UNIT 12 : MALADAPTIVE HUMAN BEHAVIOUR

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12.1 LEARNING OBJECTIVES

After going through this unit you will be able to-

- differentiate between normality and abnormality;
- obtain information related to certain mental disorders of personality, somatoform, stress and intellectual disability;
- understand the factors that contribute to an individual's adjustment in life.

12.2 INTRODUCTION

Human behaviour can be categorised as adaptive or maladaptive, normal or abnormal. A person who adapts to the demands of the environment is referred to as someone who is normal and mentally healthy.

Going by the definition of mental health by WHO, mental health is a condition subject to fluctuation due to biological and social factors which enables the individual to achieve a satisfactory synthesis of his potentially conflicting, instinctual drives; to form and maintain harmonious relations with others and to participate in constructive changes in his social and physical environments. Maladjustment on the other hand, is a process where an individual is unable to satisfy his biological, psychological or social needs successfully and establishes an imbalance between his personal needs and expectations of the society resulting in psycho social disturbances.This unit shall therefore examine these aspects of maladaptive behaviour which constitutes abnormality and discuss some of the disorders relating to mental illness.

12.3 UNDERSTANDING ABNORMAL PSYCHOLOGY

Abnormal psychology is a branch of psychology that deals with psychopathology and abnormal behaviour. The term covers a broad range of disorders, from depression to obsession-compulsion to sexual deviation and many more. Those in the field of abnormal psychology study people's emotional, cognitive and behavioral problems.



A B N O R M A L PSYCHOLOGY: Studies peoples' emotional cogntive and behavioural problems.

Abnormalitycan be defined with the help of the following models:

12.3.1. STATISTICAL MODEL

Using the Gauss's normal law of error - a bell shaped curve, the frequency of behaviour can be arranged on a continuum ranging from good to bad, more or less, acceptable or unacceptable. Majority of the people cluster around mid (central) point and the rest spread towards the two extremes. Those around the midpoint are treated as normal, the rest (two extremes) are considered abnormal. These abnormal persons include those who are mentally ill as well as supernormal who are deviant in the positive sense (the extremely intelligent ones). This model is not accepted or used in classification as it puts both the extremes as abnormal and it does not offer any options for treatment.

12.3.2. MEDICAL MODEL (BIOLOGICAL CONCEPT)

Medical model treats mental illness at par with physical illness and abnormality is the result of a physical lesion or disordered state. A healthy person is considered normal. It fails to address the psycho social aspects.

12.3.3. PSYCHOLOGICAL MODEL

Abnormal behaviours are personal choices. Emphasises on subjective aspect or personal choice to feel and behave abnormally. Based on what one perceives, so what is distressful to one is not necessarily distressful to others. It is their personal choice to behave normally or abnormally, and seek or not seek treatment.

12.3.4. LEGAL MODEL (SOCIO-CULTURAL CONCEPT)

Abnormal behaviour is based on value judgements, against certain social norms or values. Behaviour that is violating the rules of functioning in society or breaking the rules is abnormal. When an individual complies with the social norms he is normal or well adapted and considered abnormal or maladjusted if he defies the same.

Therefore, abnormality cannot be determined by any single element or factor. There are no universal agreements about what is meant by abnormality but there are standards to diagnose which conditions are abnormal and which are not. Any behaviour that causes problems in a person's life or is disruptive to other people would be considered "abnormal" behaviour that may require mental health intervention.

Abnormal behaviour is something that is

- disturbing (socially unacceptable),
- distressing, maladaptive (or self-defeating), and often
- the result of distorted thoughts (cognitions).

The field of science that deals with studying such behaviour is abnormal psychology where the emphasis is on the level of distress, suffering or pain the individual experiences.

12.4 PSYCHO-PATHOLOGY

Psychopathology is a term which refers to the study of mental illness or the manifestation of behaviours which may be indicative of mental illness or psychological impairment. The term psychopathology is of Greek origin - psyche means 'soul', and pathos means 'suffering' which is indicative of the distress and pain caused to the mind.

Actually, psychopathology and abnormal psychology are similar terminologies to refer to the study of mental and behavioural disorders. These disorders are classified as disorders of perception, thought, behavioural and emotions and each of them have distinct symptoms, etiology and treatment.

