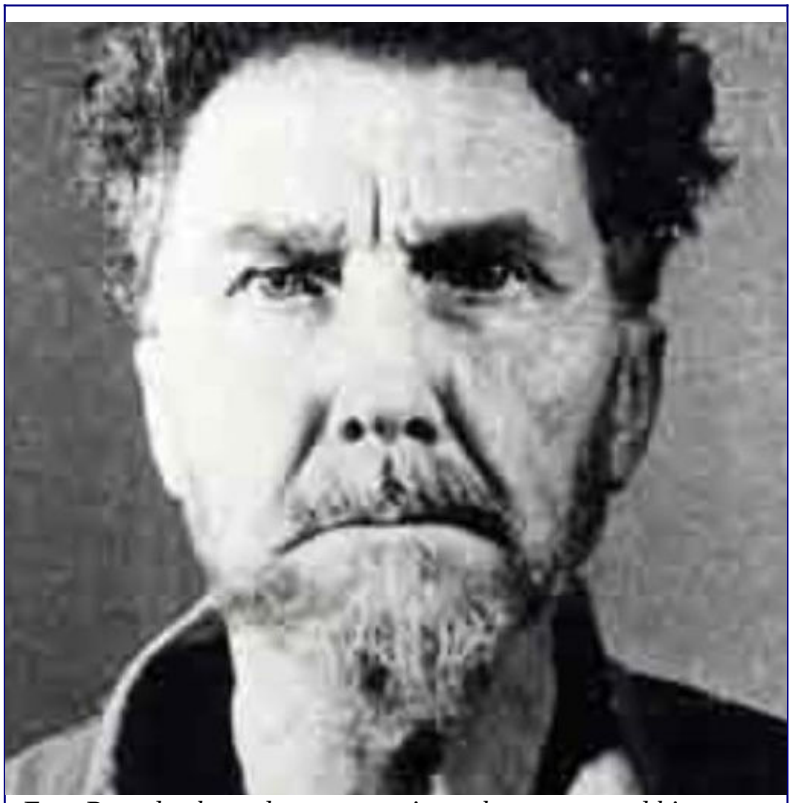

Ezra Pound, whose doctors unanimously pronounced him sane, but institutionalized him anyway.

What is Normal, Who is Sane?

Our greater problem stems from the large number of normal people who are not sane.

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"The only normal people are the ones you don't know very well."
— **Alfred Adler**, psychiatrist

What Do You Think?

What is normal? This question is trite, but serious. As a therapist who works with people in all situations, I see some people who grow and others who don't. Anyone who doesn't grow is bound to get stuck and, once stuck, the growing distress can be long lasting.

Occasional distress is common, and we accept it as normal. Normal means both average and enduring. But distress that is chronic cannot be sustained. It is not normal.

We cannot agree on an absolute definition of normal because everyone is different. But we can define relative normality as a condition that sustains us and which others accept. If you maintain yourself in an accepted social role and behave accordingly, then you may call yourself normal.

Some people don't meet this standard, and we would agree they are abnormal if we could see they consistently fail to meet the standard. But it's hard to evaluate another person's consistency unless you live with them. To go beyond and judge what is good, bad, healthy, or otherwise involves other standards which I'm not concerned with.

Sanity is the next standard we apply to people who are far from normal. We might excuse a person because of their unusual environment—a circus clown is expected to act funny—but not if they abandon a normal environment entirely. The perpetual clown may do well on stage, but they will not be judged as normal. Their abnormality would be glaring and discomforting.

If your distress is not circumstantial and you feel yourself to blame, then you may feel the circumstance is unsustainable. When things are seriously distressing, you'd like to work toward a better future. If the objective you're working toward is realistic, then you will be considered normal. If it's unrealistic, then you won't achieve a sustainable situation, you may find little support, and your distress will persist.

If this distress is chronic or you create chronic distress around you, then you and your approach are not normal. When the distress becomes too much, we say you are insane.

Sanity is a Category

People think insanity is a condition, but it only refers to behavior. We presume this behavior arises from thoughts and conclude a person's thoughts are insane, but this is unjustified. Many people who act abnormally think normal thoughts. The difference lies in what they perceive. They perceive a different world.

Mental health diagnoses do not help a person. They are a way of categorizing behavior. Diagnoses are designed to help everyone else, mostly those who make a profession out of treating people. Unlike physical diagnoses, mental diagnoses lead neither to a cause nor a cure. They support the field of psychology and its related professions.

