



An Overview of the Abnormal Concept from Mental Health Perspective

Anormal Kavramına Ruh Sağlığı Üzerinden Bir Bakış

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ABSTRACT

In this study, the definition of mental health within the framework of abnormal behavior, the definition of the concept of abnormal, how and according to which criteria individuals are considered as normal and abnormal, what statuses were given to the concept of abnormal in the past, how the treatment of individuals with abnormal behavior was done, the definition and criteria of mental disorders were discussed. In this context, the distinguishing points of the disorders that stand out in the literature and the facts and fictions about mental health were mentioned. In addition to this, it is important to establish a relationship between abnormal behavior and the approaches that examine the individual's well-being and to pay regard to culture-specific variations at the point of treatment. Based on the literature, various suggestions were offered for both practitioners and researchers.

Keywords: Abnormal psychology, mental health, mental disorders

ÖZ

Bu çalışmada anormal davranış çerçevesinde ruh sağlığının tanımı, anormal kavramının tanımı, bireylerin nasıl ve hangi kriterlere göre normal ve anormal olarak ele alındığı, geçmişte anormal kavramına hangi statülerin verildiği, anormal davranış gösteren bireylerin tedavilerinin nasıl yapıldığı, ruhsal bozuklukların tanımı ve ölçütlerinin neler olduğu ele alınmıştır. Bu bağlamda alanyazında ön plana çıkan bozuklukların ayırt edici noktaları ile akıl sağlığı noktasındaki gerçekler ve kurgulara değinilmiştir. Bununla birlikte anormal davranış ile bireyin iyi oluşunu inceleyen yaklaşımlar arasında ilişki kurulmasının ve tedavi noktasında kültüre özgü varyasyonların göz önünde bulundurulmasının önemli olduğuna dikkat çekilmiştir. Alanyazından hareketle hem uygulayıcılar hem de araştırmacılar için çeşitli öneriler sunulmuştur.

Anahtar sözcükler: Anormal psikolojisi, ruh sağlığı, ruhsal bozukluklar

Introduction

Mankind has tried to research, understand and know the world and the universe he has lived on in every period of history, but as a result of all these efforts, the topic that he had the least knowledge on was again about himself (Geçtan 2019). As individuals in the society, it can sometimes be difficult to make sense of people's normal behaviors, but it may be more difficult at this point to make sense of their abnormal behaviors. Mental health has always been an important issue for societies. So much so that mental health disorders are on the rise in every country, and if there is a common failure to respond and no action is taken, it could cost the global economy \$16 trillion between 2010 and 2030. Accordingly, according to the "Lancet Commission" report prepared by 28 global experts in psychiatry, public health and neuroscience along with mental health patients and advocacy groups, it was stated that the growing crisis could

permanently damage people, communities and economies worldwide. The report's co-lead author, Vikram Patel, noted that while some of the costs are the direct costs of health care and medicines or other treatments, most of them are indirectly in the form of loss of productivity, social welfare, education, law and order expenditures. In addition, the World Health Organization (WHO) estimates that around 300 million people worldwide are depressed and 50 million have dementia. Similarly, it is estimated that schizophrenia affects 23 million people and the number of those affected by bipolar disorder is around 60 million (Reuters 2018). All these data clearly reveal that mental health has a universal importance. Therefore the issue of what criteria we will consider individuals with gains even more importance. It can be said that the most distinguished comment that could be made against classifying individuals as normal and abnormal in terms of mental health was made by Herman Melville: "Who in the rainbow can draw the line where the violet tint ends and the orange

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tint begins? Distinctly we see the difference of the colors, but where exactly does the one first blendingly enter into the other? So with sanity and insanity.” (as cited in Dutton 2019). This situation shows us that the concepts of normal and abnormal are intertwined and fused, representing a whole. Similarly, considering that there is no consensus on the distinction between these two concepts in the historical process, it is possible to say that it is a very difficult task to deal with individuals according to which criteria.

It seems that the concepts of soul and mind are handled in the same sense in many studies. In this study, these two concepts were handled in a similar way. In addition, there are many definitions about the concept of mental health. The most widely used definition is defined by WHO as “a state of well-being in which an individual realizes his/her abilities, copes with the normal stresses of life, works productively and efficiently, and contributes to the society in which he/she lives” (WHO 2001a). In the American Psychological Association (APA) Psychology Dictionary, it is defined as “a state of mind characterized by emotional well-being, good behavioral adjustment, relative freedom from anxiety and disabling symptoms, and a capacity to establish constructive relationships and cope with the ordinary demands and stresses of life.” (APA 2021). Looking at the definitions of the concept of soul in the historical process, the understanding that it is a being that activates the body but cannot be seen with the eye has been adopted in periods before Christ, while the understanding that the function of the soul is the mind has begun to come to the fore with the beginning of the distinction between the soul and the self in the periods after Christ. In the 17th and 18th centuries, it was handled with a focus on the mind and mental process, and in the 19th and 20th centuries, with the mind’s transition from passivity to activeness, it is seen that it was handled through subconscious, superconscious and unconscious concepts. Finally, looking at its definition in the 21st century, the concept of soul is discussed within the framework of the concepts of spirituality, transcendence, meaning and integration with the universe (Düzgüner 2013).

New perspectives on mental health have emerged in recent years. One of these perspectives is undoubtedly the positive psychology approach. Looking at it, from the very first day of its appearance, science of psychology has focused more on the negative aspects and abnormal behavior of people while other positive features have been ignored. According to Seligman and Csikszentmihalyi (2000), the science of psychology has become a curative science within the framework of the disease model, especially after the Second World War. In the later process, along with the approach of positive psychology, it began to be thought that it was important to address people’s strengths as well. Considering the healing aspect of the individual’s strengths, it can be said that the concept of positive psychology is important. Considering that this approach is new and open to development, it is thought that it is extremely important to carry out studies and practices for individuals with mental health disorders in the future. In this context, in this study, the definition of the concept of abnormal, how and according to which criteria individuals are considered as normal and abnormal, what statuses were given to the concept of abnormal in the past, how the treatment of individuals with abnormal behaviors was done, the

definition and criteria of mental disorders will be discussed. In this context, the distinguishing points of the disorders that stand out in the literature, the facts and fictions about mental health will be mentioned, and various suggestions will be presented for researchers and practitioners based on the literature.

