

**Psychology of Everyday**  
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**Lecture - 15**  
**Mental Health Issues of Child & Adolescents - III & IV**

So, Prof Braj, now that we have come to the last hour of this 10 hours course on Psychology of Everyday Life. I hope we have to we have tried to bring in as many were aspects what could be interesting to people about life and how we approach.

And we are talking about the problem with children, and we mentioned couple of things. Most of the things which I see as a psychiatrist actually come to notice because of academic problems in an around academic problems.

So, one of them is like kid falling behind as in mental retardation, but lot of this kids who have brought as having academic problems performing well specially say in I am talking of range of class 1 to class 8th for example 9th, 10th, 12th again falls into the teenager range, and they appear to be normally intelligent kids right having academic problem.

So, what I normally do is try and find out if their problem is of recent onset. Like I was mentioning if it is a recent onset we have to find out depression or any other emotional problems or environmental trauma whatever. But then these are kids, when I ask they say they have been persistently performing bad, so that is a time when we suspect learning disabilities right.

Learning disability is one area which is actually with psychologist; psychiatrist has got nothing to do with in fact. Except for behavioural problems and the misery which would have arisen. Because of parent-teacher meeting bad report card, child's behaviour problem. So, how do you look at this whole learning disability as a psychologist and how do how does psychology really approach the whole (Refer Time: 02:12).

In fact, the course of discussion that was taking place just before, we repeatedly said this that there are certain over expectations that are being just opposed on these kids. But the other side which you are now referring to is also true that there are kids who really have

some problem in terms of matching with the expectation that the environment has put on them.

Right.

Say for instance the most common problems that all kids would have is writing letters which has resembling geometric forms in English letter, it would be like say B D. Now, I think all kids they confuse how b is written, and how small d is written because.

While, growing up.

While growing up. Similarly, children who are in to say say Hindi medi instruction like gha and dha. There is just a space which is left on the top quite resembling otherwise. So, there are good number of letters in all languages which share large degree of the geo or geometric pattern. And because all forms of conveying the written printed ideas is understanding of these geometric patterns. So, in the formative years, all kids would have problem. And we should not very conveniently jump on the conclusion that the child has a learning disability.

Right.

Unless you realise that over period of time, while other kids have been able to make a distinction between two patterns this child has not been able to.

Right.

And that is where that alarm rings and you need to go for assessment. The way psychology approaches to a learning disabilities specifically if we talk about dyslexia. Now, reading writing is the major challenge, and classroom teaching in all countries has to do with reading and writing. So, if you are not able to read, if you are not able to reproduce it by writing, then you have a problem. Some kids also have problem talking.

Right.

The learning of vocabulary is slow. And therefore, when they speak they have to search for words they struggle for it. And therefore, they are not able to perform the way the other kids would perform, either in reading the text, writing the text, or say talking in

general, where you have to borrow words from your own vocabulary. If this is persistent, then only I think one should be taken to screening, for a screening.

Right.

Now, with screening what I find in the field is that we have not too many trained psychologists who would actually use the appropriate assessment tool. And therefore, again the misclassification again like a DSD, we were referring to not there is a big chance of misclassification, even in dyslexia there is a chance of misclassification, only because I do not have a proper screening device, therefore, I easily jump to a conclusion.

Traditionally what is always expected is that you look at the mental ability of the child. You look at the chronological age of the child which gives a feel that how much their brain and the body is matured and intellectual ability you have mapped. After doing this then only you assist the child for possible dyslexia learning disability.

And then there is a protocol to fix on the basis of which you share it ok, this child has learning disability. But there is a whole lot of misclassification and because parents would love their kids to be labelled as quickly as possible. Because this reduces their own concept of guilt that I did not pay attention to my child. So, they would make the child go to you know this special clinics who would charge them, but then basically they do not do anything.

And special educators we again have very little number of special educators. And the special educators are not in the traditional school. So, this schools would have the normal know teachers who have done certain courses and then have done B. Ed., and then they will enter the school stream. So, you do not have teachers who are specialized to take care of kids who really have learning disability. And therefore, there would always be a mismatch in terms of what the child actually needs.

Right.

And what the environment is providing.

Providing.

The child.

Providing ok. So, if I sum up whatever you said and expand on it little bit, is that all children while growing up do things in reading, writing which like substitution of words, the mirror imaging of the word like skipping a word right. So, we do not diagnose dyslexia which is difficulty in reading, dysgraphia difficulty in writing, and dyscalculia difficulty in mathematics essentially three.

Yeah.

Now, all kids have problems in this. So, essentially what I perceive is that learning disabilities are actually the problem of language whether it is reading, writing or mathematics is also a language or the mathematics some mathematicians will not agree, but it still a language. So, they have a problem of in one of these or all of these it could be a global learning disability and all, but so we do not diagnose it before say age 7 or 9.

