

A project of vector-contextual model of a man's health creating potential

Anatoly Gennadievich Madzhuga¹, Liliya Bakkirovna Abdullina¹, Dariya Zacharovna Shibkova², Aleksandr Ivanovich Fyodorov³

¹Sterlitamak Branch of the Bashkir State University, Lenin Prospect, 49, Sterlitamak, 453103, Russian Federation

²The Chelyabinsk State Pedagogical University, Lenin Ave., 69, Chelyabinsk, 454080, Russian Federation

³Urals State University of Physical Culture, Ordzhonikidze str., 1, Chelyabinsk, 454091, Russian Federation

Abstract. The article deals with the problems of a projecting of a vector-contextual model of a man's health creating potential and its first scientific explanation. The authors pay a special attention to the determination of an interaction between metacognitive capabilities, an affective self-attribution and valeological setting which are considered to be the basic vector-components of a man's health creating potential.

[Madzhuga A.G., Abdullina L.B., Shibkova D.Z., Fyodorov A.I. **A project of vector-contextual model of a man's health creating potential.** *Life Sci J* 2014;11(9s):265-270] (ISSN:1097-8135). <http://www.lifesciencesite.com>. 54

Keywords: vector-contextual model of a man's health creating potential, metacognitive capabilities, affective self-attribution, valeological setting, health creating potential, vector, context, contextual approach, holistic approach to health.

Introduction

A man's health is used to being treated and appreciated with the existing level of a number of structural and functional factors. However, from the point of view of both the cultural-historical theory and existential-humanistic psychology the potentially possible, actualizing virtual level of a man's health is more picturesque than the existing state. This level of the "zone of the nearest development of health" can be described with the notion of "health creating potential", which is actualized as a result of a man's actualization of his subjective intention.

Analysis of the theories and conceptions, reflecting a man's activity to his health, such as: a persuasive model [1], a theory of protective motivation [2], a theory of the justified action [3], a theory of common sense and self-regulation [4], self-management conceptual model [5], cognitive-social health (identified) processed model (C-SHIP) [6], social-ecological theory [7] gave us an opportunity to determine personal factors typical of the health creating position of a man. Valeological settings, metacognitive capabilities and affective self-attribution are among them. Each of them is dynamic and aimed at its development, i.e. can be called a vector of increasing a man's health creating potential.

A health creating potential is a combination of conditions to be supported and strengthened by an individual, a man as a subject of his own whole health. To the *inner conditions* of health creating (health making) potential we can refer: a) physical (physiological) factors such as inheritance and the level of efficient body functioning; b) psychological components – knowledge, motivation and inclinations, settings of a man in the sphere of health. The *outer conditions* include some socio-cultural

factors which can be subdivided into two subgroups: a) material sphere factors (influences or conditions to support health: sport equipment and so on), and b) social ideology aimed at his health in a health creative, neutral, or even negative way. Actualization of health creating (or health making) potential as a realization of a man's intention under the circumstances is shown in the phenomenon of the objectively and subjectively treated man's health.

On this basis we've worked out a model of *a man's health creating potential* including three vectors – *valeological setting*, *metacognitive capabilities* and *an affective self-attribution* [8]. Metacognitive capabilities are used to characterize individual peculiarities of a man (cognition of the second rank). They allow an individual to reflect, appreciate and manage his cognitive system consciously or unconsciously while appreciating the efficiency or constructing a predictive health model. *A valeological setting* can be defined as a psychological state of a subject's aptitude to an active position in relation to retaining and increasing a dimension of his health creating potential. *An affective attribution* is a cognitive-personal factor providing an emotional-energetic actualization of the process of health creation and attribution of the emerging psycho-emotional states.

The category "*vector*" functions here as an element of psychological space of a person with an purposeful and dichotomous phenomena – development or destruction. From the psychological point of view it is the movement on the vectors that comprise the essence of the process of actualization of a man's potential in the sphere of health creation.