Definition and Historical Development of the Concept of Abnormal

Sigmund Freud put forward a statement about the individual’s state of being healthy as “love and work are the cornerstones of our humanness”. (Freud 2018). Looking at the literature, it can be said that the concepts of healthy and normal are two concepts that have similar aspects with each other. For this reason, before defining the concept of abnormal, when the definition of the concept of normal in the Turkish Language Association (TDK) Contemporary Turkish Dictionary is examined, it is seen that it is expressed as “conforming to the rule, customary, ordinary, regular, not excessive, appropriate”. Then, looking at the definition of the concept of abnormal, it is seen that it is expressed as “contrary to the general, customary and rule, not normal, irregular” (TDK 2021). From this point of view, it is quite difficult to say that there is a significant difference between these two concepts. The concept of abnormal is also defined under the name mental disorder. Looking at different definitions, it can be said that the concept of abnormal behavior is associated with the inconsistency, excess, inappropriateness and inability that usually exist in the feelings, thoughts and behaviors of an individual. At the same time, it seems that these characteristics are treated according to certain norms. While some of these mentioned norms show a universal and permanent nature, some of them may vary from the past to the present and from culture to culture. The consideration of these features with the relativity of time and space is also undoubtedly an important point. That is, although inconsistent, excessive, inappropriate and inadequate behaviors are observed in each individual, it is necessary to know immediately what characteristics these situations contain. These characteristics are: being continuous or repetitive, affecting the productive work of the individual and affecting the relationships of the individual. Based on all these, it can be said that defining diseases is an important determinant in defining the limits of being healthy (Öztürk and Uluşahin 2020). It can be said that there are two major sources in the identification and classification of mental disorders. These are the Diagnostic and Statistical Manual of Mental Disorders (DSM) prepared by the American Psychiatric Association and the International Classification of Diseases (ICD) prepared by the World Health Organization. Many discussions have been going on since the past about what diagnostic criteria we treat normal and abnormal behavior according to. Undoubtedly, the experiment conducted by David Rosenhan is one of the most well-known studies at this point. In January 1973, the journal Science published an article written by Rosenhan, a Professor of Psychology. The title of his article was “On Being Sane in Insane Places” (Rosenhan 1973). This study by Rosenhan is one of the studies that can be considered as a turning point in terms of stating how important and sensitive psychiatric

diagnosis is and the debates about the criteria by which we consider normal and abnormal behaviors.

It can be said that abnormal behavior has come across as a concept that has attracted attention in all periods of humanity. Prehistoric cultures often looked at abnormal behavior from a supernatural point of view and considered it to be the work of evil spirits, demons, gods or witches who took control of the person. Examples of this kind of demonological thinking are also found in many cultures. Again, in many cultures, demonic possession situations usually occurred when a person acted contrary to the religious teachings of that time. From this point of view, at that time, when such behavior was seen in a person, priests or monks were resorted to. In such cases, treatment involved a technique called trephination, in which a stone tool known as a trephine was used to remove part of the skull and create an opening. In this way, evil spirits could escape, thereby ending the person's mental distress and returning people to their normal behavior. In addition, the early Greek, Hebrew, Egyptian, and Chinese cultures used a form of treatment called exorcism. In this method, evil was expelled from the person by means of prayer, magic, whipping, hunger, making the person swallow terrible-tasting drinks or making noise (Bridley and Daffin 2020). Despite this situation, there have been individuals who do not accept these beliefs and put forward different ideas in societies. Undoubtedly, the ideas of Hippocrates, who lived before Christ and known as the "father of medicine", are very important at this point. Hippocrates discussed mental illnesses from a biological point of view, separating them from supernatural forces. He suggested that mental disorders are diseases of the brain and defined the brain as the organ of consciousness, intellectual life and emotions. Hippocrates also divided mental disorders into three categories as mania, melancholy, and meningitis or brain fever. Hippocrates, from a biological point of view, argued that the functions of the brain and as a result, the mental health are affected by the balance of the four fluids as blood, black bile, yellow bile and sputum, and in case of imbalance, mental disorder occurs in the individual (Cankardaş 2019). Considering all these, it is seen that there are many different approaches in the treatment of individuals with mental disorders.

It is known that the treatment of individuals with mental disorders in the past has not been carried out in a good way. Stigma has been seen as one of the important reasons leading to this situation. These people, who are not seen as individuals by the society, have been exposed to violence. Today, negative expressions used to insult individuals, whether in the form of insults or in a way that is inside the life, negatively affect individuals with mental disorders (Cankardaş 2019). Despite the fact that today's societies have more information about mental illness than in the past, negative situations still continue at the point of stigmatization (Hinshaw 2007). It can be said that American psychologist Stephen Hinshaw has an important position in the fight against stigma. Hinshaw's work on preventing stigma has a great impact on this situation. It can be said that there are two different perspectives towards individuals with mental illness. The first of these points of view is a negative attitude in the form of "stigma", while the other is a positive attitude in the form of "genius". The idea that

there may be benefits as well as negative perceptions about mental health has been going on since the past. The famous thinker Aristotle's quote, "*There is no great genius without some touch of madness in it.*" also shows the importance of this thought. In addition, Sigmund Freud also referred to the concept of abnormal with his statement: "*Every normal person, in fact, is only normal on the average. His ego approximates to that of the psychotic in some part or other and to a greater or lesser extent.*" (Freud 2018). On the other hand, thanks to films such as "A Beautiful Mind" and "Rain Man", it is not strange to use the concepts of genius and insanity together when schizophrenia and autism are in question (Dutton 2019). On the other hand, when looking at the historical process, abnormal behaviors have been observed in the lives of many thinkers, statesmen, writers, painters and composers. Mozart's delusion that he will be poisoned, Vincent van Gogh's cutting off his ear, and Jean-Jacques Rousseau's paranoia in the last days of his life that he has been watched by his enemies are among the examples that can be given (Geçtan 1997). Although the concept of abnormality has been given importance in many fields from art to literature, from cinema to psychology in the historical process, it is possible to say that even today, the information about what causes abnormal behavior is still limited and its criteria cannot be fully determined.