Yeah.

Between 7 to 9.

Yeah.

That is class 1 or 2. So, by that time the brain is matured, but we should always keep in mind all this kids as he said are normally intelligent kids.

Yeah.

So, if a person is having a mental retardation, if a person is if the kid is having from a deprived background of social economic. Like a kid you bring a kid from village and suddenly put him into a convent in English medium, he will find it difficult. He will pick up, but at that point of time you cannot diagnose. So, it has to be a persistent difficulty in reading, writing or mathematics or all of them. So, why does it happen? Because the incident is pretty high a rough estimate says 1 out of 10 kids in all classrooms.

Yeah.

Which makes 10 percent of the kids, 10 percent of our school going population is having dyslexia and dysgraphia. And we had a famous film which Mr. Amir khan made [FL]. He had tried to increase the awareness, but unfortunately let me tell you, its awareness is still very low. And even if the awareness is more, they are not many people to offer help

Yeah.

That is how the tragedy of dyslexia. And all this kids, so how does it happen, it is their brain network after all when you read a word or you try to remember anything. What you see in your mind is the image, you see the image of the word with the the name of that object that is how we recall. Probably the brain is not forming the visual pattern in the brain, It does not take that pattern. And so when it tries to reproduce something is missing or brain tries to as you said very beautifully that you are trying to search for something and it has to completely we put on some word.

Neurotically you know the finding suggest we all have a pathway in the brain.

Yes.

The M cell pathway.

Yes.

Which is suppose to integrate the visual in the auditory input. So, when the teacher writes on the blackboard and then says A and entire class is suppose to read aloud A, then the teacher again writes B and pronounces it as B. So, basically it is the visual pattern that I see and then I have to associate what this visual pattern is called as. So, the visual and the auditory inputs they come through two different channels.

All right.

And then the M cell has the responsibility of integrating it. So, neurologically there are the actual dyslexia kids they have problem with their firing of their M cell pathway.

Ok.

And therefore, when the teacher writes, the child understands what the child teacher is writing. The child is only not able to neurally neurologically connect or neurally connect

Right.

That this letter format is called A. And therefore, when you ask without writing write A then I commit a mistake.

Right.

Because I have not been able to associate.

So, you.

Two things.

You mean to say for the benefit of the audience also is that we have different pathways of learning through oral through, through auditory, through visual, through touch. So, many, so that the conjunction between two moralities is missing.

Yeah.

Right. So, one of them; so a kid who is not able to write a visual pattern, may still be able to tell the same thing verbally.

Exactly.

That is what you said.

Exactly.

And some of these kids have huge imagination because they are thinking and images and all that. So, what happens is that these kids become aware of their deficit, what I see clinically, I do not see what brings me for dyslexia, they bring kids with problems of behaviour. When they come with behaviour problems, it eventually immediately the whole thing focuses on academics that is when I suspect. Then I have to ask whether this has been there for long or it is a fresh thing as the clinical exercise.

And if it has been for long difficulty in reading writing, what I have realised with children is that they are aware of this very early in their career in class 1 or 2, they try to do it, it is not that they do not, but it is their brain which is not responding.

Exactly.

And nobody understands that in spite of the best of training an awareness and cinema, teachers do not pick it up most teachers. Or if they pick up so he is abused, he is insulted,

he gets 0 red marks, copy is painted red, and then at home there is a misery and then the kid normally be comes under so and in this process of report card all is other talents are Suppressed.

Suppressed with a suppressed of most other kids also. But here it is more because we are not studying how can we be cricketer. If you are not studying, how can you be a dancer. So, kid keeps taking this stress 1 year, 2 year, 3 year, 4 year, and he finally, gives up that is what how I have tried to conceptualize when I talk to kids and all. They realize that they in spite of their best effort they cannot make their mothers and fathers happy with the best effort, they cannot get good marks.

So, they tend to either externalize this stress and become start having what we call attention deficit hyper activity spectrum or conduct problems anger outburst of not being able to relate to people or they get simply spoiled by the time they grow.

Yeah.

Or they become on the reverse they internalize it, and these are the kids would develop what we call as obsessive spectrum too much brooding, too much introversion, too much of ah social anxiety, start avoiding. By the time the kid is brought to us, he would have already suffered at least 4-5 years of educations. So, his confidence is really plummeted down.

I will share an interesting experience with you.

Yeah

The project which both of us were there. We did some work on dyslexia kids very recently. Two interesting observations, one we approached a clinic basically run by a psychologist who claimed that you know this is a group of dyslexia kids. And when we actually started assessing them for their intellectual ability, for their possible dyslexia, we realize after 10 kids who were given to us only one child was dyslexia, this means 9 of them were misclassified.

