

Mental health and well-being

The World Health Organization (WHO) defines health as:

... a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Mental health is clearly an integral part of this definition. Since its inception, WHO has included mental well-being in the definition of health. The goals and traditions of public health and health promotion can be applied just as usefully in the field of mental health as they have been in heart health, infectious diseases and tobacco control.

Mental health is more than the absence of mental illness: it is vital to individuals, families and societies

Mental health is described by WHO as:

... a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community.

In this positive sense mental health is the foundation for well-being and effective functioning for an individual and for a community. This core concept of mental health is consistent with its wide and varied interpretation across cultures.

In this positive sense, mental health is the foundation for well-being and effective functioning for an individual and for a community. It is more than the absence of mental illness, for the states and capacities noted in the definition have value in themselves. Despite this, mental health is still portrayed by some as a luxury. Neither mental nor physical health can exist alone. Mental, physical and social functioning are interdependent.

Mental health and well-being can be understood from two perspectives-Macro-level and micro/individual level.

Macro-level indicators

No discussion of macro-level indicators of positive mental health can commence without noting that for mental health to flourish it must do so in an environment that is safe and capable of meeting (at a minimum) the basic needs of individuals. Where there is war and strife, hunger, disease, great poverty and denial of basic human rights the very basis for the development of positive mental health is compromised. This is not to say that in such circumstances positive mental health is altogether absent – there are always those who do well despite great adversity – but to acknowledge that there is a hierarchy of needs to be met in order to enable levels of population positive mental health to emerge.

Figure 12.4

Millennium Development Goals agreed at the Millennium Summit, September 2000

- Eradicate extreme poverty and hunger
- Achieve universal primary education
- Promote gender equality and empower women
- Reduce child mortality
- Improve maternal health
- Combat HIV/AIDS, malaria and other diseases
- Ensure environmental sustainability
- Develop a global partnership for development

Source: UNDP, 2002

Linked closely with the Millennium Development Goals is the Human Development Report (Fukuda-Parr & Kumar, 2003). First commissioned in 1990, the Human Development Report features the Human Development Index (HDI), which is used to measure a country's achievements in three broad areas: longevity (life expectancy at birth), knowledge (adult literacy rate and the combined gross primary, secondary and tertiary enrolment ratio) and standard of living (gross domestic product per capita). The data used to calculate the HDI are taken from national-level collections that include census, administrative and economic sources. The HDI is a measure of achievement and is principally used to focus attention on, and advocate for, human outcomes rather than merely the economic performance of a country.

Individual indicators of positive mental health

Most emerging positive mental health indicator frameworks specify a range of concepts and measures. Broadly, these measures concern individual perceptions and judgements about life satisfaction, emotional experiences, sense of coherence and meaning in life, personal self-esteem, sense of control over daily life and work, and dispositional optimism. Psychology of well-being predominantly focuses on the individual level of experience.



Hedonic Vs Eudaimonic Well-being

A majority of well-being models in psychology conceptualize well-being based on the presence or absence of certain qualities. Some of these models focus exclusively on hedonic aspects of mental well-being, such as the presence of life satisfaction and positive emotions, and the absence of negative emotions (e.g., Diener et al. 1999). “The predominant view among hedonic psychologists is that well-being consists of subjective happiness and concerns the experience of pleasure versus displeasure broadly construed to include all judgments about the good/bad elements of life” (Ryan and Deci 2001, p. 144). From a hedonic perspective, a good life is identical to a pleasant life, and in conceptualizing mental well-being, “the experience of pleasure and the achievement of a subjective sense of well-being remains at the center of the story” (Kahneman et al. 1999, p. 10). In this line of theorizing and research, various aspects of positive functioning are normally considered to be predictors of well-being, rather than its components (e.g., Sheldon 2013). Accordingly, these models tend to leave out optimal functioning in the measurement of mental well-being. Nonetheless, this line of research argues that hedonic well-being both results from and leads to optimal functioning (e.g., Kashdan et al. 2008; King 2011; Lyubomirsky et al. 2005). Hedonic well-being which is also called as “subjective well-being” captures the presence of positive affect and satisfaction as well as the absence of negative affect (Diener et al. 1999).

Psychologists who have adopted the hedonic view have tended to focus on a broad conception of hedonism that includes the preferences and pleasures of the mind as well as the body (Kubovy 1999). Indeed, the predominant view among hedonic psychologists is that well-being consists of subjective happiness and concerns the experience of pleasure versus displeasure broadly construed to include all judgments about the good/bad elements of life. Kahneman et al (1999) defined hedonic psychology as the study of “what makes experiences and life pleasant and unpleasant”. Happiness is generally defined as subjective well-being, which is to say, an experiential state that contains a globally positive affective tone. It may be narrowly or broadly focused: A person may claim to be happy to have found a lost shoe, happy that the war is over, or happy to be having a good life. Researchers have conceptualized and measured happiness in at least two quite different ways. One is *affect balance*, indicating having more pleasant than unpleasant emotional states, and is thus essentially an aggregate of how one feels at different moments. The other, *life satisfaction*, goes beyond momentary feelings to invoke an integrative, evaluative assessment of one’s life as a whole. Most research within the hedonic psychology has used assessment of subjective well-being (SWB) (Diener & Lucas 1999). SWB consists of three components: life satisfaction, the presence of positive mood, and the absence of negative mood, together often summarized as happiness.

However, the hedonic approach to well-being has been criticized by many scholars across diverse fields as being incomplete. These scholars argue that mental well-being encompasses more than a positive affect balance and life satisfaction (e.g., Keyes and Annas 2009). These researchers emphasize positive functioning, worthwhile goals, and meaningful activities as key ingredients of mental well-being (Joshanloo 2014). This conceptualization of well-being is typically called eudaimonic well-being. Ryff’s (1989) model of psychological well-being falls within the eudaimonic perspective. This model is premised on the idea that the core of wellness

is not how pleasantly or unpleasantly one feels but how one functions in response to life challenges. Ryan et al. (2008) also recognize the importance of studying the contents and processes of living well in addition to pleasure and mental states. Ryan et al. define eudaimonic well-being in terms of “pursuing goals that are intrinsically valued and of processes that are characterized by autonomy and awareness” (p. 163). Eudaimonic well-being which is also called as “psychological well-being captures six aspects of psychological functioning as conceptualized by Ryff (1989): autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance.

The simpler form of happiness (hedonic), at least, is rooted in nature. If happiness is natural, meaningfulness (aspect of eudaimonic well-being) may depend on culture. All known cultures use language, which enables them to use meanings and communicate them. These are built up over many generations, and each new person comes to learn most of these meanings from the group. Meaningfulness may often involve understanding one’s life beyond the here and now, integrating future and past. In contrast, happiness, as a subjective feeling state, exists essentially in the present moment. At most, happiness in the form of life satisfaction may integrate some degree of the past into the present — but even so, it evaluates the past from the point of view of the present. Most people would probably not report high life satisfaction on the basis of having had a good past but while being currently miserable.