In recent history, the concept of abnormality has been associated with insanity in societies. The 18th Ottoman sultan, Sultan İbrahim, being referred to as "İbrahim the Mad" is just one of these examples. This situation continued until recently, especially in the West. Insanity was used to refer to people who were 'possessed by the devil' until positive medicine began to take effect at that time. Again, in the following process, insane people started to be confined to correctional homes, but the aim here was to close these individuals because they cannot or are not members of the society, rather than for a medical purpose (Foucault 2020). Foucault also interpreted this situation as great confinement. However, with the antipsychiatry movement that emerged after the second half of the 20th century, Ronald David Laing and David Cooper in practice and Michel Foucault and Jean-Paul Sartre in theory stated that mentally unstable individuals should have a say, they should be taken seriously and listened to. Instead of closing these individuals to institutions with certain diagnoses, antipsychiatrists recommended investigating where the definition of normal comes from. According to them, the concept of insane should have been stripped of its derogatory meaning (Phillips 2020). Geçtan (1997), states that in defining the concept of abnormal, the underlying causes of that behavior should be investigated instead of the signs seen from the outside, since the behavior is dynamic. According to him, both normal and abnormal behaviors are nothing more than the individual's continuing his life according to the way he understands the world. In addition, the methods of functioning of normal and abnormal behavior are similar. On the other hand, abnormal symptoms are only related to the inadequacy of the adaptation efforts of the person, that is, they do not give an idea to explain the reason for this condition. In the past, if the individual did not have a very large abnormal behavior, that individual was defined as normal. Looking at the efforts to define the concepts of

abnormal and normal, we have stated that different ideas come to the fore each period. Freud, on the other hand, opposed it in 1937, saying that there was no such thing as normal, and said that it was impossible and imaginary to define this concept. In the following process, many researchers, unlike Freud, put forward different ideas on this subject. The first period of the 20th century was a period when it was seen that obeying social rules was normal and the opposite was seen as abnormal. The turning point in which this view began to change was when it began to be understood that societies could also be sick after the Second World War. The way societies are sick is that they perceive a behavior that is normal as abnormal (Geçtan 2019). Considering all these, it can be said that the definition of the concepts of normal and abnormal has changed within the framework of transformations and events in societies.

In terms of mental health, looking at the history of mental hospitals where individuals with abnormal behaviors were treated, especially in Europe, until the 15th century, there were very few hospitals for individuals with mental illnesses, but quite a lot for patients with leprosy. In the following period, as a result of the end of the wars and the decrease in the connection with the East, leprosy lost its effect in Europe. In the following process, these hospitals continued to be used as shelters where individuals with mental illnesses were closed and cared for. Looking at it today, it also seems that these hospitals are not used for this purpose. In the following process, Bethlehem, also known as Bedlam, has an important place among mental hospitals. Originally built as a monastery, this place later became home to individuals with mental illnesses. With the transfer of this place to London by Henry the 8th in 1547, this hospital began to work as a place where the mentally ill were closed. In addition, the conditions in this hospital were very bad and the physicians did not care about the causes of the mental illnesses of the patients there. In the following years, Bedlam became a tourist destination so much so that it was in competition with many tourist attractions. At the end of the 1800s, watching individuals with mental illnesses was seen as a means of entertainment and people were buying tickets for it (Cankardaş 2019).

We can say that the relationship of individuals with mental illnesses with mental hospitals has changed from time to time. People with abnormal mental health, who were able to roam freely for one period, were confined to mental hospitals for another period. It can be said that the scientists, managers and physicians of that period were influential for the emergence of this situation. The people who implemented the reforms that can be considered important for mental hospitals are known as Pinel in France, Tuke in England, Wagnitz and Reil in Germany. But Pinel and Tuke used this condition to bring individuals with mental illnesses into line. Tuke made individuals with mental illnesses feel as if they were at home, and thus the patient was left under the pressure of moral and social norms. When the patients did not comply with these conditions, threatening, not giving food, and humiliating methods that would make the mentally ill person feel both childish and guilty were used (Foucault 2020). Looking at the reforms of Pinel, we see that there are different

approaches. According to Foucault (2020), Pinel freed patients from their chains, but he also used similar methods for these patients and kept the patients under moral supervision. In the other approach, Pinel was an important figure who displayed a humane attitude towards individuals with mental illness. Pinel stated that mentally ill individuals should be treated as sick people, not creatures. It is said that while he worked at La Bicêtre mental hospital, he made improvements in the conditions of the places where the patients stayed. In addition, it is said that the patients roamed without disturbing anyone and that some patients regained their health. In this approach, Pinel was criticized on the grounds that he applied humane treatments to the upper classes and that the lower classes were treated with the old methods (Cankardaş 2019). Considering the recent history of mental hospitals in our country, Toptaşı Lunatic Asylum and Bakırköy Asylum have an important place in the last years of the Ottoman Empire and the first years of the Republic. So much so that Toptaşı became an institution serving the entire empire from 1873 onwards, and this situation lasted until Bakırköy was opened in the first years of the Republic (Kılıç 2015). Looking at it today, this institution which serves under the name of Bakırköy Prof. Dr. Mazhar Osman Research and Training Hospital for Psychiatric and Neurological Diseases, currently hosts the training of many specialists and the recovery of many patients.

As it can be seen, the historical adventure of the concept of abnormality is as old as the history of humanity. At the same time, this concept began to be systematically addressed after the emergence of the science of psychology. However, while many fields of science have developed quite rapidly to date, the level of this progress is debatable in terms of the definition and treatment of mental health disorders. It can be stated that the determinant factor in the emergence of this situation is the fact that the subject of study is human and the diagnosis of mental disorders is quite difficult. Similarly, since man is both a marble and a sculptor, the difficulty of the work that humanity will do on himself is also an important factor. Although there were experts who made original studies on abnormal behavior from time to time in the past, these ideas could not go beyond being an opposing view. It can be said that the point of view of society and the managers of the period were decisive factors in this. As a result, it can be said that continuous or repetitive patterns, situations that negatively affect the daily life of the individual and that contradict cultural norms are the determining factors in the handling of the abnormal concept. Similarly, it is important to define mental disorders and to determine what their criteria are as much as defining the concept of abnormal. Many experts use diagnostic systems when describing these disorders. Undoubtedly, this condition is a very facilitating factor for specialists at the point of diagnosis and treatment. In addition, it is debatable how accurate it is to diagnose billions of people living in the world through several diagnostic systems and to carry out their treatment. In this context, although there are hundreds of therapy methods in the treatment of the individual, especially at the point of psychotherapy, the question of why there is an increase in mental disorders also comes to mind. In order to

answer these questions as accurately as possible, it is important that mental disorders are handled well and that appropriate form of treatments are applied to the individual. With that being said, although discussions continue on what is normal or abnormal, and it is difficult to draw a clear line between the two, there are diagnostic groups that are considered diseases at the point of prognosis.

