

NORM AS A CRITERION OF PATHOLOGY IN MENTAL HEALTH CARE SCIENCES – A METHODOLOGICAL PERSPECTIVE

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Summary

This theoretical paper aims at assessing scientific status of the notion of 'norm' in clinical psychology and psychiatry. The author analyses methodological consequences of three models of the norms that function in social sciences: (a) quantitative (statistical), (b) cultural (qualitative), (c) theoretical (ideological), and three models functioning in clinical psychology and psychiatry: (a) normative objectivism, (b) developmental (c) normative subjectivism. The discussion emphasizes the ambiguity of the term 'norm' that weakens its scientific status, indispensable in empirical research, which entails a tendency to underline the reporting and ideological/declarative aspect and excessive attachment to definitional reductionism, referring to biological or cultural aspects of the norm. Another issue addressed concerns methodological difficulties connected with a holistic definition of the norm in the so-called systemic psychology and psychiatry.

INTRODUCTION

Unscientific understanding of the norm underlines its quantitative aspect (such as universality, ordinariness, commonness), postulatory (i.e. unanimous with social expectations in social surroundings), cultural (connected with legal or customary ideal obligations in individual and social conduct within a given cultural group). As these three aspects of understanding normality can be either detachable or additive, they should not be used as independent adjectives without a relativizing (contextual) addition concerning the kind of *norm versus pathology*, accounted for when normality is defined. Attempts at specifying the term's scientific status are particularly important as they

carry methodological and social consequences.

Generally, clinical psychology and psychiatry, and social sciences single out three theoretical models of the norm (a) quantitative (statistical), (b) cultural (qualitative), (c) theoretical (ideological).

PATHOLOGY AS A CONSEQUENCE OF QUANTITATIVE UNDERSTANDING OF THE NORM

Quantitative (statistical) model of the norm is based on the mathematical assumption that every phenomenon occurring in a population has *normal distribution* (Gaussian curve), and normal means statistically average and most frequently described as medium, median, modal. In psychology, an instance of such a model is, among others, deviant intelligence model, assuming as norm the distribution of results in the population within the boundaries of average, limited with falling off ± 1 (sigma), which converted to IQ of means 80 – 120 standard points in intelligence test. All below 80 and above 120 is abnormal. However, this abnormality is of varied qualitative consequence. In the first instance, it denotes a mentally retarded person and permanent impairment of varying depth. The second instance concerns various grades of genius. Thus, as such, quantitative approach is inadequate to describe complex psychological and psychiatric reality. Statistical limitations of perceiving the norm concern, among others, (1) representativeness of the population for which distribution of a given feature is conducted (frequently, even in psychometric tests this condition is not met), (2) great variety of cohorts within the same population (celibacy for the clergy is a norm, and social pathology for laymen), (3) blurring individual boundaries (individual uniqueness), and whole societies (typicality of species, cultural, civilizational), (4) fuzziness of boundaries between 'normal' and 'abnormal' (constant discussion between the theorists in favor of quantitative approach concerning the boundary criterion, whether it is a point on the scale or strip), (5) attempts at relativizing statistical criterion with cultural criterion (i.e. individual variables). Thus, one has to bear in mind that quantitative understanding of the norm is of indicative character (stat-

ing the relation of similarity of an individual with others), and cannot by itself define a given state of things or traits without specifying their essence (for instance definitions of personality, psychic health, social justice, etc.) (1).

Qualitative (social/cultural) model of the norm bases on the assumption that the norm results from the conformity of individual behavior with cultural models of a given society or culture obligatory in a given period of time. The norm thus understood, being axiological socio-cultural derivative, has a wide spectrum; on the one hand, it encompasses normative objectivism with the so-called sacred norms (God, country, nation, independence, homeland, patriotic feelings, faith, salvation, eternal life, etc.), on the other, normative pragmatism with the so-called hedonistic norms (affluent life, sexual love, sensuous pleasure, comfort, consumption, etc.). Between the two there are the so-called spiritual norms; among them moral (goodness, honor, loving your neighbor, truthfulness, diligence, honesty, civility, kindness); veracious (logical thinking, wisdom, objectivity, openness, knowledge, etc.); aesthetic (elegance, taste, harmony, order of things, etc.) (14). On this continuum, psychology and psychiatry also single out the so-called clinical norms (fatigue resistance, physical strength, fitness, stress resistance, ability to endure hunger, etc.), which help describe health, including mental condition (3).