Absolutely.

Now, what misery these 9 kids would have undergone that nobody would realize.

Absolutely.

Except for their parents if they have been very closely supervising them.

Absolutely.

So, out of no fault of theirs, either the parents were not paying attention, the schools were not paying attention and they were just imposing their demand without helping the child to learn things properly. And then you go to somebody who makes the faulty assessment, and says that you are dyslexia, this was one. And second for this project itself we were visiting various schools, in one of the schools we found a very high number 24 kids we found who are suffering from this problem and they were all between class 1 and class 5. None of these kids who were identified as dyslexia kids neither the parents knew that they are dyslexia nor the teachers knew.

And the sadder part of it, how did we identify? We simply had asked the teachers that you give us a list of kids from your class whom you think are good for nothing in your subject. And we were asking only the language teachers and the maths teachers. And surprisingly we got 25 kids on the list 24 of them were dyslexia. That means the teachers did realized that there is some problem with the child.

But did not know what to.

The parents also did know that this child has some problem.

But they will not accept.

But they will either not accept they did not accept or they were you know not craziest enough to get them assist, get them diagnosed. So, that proper care can be provided to them. It is not that they cannot be made to learn.

Yes.

But then you have to make them learn little differently.

So, one of the important factors which just came up in this thing is that you do not suspect this dyslexia or dysgraphi,a if the kid is having some other problem one. If it is an episodic thing two, it has to be more or less. So, actually this is a very very simple the



simple way to catch it. I do the lot of workshop over last 15, 20 years in the schools and on some schools in Kanpur and North Indian have responded to it, at least those kids are picked up and sent to a psychologist.

So, there was some ways I have we had to devise how to go about it. One of the simplest way which we devised was one if kid is having academic problem at least a teacher can see whether this some made some medical issue, some environmental issue. So, what how do the teacher asked me how do they do it, I said you simply go back and ask the class teacher of the previous class, and the class teacher of the previous class. So, 2 years in row if the performance is bad, suspect.

The other simple thing is not in front of the class, do not humiliate the child. Call that kid in a separate room, give the book to read and to write for his class. If he is not able to do, bring down one class; if he is not able to do bring down, one class. So, two classes below the age.

Yeah,

It is sufficient you diagnose it.

Exactly, exactly.

Is not it.

Exactly.

And then you refer it to the psychologist, it is a simple thing which is they can do it. They can do lot of other first aid ones; so once a assessment is done, because why assessment is also important. Let me share my experience the kids whom I have been working with an diagnosis dyslexia 10 years back, 20 years back all of them are doing well.

I just had to over period of months had to convince parents to allow them to do something else. So, they could be average in a studies, be good in music or sports or become a pilot of you will make a lot of them are doing well, that is one thing very

important that you cannot take away the validity of somebody's life just because that person is not studying. Education is.

Yeah.

After all one way of living it right. Knowledge you should have of one field or two fields. Education you can have not have does not matter really. So, this can be if so if you come across any kid who is parents are complaining generally about academics and all, they are simple things which you can suspect, always suggest they should go to a psychologist. You at least have an psychologist and psychiatrist in big cities who can.

In fact, I would ask the know that if you are taking your child to a psychologist, do ask the psychologist which test did you use to assist my child?

Yes, now that you have brought it also in cities at least please check the credentials of the psych psychologist.

Exactly, exactly.

Because they are so there are shops everywhere. And for dyslexia and dysgraphia, you do not need, what you need is special educators who are trained in dyslexia and dysgraphia. So, now, I am sure some of you will ask us if it is so, whether they can be helped, they can be helped. First thing is to help is and this is important because this concerns most kids is that you should restore their confidence, the parent should be accepting. Accept your child as he or she is.

Look do not look at the skill deficit of reading writing. Look at the skill sets always encourage those kids to excel or do well or gain knowledge of the specific field they are good at, and get training for skill deficits. The class teacher should get some claps for people who play good football, make good painting right not always for the topper.

Yeah.

Amar Sen says that we have first way syndrome one who tops the class will go to debates also will go to computer thing, so we have this first way problem. But everybody has the validity. They take to a special educator see training has a very simple principle.

If the kid is learning through ear, and he is not learning through here, teach him through here.

Yeah in fact, you can substitute also

You can substitute. While you are taking exams, you can ask you have wanted to test the knowledge. You can ask orally or you can make simple questions in the school of multiple choice or may be one line, one word as self is they find it easily. After all how do they do it how do kids get 99 percent marks. I think there must be some trick in it, but trick is very simple. If you ask one question there would be one or two key words which will give the answer rest all is grammar.