The two systems of classification are:

- The International Classification of Diseases System (ICD - 10), published by World Health Organisation
- Diagnostic and Statistical Manual of Mental Disorders V (DSM - V), published by the American Psychiatric Association.

However, psychopathology is not to be confused with psychopathy, which is related to antisocial personality disorders and criminality.

12.5. PERSONALITY DISORDERS

"Disorder" is used in ICD 10 to imply the existence of a clinically recognizable set of symptoms or behaviour associated in most cases with distress and with interference with personal functions. Mental illness is categorised into different disorders which has its corresponding symptoms that are assessed by mental health professionals (comprising of psychiatrist, psychologist and psychiatric social worker) to arrive at the right diagnosis.

In this unit, a few disorders shall be discussed based on ICD classification which is the one followed in India for diagnosis of mental illnesses.

12.5.1. SPECIFIC PERSONALITY DISORDERS (ICD CODE F60)

A specific personality disorder is a severe disturbance in the character

and behaviourof the individual, usually involving several areas of the personality, and nearly always associated with considerable personal and social disruption. Personality disorder tends to appear in late childhood or adolescence and continues to manifest into adulthood.

Personality disorders are therefore subdivided according to clusters of traits thatcorrespond to the most frequent or conspicuous behavioural manifestations. Thefollowing subtypes according to ICD - 10 are recognized as major forms of personalitydisorders.

- Paranoid personality disorder
- Schizoid personality disorder
- Dissocial personality disorder
- Emotionally unstable personality disorder
- Histrionic personality disorder

We shall discuss the symptoms related to dissocial personality disorder alone in this section.

12.5.2. DISSOCIAL PERSONALITY DISORDER (CODE F60.2)

Dissocial personality disorder is also known as anti-social personality disorder (ASPD) as there is disparity between the person's behaviour and the prevailing social norms.

It is characterized by:

(a)Callous unconcern for the feelings of others;

(b)Gross and persistent attitude of irresponsibility and disregard for socialnorms, rules and obligations;

(c)Incapacity to maintain enduring relationships, though having nodifficulty in establishing them;

(d)Very low tolerance to frustration and a low threshold for discharge ofaggression, including violence;

(e)Incapacity to experience guilt or to profit from experience, particularlypunishment;

(f)marked proneness to blame others, or to offer plausible rationalizations,for the behaviour that has brought the patient into conflict withsociety.

Presence of at least three of the above symptoms is essential to arrive at a diagnosis of dissocial personality disorder.The other terms that are used are amoral, antisocial, asocial, psychopathic, and sociopathicpersonality (disorder).

Causal factors

Genetic influences where a particular gene leading to aggressive behaviour can be one of the factors. Persons with emotional deficit and deficiency in fear and anxiety can also be some reasons. For some, they have used antisocial behaviour as a coping style since childhood.Influences of particular family and environmental patterns (early parental loss, parental rejection, neglect and inconsistent discipline) are also causative factors for development of personality disorder.

Treatment for personality disorders

A person with a personality disorder does not believe the need for treatment as there is no personal distress. Only those in prisons or rehabilitation settings participate in treatment regimens, but rarely change. Treatment deals with a total lifestyle change rather than specific maladaptive behaviour. Cognitive behaviour treatments aimed at increasing self-control, teaching anger management, changing antisocial attitudes and curing drug addiction can be beneficial.

12.6 SOMATOFORM DISORDERS

Somatoform disorders are a group of conditions that involve physical symptoms and complaints suggesting the presence of a medical condition but without any evidence of physical pathology to account for them .Soma means body and somatoform disorders involve patterns in which individuals complain of bodily symptoms or defects that suggest the presence of medical problem, but no organic basis can be found. They are preoccupied with their state of health, appearance, diseases or bodily organs and have no control over their symptoms. They genuinely believe that something is terribly wrong with their bodies and frequently show up at the clinics and

doctors have difficult task deciding how to manage their complaints which have no physical basis.

The main feature of somatoform disorders(Code F45) is repeated presentation of physical symptoms, togetherwith persistent requests for medical investigations, in spite of repeated negative findings andreassurances by doctors that the symptoms have no physical basis. If any physical disorders arepresent, they do not explain the nature and extent of the symptoms or the distress and preoccupation of the patient. Even when the onset and continuation of the symptoms bear a close relationship with unpleasant life events or with difficulties or conflicts, the patient usually resists attempts to discuss the possibility of psychological causation. In these disorders there is often a degree of attention-seeking behaviour.

