Quadrant-I E-Text

Details of Module and its structure

Module Detail			
Subject Name	Education		
Course Name	Understanding the Learner		
Course Code	EDU502		
Module Name/Title	Mental Health and Hygiene: Meaning, Characteristics of mentally healthy person, neurotic disorder and psychotic disorder, Defence mechanism.		
Module Code	UTL014		
Pre-requisites	••••••		
Learning Outcome	 After going through this lesson, the learners will be able to Identify and Enlist Behavioral symptoms of mentally healthy persons. Maintain good mental health by the use of appropriate Defence Mechanism in times of conflict. Categorize Neurotic and psychotic disorders 		
Keywords	Mental Health, Mental Hygiene, Defence Mechanisms.		

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1. Introduction

The concept of health with reference to mind is termed as 'mental health' by psychologists. In today's technology driven world maintaining good physical as well as mental health is a big challenge as well as the utmost necessity of every human being.

2. Meaning of Mental Health

The broader umbrella term "Health" refers to a state of physical, mental, social, emotional and spiritual well- being of the individual. The Indian concept of Health has its roots in "Athrava - Veda". According to this scripture the physical health depends upon three components or gunas as Vata, Pitta and Kaf. The physical normality is maintained by the equilibrium and any increase and decrease in these components give rise to physical diseases. On the other hand, the mental health depends upon Sattav, Rajas and Tamas gunas. These gunas are in the mind (manas) of a human being since birth. They keep certain equilibrium in a normal individual resulting into good mental health and the imbalance of these gunas create mental disorders.

The western concept of mental health is concerned with an optimum level of emotional and behavioral adjustment of the individual. It is a state of maintaining harmony or balance between the needs, desires, aspirations and attitudes of the individual with respect to the prevailing conditions in the external environment.

In the Dictionary of Education C.V. Good termed mental health as the "Wholesomeness of the mind." World Health Organization (WHO) defined mental health as a state of well being in which the individual realizes his or her own abilities, can cope with normal stresses of life, can work productively and fruitfully and is able to make a significant contribution to community.

3. Meaning of Mental Hygiene

The term *mental hygiene* is closely related to mental health and revolves around the domain of mind. It stands for the art of developing, maintaining, and

promoting necessary behavioral, emotional, and social skills to sustain good, effective and efficient mental health. American Psychiatric Association has defined mental hygiene as "a science which suggests measures for prevention of mental illness and restoration of mental health by the cure of mental illness".

The two terms "Mental Hygiene" and "Mental Health" may be differentiated as means and ends. In other words, mental hygiene is a systematic body of knowledge which aims at attaining mental health. There are three important aspects of mental hygiene namely the preventive, preservative and the curative. The prevention means an understanding of the relationship that exists between wholesome personality development and life experiences. Preservative and curative denotes the preservation of the mental health of the individual and of the group as well as the discovery and utilization of therapeutic measures to cure mental illness.

4. Characteristics of a Mentally Healthy Person

The following are the behaviour patterns that a mentally healthy person may reflect in his behaviour:

Sense of Independence: A mentally healthy individual is intellectually developed, able to think independently and is confident. He views problems and setbacks as opportunities to be tackled smartly rather than an occasion for the display of anger and emotional outbursts.

Clarity of Goals: The mentally healthy individual has a clear-cut life goals which he sets as per his own strengths and weaknesses. He directs his efforts, energy and creativity towards the fulfillment of these goals.

Realistic Philosophy of Life: A mentally healthy person lives in a world of reality His approach towards the various problems of life is practical and he is not cowed down by imaginary fears, fantasy or pitfall.

Tolerance to face failures: A person with perfect mental balance has enough courage and power of tolerance for facing failures in his life. He never worries and repents over failures and mistakes.

Adaptability and Adjustment: The beliefs, convictions and behaviour of a mentally healthy person contribute to his happiness and the happiness of others. This tend to enhance his adaptability and adjustment in various life situations.

Optimism and Sense of Individuality: A mentally healthy person recognizes himself as a distinct person. He is free from abnormalities, dissatisfactions, undesirable mental disturbances, disorders, conflicts and frustration and full of self-confidence and optimism.