Who was Akbar? He was the emperor of India. So, what is important is emperor and India, he was. So, kids find it difficult in writing he was, Emperor and India they will write. There are practices by which they can improve their. So, if you replace reading with movement, so the whole learning it comes from the movement, write rose, so skin will learn it. It is a muscle memory which we will have right.

Yeah.

So, muscle memory will replace the patchy visual memory. So, these are plus practice of course kids have to study. So, schools should support them by altering the (Refer Time: 23:45) of question paper, there are type of the reduction of volume, front seating, lot of things which can be done actually schools, if they support these kids, these kids at least develop to be a confident kid till they come to 9th and 10th and 10th and 12th the educational boards have facilities for this.

Yeah.

Even at mission universities have seats for dyslexia and dysgraphia. Board gives 1 hour extra, board gives a writer from a lower classes. The problem is parents do not know and the schools never tells them. So, get a report, get it signed by whatever authority, board will give you a writer who will be 2 or 3 classes who can who does not have dyslexia and the child can dictate, child has to study and practice by the dictation, people get good marks.

Yeah.

Plus, but the foremost thing is even if they average in the studies or they just kept through class 11th and 12th try and put them into vocational courses, try and put them into courses which is less of reading less of writing.

That is right.

Because children will not say, the children want to be like peer groups. So, they will look at the peer groups they want to become lawyers. Somebody with dyslexia and dysgraphia I think studying law is a pretty theory intensive course is not it.

Yeah.

By normal, guess the kid would find it difficult. So, it is our duty to actually guide them into how to go about it.

Yeah.

So, for this the mindset of parents has to change this country.

Yeah and so so is the mindset of the teachers in this course.

Teachers. Everybody who is in the class room would have some one or the other quality, no nobody who is good for nothing actually.

Exactly.

Right. So, when you when you ask good for nothing, teachers would have picked up kids whose report card was bad.

Exactly.

Because the whole assessment purpose of a school is a report card, which is very very fallacious thinking. This in itself creates huge amount of misery, and I am sure if this is handled in parents and schools become aware of all this at large, I can guarantee child psychiatrist will have half the work only.

They will be only treating kids who are having depression, and excuse of (Refer Time: 26:11) and all. Some of them mental retardation as it is psychiatry unless they find a cause, they cannot do much there also psychologist come in to train. So, there is a

difference dyslexia is a normal kid, normal intelligent kid who may have other skills finding difficulty in reading and writing. The training is special what we call remediation, mental retardation is a gap between age and intelligence.

Yeah.

That requires different (Refer Time: 26:39) to reduce this gap. Nobody can totally cover this gap, but all that can be done before 18. Because once the brain networks are after pruning and all they are more or less settled, it becomes very difficult to train. These are the kids who have persistent problem throughout. There are children who will be otherwise normal, but will have episodic problem because of environmental change, because of depression, because of emotional issues, because of other things they need to be handled and treated in a more clinical setting right.

Attention deficit, hyper activity disorder a small percentage has it as an illness, kids who have it premature kids, kids who are on anti epileptics, but ADHD can be secondary also, can appear because the stress of dyslexia, can because of stress of anything. Kids also have problem of what we call episodic dis control phenomena, impulses control, lot of kids become very very aggressive at times.

At times it can be because of emotional disorder or because of OCD, but lot of this kids become aggressive because as I said they are not allowed to breathe. So, this this good term which I like this, this called helicopter parents. You always keep hovering on the head of the child because as we talk about development we know the child has to be left just guide help. But if you try to continuously hammer or I think it becomes too much. I it is the same with (Refer Time: 28:16) also, in our relationship if too much hammering is done.

So, largely we will look at child psychiatrist scenario, there are few illnesses with congenital problem with, but I would not call except for same illnesses which adults have. I would call them our conditions that kids are born with it, they have some skill deficit, like all of us would be having some skill deficit. I am sitting in front of the camera and talking, but may be if I am put in front of one Mr. Amitabh Bachchan without training and ask to act I may stammer because that is not that is. So, it is not necessary my skill deficit, I have not trained, I may not be able to train, I may not be able

to lean classical music. So, we have to again it comes to the same question of diversity, education system has to alter in this country that is true.

There are some kids who are good in mathematics; they are some kids who are good in language we should allow people to study what they are good at. Only then 20 years from now, we will have people who are doing things what they are meant to do we doing. Otherwise see knowledge base wise if you look at it Mr. A.R. Rehman's music which sounds from a different world. What did he do, he did not do a PhD, in music he just gained the knowledge of music as far as he could right. Sachin Tendulkar, now when you tell parents this, they will say that no, not everybody becomes Sachin Tendulkar, oh that is all right, not everybody becomes so what. So, somebody may be become a sweet meat seller also, he should know how to make a [FL] na. Is not it.