The tradition to apply a vector modeling in psychology dates back to K. Levin with his

topological, field model of psychic, including a man's interaction with the surrounding by means of vector values. K. Levin introduced the notion "psychological", or "living space" as an actualization of a model of the surrounding with the subject inherent in it; in the psychic different objects are localized as purposes, obstacles on the way to achieve them. A man's behavior in the living space is conditioned by the vectors reflecting psychological forces (inclinations, intentions, etc.) and having a definite vector, value and points of application, as well as a "valence", i.e. an attractive or unattractive force for the subject [9].

New attempts to study a vector model in psychology have appeared lately. For instance, N.M. Amelkin has worked out a technique of psychological and self-assistance to study a spiritual and corporal pain on the basis of visualization of the pain sources in the form of opposing vectors. Mutual neutralization of those vector forces provides the necessary therapeutic effect [10]. Thus, beside a purely theoretical one a vector way of psychological phenomena study has found quite a practical application too. The vector way of presentation appeared to be quite an effective way to reflect a man's health creating potential.

The three vectors described above used to be, as it was mentioned above, self-efficient three-dimensional space of a health creating potential. However, it became clear furthermore that there was an opportunity to add one more space which efficiently supports an existing model giving it a bigger dimension. This space is created with a combination of some contexts which contain and study the vectors of a man's health creating potential.

Lately the term "context" is more often used as a scientific term denoting not only a self-textual environment of an object under study (a piece of a text) but also in an extensive-semiotic way as a sign environment of an object (also taken as a sign) ascribing some sense to this object. As a result of reconsideration of a context phenomenon in the theory of speech acts and psycholinguistics, by 1980 a context had begun to be treated as a *psychological* notion. According to the classic definition given by A.A. Verbitsky a *psychological context* is a system of inner and outer factors and conditions of activity and conduct of a man as a subject, which influence the peculiarities of his comprehension, understanding and modification of the given situation; which define the meaning and sense of the given situation as a whole and all the components introduced in it [11]. Simultaneously, there are singled out the so-called outer context (of the objective and social situation) and inner context (of the psychic reality). Such an interpretation of the context is in many ways related

to the comprehension of the environment as an "inner-outer" psychic phenomenon reflecting both the objective and social environment as a man's state of the body and the contents of his psychic. In this respect the context serves as an environment for the given phenomenon.

However, beside the structural treatment of this psychological phenomenon there must be given an additional functional characteristic of the context. It is connected to the fact that in comparison with a traditional linguistic interpretation of the phenomenon a psychological context is not so much a kind of an object's static structure (environment) as a peculiar psychic "mechanism" of actualization whose function is to structure all the man's cognitive processes due to the object's correlation with the combination of the others. Thus, context is a way to denote some combination of the interpretational psychic "mechanisms" (both cognitive and emotional) which are attracted to construct an actualization of an object. As a result we come to conclusion that a psychological context is, first of all, a functional system integrating all other psychic processes in order to provide correlation of a piece of information with other ones to ascribe them some sense and meaning.

On the basis of the synthetic structure-functional interpretation of the context we can develop a specific methodology of a psychological investigation – a *contextual approach* which presupposes to find out some systems important for the phenomenon of context, providing its detailed (really systemic) description and study [12]. It is also true for the health creating processes which acquire a subjective meaning in the inner world of a man only in the definite contexts.

There can be singled out several psychological contexts, i.e. aims to correlate a man's health potential with other phenomena of his psychic referring to the factors of a man's health creation. Firstly, it is a *social-cultural context* which embraces ethnic ways of life activity typical of the given community. These ways define a common idea and principles of management of health saving and health creating environment. This context also includes both norm-axiological and technological components of an attitude to health inherent in the given community, culture, ethnos in the given historic period. Therefore, the context is treated as a "chronotope" of a subject's health creating potential, i.e. a broader space actualizing cultural phenomena in their correlation with the health creating factors themselves.