Definition and Distinctive Criteria of Mental Disorders

Mood Disorders

Looking at the definition of the concept of mood together with the answer to the question of how the individual feels himself, it is that the individual is in a state of exuberance or collapse in a relaxed, happy, sad, uneasy and angry mood for a limited time (Öztürk ve Uluşahin 2020). Looking at the history of the concept of depression, Hippocrates used the term 'melancholy' for some mental disorders in the period before B.C., and this term is quite similar to the definition of depression today. Hippocrates also attributed depression to a change in the amount of black bile from a biological point of view. Similarly, the concepts of mania and depression were discussed in Ancient Greece in a way close to their current meaning (Türkçapar 2020). When looked at, depression and sadness and pessimism do not mean the same thing. While sadness and pessimism can change rapidly, depression causes a heavier mood in the person. In addition, contrary to what is known, depression has no direct relationship with status or a good future. In this context, it should be known that depression is not caused by a person's weakness. This situation is seen by some as a weakness of character. For this reason, depression can be seen in all people regardless of status or wealth (Sayar 2018).

DSM-5 dealt with depression-related disorders under two headings. These are depressive and bipolar disorders. Depression (collapse) is a state that involves a state of deep sadness, worthlessness, inability to enjoy life, despair, loss of appetite, reluctance, exhaustion, sexual reluctance, difficulty falling asleep and waking up occasionally, mental and physical deceleration (psychomotor retardation) accompanied by agitation, social withdrawal and thoughts of self-annihilation (Şahin 2019). In addition, the individual can no longer enjoy a situation he used to enjoy. This is one of the most important determinants of depression. Many ideas have been put forward about what causes depression. One of these ideas is a slogan of an advertisement sponsored by Pfizer, one of the pharmaceutical companies that manufactures the antidepressant Zoloft: "Depression may be related to an imbalance of natural chemicals between nerve cells in the brain, although the cause is unknown. Zoloft, available by prescription, serves to correct this imbalance." Thanks to advertisements like these, they suggested that depression is caused by an imbalance of chemicals in the brain, and they conducted studies to get this idea adopted. This does not mean that a drug affects the symptoms of the disease or that the symptoms of the disease arise from a chemical problem that the drug corrects. For example, aspirin can relieve a headache, but the headache does

not occur because we do not take aspirin (Arkowitz and Lilienfeld 2020). In this context, it is very important to distinguish between correlational and causality situations. The important point to note here is that it should not be forgotten that brain chemicals in some people are positively affected by drug treatment. One of the other main points is that pharmaceutical companies make astronomical amounts of money as a result of seeing mental disorders as an important source of income. As it is, they support repetitive forms of treatment instead of definitive solutions for mental disorders. Depression also emerges by the gap opening between the ideal self and the real self of the individual in terms of the existential approach.

There are different views on the classification of the concept of depression. These views are mostly related to whether there should be sub-types of the concept of depression. In this context, the assumption that there are sub-varieties has usually come to the fore. One of them is the concept of major depression. In addition, mental states are classified only as progressing with depression or turning into mania. The energy of individuals in the manic period is quite high, and they consider themselves strong and important. In addition, they may have a high level of interest in sexuality. The presence of manic and depressive episodes at certain intervals in a person is defined as bipolar (double-edged) disorder. Here, what is meant by the bipolar is the low and high level of the individual's mental state (Sayar 2018). Depression can occur in individuals in different situations and levels. While some individuals can get through this process without support, some individuals expect this process to pass by itself, regardless of the severity of depression. In such cases, where depression is severe, it is extremely important for the individual to resort to drug therapy or psychotherapy methods. In this context, one of the important psychotherapy methods with proven effectiveness in the treatment of depression is Cognitive Behavioral Therapy (CBT). In addition, some individuals may prefer psychotherapy methods because they may have many beliefs about drug treatment. However, the importance of walking in reducing depressive symptoms has begun to be understood in recent years. In the review studies, it has been revealed that walking has a statistically significant effect on depression. In addition, it is also important to do more studies to determine the duration of the walk, how often it should happen, and what types it has (Robertson et al. 2012). When examined, the prominence of the behavioral dimension for depression patients in CBT also supports this situation.

Anxiety Disorders

Most of us experience anxiety or fear at certain times in our lives. So at what point do these two concepts differ from each other? When viewed, anxiety is the state of worrying about an expected situation, while fear is considered as a reaction to a dangerous situation that exists at that moment. In short, while fear is related to the current threat situation, anxiety is related to a future-oriented situation. At the same time, anxiety causes a moderate level of arousal in the individual, while fear causes a high level of arousal. Anxiety also provides an advantage in terms

of providing planning and adapting to the individual (Dirik 2019). The amount of anxiety can have a positive or negative impact on the individual's life. For example, while the performance of an individual with excessive anxiety is negatively affected, not having any anxiety also poses a problem. At this point, the ideal is to have a low level of anxiety. Anxiety disorders are discussed in the DSM-5 as specific phobias, social anxiety disorder, panic disorder, agoraphobia and generalized anxiety disorder. With the change that came with the DSM-5, Obsessive-Compulsive disorder and trauma and stress-related disorders are discussed under separate headings, although they have similar aspects.

Specific Phobia

Specific phobia is the fear of a particular situation, object or living creature. Although the individual finds these fears exaggerated, meaningless and unfounded, he still continues to avoid such situations. The word phobia comes from the Greek god Phobos, who terrifies his enemies. Also the names of phobias are often called by Greek words. Another type of specific phobia can also be observed in individuals with specific phobias. This condition is called comorbidity (Dirik 2019). In addition, with the amendment to the DSM-5 for specific phobia, the criterion of age and the fact that a person finds the fear he experiences meaningless are not included. It was generally considered that negative situations were effective in the emergence of specific phobias. However, it is also a fact that more studies are needed to support this view. Finally, when looking at the treatment point, individuals may think that they can control this condition because they show avoidance behaviors since they do not see these phobias as a disease and think that there will be no treatment. Social anxiety disorder has been discussed under the title of social phobia in DSM-IV-TR. Social anxiety disorder causes more problems compared to phobias and interferes with the individual's daily life more (Liebowitz et al. 2000). In social anxiety disorder, the individual is afraid of blushing and sweating but speaking in front of the public, using public toilets, performing an action in front of others also creates anxiety in the individual. Therefore, these individuals may work in jobs that are below their abilities, as they want less social demands to avoid social situations (Dirik 2019). In this disorder, the individual intensely experiences the fear that he will be humiliated and that people will evaluate him constantly. It can be said that it is quite difficult to distinguish between social anxiety disorder and the concept of shyness, which is similar. Individuals with social anxiety disorder may show more physiological reactions than shyness. In addition, we can say that while self-confidence may outweigh in the case of shyness, the fear of being evaluated outweighs in social anxiety disorder.

