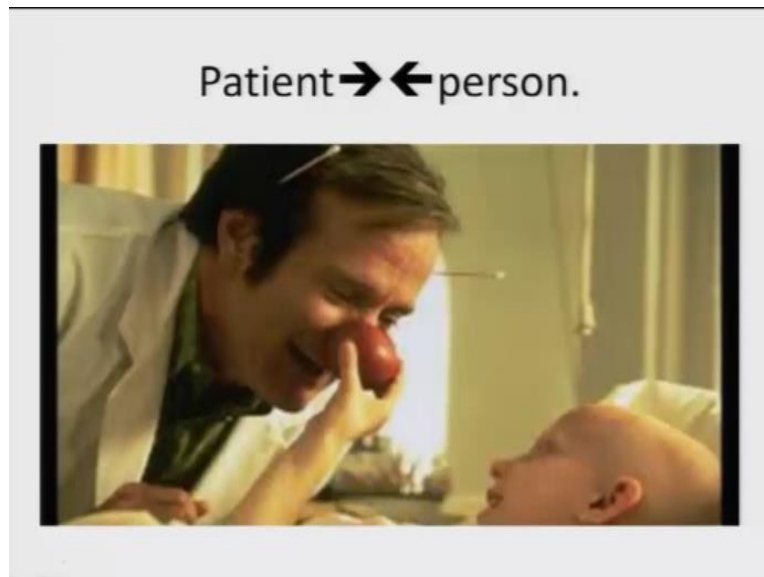
- JOHN NASH --- A Beautiful Mind
- One flew over cuckoo's nest



John Nash we all know, he recently died in an accident he had an illness called paranoid schizophrenia and he still went on to win a noble prize and I think this is most of you would have seen this film called one flew over cuckoo's nest, if not see, it actually possess a very important question of individual versus the formed laws and protocols of the society.

John Nash was once called to the world psychiatry association meet, I think it was in madred. And he thanked the doctors for they could cure him. But he also said please do not take away my creativity, because obviously he credited is the creativity to the abnormal phases of mind in which he was working.

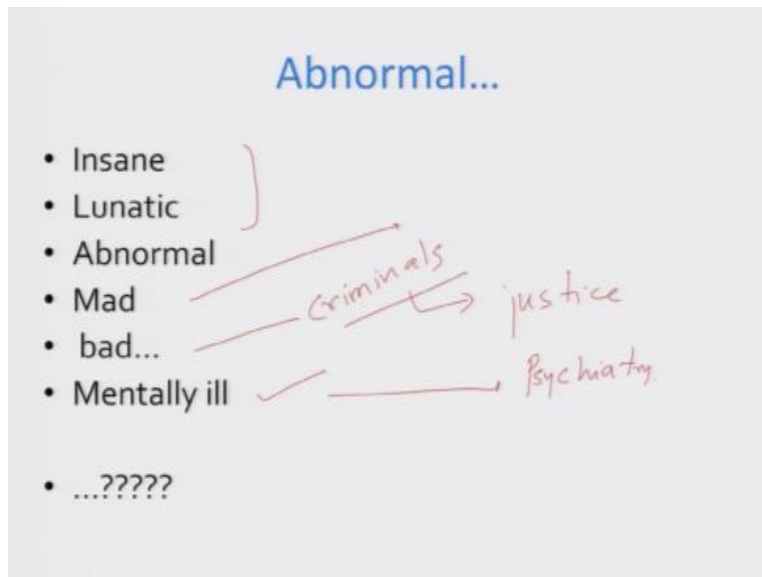
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And you know this man, one of the most beautiful actors Robert Williams who had committed suicide I think one or two years back. At the type of roles which he has done, whether he look at Patch Adams or Dead Poets Society or you look at Good will hunting or a film called Hook by Steven Spielberg entirely very, very intense emotional roles and obviously he was an actor, so if you remember you have talked about the RASA theory in the last lecture and how actors can control their expression of emotion through cognition.

But when you watch this films for some time your cognition and your thought actually is off and you intensely immort yourself even to the extent of crying or laughing with this character, and such a person committed suicide. So the big question is which people have to answer meant to their provision what are they treating, are they treating the patient or a person.