Socio-cultural approach, complementary with qualitative and broad, also reveals certain limitations. They include, among others: (1) axiological relativism, (differences in perceiving social order in various political systems), (2) apriority in determining antisocial behavior (i.e. in sociology the conceptions of sociopathy and psychopathy derive from imbalance of cultural and sub-cultural systems), (3) excessive culture centrism (i.e. in Freudian analysis it becomes a basis for defining neurosis and drawing a dynamic model of personality, encompassing a peculiar conflict between species norms "Id" and moral one "Superego" (4).

Even from the reasons given so far, one must conclude that the socio-cultural criterion that is of purely qualitative character (axiological) and expressing only the conformity of behavior with cultural norms, cannot independently define a given state of things or traits as they suffer from excessive relativism and/or pragmatism (5).

PATHOLOGY AS A CONSEQUENCE OF THEORETICAL UNDERSTANDING OF THE NORM

Theoretical models of the norm rest on the assumption that norms result from conformity between individual and optimal behavior models adapted for the changing environmental conditions, described in a given conception of

particular sciences (i.e. psychology, psychiatry pedagogy, sociology, philosophy, etc.). We are going to limit our discussion mainly to the theoretical models functioning in clinical psychology and psychiatry.

Theoretical models of the norms in clinical psychology and psychiatry encompass three types: (a) normative objectivism; (b) developmental model; (c) normative subjectivism. They will be viewed in that order.

The norm according to normative objectivism. Normative objectivism rests on a universal axiom that man, as a subject implements norms independent of himself, the norms primordial, prior to cognition (i.e. The Ten Commandments as a primordial norm) (6). Theorists of normative objectivism assume that values exist objectively, independent of the subject, permanent and constant. They are transcendent, timeless, absolute, and primordial to cognition. According to these assumptions, man does not create values but discovers them. This approach also indicates the necessity to perceive contextual functioning of values (11), the problem of perceiving the sense of values and not endowing them with sense (12), the notion of interpreting available senses, ideas, pointing to their varied degree of cognition and understanding (6,13), the problem of intentionality (14,15), the issue of involvement and sensitivity in realizing goodness (values, virtues) (16). Personalized approach accepts *sacred norms* as basic in regulating human behavior. Sacred norms constitute the nucleus of objective axiology that is imposed by a transcendent being (God, gods). They are universal by nature (regardless of any culture) and permanent from generation to generation (6,13,17-22). Spiritual norms result from internalizing sacred norms, regulating personality development and improvement. Hedonistic norms are pragmatic (7).

I have already pointed to the usefulness of normative objectivism in my paper (8) discussing the biblical story of Job's suffering and coping. According to the Bible, Job's life passed from objective and subjective wellbeing (high position in family and society) to extremely stressful state of existential character in a short passage of time. In the language of Habfoll's modern resource psychology, Job found himself unexpectedly and totally deprived of personal resources and with no access to social support (9). Job lived through colossal existential crisis concerning the sense of existence in the situation of obvious injustice of God and men. However, indispensable acceptance of his disaster and search for a new sense of life was obtained at the level of settling proper relation with God (the nucleus of faith that is sacred norms). This is confirmed in contemporary psychological – oncologic research to the effect that in terminal traumatic states references to sacred values at

the cost of hedonistic ones prove effective in the process of auto-therapy or logotherapy (10).

The above approach has noted an important achievement. It is Frankl's research on logotherapy and logotherapy duly merited for including the spiritual stratum as one in three main human strata into psychological concepts (6,23).

Developmental model of the norm. A developmental model of the norm accounts for the so-called developmental optimum (24), self-realization optimum (25), and also evaluative standard (26). In various cycles of human development (childhood, adolescence, adulthood, old age), this model encompasses several human spheres; such as biological, physical, social and economic, and moral revealed in specific behavior. In developmental psychology, behavioral patterns in the given life cycle constitute the main idea regulating development of self-identity. Such patterns are superior and most essential regulators of human conduct (self-improvement) and behavior toward other men (education). It has been noted that developmental norms are internalized in consequence of intellectual understanding and acceptance. Simultaneously, these norms become norms of conduct as internalized standards of behavior in the process of development and rearing. Piaget played a key role in developing the model of developmental norm (24), concentrating cognitive and moral development not only quantitative but also qualitative. This model assumed that human personality develops toward maturity. It presupposes that morality relies on the respect man gains while accepting norms and rules of moral conduct given from the exterior that individuals must accept. Piaget differentiates between subjective and objective understanding of moral norm, which diminishes with age as coming from hedonistic morality (objective), resulting more from coercion exercised by adults. In this sense, Piaget's moral autonomy comes closer to the concept of Kantian categorical imperative (27).

