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Positive mental health: a research agenda

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Vaillant provides a thoughtful review of seven models for conceptualizing positive mental health. He proposes that the best way to understand mental health is to conduct longitudinal studies of multiple populations, in culturally diverse settings, using instruments that assess multiple conceptualizations.

Looking to future, I agree with Vaillant that there is a need for theoretical and empirical work to establish the most useful conceptualization of positive mental health. On the theoretical side, there is a need to clarify and integrate the current overlapping but distinct constructs into a broader overarching framework. On the empirical side, there is a need to develop and refine instruments for measuring positive mental health constructs at multiple levels, including self-report, behavioral ratings, psychophysiological responding, and neurobiological functioning. There is also a need to link research on positive mental health to the psychology of normal and abnormal functioning across the life-span. In particular, it would be valuable to determine the links between positive mental health and intelligence, temperament, personality traits, self-regulation and attachment, through genetic, neurobiological, psychometric and developmental research.

Positive mental health must be distinguished from intelligence as psychometrically defined, and from other forms of intelligence in models such as Gardner’s multiple intelligences (1). Clearly a high IQ and positive mental health are not synonymous. Nevertheless, mental health and intelligence (as defined by IQ tests) both involve effective problem-solving and adaption to the environment. An important research question concerns the nature and extent of the overlap between psychometrically assessed intelligence and positive mental health across the lifespan.
Vaillant points out that positive mental health has been equated with social and emotional intelligence. There is also an argument that existential or spiritual intelligence, or indeed an advanced stage of moral development (2), may be central to positive mental health, given the well-established correlation between religious practices and well-being (3). It remains unclear what the relationships are between positive mental health and other forms of intelligence, such as musical, kinesthetic and naturalistic. Similar arguments may be made for the constructs of giftedness and creativity. It is plausible that certain individuals may be exceptionally gifted or creative in the way they address issues relevant to their own positive mental health.

Implicit in temperament and personality trait theories, is a conception of positive mental health as involving a particular type of profile. For example, infants with easy temperaments may be viewed as having better mental health than those with difficult or behaviorally inhibited temperaments. With trait theories, such as the five factor theory of personality, individuals with high levels of emotional stability, extraversion, agreeableness, conscientiousness and openness to experience may be viewed as having better mental health than those with other profiles. Vaillant alludes to this type of approach in his section on mental health as the presence of multiple human strengths. However, I wish to underline the importance of linking research on positive mental health to extensive existing knowledge about temperament and personality traits (4).

A vast literature on self-regulation throws light on factors relevant to the capacity to persist in motivated action while tolerating distress (5). This capacity may be an aspect of positive mental health, and is probably related to adaptive defense mechanisms discussed in Vaillant’s section on resilience. Research on self-regulation and positive mental health should be an important future priority.

Studies of attachment have shown that secure and insecure attachment styles may be identified across the lifespan, with secure attachment styles being associated with better psychological adjustment (6). Individuals with secure attachment styles, as a result of sensitive parenting in early life, develop internal working models of self and others that entail an expectation that others will reliably be available to meet attachment
needs. This trusting disposition is arguably a key component of positive mental health, and an area requiring further investigation.

An integration of current models of positive mental health addressed in Vaillant’s paper into an overarching framework, and research linking such an integrative model to intelligence, temperament, personality traits, self-regulation and attachment will ground out understanding of positive mental health within current knowledge about normal life-span development, and provide a scientific basis for developing intervention programs to promote positive mental health.

References