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So what is abnormal? There have being various words like in Hindi as I said common word was Pagal and that is still a taboo, because lot of people go to the mental profession will say, see I am not a Pagal. Other terms in the language is were insane, lunatic and that is how lunatic was linked to some people discovered that with the lunar cycle, the people exhibit abnormal behavior. And then you all would have heard a term lunatic that is no more used.

Initially these people who had abnormal behavior we also treated as criminals, almost clubbed, but that is centuries back. Mad is another common term which is being used, but now all this terminology with the lot of deliberation and human right movements and with the development of understanding of brain, people have realized that all these people are not so. So society has evolved two mechanisms, one for people who are behaving abnormally with intent are criminals.

And those who broadly I mean it is not the definition and those who do not have an intent and performs a mad which is against it are mentally ill so the criminals are dealt with justice system this is dealt with psychiatry we do not know the further terminology a case in example would be somebody like the kids who have during developments the intelligence grow slowly IQ test

which is the most common thing at and kids who have developmental problems were also clubbed with all this.

But later on then they were called handicapped disabled and now they will different special children and then differentially abled this is how the how the terminology changes with as we gain knowledge, gain knowledge individually as well as society and that brings in a transformation in our thinking so old terminology is washed out it is just not change it is transform. Our knowledge is transformed to some other level where we understand why is the person behaving and that is how law also looks at it.

So what differentiates a criminal from mentally ill is probably intent a criminal is suppose to have committed some act which is against the rules of society knowing fully well the implications of it and has an intent to do it where as intent is not present in person who as metal illness because obviously is not aware a lack of insight is not always the case but largely that is the broader definition.

So the big question is that if being not so normal or abnormal is the impetus to change whether with the help of physiatry or with the help of religion or with the help of self help guru or whatever but this behavior is positive against what is normal.



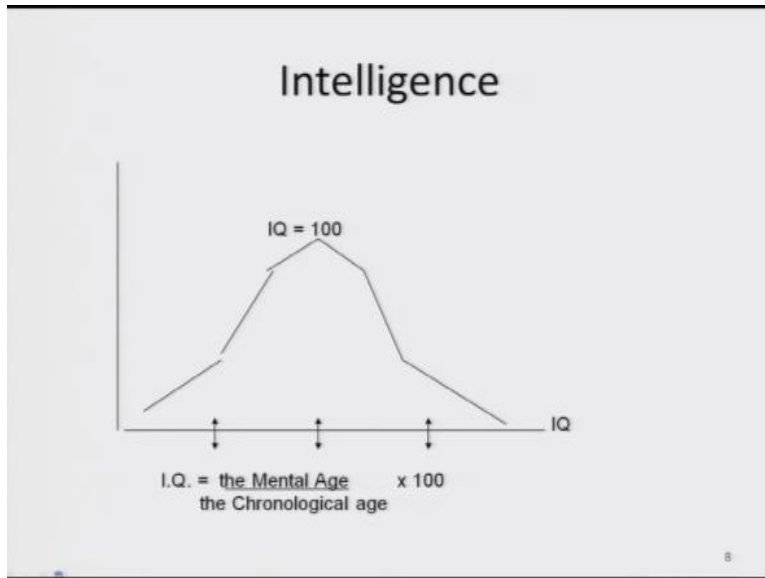
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- WHAT IS NORMAL?

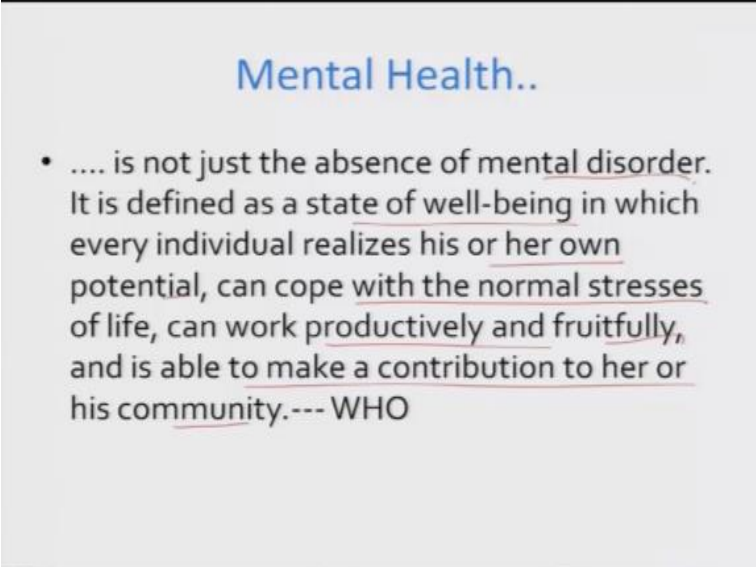
And all of us actually if you look at any trajectory of your life there would have been lot of points where would have try to change ourselves because of this like it is written smoking not allowed at some place and you smoke and so one way of it could be rebel and one way of it could be not so normal or somebody have point out and then all this ads which come for anti-smoking or anti drinking or trying to change the behavior which society try to change is actually pin pointing something deep within by which so the big question is but there are people who rebel so what is normal. IQ as I said.