Human development can be progressive or regressive in various life cycles because it encompasses both biosphere and culture (28-31). Development reflects cyclically changing health standard reflecting the impact of biological, psychological, cultural, and ecological factors. Such health standard is also a developmental norm in the given life cycle, concerning all somatic and mental disorders. However, in spite of all cyclic developmental changes, self-identity is preserved, which may result from either normative objectivism or normative subjectivism.

Norm and pathology according to normative subjectivism. Normative subjectivism stresses the fact that man creates both quantitative and qualitative dimension of norms. Though in man's mental structure, norm links up with his axiological system, still axiology as such in

empirical sciences comes from a positivistic and not idealistic trend (32,33). In this manner, the principle of normative objectivism of values is questioned and stress put on individualism and subjective significance. In psychology, psychiatry, and sociology, it leads to axiological subjectivism limited to merely empirical research on evaluative processes (34). The norm is what man makes of it, which fact is methodologically significant because it allows employing norm statistically (i.e. psychometric tests, quantitative experimental indexes). The beginnings of normative subjectivism in psychology go back to radical behaviorism (as Skinner's), who, maintaining that man is not a 'moral animal' automatically eliminated values (ideals), endowing rewards and punishments with regulatory power (the so-called primary and secondary reinforcement) (35).

In practice, cognitive psychology of non-behavioral provenance examines the influence of social stimuli on man without referring to the notion of value (12, 36). In spite of several controversies (11,37), psychology is often considered a discipline investigating reality like physics; whereas investigating axiological norms concentrates on momentarily pragmatic human values, which in reality concerns examining the processes of evaluating and internalizing norms (38), emotions and motivations (39,40), attitudes (41), formal aspects of moral and pro-social behavior, evaluative standards (42,43), and preferred goals in life (44), etc. As applied disciplines, clinical psychology and psychiatry do not negate the significant role of values, which like norms, play largely regulative function, satisfying needs, especially higher ones (45). The case in point is an attempt to systematize health norm proposed by World Health Organization based on full harmony of culture and biosphere, called *socio-ecological mandala of health norm* (28).

The usefulness of such systemic description of mental health, replaced in modern psychology with such notions as "quality of life" (47,48) or "wellbeing" (49), is limited methodologically, and denotes some ideal value of health in optimal conditions. In individual life, health is taken rather as a state and a process of dynamic balance between one's immune resources and the resources external to man. Aaron Antonovsky's (50) salutogenic conception of health serves as an example, where sense of coherence plays a key role as the awareness of oneself, environment, and relations between them.

Besides the holistic definition of mental health, modern research most frequently examines itemized approaches, dealing separately with biosphere (biologism) in general biological categories (51), cultural sphere (psychologism), referring to cultural determinants of full development of personality (the so called mature personality) (52-54).

CONCLUSION

Summing up theoretical models of norm in psychology and psychiatry and their applicability in social practice, their descriptive and explanatory usefulness must be stressed. One must also remember their methodological limitations that may be itemized as: (1) diversity of normative psychological conceptions, which do not readily yield to empirical verification (55); (2) postulatory and ideological character of holistic conceptions (systematic) that are unverifiable (absence of interdisciplinary methods) (56); (3) entanglement of many psychological conceptions of health with philosophical (evaluative), sociological (social, cultural, civilizational) and biological (genetic, racial) (57); (4) the unresolved developmental dilemma connected with estimating natural conditions against cultural ones, which leads to extreme culture-centrism in defining mental health (58); (5) arbitrariness in creating the so called mental health criteria symptoms (i.e. ability of development and self-regulation, sense of integration and autonomy, rational perception of reality, ability to cope with stress, etc.) (59-61); (6) paradigmatic approach in theoretical models of health norm (i.e. Platonic paradigm of individual differences, personalistic paradigm, ecological paradigm, etc.); (7) attachment of one's own views (as schools and trends in psychology, such as structuralism, functionalism, behaviorism, psychoanalysis, cognitive psychology) (62); (8) too small verifiability of mental health theories, entangled with the cultural and the evaluative (63,64). Thus in diagnosis and therapy, the usefulness of normative psychological and psychiatric theories should be treated with restricted confidence and contextualized (65) as full responsibility has to be accepted for accurate diagnosis and therapy and full professional and ethical responsibility (66).