12.6.1. DISTINCT SOMATOFORM PATTERNS ACCORDING TO ICD - 10 ARE :

- Somatization disorder
- Undifferentiated somatoform disorder
- Hypochondriacal disorder
- Somatoform autonomic dysfunction
- Persistent somatoform pain disorder
- Other somatoform disorders
- Somatoform disorder, unspecified

12.6.2 TREATMENT

Treatment for persons with somatoform disorders is difficult as they refuse to admit the presence of any psychological factor. Psychodynamic approach focussing on the insight like hypnosis can be effective. Other than that, cognitive behavioural treatment (CBT) and prescription of antidepressants can be of help in handling the symptoms.



CHECK YOUR PROGRESS

Q 1: What are the three 'D's of abnormal behaviour?

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Q 2: What is a disorder?

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Q 3: When is the onset of personality disorders?

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12.7 MENTAL RETARDATION

Mental retardation is a condition of arrested or incomplete development of the mind, which is especially characterized by impairment of skills manifested during the developmental period, which contribute to the overall level of intelligence.For a definite diagnosis, there should be a reduced level of intellectual functioning resulting in diminished ability to adapt to the daily demands of the normal social environment.Initial diagnosis occurs at ages of 5 to 6 (time of schooling). Also known as intellectual disability, it is characterized by below average intelligence or mental ability and a lack of skills for day to day living. People with intellectual disabilities can and do learn new skills, but they learn them more slowly. There are varying degrees of intellectual disability, from mild to profound. Intelligent Quotient (IQ) needs to be calculated to determine the category of retardation.



M E N T A L RETARDATION: is also known as Intellectual Disability

Classification of Mental Retardation - ICD -10

Diagnosed Level of MR	**Corresponding IQ range**
Mild retardation	IQ - 50 to 69
Moderate retardation	IQ - 35 to 49
Severe retardation	IQ - 20 to 34
Profound retardation	IQ below 20

Each of the levels is discussed with corresponding symptoms:

12.7.1. MILD MENTAL RETARDATION (CODE F70)

A person with mild retardation has the ability to use speech, make conversations, acquire language and they are fully independent in self-care (eating, washing, dressing, bowel and bladder control). Main difficulties are usually seen in academic school work, reading and writing.

12.7.2. MODERATE MENTAL RETARDATION (CODEF71)

In this stage, some of them need supervision throughout life as achievement of self-care and motor skills is retarded. They are slow in developing comprehension and use of language.Progress in school work is limited, but a proportion of these individuals learn the basic skills needed for reading, writing, and counting.

12.7.3. SEVERE MENTAL RETARDATION (CODE F72)

Persons with severe retardation suffer from a marked degree of motor impairment or other associated deficits, indicating the presence of clinically significant damage to or maldevelopment of the central nervous system.

12.7.4. PROFOUND MENTAL RETARDATION (CODE F73)

Those with profound retardation are severely limited in their ability to understand or comply with requests or instructions. They are immobile or severely restricted in mobility, incontinent, and capable at most of only very rudimentary forms of nonverbal communication. Constant help and supervision is required as they possess little or no ability to care for their own basic needs.

12.7.5. CAUSES OF MENTAL RETARDATION

- o Brain defects
- o 5 biological conditions
- Genetic chromosomal factors
- Infections and toxic agents (viral encephalitis, genital herpes, syphilis,

German measles etc, toxic agents such as carbon monoxide, incompatibility of blood types)

- Trauma (physical injury, hypoxia - lack of oxygen to the brain due to delayed breathing)
- Ionizing radiation (produces gene mutation in the sex cells of either parents leading to defective offspring)
- Malnutrition

12.7.6. TREATMENT OUTCOMES

As the condition is not curable, persons with retardation can be provided with special education and certain rehabilitative services. Educational and inclusive programmes can be available to those with mild retardation to mainstream them into society. Institutionalization is essential for the severely retarded with associated physical impairment.

12.8 STRESS

The term stress is used in countless ways today, describing everything from feeling ill in the morning to anxiety leading to depression. In some circles it has both negative and positive connotations. Stress is a natural phenomenon. It can be defined as any emotional, physical, social, or economic factor that requires a response or a change from an individual. Stress is the body's way of responding to any kind of demand or threat. It is a defence mechanism that has, in many ways, assured the survival of the human species. However, today, prolonged stress is destructive and debilitating.