Panic Disorder

The concept of panic disorder comes from the Greek god Pan, who in Ancient Greece frightened people passing through the forest, especially at night. So much so that people who have seen Pan have experienced the physiological symptoms of a panic attack as they are today (Arkowitz and Lilienfeld 2020). Looking at the definition of panic disorder, it is related to experiencing panic

attacks that are not related to any situation and that these panic attacks will be experienced again in the future. During a panic attack, the individual may experience difficulty in breathing, chest pain, suffocation, dizziness, drowsiness, feeling like he is going to faint, increased heart rate, nausea, sweating, shivering, hot flashes, numbness and tingling, and depersonalization (self-alienation, that is, feeling outside of the body), derealization (feeling of unreality, that is, the feeling that the world is not real) symptoms. At the same time, the individual has a severe fear of death, going crazy or losing self-control. The individual is also afraid of the recurrence of panic attacks, this situation is called anticipatory anxiety (Öztürk and Uluşahin 2020). One of the important criteria of a panic attack is that the attacks are repetitive. Psychologist David Barlow argues that a panic attack is caused by the 'fight-or-flight' response that we normally show in the situation of danger, resulting from a false alarm when there is no danger (Arkowitz and Lilienfeld 2020). Finally, it seems that panic disorder is not like an individual's state of anxiety, but that individuals experiencing this condition perceive that a very terrible thing has happened to them. In addition, there are studies showing that panic disorder may be hereditary.

Agoraphobia

Agoraphobia was evaluated within the framework of the diagnosis of panic disorder in DSM-IV-TR. With the DSM-5, these two diagnoses were separated from each other. In this case, the idea that a person with panic disorder will have a panic attack and be afraid of its consequences, not because of the environment he is in, is essential, while in agoraphobia, the fear of the individual is based on the fear of himself (Öztürk and Uluşahin 2020). The individual with agoraphobia is afraid of being in open or closed spaces where it is not possible to escape or seek help. For this reason, sometimes he may not even leave the house. The main condition observed in generalized anxiety disorder is worry. The most defining feature of this disorder is that the individual worries constantly and excessively when it comes to situations such as work, school, financial situation, the safety of himself and his relatives (Arkowitz and Lilienfeld 2020). Undoubtedly, the state of health is also one of the important issues. Looking at the symptoms of this disorder, conditions such as not being able to focus, getting tired easily, getting angry quickly, muscle tension, sleep disturbance and restlessness are usually effective. However, it should not be forgotten that there are many studies showing that generalized anxiety disorder is associated with depression. When looked at, the rate of occurrence of another mental disorder together with generalized anxiety disorder is over ninety percent. In addition, half of the patients may have a personality disorder (Öztürk and Uluşahin 2020). In addition, an individual with a generalized anxiety disorder continues to experience anxiety even if his work goes as desired. This may be caused by anxieties of unknown origin, high sensitivity, and the loss of hope as a result of constant distress and uneasiness (Geçtan 1997). Undoubtedly, Cognitive Behavioral Therapy (CBT) has an important place in the treatment of anxiety disorders. In this context, it is inevitable that the principles and techniques of CBT shall have a positive effect on this disorder.

Obsessive-Compulsive and Trauma-Related Disorders

This section will be examined under three headings as Obsessive-compulsive disorder (OCD), Body Dysmorphic Disorder and Hoarding Disorder. Looking at the literature on OCD, it can be said that contemporary views began with Freud. Freud has said that neuroses arise from the individual's childhood parental relationships. In addition, Freud states that obsessive-compulsive disorder arises as a result of the conflicts experienced by the individual in the anal period and argues that OCD is a kind of "sadistic superego" and "masochistic ego" (Geçtan 1997). Freud also stated that obsessive-compulsive mechanisms play an important role in the emergence of religions. This process is a continuous, stereotyped counter-reaction and making-breaking mechanisms in order to suppress negative and unwanted thoughts that arise in the individual in worship. For example, practices that are common in our society, hitting the table several times in a situation that there may be something unfortunate, statements such as Mashallah and tuh tuh when faced with a situation that is liked, are a magical kind of compulsion that an individual makes to expel a negative situation even though it is not in the form of neurosis.

Obsessive-Compulsive Disorder

OCD is handled as thought, impulse dimension, i.e., obsession and behavior dimension, i.e., compulsion. These dimensions of thought and behavior make the daily life of the individual very difficult. Obsessions (fixations) are patterns of thoughts or impulses that are not in the will of the individual, disturbing him, alien to the self and can not be overcome as a result of any efforts and are constantly repetitive. These obsessions contradict the beliefs, moral values, logic and opinion of a person and are not approved. In short, they are situations that are alien to the individual's self. However, the individual still knows that these thoughts arise from his own mind. At the point of compulsion, the individual involuntarily exhibits behavior or mental actions to get rid of his obsessions. In society, this type of behavior is called obsession (Öztürk and Uluşahin 2020). In addition, it can be said that the individual performs these thoughts and actions in a ceremonial nature. Likewise, the individual feels under pressure while thinking or doing these actions. Considering the distinction between OCD and meticulousness, we can say that feeling under pressure is an important factor. OCD is a disorder that is not only a dimension related to the cleanliness of the individual, but also varies quite a lot. In addition, although an individual with OCD is aware of his condition, when he can observe it from the outside, he can have a broader perspective on his condition and a positive ground can be formed for the treatment process. At the point of treatment, it has been proven by studies that cognitive behavioral therapy is one of the best methods. In the treatment of OCD, the individual may seek a different occupation or, if possible, change the environment in which he feels that he may be under the pressure of his thoughts or behaviors. Similarly, in situations where obsessions or compulsions will arise, he may go into procrastination behavior. Thus, as the gap opens, the individual can understand that this situation can be overcome. In addition, the individual should have a go at these thoughts and

behaviors with exposure and reaction prevention techniques.