References

- Sowa, J. Kulturowe założenia pojęcia normalności w psychiatrii. PWN: Warszawa, 1984.
- Brzeziński J, Hornowska E. (eds). Z psychometrycznych problemów diagnostyki psychologicznej. Poznań, 1993.
- Brzozowski P. Skala Wartości Schelerowskich – SWS. Podręcznik. PTP: Warszawa, 1995.
- Lynn DJ, Freud Sigmund. In: Fink G. (ed.) Encyclopedia of stress. Second Edition. Academic Press: New York 2007; 2:90-95.
- Brzeziński J, Siuta J. (eds.). Społeczny kontekst badań psychologicznych i pedagogicznych, Wyd. Naukowe UAM: Poznań 1991. Jaworski R. Harmonia i konflikty: Empiryczna weryfikacja podstawowego paradygmatu psychologii pastoralnej. Wyd. UKSW: Warszawa, 2004.
- Frankl VE. Nieświadomiony Bóg. Warszawa 1978; IW PAX; Popielski K. Człowiek – wartości – sens, Wyd. KUL: Lublin, 1978.
- Teilhard de Chardin P. Człowiek: Struktura i kierunki ewolucji grupy zoologicznej ludzkiej. IW PAX: Warszawa, 1967.
- Terelak JF. Pismo święte jako źródło mądrości przednaukowej w zakresie radzenia sobie ze stresem traumatycznym na przykładzie „Księgi Hioba”: Studium przypadku. In: J. Krokos, M. Ryś (eds.), Czy rozum jest w konflikcie z wiarą: W X rocznicę ogłoszenia encykliki „Fides et ratio”. Wyd. Inst. Papieża Jana Pawła II: Warszawa, 2009; 283-304.
- Hobfoll SE. Stres, kultura i społeczność: Psychologia i filozofia stresu, GWP: Gdańsk, 2006.
- Terelak JF, Nikiel T. Związek pomiędzy systemem wartości a doświadczaniem choroby onkologicznej u kobiet z rakiem piersi. In: L. Suchocka, R. Sztembis (eds.). Człowiek i dzieło: Księga jubileuszowa dedykowana Księdzu Profesorowi Kazimierzowi Popielskiemu z okazji 75rocznicy urodzin, 50. rocznicy kapłaństwa oraz 45-lecia pracy naukowo-dydaktycznej. Wyd. KUL: Lublin, 2010; 173-187.
- Galdowa A. Powszechność i wyjątek. Księgarnia Akademicka: Kraków, 1995.
- Opoczyńska M. Człowiek wobec wartości. In: A. Galdowa, (ed.), Wybrane zagadnienia z psychologii osobowości. Wyd. UJ: Kraków, 1999; 151-168.
- Tischner J. Myślenie według wartości. Znak: Kraków, 1994.
- Scheler, M. (2004). Fragmenty o odpowiedzialności. In: J. Filek (ed.). Filozofia odpowiedzialności XX wieku. Wyd. UJ: Kraków, 2004; 25-32.
- Obuchowski K. Regulacyjna rola standardów ewaluacji. In: P. Buczkowski, R. Cichoński (eds), Podmiotowość: Możliwość – rzeczywistość – konieczność. Nakom: Poznań, 1989.
- Popielski, K. Noetyczny wymiar osobowości: Psychologiczna analiza poczucia sensu życia. Wyd. KUL: Lublin, 1994.
- From, E. Niech się stanie człowiek: Z psychologii etyki. PWN: Warszawa, 2005.
- Dąbrowski, K. Zdrowie psychiczne ludzi przeciętnych, wybitnych, u kształtowanej osobowości oraz problem psychopatii. In: K. Dąbrowski (ed.). Zdrowie psychiczne. PWN: Warszawa, 1985.
- Popielski K. Człowiek: egzystencja podmiotowo-osobowa. In: K. Popielski (ed.) Człowiek – wartości – sens. Wyd. KUL : Lublin, 1996.
- Oleś P. Z zagadnień psychologii wartości. Roczniki Filozoficzne KUL, 1984; 32(4): 67-95.
- Sartre J.P. Egzystencjalizm jest humanizmem. Wyd. Muza: Warszawa, 1998.
- Lévinas E. Difficile liberté. Paris, 1983.
- Popielski K. Noo-logoterapia. Elementy wprowadzenia. Lublin-Kielce, 2004.
- Piaget J. Mowa i myślenie u dziecka. PWN: Warszawa, 1992.
- May R. O istocie człowieka: Szkice z psychologii egzystencjalnej. Rebis: Poznań, 1995.
- Rogers C. On becoming a person. Houghton Mifflin Comp: Boston, 1961.
- Kant I. Uzasadnienie metafizyki moralności. PWN: Warszawa, 1953.
- Sęk H. Wprowadzenie do psychologii klinicznej. Wyd.3. Wyd. Naukowe SCHOLAR: Warszawa, 2005.
- Obuchowska I. Drogi dorastania. Wyd. Szkolne i Pedagogiczne: Warszawa, 2000.
- Oleś P. Psychologia przełomu połowy życia. Wyd. KUL: Lublin, 2000.
- Obuchowska I. Drogi dorastania. Wyd. Szkolne i Pedagogiczne: Warszawa, 2000.
- Bocheński J. Zarys historii filozofii. Philed: Kraków, 1993.
- Sareło Z. Moralność i etyka w ponowoczesności, Wyd. ATK: Warszawa, 1996.
- Reykowski J. Źródła procesów ewaluacyjnych i ich funkcje regulacyjne. In: B. Wojciszke (ed.). Studia nad procesami wartościowania. PAN: Warszawa, 1988; 36-53.
- Skinner B. Zachowanie się organizmów. PWN: Warszawa, 1995.
- Matusewicz Cz. Psychologia wartości. PWN: Warszawa, 1975.
- Gasiul H. Formalne cechy systemu wartości jako wskaźniki