That is true.

Why should everybody, but I mean that is a I deal dream eutopia which I am calling off. Because one another condition which is being labelled as illness, I do not think that is a illness because these are those kids who are just because we have not been able to find a cause like for dyslexia, for mental retardation, they very few people who have causes like may be a down syndrome you have a genetic cause, hyper thyroid in mother may cause all these.

This condition we are finding huge rise in frequency of it incident of it. At one point of time it was one in 2500. Now, it is one in 58, all across the world. We do not know it is related to infections, it related to somebody said it is related to vaccine, we do not know; it is related to food which we are giving, it is related to it has a genetic basis, because it does not turn off. So, but we do not know the gene till now it may be multiple genes. And that condition is what we call autism.

Yeah.

Autistic spectrum disorder right from high functioning autism to aspergersum syndrome to a very very full blown autism. Now, people who are high functioning autism, write books, they paint they, this is also another field where it is into the per view of psychology because there no there is no medical treatment.

Yeah that is.

In a small percentage, you may find some cause in MRI or genes or fragile syndrome or doing carrio typing and all that, but I have how much it is directly related it may be just see lot of research in, but is still the screening of autistic kids and the management of autistic kids.

Yes.

Is something its psychologist can do it.

Yeah.

Much better.

They can do much better, but the first interface is with the paediatrician actually.

Yeah.

Earliest diagnosis can happen in less than one year. Because kids when they are growing they do lot of social expression, they smile when it comes. People have found in studies that a kid who is not smiling, not giving social smile is slightly a loaf even whenever is not evoking any response may be having autistic, because autism develops within 3 years.

This is the time when the social learning system of brain is developing. So, what happens is probably that six layer of cortex they some geometrical architectural problem. Especially in areas because we have discussed the child is learning through environmental exchange. The what are the core symptom, the core symptom is the child is absorbed in his own world, may not have language, but does not use language for social communication.

Yeah.

He has his own awkward idiosyncratic language, may be doing lot of repetitive things may be hyper sensitive or hypo sensitive to a stimulus. Now, there are lot of theories that cause may be this geometrical pattern especially in the areas like mirror neurons through which we learn we observe we are like monkeys. You see and we learn and monkeys do

not retain, we retain it is just that. So, that area is probably damaged. So, they do not have theory of mind, theory of mind simply means what the other person is thinking.

Yeah.

Which comes through empathy. So, that empathy is totally lacking. There is one theory which says that the theory of central coherence that when we have lot of senses this, this, this, smell, all senses go in, and they have mix and unified in a with a thread which is my perception. So, they are all the senses are running here and there. So, kid may response to some internal stimuli, something to outside, but the basic expression of need and all that is preserved. Kids who have high language, high IQ have a good prognosis; otherwise so but the misery of autism is not with the autistic kids so much, it is with the parents.

Yeah.

Because the way it that kid will look in eye to eye contact and they smile or react, kids do react they are not unemotional or dead right, but they have a very peculiar way of expressing which only a very sensitive mind can understand. So, peep into autistic mind is very difficult into what is going on to their head. So, they have their own world actually in which they are living, it is not an illness. It is just a condition they are like that. But the problem is there, again when you talk of normalcy, abnormalcy they are not fitting into the prescribed system of today's world.

Yeah exactly.

So, if a if this is a normal trajectory of development suppose for a kid, a mentally retarded kid would be here same trajectory in a normal range, but autistic could will be going in a different trajectory. So, the whole theory appear appears to bring back to normalcy. Now, whether you can bring back 100 percent depends on what level of functioning you have.

Yeah.

But there is one field where psychologists and lot of therapies have come up, but again some of these kids have been known to have a very very peculiar talents, they used to be called idiot servants. If you all remember and if you do not then, you should see a film



called rain man with Tom Cruise and Dustin Hoffman which was a aspergers, even our Sharukh Khan made film called My Name is Khan, you it was about an autistic kid. Now, but I have seen kids there is one kid who when he was very small into a not a very religious family right from when it was almost 2 years or o, the only he would do is do a keerthan or a bhajan.

Ok.

And try to if you give him a paper, he will tear it and make flowers out of it. So, we tried to treat him, train him, but after when he was 7 or 8, there was no change in him. The only thing he can do is worship, do bhajans, do music, do remember all shlokas in Sanskriti and also, may be that is his asymptote maybe he is born for that. So, luckily parents understood that, and parents got him train into music. There was one kid who was not studying otherwise, but could do lot of proof reading much shorter time.