12.8.1. STRESS AS A HUMAN REACTION

The General Adaptation Syndrome was first described by Hans Hugo Bruno Selye in 1936. He suggested that there are three stages to stress: alarm, adaptation and exhaustion.When a person senses danger, the brain sends signals to other parts of the body known as 'stress response' to prepare to "fright", fight or flee.

Causes of stress known as stressors can be both negative and positive. Positive stress known as eustress occurs when the level of stress

is high enough to motivate a person to accomplish the task. Stress can also be the result of internal thoughts that are irrational causing fear and anxiety. Stress is caused by an imbalance between the perceived demands and the perceived resources and abilities of a person to cope with those demands. One's perception is also important as each one responds differently to situations. What is stressful to some may be relaxing or enjoyable to others. So it depends on how one perceives and responds to it.

12.8.2. SYMPTOMS OF STRESS

It is important to be aware of the warning signs and symptoms of stress that is exhibitted through our thoughts, emotions, and behaviour and body reactions.

Cognitive Symptoms	**Emotional Symptoms**	**Physical Symptoms**	**Behavioural Symptoms**
Memory problems	Depression or general unhappiness	Aches and pains	Eating more or less
Inability to concentrate	Anxiety and agitation	Diarrhoea or constipation	Sleeping too much or little
Poor judgment	Moodiness, irritability, or anger	Nausea, dizziness	Withdrawing from others
Seeing only the negative	Feeling overwhelmed	Chest pain, rapid heart rate	Procrastinating or neglecting responsibilities
Anxious or racing thoughts	Loneliness and isolation	Loss of sex drive	Using alcohol, cigarettes, or drugs to relax
Constant worrying	Other mental or emotional health problems	Frequent colds or flu	Nervous habits (e.g. nail biting, pacing)

12.8.3. STRESS DISORDERS

We discussed stress as a normal human reaction but in certain situations it can become a disorder that needs attention or intervention by professions, called as stress disorders. These disorders occur when the stressor outside the range of normal human experience can cause major emotional disturbance. Some of the stress disorders according to ICD 10 are - **Acute Stress Disorder and Post Traumatic Stress Disorder (PTSD).** The symptoms, causes and treatment of PTSD are discussed in this section to get an understanding of how traumatic events in one's life can lead to a situation that needs psycho social assistance.

12.8.4. POST-TRAUMATIC STRESS DISORDER

PTSD refers to severe psychological and physical symptoms that result from sudden, unexpected, environmental crises. This arises as a delayed response to a stressful event or situation of an exceptionally threatening or catastrophic nature, which is likely to causepervasive distress in almost anyone.

Traumatic events

The stressful situation or trauma could be any natural or man-made disaster, being a combat, serious accident, witnessing the violent death of others, or being the victim of torture, terrorism, rape,or other crime.

Symptoms

Typical symptoms include episodes of repeated reliving of the trauma in intrusive memories("flashbacks") or dreams, occurring against the persisting background of a sense of"numbness" and emotional blunting, detachment from other people, unresponsiveness tosurroundings, and avoidance of activities and situations reminiscent of thetrauma.

Commonly there is fear and avoidance of cues that remind the sufferer of theoriginal trauma. Rarely, there may be dramatic, acute bursts of fear, panic or aggression,triggered by stimuli arousing a sudden recollection and/or re-enactment of the trauma or ofthe original reaction to it.Anxiety and depression are commonly associated with the above symptomsand signs,

and suicidal ideation is present. Excessive use of alcohol or drugs may be acomplicating factor.

The onset follows the trauma with a latency period which may range from a few weeks to months(but rarely exceeds 6 months). This disorder should not generally be diagnosed unless there is evidence that it arose within 6 monthsof a traumatic event of exceptional severity.

Treatment for Disorder and Post Traumatic Stress Disorder (PTSD).

The most effective treatment for PTSD is crisis counselling that is short term and prescribing psychotropic medications to deal with any symptoms of discomfort or anxiety. In situations of disaster, there can be post disaster debriefing sessions and direct exposure therapy to assist the affected persons deal with the situation. Telephone hotlines can be available for dealing with distress and appropriate help can be provided.