Body dysmorphic disorder

Although the concept of body dysmorphic disorder began to be defined in the 19th century, it was used as dysmorphophobia by being associated with dysmorphia, who was seen as the ugliest woman in Ancient Sparta. It was named as a disorder with DSM-III-R. In this disorder, individuals examine the parts of their bodies that they see as defective in front of a mirror or by means of special tools for hours and try to hide them with many methods (Öztürk and Uluşahin 2020). This disorder should not be confused with eating disorders. If the individual has a high level of anxiety about his body shape and weight, eating disorders can be considered. As with OCD, the individual acts in an iterative way. With the DSM-5, hoarding disorder began to be considered as a separate diagnosis. Individuals with hoarding disorder have a hard time disposing of their possessions, regardless of their true value. Some individuals can collect not only objects but also animals. In this, the person's assessment of himself as helpful is at the forefront. This hoarding situation is quite far from the individual's ability to provide adequate care for animals (Tiremaz 2019). Although emotional and material values come to the fore in the distinction between this disorder and collecting certain things as a collection, we can say that the situations that will make the individual's life difficult are the determining factors. It can be said that there is a very strong emotional bond between individuals and objects in hoarding disorder. So much so that although some patients find this situation unreasonable, they can feel something towards objects. In other words, they could treat them as human-like. (Arkowitz and Lilienfeld 2020).

Post Traumatic Stress Disorder

Considering the relationship between Post Traumatic Stress Disorder (PTSD) and Acute Stress Disorder (ASD) in trauma-related disorders, it can be said that the two diagnoses are quite similar. One of the main differences is that ASD has a shorter duration. If the symptoms of ASD last more than a month, this condition may reach a point that will meet the diagnosis of PTSD. At the same time, although ASD is not a recognized diagnosis as much as Post Traumatic Stress Disorder, this diagnosis is criticized for the reason that it reveals the short-term reactions observed in the individual when faced with a traumatic event, as abnormal behavior, and therefore for labeling it (Harvey and Bryant 2002). The criteria for PTSD are discussed under four headings in the DSM-5. These are: re-experiencing of involuntary traumatic events, avoidance of stimuli related to the event, other post-traumatic mood and cognitive changes, and symptoms of increased arousal and reactivity. The concept of PTSD was not officially discussed in the DSM until the late 1970s. In the historical process, the signs of this concept can be found in the Sumerians, Ancient Greece and even in Homer's Iliad. In recent history, this concept has been used especially for American veterans. These individuals were coping with the 'Soldier's Heart' syndrome (Effort syndrome or Da Costa's Syndrome). During the Second World War, this condition was called 'Post-War Neurosis'. The main point at which the importance of this concept was

understood was the Vietnam War. Those who returned from the war at that time were diagnosed with 'Post-Vietnam Syndrome', and this diagnosis is quite consistent with the current diagnostic criterion of the DSM (Arkowitz and Lilienfeld 2020). At the point of diagnostic criteria, the DSM-IV-TR stated that a high level of fear, helplessness and traumatic events should occur in the individual at the time of the incident for PTSD. Many of the individuals diagnosed with PTSD stated that they experienced emotional bluntness at the time of the event, that is, they were insufficient to give an emotional response. For this reason, with the DSM-5, the criterion that the intense emotions experienced in the individual at the time of the event should be sought has been removed. Another important change is that secondary exposure to traumatic situations through the media is no longer considered as a trauma (Yorulmaz 2019). We can say that the main factor in making such a criterion change is that the constant exposure of individuals to negative situations leads to depersonalization.

PTSD is one of the most studied and discussed topics currently. One of the topics of discussion is the fact that traumatic situations are at the center of this diagnosis. Mental health professionals were looking for traumatic symptoms in an individual to make this diagnosis. Along with recent studies, it has been revealed that stress situations that do not pose a physical danger also show symptoms similar to PTSD. In 2008, Gerald Rosen and Scott Lilienfeld of Washington University found that situations resulting from divorce, unemployment, or the loss of a close friend met the criteria for PTSD at a significant level. In a different study, Sari Gold et al. from Temple University, in a study conducted with 454 college students in 2005, revealed that non-traumatic events such as divorce, relationship problems, serious health problems of a significant person, and imprisonment of a close person also meet the criteria for PTSD at high levels. In light of these studies, many experts have suggested the idea of expanding the criteria for PTSD. However, Richard McNally from Harvard University stated that as a result of this idea causing a situation known as criterion expansion, such an expansion of the diagnostic criteria may cause difficulties in diagnosing the patient (Arkowitz and Lilienfeld 2020). As a result, the fact that there are differences of opinion among experts on diagnostic criteria shows that PTSD is still not fully decidable. In addition, it can be said that there is a significant relationship between the concept of self-recovery ability known as 'resilience' and PTSD (Terzi 2008), which is considered to meet the meaning literally. It is possible to say that individuals with high self-recovery ability are immune to a traumatic event. In studies on which factors are effective in an individual's immunity to PTSD, it has been revealed that factors such as high income level, good education, having strong social relationships and being male, even if not at a high level, provide immunity (Arkowitz and Lilienfeld 2020). As a result, it can be said that the comprehensiveness of the studies on PTSD is an important determinant in better understanding this concept.

Schizophrenia

The concept of schizophrenia was first described by psychiatrist Emil Kraepelin as 'dementia praecox', i.e. 'early dementia'.

Later, psychiatrist Eugen Bleuer stated that the concept of early dementia is not suitable for this disease. For this reason, he stated that the concept of schizophrenia, which emerged in 1908 with the combination of two words of Greek origin, *schizein* (to divide) and *phren* (mind), is suitable for this disease (Ar 2019). It should not be forgotten that the studies of these two psychiatrists provide important information on the definition of the concept of schizophrenia today. Schizophrenia is a disorder that negatively affects the individual's perception, thought, emotion, movement, attention and judgment. This situation causes the individual to experience difficulties in many areas. One of the important points to be considered in schizophrenia is that it can differ from person to person and there can be many changes in the individual over time (Öztürk and Uluşahin 2020). This situation also shows that it is very difficult to draw a general picture for schizophrenia.