So, my psychologist when she works with this kids, she kid bringing this kids because I keep reviewing the whole thing. There is just kid whom you ask any day, any date, he would tell you the date, or he can add things like where does the skill come from that is how the brain is evolved. So, one skill has gone much sometimes I wonder when I look at autistic kids, they whether all of us have some one special skill like this, but because we did not have autism.

So, we schools got us trained in to living in the world, so but again it is it is not important that whether we are able to treat it or not, what is important is that we need special schools for these kids.

Exactly

Actually these kids should be put in

I think.

Integrated schools.

I think even for autism especially again it is important that the IQ level has to be assist, and then you have to see you know.

Yeah, because high IQ

Age appropriateness.

High, IQ is a good prognostic factors. So, these are the type of stuff which kids face. And when we say this let us it is a normal range of the thing, you have problems we treated, you have a skill deficit we treated, but even kids would do not have problems they have to follow a life trajectory as they grow up. They have to find their carrier, they will some will be successful, some will be not, some will change, some will be good in relationships.

Howard Gardner's theory as fallen aside, but it was interesting to get we talk of multiple intelligences. He was talking that people are somebody is word intelligent, somebody is music intelligent, somebody is kinesthetic intelligence, that means, because intelligent itself is a very doubtful concept, what is intelligence we may have IQ test, but what you say as a psychologist (Refer Time: 39:21).

Even.

Because that is a high premium on intelligence nah.

Exactly, exactly. In fact, I usually say that intelligence is a construct which was given exceptional weightage at some point in history. And then it is the construct which did fall and decline to the minim lower. And now gradually you know people are taking it with a pinch of salt in the professional world.

Right.

For people at large in everyday life those who are not aware of the nitty-grities of the concept of IQ or intelligence for them IQ is still something at desirable quality. Like historically IQ at one point in time was used in Europe to classify students in to different sections. So, those who fall within a specific range of IQ will go to section A of the class.

And racism.

Racism. In US there was a time when at the time of immigration. The IQ will be tested. And those who fall short of certain point they will be deported back so.

So, they bring back to the thing which we were talking the benchmarks of society.

Exactly. So, I do not understand that why for classification of a section or why for the purpose of immigration these construct should have been given this extra importance, but then historically it was given. And most interestingly place where it should have been given a premier position like say assessment of intellectual impairments another kind of neuro developmental issues. There we find that there is a difference in terms of the basic assumptions on which these assessments are based.

I will not go into the too much of technical details, but IQ assessment also know follows two different trajectory; one set of IQ assessment which is purely dependent on the statistical technique called factor analysis. So, like two factor theory, multi-factor theory these are all based on the statistical technique. Now, why to give importance to statistical technique and make this construct such important. That for classroom, for clinical diagnosis, for immigration, for large number of things you start using it.

The other stream of assessment of intelligence is what is called as brain based intelligence. So, you because now neurology gives you a fair understanding of which part of the brain does which kind of activities. So, you design test wherein the performance will indicate how robustly a given area of the brain is working. And if the given areas of the brain is working appropriately then it is absolutely fine, then that means, that there is no problem with the functioning of the anatomical brain. And if there is not an issue with the functioning of the anatomical brain, then this child can be trained.

So, but it is very interesting if you do a functional MRI, and it may show that the brain away areas function will still lie intelligence may not be there.

Could we?

That there are test where now people have gone for using the brain mapping technique vis-a-vis the behavioural outcome of the kids.

Ok.

Therefore, now I made one passing remark that when you are subjecting your child to assessment of any kind we are specifically referring to intelligence assessment right now. Do ask the person who performs his assessment which assessment tool are you using?

And you have the right to ask the details of the assessment tool which is being administered. That will alert the those who are in.

Right.

Assessment business.

Right, right.

And this will also educate the parents.

Right.

Maybe the teachers also.

Right,. But you brought one word which I think we should at the end of it all especially when you talk of child or anybody, you said impairment. I think I would like to clear actually like to tell people impairment is a loss of function of an organ of a micro level or a micro level right. Impairment does not mean disability.

Exactly.

Right.

Exactly

Disability is the perceived or real inability to not performing a function. So, not performing of function is an decision act of connexion of will from here to the completion of the act. Am I right?

Yeah.

Impairment is that my hand has a muscle rupture that is a impairment.

Yeah.

Ones it improves and then I am not able to lift that may be disability. Am I right?

Yeah.

So, disability is a psycho social construct; impairment is a biological construct.

Exactly.

When it comes to children, the big deal is that lot disability which we find in children is far, far ahead of the actual impairment. This is the fallacy on thought process of the society because little bit of impair is impairment is by virtue of being pointed out, by virtue of putting inferiority by they become disable. The mind starts perceiving that I cannot do it. This is the phenomena which is not only in clinical sense.