12.9 CONCEPT OF EFFECTIVE ADJUSTMENT



MALADJUSTMENT: are deviations from the norms, usually called abnormal behaviour.

In the light of all that has been discussed about abnormal behaviour, it is important to explore the term adjustment. For eg: if we face a stressful situation, the way we handle it positively is one way of adapting or adjusting to the situation. Adjustment is therefore defined as a process wherein one builds variations in the behaviour to achieve harmony with oneself, others or the environment with an aim to maintain the state of equilibrium between the individual and the environment.It is basically the demands and pressures imposed on the individual by the environment and his reaction to it.

It centres mostly on the relationship established between the individual and the environment. Each individual holds a certain position in society and is expected to fulfill that role. When he is able to fulfill the role in a successful manner, he derives immense satisfaction. But, if he fails to execute that role, he ends up getting frustrated. If the relationship between the individual and hisenvironment is in accordance with the social norms, then the adjustment is achieved and the behaviour of the person is considered normal. On the other hand, if there are deviations from the norms, then itdemands clinical investigations and interventions. Such deviations are

defined as maladjustment and if they are severe, they are classified as abnormal behaviour. This is also referred to as normal adjustment and abnormal adjustment.

Adjustment can also be discussed as a mental health component. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community. In this positive sense, mental health is the foundation for individual well-being and the effective functioning of a community. Therefore, a mentally healthy individual will be able to fulfill his responsibilities in society and realize his goals.

There are two ways of understanding adjustment. It is considered as an achievement when an individual accomplishes something in life and is rated based on his performance. Adjustment can also be a process throughout a person's life where he maintains balance among various demands placed on him through his life course. One has to adjust to different phases in life like getting adjusted in college, a new job, marriage or even to failures and disappointments. In life, we come across different personalities some of which are compatible with us and some can annoy us. Ultimately, adjustment is also about adapting to both these personalities in an accommodating manner.

12.10. ADJUSTMENT NATURE

Having discussed the concept of adjustment, it is easier to understand what is meant by adjustment nature. A relationship exists between the person and the environment and therefore the individual's personality has a lot to do with adjustment. It depends on his perspective towards life and the situations he experiences. As discussed above, a mentally healthy person will be able to adjust and adapt himself to the changing environment in a positive manner.

12.10.1. QUALITIES OF A WELL ADJUSTMENT PERSON

There are certain traits or characteristics that constitute an adjustment

personality such as:

- approaches every challenging situation with confidence and forethought;
- is free from internal conflicts, is not at 'war' with himself;
- able to get along well with others;
- accepts criticism and is not easily upset;
- has a strong sense of self-esteem;
- knows himself, his needs, problems and goals (self-actualization);
- has good self-control- balances his emotions;
- faces problems and tries to solve them intelligently. ie. coping with stress and anxiety;
- able to respond to the varied experiences of life with flexibility and a sense of purpose.
- is resilient and gets the most out of life.

When individuals are confronted with difficult situations, challenges or obstacles in life, they handle them by the help of certain tools called defence mechanisms or adjustment mechanisms. By using them, the person is able to deal with the issue and adjust accordingly to his environment. Sometimes, it becomes a habitual process of using these defences. However, there are no restrictions to use of adjustment mechanisms. Eventually, one must learn to adapt to changing situations with a positive attitude and enjoy life to the fullest.



12.11 ACTIVITY

Reflect on any stressful situation in your life in the recent past. Identify the cause or the triggers, the varied symptoms you experienced and also the mechanisms by which you handled it.

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CHECK YOUR PROGRESS

Q 4: What are the main features of mental retardation?

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Q 5: What is the most effective treatment for PTSD?

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12.12. LET US SUM UP

- Abnormal psychology is a branch of psychology that deals with psychopathology and abnormal behaviour.
- Abnormality can be understood with the help of four models - viz., Statistical Model, Medical model, Psychological model and the Legal model.
- There are no universal agreements about what is meant by abnormality but there are standards to diagnose which conditions are abnormal and which are not. The systems of classification of mental illness are: The International Classification of Diseases System (ICD - 10) and the Diagnostic and Statistical Manual of Mental Disorders V (DSM - V).
- Abnormal behaviour is something that isdisturbing (socially unacceptable),distressing, maladaptive (or self-defeating), and often the result of distorted thoughts (cognitions).
- Psychopathology refers to the study of mental illness or the manifestation of behaviours indicative of mental illness.