Besides, we can also study health and the problems of development of a man's health creating potential in *corporal-physiological, psychological*

and *spiritual* contexts. Here we come across a holistic interpretation of health and health creating potential. Health from the holistic point of view is known to include not only a corporal but also psychic and spiritual levels of a man. The term “*holistic*” originates from the Greek word “*holos*” denoting “unity”, “integrity”. Correspondingly, *holism* is a science studying the world as a result of a consecutive creative evolution which is defined by a non-material and non-cognitive “factor of integrity” [13; 14; 15]. Psychologist and philosopher A. Maslow connected a holistic point of view on the world with a natural healthy state of a man: “I think a holistic way of thinking and understanding to be absolutely natural ... for healthy self-actualized men and, vice versa, extremely difficult for less developed, less mature representatives of a mankind” [16].

A holistic understanding of health has become an interdisciplinary sphere of investigation and clinic practice and also gave rise to valeology as a science of an integral healthy man. A holistic approach to health presupposes not only a removal of a contradiction between spiritual-psychological and material-physiological origins of a man. Besides, it emphasizes a man’s subjectness as a health bearer, his responsibility for his health and health development as a life potential. On the contrary, an unhealthy state from the point of view of valeology is initially born on a mental, i.e. neological level, is further distributed to a psychic, emotional sphere, to be exact, and, is finally localized on a vital (i.e. physiological or corporal level) through imbalances of vegetative nervous system, imposing definite restrictions of his self-realization on a subject. One of the latest modern Russian holistic health models is a model offered by R.I. Aisman. It reflects a constant and uninterrupted impact of somatic, psychic and spiritual origins in connection with social and ecological factors [17].

Hereafter, from the point of view of a holistic interpretation of health and health creation it is necessary to introduce any factor relating to this problem not only into the context of corporal processes, but also to study their subjective actualization in cognitive and emotional forms, and to investigate a spiritual meaning of the health creating factors. It should be noted that the consequence of these contexts is not spontaneous – a successive one transcends (acquires and modifies) a previous one.

First of all, it concerns an interaction between biological (corporal, physiological) and psychological contexts. According to the ethologist V.R. Dolnic, to explain psychological processes “one has to admit a man’s biology but not only know it. To

ignore ethology if you study a child’s behavior is as mistaken as ignoring ecology in economy” [18, p. 132]. In an original psychological-semiotic psychological conception of corporality and consciousness by A.Sh. Thostov (based on the Bart’s philosophy) corporal phenomena are presented in the conscience as a *sign*. The mechanism of corporal phenomena transcending into psychic can be identified in the following way: “a sign (denoted corporal sensation) as an association of a sensitive tissue and corporal construct, becomes denoting in a mythological scheme of disease and, developing outside, transforms into a symptom” [19, p. 4].

Furthermore it results in the fact that together with the corporal, physiological factors psychic actualizations of body and disease influence greatly on the state of a man’s health; these representations acquire some sense in the context of a health-disease myth (as a *secondary semiotic system* in the Bart’s interpretation where a sign is not connected with the denoted object and becomes denoting something else). That’s why a man whose psychic is of a principally semiotic character understands and interprets his corporal processes from the point of view of his shared myth (magic, energetic, scientific-medical and so on). Moreover, “introducing into the secondary semiotic system of the myth perceptions can change their qualities as well as be produced from above by the myth itself...” [19, p. 5]. Consequently, influence on a man’s health (both from the point of view of the plane of development of its health creating potential and of the plane of treatment-correction) necessarily presupposes the influence in combination with the mythical picture of health and its malfunctions as a psychic reality.