Yeah.

It has also when it comes to women, it comes to.

Certain section of the society.

Certain section of the society.

That is. So, that is so.

By virtue of telling people right.

In fact, you use the word know good for nothing when we were talking about dyslexia.

Absolutely.

So, large number of us are told that you are good for nothing.

Ha.

And if I am repeatedly told by those in whom I have invested my confidence.

Absolutely.

My teachers, my parents, my siblings.

Absolutely.

Then that matters.

Yes.

And at the top of that you put a social agent a psychiatrist, a psychologist.

Right.

Who gives a number and then says that yes.

Yes.

So, he or she also indorses that.

Right.

So, that becomes a double impairment.

So; that means, a psycho psychiatrist and psychologist also have a duty to like DSM has this good thing global assessment of functioning and all. But beyond that one should also assist that is why social and occupational functioning is so important in diagnosis. You may be depressed, but how is a social occupational functioning.

Yeah.

You want.

Yeah, that is true.

You may be having autism, but how functioning you are, right.

Yeah.

And you may be dyslexia, but how functionally you are.

Exactly.

So, up kid who is having dyslexia may be very smart and doing lot of other things. So, do we call him disable?

Not at all.

No, we do not.

Not at all.

But it is perceived it is it is called learning disability. So, how did a (Refer Time: 47:01), see it is very interesting like with mental illness what is to happen was mad first it was which hunting, then it was lunatic, then it was mad, then they were asylums, then they were mental hospitals, now you call mental illness. In India the common term is you tell the people do not want to come to a psychiatrist they will say [FL]. So, you do not know what [FL] meant, [FL] sometimes is taken as creative thing, madness is taken as a creative thing, [FL] is taken as a pejorative right.

Similarly, in other things also when you talk of disability or you talk of this type of learning disability, so it was perceived as a disability. Then they started talking about special children, then they started talking about what do they call it differentially abled.

Differently abled.

Differently abled. I do not know what do what do they call these days.

Divyang.

Ha Divyang, Prime Minister brought in divyang thing also. So, divyang means people who have word divine actually.

Yeah.

Divyang and what is not working is all divine. So, in that sense everything is divine even people who are functional also divine otherwise who will sustain all of us. So, irrespective of all these if you would listen to all this 10 hours of whatever we have talked some of them thing may be lot of circ scription. And but essentially what we were trying to discuss and these are one of the rare occasions where two people from two specialities who should be working together have had a freewheeling discussion. We deliberately try to keep it as freewheeling.

Exactly.

So, that you can pick up things it is not a curriculum course, it is more for you benefit. But if you listen carefully and my suggestion would be when you are listening keep up pen and a copy handy and keep noting down keywords.

In fact, it was deliberate on our part.

Yes.

We wanted this course to be more reflective in nature.

Yes.

That you listen to the discussion, it induces a thought process in you and whatever triggers.

Yes.

Whatever gets invoked.

Yes.

You can write it down. And see we began with you know mapping the kind of day to day behaviour and.

How do we put in to psychiatrist.

And then psychiatry.

Psychology.

Psychology classification and then.

Yes.

Trying to find out whether it is normal or not.

Abnormal.

So, practically we are saying that do not get indulge in that kind of a futile exercise.

Yes.

Everything is normal. There are few things which requires a different kind of an intervention.

Yes.



And there are more of a logical way quality medical or scientific or logical whatever word suits you, there is a way of analysing the situation. There is a way of analysing the behaviour, there is a way of say identifying whether special attention of or special intervention is needed. And we have given at most importance to the fact that the family and the schools, both have the owners of handling the kids appropriately, handling the adults and the elderly population.

Yes.

Very sensitively.

Yes.

And if that degree of sensitivity is maintained at all levels.

Yes.

Then I think that understanding of this course would succeed.

Yeah and more importantly do not get stuck to labels, a label is not you, your life is bigger illness is a part of it.

Yeah.

What happens in our society with human race I think is like you have all 32 teeth here one of them goes missing, your tongue will enter there. So, if you get a label or if you are in a alter state of mind or if you are having some disability or impairment or loss of social occupation or your mind is in simple distress, depression, whatever it is then the chances of your whole attention span going there is much high.

Yeah.

Because the brain as I told you it is a homeostatic organ it (Refer Time: 51:30) to bring things to balance. In that attempt that small part of you takes over everything, right.

Yeah.