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So within this Gaussian curve most of the population will fall in there IQ's

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**Mental Health..**

- .... is not just the absence of mental disorder. It is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.--- WHO

So when you talk of normal as mental health defines WHO defines is not the just the absence of mental disorder so that means you do not have to be mentally ill if you are not mentally ill you are mentally healthy is no correlation unless you have a state well being in which every individual realized his or her own potential can cope with the normal stresses can work productively and fruitfully and is able to make a contribution to his or her community.

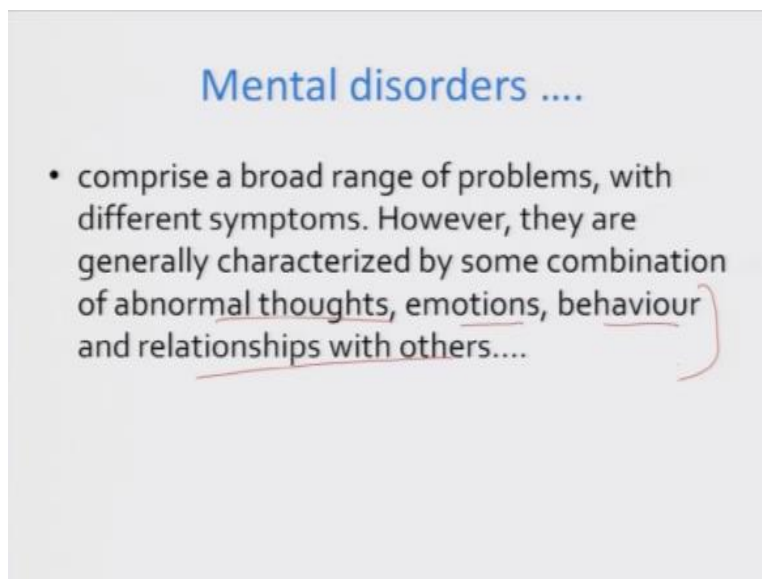
This is a more or less comprehensive definition but very difficult to fulfill if you look at it. everybody has some gap somewhere in the cognitive process or in the emotional handling, so we have people who develop problems and the illnesses which can happen at a level of cognition or can happen at the level of emotion, emotional regulation lot of mood disorders the mood symptoms and impulse illness called impulse dyscontrol or bottom line personality we don't have to go to the detail I am just or in obsessive compulsive disorder where these are the problems in the thought

Or schizophrenia where people developed delusion which is a content of thought so or both can coexist there is a very common illness which is happening to old people these days Dementia all

of you know about it where this cogitative capacity is declined in the most low percent term as the brain shrinks the certain damage to tissues in certain area which are responsible you remember the word I used frontal cortex and dorsolateral prefrontal cortex, the ability to abstract the ability to judge correctly the ability to problem solved ability to they slowly start getting diminished the capacity diminishes with the brain shrinking with the memory shrinks.

So that is the illness of cognition but it associated with it could be a problem of emotion so if we look at the extremes of the problems of either cognation or emotion in between there is whole range and everybody has experienced even if temporally all such things how anxiety we talk about anxiety how anxiety can actually block your mind, so this comprise a brought range of problems.