Balanced Life Style: The mentally healthy individual leads a well balanced personal, work, family and social life. He mostly remains satisfied and does not exhibit undue fear and anxiety for any new assigned accomplishments.

5. Defence Mechanisms

There are certain life situations or factors that cause emotional conflicts and frustrations in the individual due to which psychological balance of an

individual threatens. The 'ego defences' or 'Defence Mechanism' or 'mental mechanism' protect a person against these psychological dangers and help make adaptation to distressing experiences by preserving inner harmony.

Davison and Neale Defined: A defence mechanism is a strategy unconsciously utilized, that serves to protect the ego from anxiety.

6. Types of Defence Mechanisms

Denial In this mechanism the individual refuses to perceive or deny the reality of the unpleasant fact altogether (simple denial), admit the fact but deny its seriousness (minimization), or admit both the fact and seriousness but deny responsibility (transference).

Displacement

In this defence mechanism the mind redirects emotion from a "dangerous" object to a "safe" object. For e.g. a worker, angry at his boss, obviously unable to direct his anger and hostility to his intended target, comes home and yells at his wife. She, now also angry and upset, displaces her anger on the child, who then further displaces it on their pet dog.

Intellectualization

Intellectualization is a defence mechanism in which reasoning is used to block confrontation with an unconscious conflict and its associated emotional stress. This involves concentrating on the intellectual components of the situation so as to distance oneself from the anxiety-provoking emotions associated with such situations. Thus, it effectively removes one's self, emotionally, from a stressful event.

Projection

In this defence mechanism the individual "projects" one's own undesirable thoughts, motivations, desires, feelings—basically parts of oneself—onto someone else (usually another person, but psychological projection onto animals and inanimate objects also occurs).

Rationalization

In Simple words rationalization is making excuses for one's mistakes, and by doing so avoiding self-condemnation or condemnation by others. It occurs when a person attempts to explain or create excuses for an event or action in rational terms. In doing so, they are able to avoid accepting the true cause or reason resulting in the present situation.

There are two types of rationalization.

"Sour Grapes," In this kind of defence the individual fails to attain his cherished goal after repeated efforts and starts blaming various factors in order to rationalize his failure.

"Silver Lining," or "Sweet Lemon" It is the second, more productive type of rationalization in which individual feels that everything happens for the best, so one should try to find the blessing in disguise.

Reaction formation

It is also known as "reversal formation" or "believing the opposite." The person having a threatening or anxious emotion turns it into just the opposite in which anxiety-producing or unacceptable emotions are replaced by their direct opposites. For example, one who is strongly aggressive, afraid of his own destructive impulses, might act very humbly.

Regression

This has been defined as unconscious" back tracking" either in memory or in behaviour. It involves the reversion to an earlier stage of development in the face of unacceptable impulses. The individual using this mechanism recaptures past successful moments of satisfaction and give up mature problem-solving methods of dealing with challenges.

Repression/Suppression

Both mechanisms involve a process of pulling thoughts into the unconscious, and preventing painful or dangerous thoughts from entering consciousness. The difference is that repression is an unconscious force, while suppression is a conscious process, a conscious choice not to think about something. The effect of repression is that whatever individual tries to push away into the subconscious is not lost. The subconscious tends to empower it, and the more one tries to repress something, the more powerful and attractive it becomes. Finally, the repressed desire starts to manifest itself in actions, often in ways not noticeable to the person repressing it, but noticeable to others.

Sublimation

Sublimation is the refocusing of psychic energy away from negative outlets to more positive outlets. It is to convert the personally or socially intolerable impulses and drives into consciously accepted modes of behaviour. Sublimation, therefore, is the process of transforming negative or unacceptable wants and desires into "socially useful" achievements by finding an outlet into acceptable forms of expression, such as art, dance, music, crafts etc.

Compensation

It is the tendency of most of the persons to make up deficiency in one trait or area by development in another area. An individual who feels weak and fails in one area, compensates his weakness by excelling in another field. Compensation is generally of following types:

Direct Compensation: When an individual removes his specific weakness and frustration in the same field by unusual effort.