Since schizophrenia is a disease that affects all aspects of the individual, that is, many aspects that make up the meaning of life, it is examined under the heading of positive, negative and disorganized symptoms in the DSM-5. However, subtypes of schizophrenia were removed with this version. Positive symptoms include conditions such as hallucinations and delusions. Hallucination is when an individual has sensory experiences despite the absence of any stimuli. These hallucinations are usually of auditory dimension. The individual states that his own thoughts are said by others. In delusion, the individual continues to have delusions despite the incompatible and obvious contradictory findings with reality. Delusions can occur in many different ways. For example, the individual may state that thoughts that are not his own are inserted into his brain by others, and that his behavior is controlled by signals emitted from base stations. Negative symptoms, on the other hand, indicate the individual's deficiencies in the behavioral point. These are related to the individual's asociality, not being able to enjoy life (anhedonia), being reluctant, decreased speech and emotional bluntness. Emotional bluntness is used for the external affectivity of the individual. For this reason, it does not mean that patients with schizophrenia have impoverishment in the dimension of internal affect. In disorganized symptoms, the individual manifests disorganized behavior and speech. In this case, the other person has difficulty in understanding the individual (AR 2019).

Although the number of individuals affected by schizophrenia in the world is tried to be estimated statistically, this situation may be limited to certain countries. For this reason, reaching a universal point in studies on schizophrenia may allow for a better understanding of this concept and a more effective treatment. In addition, although there are still prejudices about the treatment of schizophrenia, there are studies showing that it can be partially cured. We see the treatment of individuals not only through studies, but also through many prominent individuals in societies. Famous mathematician John Nash and screenwriter and writer Ayşe Şasa are just a few of these individuals. Ayşe Şasa, who has been trying to cope with schizophrenia for eighteen years, states that meeting Ibn Arabi was a turning point in her life, but also shows us that it is possible to overcome

mental illness. In addition, considering the high loss of talent in individuals with schizophrenia, factors such as painting studies are of great importance in restoring talents (Sayar 2018). Finally, it is necessary to be aware that the support of the family is very important in terms of the treatment process.

Personality Disorders

Personality is one of the important concepts that has been studied and discussed from past to present. The concept of personality is frequently used not only in academic life but also in daily life. So much so that Freud's view that the personality is largely completed by the age of six has become a situation that every individual may know. Although the opinion that this situation cannot be limited to a certain age range is now known, the previous opinion continues to maintain its importance. In addition, there are some tendencies in all people at the point of personality disorder. The severity of these tendencies forms the fine line between normal and abnormal. Contemporary psychiatry focuses mainly on observable behaviors in terms of personality. The classification systems used for personality disorders are based on a categorical evaluation. The categorical approach consists of an evaluation as yes or not. For this reason, the idea that it would be more appropriate to take the dimensional approach is widespread.

One of the biggest problems encountered in defining personality disorders is the inability to distinguish between personality disorder and personality structure. From this point of view, when diagnosing personality disorder, first of all, the level of social adaptation of the person, the ability to keep a regular job, the ability to socialize in relationships, and the long-term presence of the disorder without any change should be considered (Öztürk and Uluşahin 2020). An alternative draft has been developed in the DSM-5 version at the point of classification of personality disorders. Factors such as negative aspects of test-retest reliability, bias towards gender, and frequent comorbidities were effective in the development of this draft. This draft also includes personality traits (Nazlıgül 2019). In addition, personality disorders are handled in DSM-5 as three clusters: cluster A (odd/extraordinary), cluster B (dramatic/variable), and cluster C (anxious/fearful). As a result, it is known that there are opposing views at the point of classification, and it is possible to say that the criticisms of the current classification are in the direction of contributing to the literature.

Cluster A Personality Disorders

Individuals with paranoid personality disorder, one of the cluster A personality disorders, are highly suspicious of other people. This state of doubt of the individual affects his relations with his environment. These individuals are constantly on the alert because they think they are being used or treated wrongly. For this reason, behaviors may be hostile and anger may arise (Nazlıgül 2019). These individuals are very touchy, vindictive, criticizing other people in negative situations, and tend to see themselves as superior. So, what are the differences between these individuals and those who doubt in daily life? First of all, while paranoid individuals develop thoughts without any clues or symptoms,

other individuals can adopt this attitude in the face of an event. Similarly, it can be considered that the desire to have information about everything in paranoid individuals causes this condition. Individuals with schizoid personality disorder are introverts who avoid social and close relationships, seem boring and cold because they do not show their feelings to the other party. These individuals prefer solitude and can remain indifferent even in the face of praise and criticism. In schizotypal personality disorder, individuals are in magical thoughts. For example, having a sixth sense and telepathy. They make an odd and strange impression in environments (Öztürk and Uluşahin 2020).

Cluster B Personality Disorders

Antisocial personality disorder, which is included in cluster B personality disorder, can be used in a similar sense with the concepts of psychopath or sociopath. However, it is possible to say that these concepts have different aspects rather than common ones. Individuals with antisocial personality disorder engage in behaviors aimed at disrupting social order. For example, constantly lying, arson, theft, ignoring the rules, aggressive behaviors, not feeling anxious or being reckless (Nazlıgül 2019). Looking at the distinction between the concept of antisocial and psychopathic, it can be said that there are quite a few such behaviors that can be observed externally in psychopathic individuals. In fact, we can say that psychopathic individuals are quite successful in camouflaging themselves. However, when looking at the difference between a psychopath and a sociopath, a psychopath can arise from a genetic or biological abnormality, while a sociopath bursts as a result of environmental conditions. Although psychopathic individuals give the impression of being attached to the other party, they do not bond with anyone. Sociopaths can only bond with family or gang members. While psychopathic individuals are more likely to hide in society due to their less impulsive behaviors, sociopathic individuals are more likely to be arrested for their more impulsive behaviors. Again, while psychopaths do not get angry quickly and do not experience outbursts, sociopaths can get angry more easily and as a result they experience violent outbursts (Johnson 2019). In addition, it is possible to say that sociopaths are highly talented at making up and do not allow even the slightest negative behavior towards themselves compared to psychopaths. Finally, it can be said that concepts such as psychopathy and sociopathy are closely related to cultural codes and religious beliefs.