This does not mean diagnoses are useless or exploitative; they're an intermediate tool. They are useful when they lead to insight, but psychology lacks insight. Most diagnosis and diagnosticians do too.

Diagnosis

I recently offered a client a speculative diagnosis of Schizoid Personality Disorder. It's described this way (Okoye 2024):

> "Schizoid personality disorder (ScPD) is a mental health condition marked by a consistent pattern of detachment from and general disinterest in social relationships. People with schizoid personality disorder also have a limited range of emotions when interacting with other people."

> “Schizoid personality disorder is one of a group of conditions called ‘Cluster A’ personality disorders, which involve unusual and eccentric thinking or behaviors. Personality disorders are chronic (long-term) dysfunctional behavior patterns that are inflexible, prevalent and lead to social issues and distress.”
>
> “People with schizoid personality disorder may seem aloof, disengaged and distant. They often don’t realize their behavior is unusual or problematic.”

Do you often feel detached and lack interest in social relationships? Do you feel limited emotions when interacting with strangers? Does this cause you distress, but do you feel this is justified? If so, then the way you look at the world is probably the same as someone with schizoid personality disorder. The only way to determine for sure if you are ScPD, is to determine if your life is dominated by these conflicts.

This description of ScPD reads like an astrology chart. It could fit anyone. I know it fits me. I read it to a high functioning client and it fit him. The difference between me, my high functioning client, and my ScPD client is that those of us on the “outside” judge my ScPD client as abnormal. He doesn’t feel he is, but others do, especially those who don’t know or cannot empathize with him.

Assigning Labels

We assign labels to identify people as being helpful or unhelpful without understanding what the labels mean. Many things either escape our notice or deceive us. Our labels reflect what we notice, doing little more than defining what we think is normal. They are neither accurate nor insightful.

We notice what bothers us in our efforts to control it. Our reasons are imprecise. Labels are often wrong when they pertain to people, because everyone wants to be seen by others as being positive or normal. That includes my most abnormal clients.

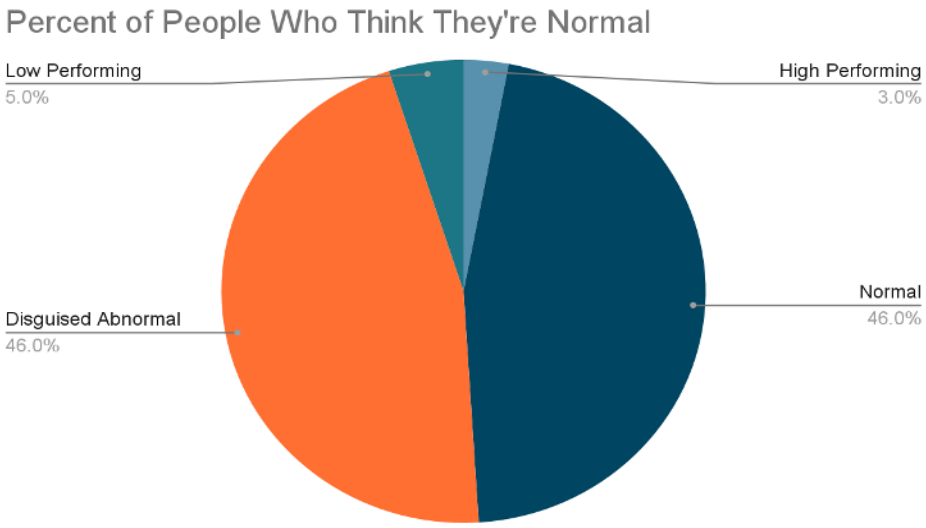
This is a problem for management and boundary setting. The only people who get labeled are those who run afoul of the system. These are the people who cannot control their presentation.

Below is a pie chart of how people think and act. It divides people into those who we see as normal and those we see as abnormal. The sections labeled “Normal” and “Disguised Normal” are the 92% we accept as being like us. The “Low Performing” and “High Performing” are those we recognize as different. I just invented these numbers.

The Unusual High Performers

The high performers we celebrate and encourage. The low performers we isolate, medicate, or segregate. In both cases, we do poorly at supporting these people because we don’t understand them.