rozwoju osobowości. UMK: Toruń, 1987.

38. Gołąb A. Teoretyczny model mechanizmu internalizacji norm. Coursebook UW: Warszawa, 1977.

39. Eccles J. S., Wigfield, A. Motivational beliefs, values, and goals, Annual Review of Psychology, 2002; 53 (1):109-133.

40. Eisenberg N. Emotion, regulation, and moral development, Annual Review of Psychology, 2000; 51(1):665-698.

41. Wojciszke B. (ed.) Studia nad procesami wartościowania, t. I. Wydawnictwo Ossolińskich PAN: Wrocław, 1988.

42. Czapiński J. O naturze i funkcji procesów wartościowania. In: B. Wojciszke (ed.). Studia nad procesami wartościowania, t. I. Wydawnictwo Ossolińskich PAN: Wrocław, 1988; 13-35.

43. Obuchowski K. Regulacyjna rola standardów ewaluacji. In: P. Buczkowski, R. Cichocki (eds.). Podmiotowość: Możliwość – rzeczywistość – konieczność. Nakom: Poznań, 1989.

44. Koziński J. O człowieku wielowymiarowym: Eseje psychologiczne. PWN: Warszawa, 1988.

45. Mądrzycki T. Osobowość jako system tworzący i realizujący plany. GWP: Gdańsk, 1996.

46. Styczeń T. Usensownić swe działanie to dla człowieka „być”. In: K. Popielski (ed.), Człowiek – pytanie otwarte. Studia z logoterapii i logoterapii Lublin 1987: Wyd. KUL: Lublin, 1987; 177-180.

47. Kowalik S. Jakość życia psychicznego. In: R. Derbis (ed.). Jakość rozwoju – jakość życia. Wyd. WSP: Częstochowa, 2000.

48. Bańka, A. (ed.) Psychologia jakości życia. Wydawnictwo Stowarzyszenie Psychologia i Architektura: Poznań, 2005.

49. Czapiński, J. Psychologia pozytywna. Nauka o szczęściu, zdrowiu, sile i cnocie

Człowieka. PWN: Warszawa, 2004.

50. Antonovsky A. Poczucie koherencji jako determinanta zdrowia. In: I. Hesze-Niejedok, H. Sęk (eds.). Psychologia zdrowia. PWN: Warszawa, 1997.

51. Wołowicka L. (ed.). Jakość życia w naukach medycznych.: Wyd. Uczelniane AM: Poznań, 2001.

52. Cekiera, Cz. Rozwój ku dojrzałej osobowości. Zdrowie Psychiczne, 1992; XXXIII, (1-): 116-126.

53. Deci, E.L., Ryan, R.M. Hedonia, eudajmonia, and well-being: An introduction. Journal of Happiness Studies, 2008; 9: 1-11.