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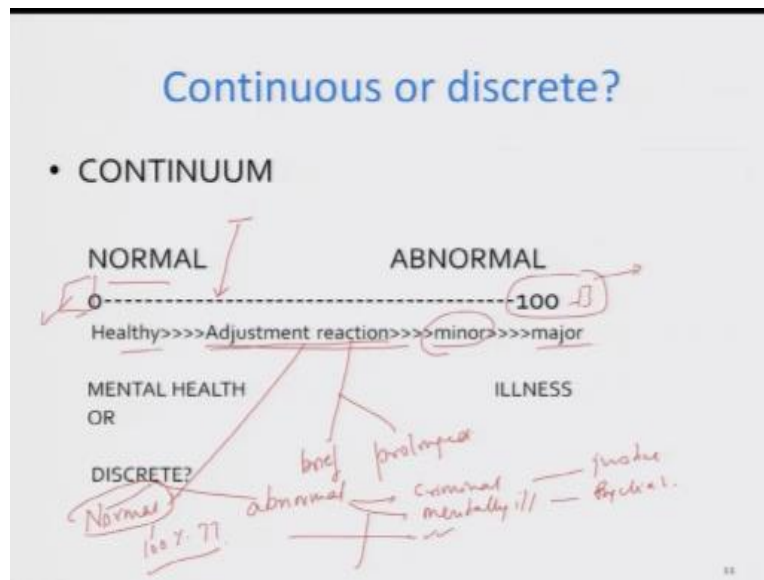
Mental disorders ....

- comprise a broad range of problems, with different symptoms. However, they are generally characterized by some combination of abnormal thoughts, emotions, behaviour and relationships with others....

However they are generally characterized some combination of abnormal thoughts, emotions behavior and relationship with others this the alternation and this actually helps us decide whether it is abnormal and all when I am saying abnormal the way abnormal is defined this is in the era in which we are living and this context of our culture may be some other day some other

time this may not be considered as abnormal. So the big question is whether the abnormal illness is on a continuum.

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That we all have normal people who are healthily adjusted are suppose you are exposed to a stress say grief reaction or sudden change or job or relationship everybody has adjustment reaction this adjustment reaction can be brief or prolonged and if some people mat just cross this threshold and have a minor illness depression is a very common term which is being used right from united nations to national level and it is being consisted as number one killer even surpassing cardiac and the Indian prime minster also talked about the whole thing in his one of his interactions with the people the depression is something which we talked about and it should be handle because it is a even if it does not kill on its own underlying current of depression complicates your illness and your life.

So and then to a major illness whether it is a continues illness and people lie on this continuum from 0 to 100 because this would include lot of transitory abnormal behavior the rebellious behavior of children at times the rebellious the behavior of children of going out and trying alcohol or smoking or people falling in relationships getting out of relationship unstable

relationship lot of it would fall into on this continuum that means everybody is alike and people who are abnormal are not actually abnormal there is a possibility that there is may be small percentage at this end which may have an illness.

And this end who may not be functioning normally intellectually or when I am talk about mental retardation all but largely most people fall between this that is one of the way of looking at it the other way is that normal people it is discreet the people who are normal and there are people who are abnormal now this abnormal can be criminal or mentally ill again as I said justice system and psychiatry and these are normal people who have minor problems of adjustment as the WHO definition says.

And I have now and then but the largely able to carry on the relationships well but who is 100percent normal is there some body if you look deeply people will having problems and we know people have problems actually if you go to a psychotic clinic or to a cardiac clinic or to a neurologic clinic lot of people are apparently normal they do not have actual 30% people who have anxiety and worry and all is that worry or even to much worry or too much anxiety is that all normal we assume that is normal what is appearing is there may be threshold beyond which this can turned into illness both in time and space, so this although we have a system of diagnosis which is discrete.

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## Who is ill?

- IS MENTAL HEALTH DEFINED BY A UNITARY CONSTRUCT? ✓
- OR
- IS CONTEXT DRIVEN?