Substitute Compensation: An individual weak in one field attempts to become outstanding in another area.

Indirect Compensation: This is the most common compensation sought by parents through their children. The father, who wanted to be a doctor but failed, enjoys his son's success as a doctor.

Neurotic Compensation: This is used by an individual when normal compensatory mechanisms fail. In the absence of required abilities a person is bound to face failures again and again. In such circumstances, he develops neurotic compensation in the form of physical illness as well as mental illness.

Fantasy

Fantasy (daydreaming) is a way to escape real problems or kind of withdrawal of one's own self. The individual remains satisfied in a self-created satisfying world of imagination instead of facing the reality. The fantasies provide a temporary escape to a dream-world free from the dangers, threats and boredom of the real world. The common types of fantasies are roaming in the past, conquering hero and suffering hero or martyr type.

Identification

Identification (sometimes also called introjections) involves identifying with someone else, taking on their personality characteristics, in order to solve some emotional difficulty and avoid anxiety. In order to pacify a person whom, the individual perceive to be a threat, he may emulate aspects of their behaviour by adopting their mannerisms, repeating phrases or language patterns that they tend to use and mirroring their character traits, a person may attempt to appease the person.

Withdrawal

Withdrawal involves the removal of oneself from anything and everything that carries reminders of painful or stressful thoughts and emotions, e.g. avoidance in watching television or literature that contain images or scenes eliciting painful emotions or stressful thoughts.

Defence mechanisms are helpful and healthy if used in a proper manner. However, if misused or overused, the same defence mechanisms may prove to be unhealthy and lead to severe mental disorders.

7. Types of Disorders

- 1. Neurotic Disorders
- 2. Psychotic Disorders

Neurotic disorders

Psychoneurosis is an emotional disorder in which person remains in touch with reality but is seized with anxiety and threats to harm to his body. The dysfunction of behaviour is produced due to emotional stress caused by anxiety, frustrations, conflicts, deprivation of personal insecurity and inadequacy of the individual to cope with his problems. It has been observed that the individual suffering from neurosis experiences great difficulty in satisfying his needs and desires as well as his social obligations.

Types of Neurotic Disorders

Anxiety neurosis
Hypochondriac neurosis
Phobic neurosis
Obsessive-compulsive neurosis
Traumatic neurosis

Anxiety neurosis

The person suffering from anxiety neurosis fails to concentrate on any problem. His mind fluctuates very rapidly from one object to other. He feels difficulty in decision making and becomes excessively sensitive to what others say and feel about him. The person lacks self-confidence and feels discouraged to start any work independently. Sleep disturbances, excessive sweating, sustained muscle tension, tires easily and feels weakness.

Hypochondriac neurosis

The individual suffering from this disorder keeps on thinking about health and with various presumed disorders or diseases of the bodily organs. Hypochondriacs are characterized by their multiplicity of complaints about physical illness particularly a peculiar sensation in the general area of stomach, chest, head or anywhere else in the body consider themselves seriously ill. They utilize actual physical disability as a defence against feelings of a failure and as an escape from striving.

Phobic neurosis

Most of us have minor irrational fears but in phobic reactions such fears are intense and interfere with every day activities. Neurotics usually admit that they have no read cause to be afraid of the object or situation but they cannot help themselves. Phobic neurotics show a wide range of symptoms in addition to their phobias such as tension, headache, back pain, stomach upsets, dizzy spells and fear of "cracking up".

Obsessive-compulsive neurosis

Obsessive-compulsive neurosis is a behaviour pattern in which the individual is compelled to think about something that he does not want to think about whereas in compulsive neurosis the individual is compelled to carry out some action against his will. The individual knows that his behaviour is irrational but he cannot control it. Various types of obsessive behaviours are **Obsessive doubt i.e.** an inclination not to believe that a completed task has been accomplished satisfactorily as locking the door, and switching off the heater again n again etc. **Obsessive thinking** i.e. to repeat the same idea again and again as the mind of the patient may be full of thoughts of infection and disease and **Obsessive guilt** which haunts the mind of the individual and persons remains insecure, anxious about morality and unable to tolerate stress. On the basis of an analysis of

obsessive-compulsive activities it has been found that there are three mechanisms involved in it, guilt and punishment, substitute thoughts and rigid ordering of the future.