The high performers include John Nash the unstable genius, and Donald Trump the psychopath. These people reveal something the rest of us don’t see. The low performers don’t have anything to sell, so we ignore them.



I'm uninterested in the high performers as a category because each is a special case. We might label them, but we don't understand them. We may think we're educating people to become high performers, but we're actually training people to behave normally. That's all we understand.

Popular psychopaths are exceptional because they reflect our collective madness. Many leaders and celebrities are either psychopaths or emotionally dysfunctional. Neither are easily helped nor open to it.

That Donald Trump attracts hundreds of millions of followers is an ominous reflection of the mental health of the US population. It's less important what it says about his mental health, which is fairly obvious. Nothing good comes when a large number of rightfully indignant people follow a lunatic.

Prejudices are based on false understandings used to create separation. Sanity and insanity are similar when seen from the inside. We rarely understand what we cannot recognize, nor can we recognize what we don't understand. We create categories to protect our ignorance and prevent change. Psychopaths can attract large groups because their logic connects the prejudices many have with the actions people want. Psychopaths are famous for appearing normal.

The Disguised Abnormal

I am most interested in the large portion of abnormal society whom we do not recognize. These are the distressed people who eventually come out of the woodwork in need of psychotherapy. They also include the people whose intellects and emotions shut down while they continue to appear normal. Both of my parents fit this description, and I suspect most people around me do as well.

Shutting down one's intellect and emotions is unhealthy for all involved. These people look normal from the outside, but their minds are echo chambers of disconnected ideas, cognitive prejudices, and codependent habits. These people are poorly aware of themselves, repressed, and resistant to change. You won't be able to pin them down.

I think of the elderly couples, bothered, unproductive, and drugged with pharmaceuticals advertised as life-prolonging. Much of the population is aging in that direction. This includes those of us who have "bought the dream" of a material version of normalcy.

We think money is a laudable goal and assets measure spiritual achievement. This is not the case. Material normalcy simply means you're playing a rewarded economic function. It has nothing to do with your mental health.

One could point to a lack of meaning in people's lives. A lack of human and spiritual values leads to depression, frustration, and anxiety. The typical antidote for meaninglessness is to ignore it through distraction. You might blame this on a lack of community or religion, but community and religion are simply other standards of normalcy.

If you have no feeling and little awareness, then you can pipe religious doggerel into your head and believe you are doing God's will. You can serve your community and believe you're helping others and our collective future.

Whether either of these succeeds depends on circumstances beyond your control. Are you adding human value, or are you simply turning some institutional wheel? You can pursue either path while being dysfunctional and self-destructive.

At some point, the disguised abnormal person may confront their situation. This isn't inevitable, since there are many places to hide within your own mind. It's only when your reasons become wholly delusional that your pretense of normality fails. You're only unmasked when your abnormality has caused so much damage that you can no longer hide.

I have an ex-wife who fits this description. She maintains her illusion of sanity by continually moving to new audiences, jobs, congregations, and husbands. I wonder when the world will see the pattern? At some point, she may run out of options, but the world is a big place.

Normally Self-Aware

You don't gain awareness until you confront your ignorance. To be normal in a changing world requires a degree of awareness, insight, and resilience. This is true even if all you're trying to do is behave normally. Among other things, normal means sustainable, and this requires these basic skills. Awareness, insight, and resilience provide a serviceable definition of mental health.

Successful, normal people—the ones who are aware, insightful, and resilient—don't need psychotherapy. They find sufficient guidance from their environment. Those who move either below or above normal can benefit from my guidance. Most of my clients are of this sort: people who are aware they are outside of the norm.

I take an active point of view. I apply the prejudice that they have something special, or else they would not be looking outside the normal world. I chastise the overachievers by asking them who they're over performing for? I take a somewhat unsympathetic attitude with those in grief and depression, asking them what they're waiting for? Death is inevitable and the human world is dysfunctional.

As my friend Phyllis Shafley told me, “Grievances are like flowers: if you water them they will grow. So little grievances grow into big grievances, and it’s so unfortunate! Everybody’s got problems, and there’s sin in the world, but move on and make your life what you want it to be!” (Stoller 2019)

“Normal is not something to aspire to, it's something to get away from.”
— **Jodie Foster**, actress

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If your life is not normal, then schedule a free, zoom call at:

https://www.mindstrengthbalance.com/schedule15