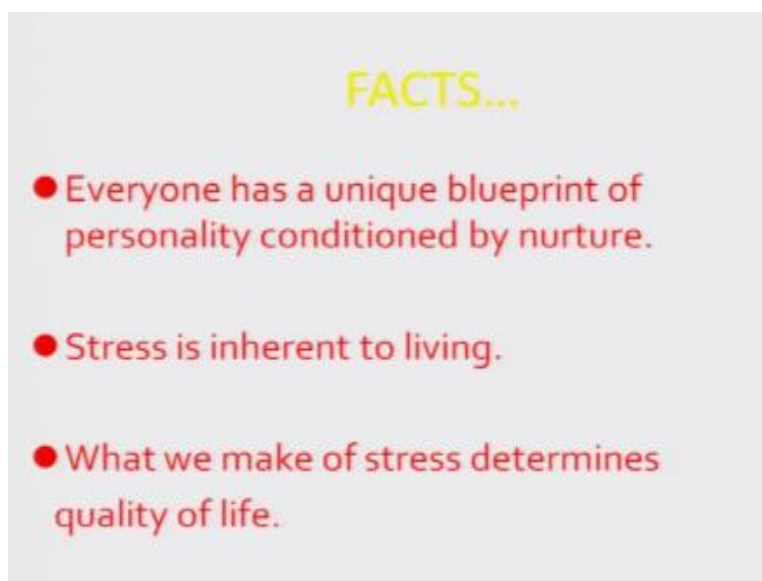
But what we see is there is a whole continuum of so because we do not know the causes that is why we look at the whole thing in our sense of normal, abnormal but who is ill actually, was this man ill because when the whole England was in overcoats and coat he was walking with one shawl and this dress and went on to meet, we will talk about Gandhi later so his mental health define by unitary construct is it one definition.

That water is made of H<sub>2</sub>O is not like that, even water has hydrogen and oxygen, so or we define mental health by context if you go to some tribes in Africa or some Adivasi deep in India look at them the way they are living would be entirely different from the way somebody is living in Mumbai or New York but would we call them mental ill, just because they do not follow over our pattern, just because they do not look at the whole thing in the way we look at it.

So this context important, because in the context now somebody who says I am sad because of relationship same marital relationship and the person may be having depression but just treating depression would it sort out would it sort out the problem relationship problem somebody a student who is finding difficulty in studying a subject and is unable to express this to his or her mentor and performs academically bad and after few semester lands up in depression.

So we treat the depression, when it comes to us we treat the depression as illness and then say fine you are fine you go back but does it sort out the problem because we haven't address the context so this whole sorting out of the underling context is something which you should remember as we go and talk about the what is the need for what is say transformation, one of the need arises from this. Because whatever so what are the facts.

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That everyone has a unique blueprint of personality which is conditioned by nurture we already know you born with the temperament and we move on to stresses inherent to living you see in the Yerkes-Dodson curves which we talked about, what we make of a stress determines quality of life? So everybody has a stress so if you have to reach on time you have to reach on time but



how do you take this anxiety of reaching on time, how do you push yourself, how do you actually plan your mind a day and see how the whole thing goes will determine how actually you are going to deal with it in terms of stress.

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The slide features a light gray background with the title 'Challenges..' in yellow text at the top center. Below the title, there are two main bullet points in red text. The first bullet point is '● Cognitive aberrations', followed by three sub-points: '-- selective abstractions', '-- minimizations and magnifications', and '-- generalizations'. The second bullet point is '● Suppression of', followed by one sub-point: '-- emotion'.

- Cognitive aberrations
  - selective abstractions
  - minimizations and magnifications
  - generalizations
- Suppression of
  - emotion

Cognitive aberrations we have talked about cognition, cognitive aberrations is called selective abstractions so you do not look at the whole picture you just pick up one thing think about it out of context and then worry yourself minimization, magnification very small things can sometimes

get very, very magnified in your mind and your mind can go on feeling like a tizzy and on and on and on which will disrupt your normal life.

Minimization is a reverse of it these are the type of aberration, generalization now this something which is which specifically has happened with you but it has induced a certain thought process in your head or an emotionally state in your head by which you generalize it to everything to all situations and that seed of phobia, the mind generalize it is in every like suppose sometime you would have fallen from a height.

It is possible that the brain gets into fear and every time you see anything, anything which is slightly higher than your thought process, thought process not in the sense of your limit of thought in the terms of concrete height, your mind just suppression of emotions all of us do it, we know we will most of the times actually in fact most of the times we keep suppressing our emotions.

For others for society for being accepted this need for being accepted is so much that people have to learn to divert their thought process divert their emotions and divert their whole being and suppressing the thoughts and all, so what are the sources by which you can improve.