Thus, body processes responding to this or that influence in the frame of *physical culture* (when not only physical exercise of “body culture” or “bodybuilding” are taken into account but understood in a broader sense as a care of wellbeing) are by all means reflected in some *psychic forms*, and as a result they acquire its positive or negative *spiritual meaning*. The notion “*spirituality*” is used here to denote a process and a result of a man’s self-modification into the process of self-transcending (overcoming and entering a new level) of the given restrictions of its corporality and psychic through the development of a responsible self-identification with broader spheres of existence [20]. Spirituality is a potential of harmonization and contradiction to entropy, potential introduced in the life phenomenon, and acquiring its most full and conscious expression in a man. Such an interpretation denotes an actualization of a man’s potential, in the sphere of health creation included, with disclosing an existing

and creating new opportunities to express a man's essence in the world. Through it health creation functions as an example of a genuine spiritual culture of a man. So, there are many cases when a man on the point of taking care of his body began to realize the necessity of his spiritual development in the form of different western or eastern practices.

Thus, a contextual approach is supplementary to a vector model of a health creating potential with a new space development of an original model which can be consequently called a *vector-contextual model*. It means that the vectors of health creating potential are actualized not in a vacuum but in corresponding contexts providing process's favourable or unfavourable conditions in a man's psychic. It should be also noted that a nucleus of the model must be a development of the very potential of health creation of a certain subject acting as a selfness (genuine I, different from the masques of a false Ego or another image, i.e. the subject himself).

According to K.G. Yung "...conscience and unconscious are not necessarily opposite to each other, but mutually supplementary to the whole – selfness...", but "...selfness is higher in relation to a conscious I value", therefore, it can't be interpreted by a man as "I" in a proper way, for a part can't be treated as a whole [21]. Yung compares Selfness with the Sun in our Solar system, and Ego with the Earth centered to the Sun. Selfness is situated in a consecutive flow of creation understood as transcending, dialectical removal of contradictions-oppositions (masculine-feminine, conscious-unconscious, god-bad, own-not own and so on), the peak of which is acquiring a genuine integrity – individualization [22].

A. Maslow treats a man's "selfness" or "I" as its essential nucleus; correspondingly, *self-actualization* by Maslow is acquiring an ability to tune with your own inner nature which provided an optimum of a man's functioning and health – corporal, psychological and spiritual [16]. Self-actualization is a consecutive process of a subject's disclosure of his potential possibilities, including a sphere of health, which takes us back to the notion of health creating potential which is actualized only in an active cooperation of a subject with the world in a form of its own corporality as well as in forms of social relations and objective activity. In psychosynthesis of R. Asagioli this process is called self-actualization and is treated as self-study and disclosure of the potential, "your treatment as a synthesizing spiritual Center" [23, p. 30]. However, it is not to include a spiritual level itself.

In the terms of the author of ontopsychology A. Menegetti "*onto-in-se*" or "*in-se*" is a selfness as

an individual's existence by itself taken irrespective its attitudes to the world; it's an inner positive nucleus of a man, his genuine being, transcended into the plan of existence, while a conscious-logical "I" is an only conscious psychological station of a man's psychic inclined to compare itself to the whole psychic. Therefore, as well as in other trends of an existential psychology a man's task is treated as a disclosure of a positive potential of his existence in cooperation with the world; successive co-tuning of "I" and "in-se" is a basis of an efficient practical activity and health [24].

Thus, selfness – super individual transpersonal center reflecting the man's deepest and genuine nature as a conscious subject and compared, according to S. Groff, with a Hindi conception of Atman-Brahman as a divine "inner". Selfness is presented as an active subject possessing not only a different potential but some images about itself and direction not only to the outer world but, first of all, to itself in the processes of self-study and self-actualization. This subject realizes its self-creating potential in a form of *care for himself*.