54. Heszen, I. Duchowość i jej rola w radzeniu sobie ze stresem. In: L. Suchocka, R. Sztembis (eds.). Człowiek i dzieło: Księga jubileuszowa dedykowana Księdzu Profesorowi Kazimierzowi Popielskiemu z okazji 75. rocznicy urodzin, 50. rocznicy kapłaństwa oraz 45-lecia pracy naukowo-dydaktycznej. Wyd. KUL: Lublin, 2010; 215-223.

55. Rokeach H. The nature of human values. New York: The Free Press, 1973; 5.

56. Brzeziński J., Siuta J. (eds.) Społeczny kontekst badań psychologicznych i pedagogicznych, Wyd. Naukowe UAM: Poznań, 2004.

57. Kahneman, D. Experienced utility and objective happiness: A moment-based approach. In: D. Kahneman, A. Tversky (eds.), Choices, values and frames.: Cambridge University Press and the Russel Sage Foundation: New York, 2000; 673-692.

58. Hofstede G. Kultury i organizacje: Zaprogramowanie umysłu. PWE: Warszawa, 2000.

59. Snyder, C.R., Lopez, S.J. (eds.). Handbook of positive psychology. Oxford: Oxford University Press, 2002.

60. Terelak, J.F. Człowiek i stres. Oficyna Wydawnicza BRANTA: Bydgoszcz, 2008.

61. Ryan, R.M., Huta, V., Deci, E.L. Living well: A self-determination theory perspective on eudajmonia. Journal of Happiness Studies, 2008; 9: 139-170.

62. Lykken, D., Tellegen, A. Happiness is a stochastic phenomenon. Psychological Science, 1996; 7: 186-189.

63. Straś-Romanowska, M. Jakość życia w świetle założeń psychologii zorientowanej na osobę. Kolokwia Psychologiczne, 2005; 13: 262-274.

64. Terelak J.F., Nikiel T. Związek pomiędzy systemem wartości a doświadczeniem choroby onkologicznej u kobiet z rakiem piersi. In: L. Suchocka, R. Sztembis (eds.). Człowiek i dzieło: Księga jubileuszowa dedykowana Księdzu Profesorowi Kazimierzowi Popielskiemu z okazji 75. rocznicy urodzin, 50. rocznicy kapłaństwa oraz 45-lecia pracy naukowo-dydaktycznej. Wyd. KUL: Lublin, 2010; 173-187.

65. Tucholska, K., Gulla, B. Psychologia pozytywna: Krytyczna analiza koncepcji. In: P. Francuz, W. Otrębski (eds.) Studia z psychologii w KUL, 2007; 14: 109-133.

66. Stepulak M.Z. (ed.). Dylematy etyczno-zawodowe psychologa. Wyd. KUL: Lublin, 2002.

*NORMA KAIP PATOLOGIJOS KRITERIJUS
PSICHIKOS SVEIKATOS PRIEŽIŪROS MOKSLĖ
(METODOLOGINĖ PERSPEKTYVA)*

Jan F. Terelak

Raktažodžiai: norma, patologija, klinikinė psichologija, psichiatrija, kiekybinis normos modelis, teorinis normos modelis, normatyvinis objektyvizmas, normatyvinis subjektyvizmas, normos evoliuciniai aspektai, psichinė sveikata

Santrauka

Darbo tikslas - mokliškai įvertinti savoką "norma" klinikinėje psichologijoje ir psichiatrijoje. Autorius nagrinėja metodologines pasekmes trijų normos modelių, kurie funkcionuoja socialiniuose moksluose: a) kiekybinį (statistinį), b) kultūrinį (kokybinį), c) teorinį (ideologinį) ir tris modelius, funkcionuojančius klinikinėje psichologijoje ir psichiatrijoje (normatyvinį objektyvizmą, evoliucinį, normatyvinį subjektyvizmą). Diskusija pabrėžia termino "norma" įvairiareikšmiškumą, kuris silpnina jo mokslinį statusą, būtiną empiriniams tyrimams, dėl to linkstama pabrėžti formalųjį, ideologinį-deklaratyvų aspektą ir pernebęg laikytis redukcionistinių apibrėžimų, remiantis biologiniais ir kultūriniais normos aspektais. Išdėstomi metodologiniai sunkumai, susiję su normos holistine definicija vadinamojoje sisteminėje psichologijoje ir psichiatrijoje.

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