- Personality disorder is a severe disturbance in the character and behaviour of the individual, involving the personality, and associated with some personal and social disruption.
- Some of the symptoms of dissocial personality disorder are:
  - o Callous unconcern for the feelings of others;
  - o Gross and persistent attitude of irresponsibility and disregard for social norms, rules and obligations;
  - o Incapacity to maintain enduring relationships, though having no difficulty in establishing them;
  - o Very low tolerance to frustration and a low threshold for discharge of aggression, including violence;
- The main feature of somatoform disorders is repeated presentation of physical symptoms, together with persistent requests for medical investigations, in spite of repeated negative findings and reassurances by doctors that the symptoms have no physical basis.
- Mental retardation is a condition of arrested or incomplete development of the mind, which is especially characterized by impairment of skills manifested during the developmental period, which contribute to the overall level of intelligence.
- There are varying degrees of intellectual disability, from mild to profound such as - Mild mental retardation (IQ - 50 to 69); Moderate mental retardation (IQ - 35 to 49); Severe mental retardation (IQ - 20 to 34); Profound mental retardation (IQ below 20).Intelligent Quotient (IQ) needs to be calculated to determine the level of retardation.
- Mental retardation is not curable; persons with retardation can be provided with special education and certain rehabilitative services. Educational and inclusive programmes can be available to those with mild retardation to mainstream them into society.
- Stress is a natural phenomenon. It can be defined as any emotional, physical, social, or economic factor that requires a response or a change from an individual. It is the body's way of responding to any kind of demand or threat.
- When a person senses danger, the brain sends signals to other parts of the body known as 'stress response' to prepare to "fright",

fight or flee. Positive stress known as eustress occurs when the level of stress is high enough to motivate a person to accomplish the task.

- Symptoms of stress can be felt at the cognitive level, emotional level, behaviour and physical level.
- Stress disorders occur when the stressor outside the range of normal human experience can cause major emotional disturbance.
- PTSD refers to severe psychological and physical symptoms that result from sudden, unexpected, environmental crises. This arises as a delayed response to a stressful event or a threatening situation.
- Adjustment is defined as a process wherein one builds variations in the behaviour to achieve harmony with oneself, others or the environment with an aim to maintain the state of equilibrium between the individual and the environment.
- If the relationship between the individual and his environment is in accordance with the social norms, then he is considered to be normal and a well-adjusted person. But if his behaviour is in deviation from the norms, it is called maladjustment and he may need intervention. These deviations are called abnormal behaviour. This is also referred to as normal adjustment and abnormal adjustment.
- A well-adjusted person approaches every challenging situation with confidence; able to get along well with others; accepts criticism and is not easily upset; is resilient and has good self-control.



12.13 FURTHER READING

- Carson, R. C., Butcher, J. N., Mineka, S., & Hooley, J. H. (2007).Abnormal psychology [12th Ed]. New Delhi: Pearson Education Inc.
- The ICD - 10 Classification of Mental and Behavioural Disorders, (2007). World Health Organization. Indian Edition. New Delhi.

12.14 ANSWERS TO CHECK YOUR PROGRESS

Ans to Q No. 1: Disturbing, Distressing, and the result of Distorted thoughts.

Ans to Q No. 2: Disorder" is used in ICD 10 to imply the existence of a clinically recognizable set of symptoms or behaviour associated in most cases with distress and with interference with personal functions.

Ans to Q No. 3: Personality disorder tends to appear in late childhood or adolescence and continues to manifest into adulthood.

Ans to Q No. 4: Belowaverage intelligence or mental ability and a lack of skills for day to day living.

Ans to Q No. 5: Short term crisis counselling

12.15 MODEL QUESTIONS

A) Short Questions (Answer each question in about 150 words)

Q1: What is psychopathology?

Q2: What are somatoform disorders?

Q3: What are the symptoms of dissocial personality disorder?

Q4: Briefly discuss post-traumatic stress disorder.

Q5: What are the qualities of a well adjusting personality?

B) Long Questions (Answer each question in about 300-500 words)

Q1: Define abnormality. Discuss the different models of abnormality.

Q 2: What is stress? How will you identify a person going through stress?

Q 3: What is mental retardation? Explain the different categories and the corresponding symptoms.