"Care for himself" (Greek *epimeleia*) according to French philosopher and "archeologist of knowledge" M. Fuko is one of the most important characteristics of a man which was firstly treated and articulated in an antique world. The scientist notes that care of himself became a heart of an antique philosophy constantly striving for becoming "an art of existence" in the works by Socrates, Epicurus, Epictetus, Seneca, Mark Aurelia. He also underlines that "according to the tradition rising to the sources of the Greek culture care of himself is closely connected to the medical idea and practice", and "Plutarch in his introductions to his "Ideas about health" ... wrote that philosophy and medicine act in "the same limits" [25, p. 63]. Whereas a principle difference between care and cure of the body was not made at that time. Alongside with care for the body care for the soul – Pythagoras's practice of self-analysis – in forms of "reflections on deeds" and critical analysis of notions; it has got a wide distribution in different philosophical schools. So, the Stoics worked out some schemes showing different stages, possible ways of curing, to be more exact. As M. Fuko writes, "These concepts and schemes are equally useful for both the corporal medicine and therapy of soul did not allow to apply a common type of a theoretical analysis to physical malfunctions and moral dissipation, but also presupposed in both the cases one and the same way of action, interference: both the "injures" were to be dealt with, were to be cured and to achieve recovering if possible" [25, p. 64].

Swiss *psychiatric*, psychologist and philosopher L. Biswanger introduced an existential idea of a man as “a project of himself”, when being conditioned by the past, present and his own unconscious is a estrangement of free existence. A man’s world-project serves as a basis of an individual style existence-in-the-world which defines his ideas of himself, of the world and typical reactions. Another existential psychologist – M. Boss, – like L. Biswanger, suggests taking a person in the context of his images of the future; only concretization of perception of the future absence of an existential idea gives rise to psychological problems [26]. Thus, an existential idea of a man presupposes a man’s project of himself, of his life and of his health too. It is such a self-projecting where the potentials of a man’s health creating are shown.

In accordance with this holistic interpretation it is necessary to project health on the basis of disclosure of a health creating potential in all the levels of a man’s integral existence. At the same time as a basis of the process of the potential development one can take a model of virtual psychology and periodization of psychological development suggested by N.A. Nosov and T.V. Nosova. While studying the development of a man’s idea of himself in an ontogenesis from childhood till adulthood they singled out 5 levels of such a self-reality – “so be”_according to their terminology, i.e. virtual reality (from the existential point of view – levels of “actualizing himself” project treated as a kind of a subject’s “zone of the nearest development” by means of which a man identifies himself in different periods on different basis. All these realities (of corporality, of consciousness, of an individual, of a will, of an inner man) are acquired by a man as a result of a consequent change of a self-identification idea while acquiring a previous method of self-identification at a required level [27, p. 74-100; 325-344].

In correspondence to these levels of acquiring his own nature, forming a man’s integrity (individuation) accents on a care for himself and his health are changed. They are shown as specific ways and methods of realization of a health creating potential. It must be noted that these ontogenetic levels seem to be taken anew, already consciously, by a man trying to realize a genuine care for himself as a healthy man. Consequently, at first a subject must realize his potential of health creation in the sphere of corporality (the first level), then – in the sphere of psychic (the second-fourth levels), and further – in a spiritual sphere (the fifth level). Simultaneously, it is possible to speak about a disclosure of this potential in different contexts – corporal, psychic and spiritual. Besides, a sociocultural context forms a natural

background for these processes which defines definite forms and priorities of a subject’s health creating activity.

The vector-contextual model of a man’s health creating potential allows defining some vectors for developing and executing social influences from the side of teachers, parents, authorities responsible for formation of students’ health culture and their individual health creating position. Moreover, the vector-contextual model of a man’s health creating potential worked out and conceptualized by the authors’ allows a teacher to predict some stable qualities of self-actualized personality of students and levels of their readiness to health creating activity in the constantly changing conditions of society and self-actualizing personality.