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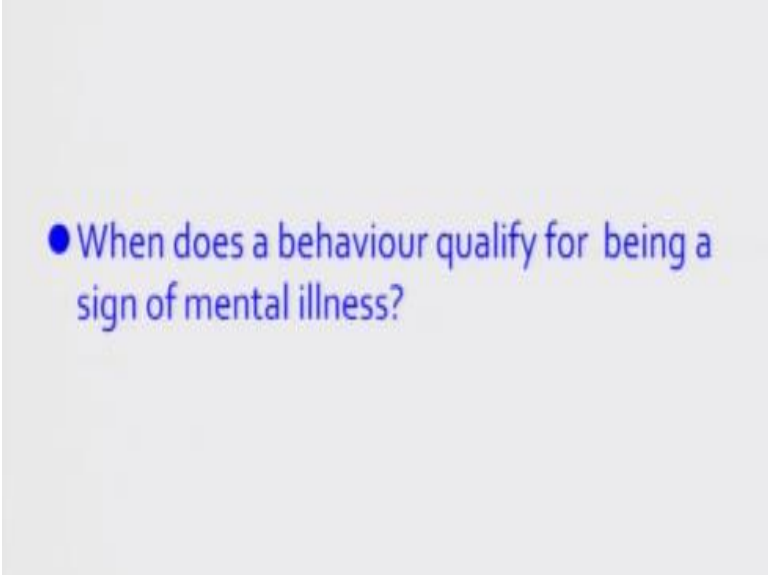
Self, work, relationships, societal changes, frustrations, failures, these are the sources by which these challenges and the trouble can arise it can arise from your own self the lot of may be the way one has been brought up the cognitive style of thinking may not be conducive to a healthy adjustment, you may have temperamental problem an emotional problem by which you are not able to adjust the you may have a predilection to any psychiatry illness.

By which you are not able to adjust or simply the past experiences of your life have been searched and people have people imitate people model other people here we would have seen people who keep on jumping every on everything and reacting. Work can be a considerable source of stress we all know so if your work and your passion and you place is the same its wonderful, but often they not relationships can take you up and bring it down.

Societal changes the larger socio political foundation of country or times Indians have experienced that recently with demonetizing can bring in huge amount of residential crises, frustrations obviously build up with all this failures the more they keep happening the more they keep adding to your and fuzzy thinking is another term of that mathematical fuzziness but because if you try talking to people most of the people I don't know whether it is a result of educational system.

Or it is a result of the way brain behaves or it is a result of the way societies have developed obviously societies and minds that lot many people have a problem in problem solving so after certain point of time small things they will be able to do but as long as the system is going fine its wonderful with them, the movement system challenges them.

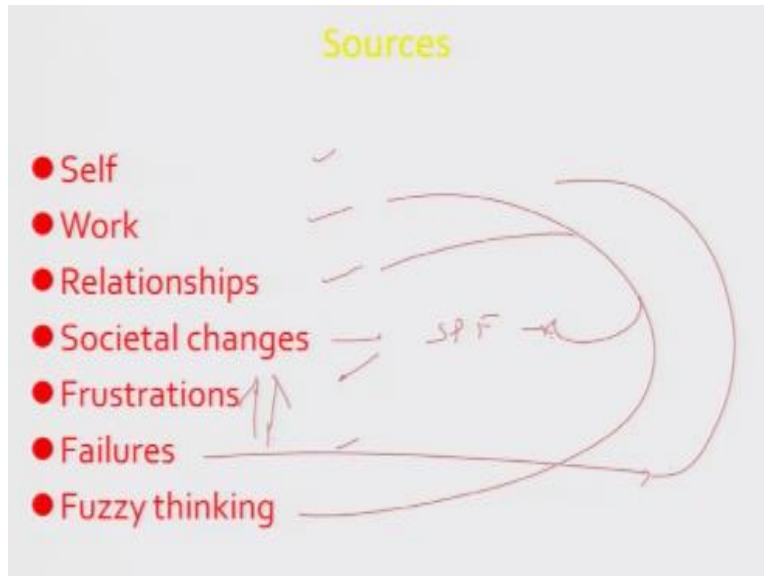
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- When does a behaviour qualify for being a sign of mental illness?

The mind itself goes into a certain sort of confusion and they will take a decision which will not be rational and logical or may not be fulfilling that need but would be highly tampered with emotion it would be highly impulsive at times or may be colored with their basic mood state of may be sadness or may be anger and then once they take a decision then their mind obviously makes them behave and that behavior itself can create problem at work.

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Can create problem at relationship can create problem in their relationship with the society increase frustration to a large extent and obviously the end result is failure which again increases this cycle so this wishes cycle people get into of taking wrong decision then jumping and then creating problems, I will end at this and we will continue the next lecture on the same issue, thank you.

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