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PSYCHOLOGICAL HEALTH

All psychotherapeutic systems have a view of human nature, a concept of disease etiology, and a vision of psychological health. This vision is the end point of "successful" therapy as defined by each particular orientation.

Reflecting a dissatisfaction with traditional pathology-based clinical and mental health classifications, some researchers are developing and empirically investigating models of positive health. There has also been an increasing interest in non-Western approaches to psychological health. These investigations suggest that elimination of pathology may just give us the concept of the "average" or "normal" rather than a concept of true positive psychological health.

In the original constitution of the World Health Organization a view of health was stated in positive terms: "Health is a state of complete physical, mental, and social well-being and is not merely the absence of disease or infirmity."

There are problems with the study of psychological health. There is a gray area between science and values. Psychological health may be a cultural value. If psychological health is only a value, how does psychology keep from becoming merely sermonizing? The balance is a tenuous one.

DIFFERENT VIEWS OF PSYCHOLOGICAL HEALTH

Theories of psychological health are often based upon the views of the individual that each tradition has.

There are four broadly conceived beliefs about human nature, summarized in Table 1.

Theory 1 states that the person is evil, basically amoral. Theory 2 says that people are good. Theory 3 includes the blank slate or *tabulae rasae* view. It is existence preceding essence. Theory 4 states that people have self-actualizing innate natures that not only are personal as Theory 2 goes, but reflect a divine or cosmic or transpersonal spark intrinsic to everyone. Finally there are combination theories.

The Goal of Teaching (Therapy, Discipline, etc.)

The goal of "teaching" refers to the vision of psychological health and the model of human nature from which it springs (Table 2).

Table 1

Theory	View of Human Nature
1	Innately evil/amoral
2	Innately good, self-actualizing nature
3	<i>Tabulae rasae</i> : existence precedes essence
4	Innately good and in essence in harmony with the divine

Table 2

Theory	View of Human Nature	Vision of Health
1	Innately evil/amoral	→ Lessen the evil and/or seek salvation
2	Innately good, self-actualizing nature	→ Uncover the self
3	<i>Tabulae rasae</i> : existence precedes essence	→ Create self
4	Innately good and in essence in harmony with the divine	→ Uncover the essence of self

1. *The amoral theory of human nature.* Since people are basically evil, the vision can only be to make them "less so." In Freudian terms, the goal is to give individuals more control over the id impulses; in traditional Christianity, the goal is to have people seek salvation and God, realizing their basically evil nature.
2. *The good theory.* This theory suggests that a concept of health is having the individual uncover his or her own self-actualizing nature. "To move away from the facades, oughts, pleasing others, and to move toward self-direction—being more autonomous, increasingly trusting and valuing the process which is himself" (Rogers, 1961).
3. *The blank slate existence precedes essence theory.* The vision of this theory, in a relativistic world, is to choose one's self, to stand forth (existential) and to learn skills necessary for optimal cultural functioning (behavioral).
4. *Transpersonal approach.* The vision is an awakening, *nirvana*, *kensho* to one's true self, which is "no self" but rather part of the larger Self.

VIEWS OF HUMAN NATURE

Goal of Therapy For those who begin with the Theory 1 view of human nature, the best they can do is come to some kind of resolution, that is, the "best possible" conditions for the ego. The task of therapy is to uncover and understand initial traumatic events.

Ego Psychology Ego psychology is used by different individuals, at different times, to describe a wide variety of approaches. These range along a continuum from neoanalytic viewpoints of the conflict-free sphere of the ego to those believing in an innate, self-actualizing, intrapsychic ego.

View of the Individual Theory 2, represented by Rogers, believes there is an innate, self-actualizing quality within each individual. Therefore, the goal of therapy is merely to provide a warm, supportive, trusting environment to allow the person to see and accept that innate self.

Behavioral Approach This approach is used as an example of a Theory 3 viewpoint. Within a behavioral approach, there are many different groupings, and within each of these

Table 3 Comparison and Contrast of Four Schools of Psychotherapy

Subject	Psychodynamic (Id Psychology: Freud)	Client-Centered Therapy (Ego Psychology: Rogers)	Social Learning Theory (Behavioral Psychology)	Zen Buddhism
View of human nature	Aggressive; hostile, life out of control; ruled by unconscious	Innately good; intrapsychic self, which is self-actualizing	Person is <i>tabulae rasae</i> at birth; with no "essence"	A human being has pure, innate, good, unconscious "self" that is like Buddha nature and is within all
Goal of psychotherapy	To make the unconscious conscious; overcome childhood amnesia; recover warded-off memories	To let the person experience that self inwardly and knowingly	The target behavior: if deficit, teach it; if excess, decrease it; make it appropriate	To make the unconscious conscious; to hear the bird in the breast sing
Etiology of disease	Repression of sexual and hostile childhood wishes by superego and ego	Trying to meet external shoulds and oughts; inability to assimilate experiences into one's self concept	Environmental variables; learning deficiency	Belief there is a "self"; greed; ego; attachments

groupings there are additional subgroupings. Behavior therapy consists of activities implying a contractual agreement between therapist and patient to modify a designated problem behavior with particular application to neurosis and affective disorders.

Behaviorists suggest that to be free, people need to have knowledge of the internal and external factors that control them. This means (1) having more accurate knowledge of the consequences of alternative behaviors, (2) learning more skills necessary for achieving objectives, and (3) diminishing anxieties that restrict participation in the alternatives chosen. Freedom also involves having precise awareness of the internal and external environments, and arranging these environments in such a way as to maximize individual choices.

Table 3 summarizes these three different viewpoints—id psychology, ego psychology, and behavior therapy—across the three dimensions. These viewpoints represent Theories 1, 2, and 3 respectively.

NONTRADITIONAL APPROACHES: THEORY 4—ZEN

These three approaches are contrasted in Table 3 with the religious/philosophical Eastern view of Zen Buddhism, representative of a Theory 4 viewpoint. The qualities of a healthy person as suggested by the Eastern tradition include determination and effort, flexibility and adaptability, a sense of meaning, an affirmation of life, dying to a finite ego, loss of self-importance, development of compassion and selfless service, increased depth of intimate relationships, development of control of one's mind and body, and ethical qualities such as the four illimitables or measureless states—compassion, sympathetic joy, all-embracing kindness, and equanimity.

SUMMARY

Not all of the innumerable views of psychological health fit into the four-theory model described. Other important

theories include Jung's concept of the individuated self, Rank's use of creativity, and Maslow's self-actualizing people. Marie Jahoda has pointed out that most definitions of positive and mental health call attention to one or more of the following six aspects: (1) the attitude shown by a person to self; (2) the style and degree of self-actualization; (3) the degree of personal integration achieved by the individual; (4) the degree of autonomy achieved by the person; (5) the degree of the person's conception of reality; (6) the degree of environmental mastery achieved by the person.

Greater knowledge of positive health can add considerably to clinical practice, and potentially to society at large.

FURTHER READINGS

Maslow, A. H., 1962.

Shapiro, D. H., 1982.

BEHAVIORAL MEDICINE COMMUNITY PSYCHOLOGY HEALTH PSYCHOLOGY HEALTHY PERSONALITY MENTAL ILLNESS: EARLY HISTORY PRIMARY PREVENTION OF PSYCHOPATHOLOGY PSYCHOANALYSIS

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