Corresponding Author:

Dr. Madzhuga Anatoly Gennadievich
Sterlitamak Branch of the Bashkir State University
Lenin Prospect, 49, Sterlitamak, 453103, Russian Federation

References

1. Rosenstock, M., 1969. Prevention of illness and maintenance of health. Poverty and health: A sociological analysis. Cambridge: Harvard University Press.
2. Rogers, C. R., 1997. What understanding and acceptance mean to me. *Journal of Humanistic Psychology*, 35(4): 7-22.
3. Ajzen, I., 1991. The theory of planned behavior. *Organizational Behavior and Human Decision Processes*, pp: 179–211.
4. Leventhal, H., I. Brissette and E. Leventhal, 2003. The common-sense model of self-regulation of health and illness. *The Self-regulation of Health and Illness Behavior*. London: Routledge, pp: 42–65.
5. D’Zurilla, T.J. and M.R. Goldfried, 1971. Problem solving and behavior modification. *Journal of Abnormal Psychology*, pp: 107-126.
6. Miller, S.M., Y. Shoda and K. Hurley, 1996. Applying cognitive-social theory to healthprotective behavior: Breast self-examination in cancer screening. *Psychological Bulletin*, 119: 70–94.
7. Stokols, D., 1996. Translating Social Ecological Theory into Guidelines for Community Health Promotion. *American Journal of Health Promotion*, 10(4): 282–298.
8. Madzhuga, A.G., 2010. Health creating education: theory, methodology, practice: monograph. Ufa: EID RESMC MO RB, pp: 300.

9. Levin, K., 2001. Dynamic psychology: Selected works: Trans. From German and English. Moscow: Smysl, 572 p.
10. Amelkin, N.M., 2010. Life without forces. New vision of human problems. – Moscow: Sigmarion, 144 p.
11. Verbitsky, A.A., 2005. Context (in psychology). Psychological lexicon. Encyclopedic dictionary in 6 vol. Moscow: PER SA, pp: 137-138.
12. Verbitsky, A.A. and V.G. Kalashnikov, 2010. Context in psychology and pedagogics. Monograph. Moscow: Logos, 298 p.
13. Smuts, J.Ch., 1926. Holism and Evolution. London: Macmillan.
14. Haldane, J.B.S., 1932. The inequality of man and other essays. London, 71 p.
15. Meyer-Abich, A., 1963. Geistesgeschichtliche Grundlagen der Biologie. Stuttgart, Gustav Fischer, 1—322.
16. Maslow, A., 1999. Motivation and personality. S-Pb.: Petersburg, 352 p.
17. Iseman, R.I. and A.Y. Turner, 2001. Physiological basis of health. Novosibirsk: LADA. 524 p.
18. Dolnik, R.V., 2004. Disobedient child of biosphere. Conversations about a man in the company of birds, animals and children. S-Pb.: Che-Ro-on-Neva; Petrogliph, 52 p.
19. Tkhostov, A.Sh., 1993. Disease as a semiotic system. Vestnik of Moscow University. Psychology, 1: 3-16.
20. Kalashnikov, V.G. and G.N. Kazantseva, 2009. Spirituality as a category of psychological science. Spiritual-moral world of the modern Russian community: problems of formation and protection: scent.-pract. conf. Volgograd, 16th March 2009. Moscow: CLR “Globus”, pp: 15-19.
21. Yung, K.G., 1999. Personal and super personal, or collective unconscious: trans. Moscow: PRIOR, 228 p.
22. Yung, K.G., 1997. AION. Investigation of Selfness phenomenon. Moscow: Refl-book, K.: Vakler, 336 p.
23. Assagioli, R., 1994. Psychosynthesis: theory and practice. Moscow: REFL-book, 314 p.
24. Menegetti, A., 2006. Introduction to ontopsychology. Moscow: “Ontopsychology”, 138 p.
25. Fuko, M., 1998. Culture of yourself. History of sexuality. Vol. 3. Care for yourself. Kiev: Dukh and Litera, pp: 45-79.
26. Tikhonravov, Yu.V., 1998. Existential psychology. Teaching-reference edition. Moscow: CSS “Business-school Intel-Synthesis”, 238 p.
27. Nosov, N.A., 2000. Virtual psychology. Moscow: Agraph, 432 p.

5/29/2014