And you start understanding yourself I am this, I am that which will take of the sheen of your life, you are still yourself; you are born to do what you are doing to realize your

potential and that should be the primary thing, even if you have a fall or depression whatever get back to it. Now, having said this there is small percentage which are altered condition like schizophrenia, more persistent like autism, like dementia, there you require assistance to do this, eventually.

Exactly.

So, take life in a much more larger and use your own intelligence, intellect and defining what you need. See Indian culture has lot of stuff by which you can train yourself right from mythology to Mahatma Gandhi; what they have, they have left a model behind how to train your mind to define your need that is critical thinking.

So, once you develop critical thinking, there will be problem, there will be sadness, there will be depression, there will be all that drama of life will go on, but it will be the you will be to bounce back, so that was about the psychological analytical aspect. But let me use this last 5 minutes for something more positive, there was I think all of you should will get on net what you call a mass loss pyramid of achievement.

Mass loss need hierarchy.

Need hierarchy right. From the basic security which the brain needs to further achievements at the top is self actualization.

Yeah.

So that means, ones your security your social thing everything is fulfilled then you keep moving and finally, you self actualize, but self actualization has one more way some people have bypass return gone to the self actualization, actually. Especially you see the artists, artist actually bypass and go, because there are lot of poverty stricken artists; they have people have become great poets in poverty, the basic security Gandhi left everything and went to self actualize.

So, what I am saying self actualization more than going step by step that is one way of doing it, but it is more than that it is about recognising about what actually you are meant for. A problem is that schools cater to 80 percent or normal population who will fall into societal system, schools do not cater to kids who are low, they do not bother about them and to geniuses.

Yeah.

Both of them get bored, so both of them have adhd, both of them have conduct problems, very intelligent kids are.

Yeah.

Very very disruptive, they cannot fit into that boring mechanisms so.

But its the inability of the system to accommodate.

Absorb them. So, more than your routine work and your routine chasing of dreams and all also try to keep something creative in your life, some art, some music, some finer thing in your life, because although it may not appear and there is no calculation on it, but believe me these things really come on handy when in crisis.

Exactly.

Right, like reading like whatever it is even god, religion, whatever. So, if you keep that most routine problems will fall in your normal range which appear as problem will vanish right. 1, 2, 3, 10 percent people have illnesses they will be treated, but at least the generalise the anxiety which gives so much importance to psychiatry and psychology and to some good some fraudulent spiritual gurus at least that will vanish.

Yeah.

Right. And you will be more in charge of yourself ultimately that is a purpose.

Yeah.

Otherwise, I think h an race still is in evolve evolution we face and why it is also important a brain is also evolving, it is evolved in millions of years. And now we face artificial intelligence, we have summed as silicon chip everybody will have a silicon chip to control pain and to control it will directly connect to your head to the internet.

That is that is farfetched.

But information overload is already increased.

That is true.

So, one thing which we should always bother is that information over you whether your brain is ready to process all that or not with Whatsapp, with Facebook, with all those things coming up. So, each one of us one simple trick which everybody should do, I think is periodically take out some time just to be with yourself.

This is what we said know that you this course is meant for reflection.

Yes.

It is not like a regular routine kind of a course, where you.

Absolutely.

Learn about certain topics.

Absolutely.

Models theories.

So, I think you can feel free to ask questions and keep sending as your you get your videos and we will try to answer them and.

We will try to.

Correct.

Combine, combine them and perhaps if there is a need we will address them.

Yes.

In one session, it depends on how things evolve.

Yes. Anything else (Refer Time: 57:03).

I think it is just.

Final, comments.

It is just you know.

We have a minute.

It was a pleasure.

Still.

Because what we did was we ensured that we extract the kind of issues that people at large have people who have not been exposed to psychology or psychiatric, but they all have seen the life.

Yes.

And they have been picking up different threads depending on what circumstance they suffer, the experience. And many a times either they themselves jump at a conclusion.

Or get a information with (Refer Time: 57:43).

Or get a get information from unreliable sources which make them derive some faulty conclusions. So, this was an attempt from our side to clear the air as much as possible and as I am repeatedly saying, both of us have been saying that be more reflexive, be open and this is how life can be handled.

Absolutely.

Much better.

Absolutely.

Yeah, I think that is that make sense and this is how. So, do not look for point wise remembering and.

Yeah.

Point wise. So, if you ask me one last word I think we have somehow tried to do what the way our ancient knowledge systems who have build up, at least Upanishads.

Yes.

We may not have been at that level. So, anyway because we are still talking about lot of borrowed knowledge from Western and all that and we are trying to more or less

synthesize, but this is how Upanishads developed were people just sat and talked and so they were the creators of original knowledge probably at some point of time, we do not know before them, but anyway even if we are replicators and transmitters I think, it is ok.

It is ok, yeah that is what.

Thank you very much.