Traumatic neurosis

It is described as a reactive state resulting from the physical and emotional stress of continued danger and hardship experienced in combat.

The most common symptoms of traumatic neurosis are: -

Deterioration of performance

Inaccurate judgments

Slow reactions

Uncoordinated movements

Lack of confidence

Because of certain traumatic experiences, the patient generalizes that the whole world is dangerous and threatening and attempts to avoid any type of contact with dangerous situations.

Psychotic Disorders

In this type of disorder there is complete cut-off from reality and the disturbance is so much that it is difficult for the patient to carry on routine activities, communicate with others and to live according to social norms. The psychotic develops severe mental symptoms like delusion, hallucination, incoherence in speech and violence and is injurious to himself and to others because of which he is usually placed in confinement. The two common symptoms of psychotics are namely delusion and hallucination. A delusion is a false belief, an idea which is without any basis and out of harmony with the facts of the patient's surroundings. For example, a psychotic may have the delusion of grandeur as if he possesses tremendous power and influence on others. Some psychotics may have the delusion of persecution as if they are being harmed by others. The psychotics believe their delusions to be true and defend them despite factual evidence to the contrary. Hallucination refers to the perception of things and events that are wholly imaginary in nature. The most common hallucinations are visual and auditory. The psychotic may hear or see strange things in the void. For example, the patients see God in the void or hear the sound of ghosts etc. It has also been observed that some psychotics suffer from illusions in which the patient misinterprets or falsely perceives external stimuli.

Types of psychotic Disorders

Schizophrenia

Paranoia

Manic-depressive psychosis

Schizophrenia

Schizophrenia also called dementia, is the most common and the severest psychotic disorder and has higher occurrence in society. The common symptom of schizophrenia is that the behaviour is marked by disorganized thinking and feeling. There is no reason or logic in his speech and is marked by irrelevance and repetition of the same idea. The patient develops apathy of feeling and emotions to situations and withdraws himself from social situations and remains preoccupied with inward rumination. He sees delusion either of persecution or of grandeur. It is essentially caused by personality disturbances arising from the individual's inability to satisfy his ego-needs and to cope successfully with his environment.

Paranoia

Paranoia has been used by Greeks indiscriminately for all types of mental disorders but psychologists reserved the term paranoia to cases showing delusion and impaired contact with reality without severe personality disorganization. The patient's delusional system is logical and systematized. He possesses adequate general comprehension. Prolonged frustration and conflicts in childhood and adolescence resulting in marked feelings of inadequacy and insecurity are the basic causes of paranoia. If the relationship with parents in early childhood is disturbed, the child begins to feel insecure, unwanted, uncared for and unappreciated.

Manic-depressive psychosis

Manic-depressive psychosis, as the name suggests is a mental disorder characterized by periodic attacks often alternating in nature between marked elation and depression.

Characteristics

The periods of depression or elation appear alternately. It is not necessary that periods of elation and depression must occur in every patient. Patient may show either of the two. Attacks of elation/depression vary in duration from days to years. Normal periods appear between the attacks. It may also vary from patient to patient and in the same patient. The disturbance is basically emotional in nature. But intellectual processes are impaired. Following are the different types of manias and depressions.

Mania

This period is marked by feelings of elation in which the patient is unduly boastful, enthusiastic and hyperactive. He is irritable and intolerable of personal criticism. Following are the important types of mania.

Hypomania:

The hypomanic is usually very talkative, boastful and distractible. He is humorous, amusing and entertaining. He is sensitive to criticism and irritable.

His speech is loud and rapid and frequently accompanied by gestures. The patient has not insight into his conditions.

Acute mania:

The speech of the acute mania is confused. He suffers from flights of ideas. He shifts from subject without any attempts to connect them. He becomes destructive and may break furniture, or may strike those near him. He is overactive. Hallucination and illusions are frequent. Though Memory is not affected yet insight is seldom present in him.