Borderline personality disorder is the most striking personality disorder among personality disorders. Of course, the fact that the disorder is widespread and difficult to treat is the determining factor in this. In this disorder, there is a constant instability in the person's mood, affectivity, and relationships. In a way, the sense of identity is not fully established. These individuals exhibit repetitive suicide attempts and self-harming behaviors. One of the most prominent characteristics is the fear of being alone. It can get to the point where the individual can not tolerate being alone. In addition, the stages of glorifying and devaluing others can change quite quickly in these individuals. Individuals with histrionic personality disorder display behaviors

such as constantly wanting to keep the attention, attitudes towards dramatizing and exaggerating situations, creating false stories, exhibiting intense emotional reactions and being quickly influenced by the other person. They want to attract attention with their physical appearance. The individual's need for love is as high as possible, but they still cannot maintain a balanced relationship (Öztürk and Uluşahin 2020). In narcissistic personality disorder, the individual greatly exaggerates his abilities and acts with dreams of success. They demand constant attention, and friendships for them should be built on utilitarianism. So much so that they can expect special favors for themselves. Individuals, in a way, seek to gain their self-esteem from the outside. They are individuals full of jealousy and arrogance because they lack empathy in their social relationships. Since these individuals are also selfish, even in choosing a spouse, they may change spouses when they see an individual with a higher status (Nazlıgül 2019). Freud interpreted narcissism as sexual perversion, in which one's romantic attraction is directed at oneself. In addition to the negative aspects of narcissistic individuals, effective and successful individuals can also emerge from them (Arkowitz and Lilienfeld 2020). It is possible to say that narcissistic individuals try to carry their success in a certain area to all other points in their lives. So much so that they see themselves as experts in everything. In addition, one of the differences between self-confident individuals and narcissists is that while narcissists see themselves as valuable, they also devalue the other side. However, self-confidence is more related to the individual himself. The concept of 'narcissurfing' has recently emerged in relation to narcissism. This concept is the individual's control of how and how often he appears by searching himself from search engines on the internet. For these individuals, appearing in the virtual world means the same as existing (Sayar and Yalaz 2019). Finally, since narcissistic individuals may be closed to criticism, their treatment should be carried out with persistence.

Cluster C Personality Disorders

In the avoidant personality disorder, which is included in the C cluster personality disorder, individuals avoid being in a relationship because they are afraid of being criticized and not getting approval (Nazlıgül 2019). These individuals are eager to establish social relationships, that is, they do not have emotional bluntness. In addition, the individual feels sad after the avoidance behavior. For this reason, while few can establish close relationships, their social relationships remain limited (Öztürk and Uluşahin 2020). In dependent personality disorder, there are individuals who cannot make decisions alone and have a lack of self-confidence. These individuals care more about the needs of the other party rather than their own needs in order to maintain their relationship. Even if the relationship is over, they are in search of a new relationship (Nazlıgül 2019). Finally, it can be said that paying attention to the comorbidity of personality disorders is important in terms of treatment.

Dissociative Disorders and Somatic Symptom Disorders

Dissociative disorders are one of the most discussed topics in the field of mental health. It is believed that almost all of

these disorders occur with the same system. This system, which is in the form of a division, is considered as a part that cognition or experience cannot reach consciously. That is to say dissociation occurs as a result of the inability to combine all the experiences that we have consciously revealed with our cognition, emotions, motivation and awareness, which are the tasks of consciousness. These disorders bring to the fore the question of how memory works as a result of stress exposure. According to the psychodynamic approach, this condition is manifested by the suppression of traumatic events (Kuzu 2019). It is believed that abuse situations in childhood are important in the cause of dissociative disorder. In dissociative memory loss, which is one of the dissociative disorders, the individual has great difficulty remembering important information at the personal level, especially information related to a traumatic situation. Although this state of forgetting is not permanent, its duration may vary. The more serious dimension of amnesia is the fugue. An important point to be considered in amnesia is that conditions that occur after taking a substance with dementia should be excluded. Because dementia progresses slowly and is not a stress-related condition. In the disorder of alienation from oneself and reality, the individual's self or concept of reality has been distorted and changed. This change usually appears with a stressful situation. These individuals can sometimes evaluate themselves as mechanical. In dissociative identity disorder, the individual has two or more personalities. Also, these personalities appear in different time periods and are unaware of each other. Similarly, these personalities are quite different from each other. Dissociative identity disorder can be confused with schizophrenia. However, unlike dissociative identity disorder, thought disorder and disorganized behaviors are seen in schizophrenia (Kuzu 2019). Another topic is keen on the individual's health and physical symptoms in somatic symptoms and related disorders. In a way, it includes situations that cannot be medically explained. This disorder is considered as the presence of a physical symptom in the individual, the negative impact on his daily life and causing discomfort. This disorder is discussed under the subheadings of illness anxiety, conversion disorder, and factitious disorder.

Conclusion

As it can be seen, discussions are still ongoing on the definition, scope and classification of the concept of abnormal in the field of mental health. Looking at the literature, this concept has been discussed within the framework of DSM and ICD criteria. However, it can be said that original studies criticizing these diagnostic and classification criteria have been conducted. Similarly, the number of studies on the negative and abnormal behaviors of individuals in the historical process is quite high. However, it has always been difficult to better understand the abnormal behavior of the individual. In this context, it is extremely clear that a better understanding of the concept of abnormal is important for both individual and public health. Looking at the literature, the concept of abnormal is tried to be better understood with the versions that are constantly updated. On the other hand, considering that the studies are mostly

limited to some countries, it is considered that it is necessary and important to take into account the culture-specific features of the studies to be conducted in Turkey and to apply the treatment stages accordingly. At the point of treatment, drug therapy and psychotherapies are two important forms of treatment that are preferred at the point of abnormal behaviors. In addition, factors such as changes in the environmental conditions in which the individual lives, changes in lifestyle and psychoeducation may have a positive effect on treatment. In addition, it should be taken into account that treatment that is not suitable for the individual may cause resistance.

Considering that many psychosocial factors are ignored as a result of approaching normal and abnormal behavior criteria at the point of mental health through certain diagnostic systems, it is thought that it is necessary to bring psychosocial factors to the fore. It is considered that knowing that psychological disorders are not the only cause and comorbidity of many disorders are important in terms of treatment. In addition, it should be taken into account that culture-specific variations are also an important factor in treatment. An understanding of social awareness can be developed by considering the fact that preventive service practices are not at a sufficient level in the diagnosis and treatment of individuals with mental health problems, and their late diagnosis due to familial reasons. It is thought that it will be beneficial to prevent stigma and to consider the strengths of individuals in studies on abnormal behavior. On the other hand, a relationship can be established between abnormal behavior and many approaches to increase the well-being of the individual. At this point, it is thought that the development of new methods and techniques will be beneficial.

Authors Contributions: *The authors attest that she has made an important scientific contribution to the study and has assisted with the drafting or revising of the manuscript.*

Peer-review: *Externally peer-reviewed.*

Conflict of Interest: *No conflict of interest was declared by the authors.*

Financial Disclosure: *The authors declared that this study has received no financial support.*

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