Hyper mania: The patient suffering from hyper mania manifests symptoms of mania such as extreme motor activity with marked tendencies toward violence and destructiveness. His behaviour is confused, incoherent, vulgar and he makes noise, cries, yells, sings and dances. Hallucination and illusion are sometimes not present.

Delusional Mania: The patient suffers from delusions of grandeur of unsystematic and illogical types. The patient believes himself to be a great leader, a saint or even God. Hallucination, illusions and much motor excitement are the common symptoms of delusional mania.

Depressive Psychosis: The patient suffering from depressive psychosis is characterized by extremely sad and pessimistic mood. He feels unworthy and lacks confidence to do anything. He experiences hallucination, illusions and delusions. Following types of depressions have been reported.

Simple depression: The patient shows general slowing down of physical and mental activities. He is gloomy dejected and sad. His attitude is of uncertainty and doubt. He feels unworthy and incompetent to do anything. He entertains thoughts of suicide. He neither eats nor sleeps well.

Marked depression: The patient feels himself completely helpless and unworthy to do anything. His speech is slow and monotonous. Sometimes patient refuses to take food. Delusions of sin and guilt are common

Sty porous depression: Sty porous depression is marked by morbidity, dearth of ideas, stupor and clouding of consciousness. The patient is mute and negativistic. He is looked after by others for all his needs. The patient is completely inactive. He may sit in the same posture hours together until disturbed.

Delusional depression: The patient develops illogical and unsystematic delusions of persecution. He may develop hypochondriacal ideas, ideas of ruin, ideas of humility and ideas of guilt. Delusions are accompanied by hallucinations and illusions.

Mixed types:All patients who suffer from manic-depressive psychosis cannot either be manic or depressed types. There are patients who possess the symptoms of both the phases and are thus called mixed types. A patient may be

talkative and excited and yet be severely depressed or may be active at the same time.

8. Conclusion

Mental health and hygiene can be maintained by ego defence mechanism through which the person attempts to cope with his frustrations, conflicts and environmental difficulties. But the excessive use of these mechanisms can lead to serious neurotic and psychotic disorders. In order to prevent such situations positive attitudes and good handling of children are basic.

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QUADRENT-IV Self-Assessment

Subject Name: Education

Course Name: Understanding the Learner Module Name: Mental Health and Hygiene

Course Code: EDU502 Module Code: UTL014

Multiple Choice Questions

- Q1 The concept of mental health is given in one of the following Indian Scriptures
 - a) Rigveda b) Atharveda c) Yajurveda d) Samveda.
- Q2 As per Indian Scriptures the mental health depends upon
 - a) Sattav, Rajas and Tamas b) Vata, Pitta and Kaph c) Pitta, Kaph and Tamas
 - d) Sattav Tamas and pitta.
- Q3 Mental Hygiene deals with process of attaining
- a) Physical health b) Emotional well-being c) Social competence d) Mental health **Q4** A mentally healthy person does not reflect
- a) Harmony in relationships b) Self Sufficiency c) Maladjustment d) Optimism **Q5** The following term is not a synonym for Defence mechanisms
- a) Mental Mechanisms b) Ego Defences c) Coping Strategies d) Adjustment Mechanisms **Q6** Defence Mechanisms operate in human beings
 - a) Consciously b) Sub- consciously c) Unconsciously d) Both Sub-consciously & unconsciously
- Q7 The process of constructing a logical justification for a decision or mistake is termed as
- a) Regression b) Rationalisation c) Intellectualization d) Sublimation
 Q8 The psychological projection onto animals and inanimate objects happens because of
- a) Desirable Feelings b) Undesirable feelings c) Undesirable desires d) Both b&c **Q9** Suppose a student does not qualify IAS examination in spite of repeated efforts and starts

blaming the system, that individual or student is using the following

- a) Rationalization b) Regression c) Repression d) Reaction Formation **Q10** The cause of irrational and intense fear is
 - a) Hypochondric Neurosis b) Obsessive Compulsive Neurosis c) Traumatic Neurosis
 - d) Phobic Neurosis

SCORING KEY: 1- B, 2- A, 3- D, 4- C, 5- C, 6- D, 7- C, 8- D, 9- A, 10- D