FESTUS ASIKHIA

HEALTH PSYCHOLOGY: ORIGINS, BRANCHES, AND APPLICATIONS

Table of Contents

Introduction	2
Justification	4
General analysis	4
The concept of health psychology	4
Origins of health psychology	7
The goals of health psychology in society	9
Branches of Health Psychology	12
Clinical health psychology (CiHP)	12
Community health psychology (CoHP)	13
Public health psychology (PHP)	13
Critical health psychology (CrHP)	14
Discussion	14
Cognitive-behavioral therapy	14
Psychodynamic psychotherapy	16
Rational Emotive Behavior Therapy	17
Treating trauma and PTSD	
Neurophysiology and the stress response	19
Methods	21
Results	21
Actualization	21
Conclusion	22
References	22

Introduction

Sound health is an aspect of man's life that can never be ignored. The English say that health is wealth, and no statement is more accurate. Terrible health conditions adversely affect the general performance of individuals, making them unable to get the best out of life. Terminal diseases like

cancers often drain the energy from patients who suffer from them and can be very expensive to treat.

Although numerous causative factors of diseases, illnesses, and health challenges are biological, a closer look at things reveals many other elements with no roots in biology that equally impact physical health negatively or positively. Studies have shown that prolonged mental pressure can have adverse effects on physical health, supporting the notion that a healthy mind means a healthy body. For instance, some mental challenges trigger loss of appetite or inability to eat, leading to extreme weight loss and weakness. Also, research and observation have discovered that certain habits, behaviors that individuals engage in have the ability, over time, to impact their physical health. For instance, people who overeat junk are prone to putting on a lot of weight, which could lead to obesity and the conditions obesity attracts. (Dekker et al., 2001).

There is a state of mind that sponsors good health, coupled with behavioral patterns that impact positively on physical health. Health psychology views health conditions from the psychological and behavioral perspective and provides treatment and therapy sessions to patients, tackling their physical health challenges from the root causes. (Achor, 2010).

This research covers the concept, origins, and history, approaches, and applications of health psychology. The data collected were sourced from existing literature, journals, observation of health psychologists at local levels, and short conversations with professional health psychologists.

Justification

In many regions of the world, little attention is being paid to the mental health of individuals, and even less attention is paid to the improvement of the healthcare sector in that regard. The rising rate of mental illness susceptibility and the resultant effects in society, coupled with the behavioral tendencies that have sprung up due to high poverty rates and social decadence, has made it necessary to treat certain health conditions from the psychological point of view and for the enlightenment and education of the public on the dangers of harmful behavioral practices on their physical well-being.

This work will inform the position of health psychologists, encourage the use of its services by the commoner, and help individuals pay more attention to their total wellbeing.

General analysis

The concept of health psychology

Health psychology is sometimes referred to as behavioral medicine, alternative medicine, or medical psychology. Health psychology concerns itself with the behavioral, psychological, and social factors that affect physical health over the short term or long term.

There is a lot of emphasis on the biological causes of diseases in the world today. Countless commercials abound on germs, mosquito bites that lead to malaria, and there is more enlightenment on hygiene and prevention of diseases, with a lot of mentions of viruses, bacteria, and the like. Health psychology, however, has nothing to do with organisms and microorganisms

that cause sickness but rather the state of mind and behavioral habits that negatively impact physical health. (Brownell, 1999).

Health psychology is the field of psychology that encompasses encouragement of healthy living, prevention, and treatment of diseases and studies the contributions of psychological, behavioral, and social factors to physical health. It is more or less a combination of medical counseling, psychological treatment procedures, and public healthcare improvement. (Conner & Norman, 2001).

The mental condition of individuals highly impacts their physical health conditions. Persons going through mental stresses, trauma, and psychological challenges which are prolonged are usually susceptible to health challenges, as mental pressure is exerted on the hormones of the body, which could react to cause varying physical conditions. Certain mental disorders, for instance, trigger excessive weight gain, which can be harmful over time, as excess body fat has proven to be. Anxiety disorders are also known to likely result in shock depending on the degree of the panic attack, or over a lengthy time, result in hypertensive symptoms. Other mental disorders have been observed to lead to weight loss, eating disorders, fatigue, and other physical problems.

Behavioral factors also affect physical health, negatively or positively. Certain habitual tendencies of individuals have the propensity, in the long run, to affect their overall health condition.

Harmful habits will lead to negative impacts, while good habits will generally improve health. For instance, lung cancer is most common among people who have a history of chronic smoking habits. In some parts of Africa, men smoke as many as 30 cigarettes in a day. (Mark, 2003). Such lousy behavior ultimately results in complications in health, mainly in middle or old age. Excessive sugar or alcohol intake can also result in health complications, like liver failure, kidney failure, diabetes,

obesity, et cetera. Not all behavior is negative, and the positive habits like sleeping well, having good exercise sessions, and good eating habits often translate to better health conditions overall. Health psychology is concerned with encouraging better behavioral patterns among the population, using the likely results of harmful habits as pointers.

Social factors also have a hand in determining the quality of physical health in individuals. An environment besieged by poverty and challenging living conditions will ultimately breed physical health challenges. In some parts of the world, primarily overpopulated slums, the quality of life is somewhat low. So, the rate of disease transmission is high; there is an increased susceptibility of exposure to harmful behavioral habits, like excessive smoking and drinking and unprotected sex. All of these factors combine to impact the quality of physical health significantly in such societies. For instance, Internally Displaced Persons in Nigeria, through the activities of the Boko Haram terrorist group, are ideally placed on suffering varying degrees of health conditions, and outbreaks of diseases are more likely to occur in their refugee camps. (Taylor, 1999).

Better placed individuals with higher socio-economic privileges have more access to health facilities, quickly get health advice, and pay more attention to the essential cleanliness of their surroundings. This places them in a better position to have excellent physical health conditions than those at the bottom of the socio-economic ladder.

Health psychology seeks to understand these phenomena, enlighten the public on them, treat diseases with the help of psychology, and improve healthy living conditions by working up close with patients or helping to develop and implement healthcare policies. Health psychologists also train other healthcare professionals, such as regular physicians and nurses, on the psychological

approach to the treatment of diseases and also engage in new research in educational institutions. (Bowling, 2005).

The general view held by health psychologists is that health is a product of the combination of biological, psychological, behavioral, and social factors, with every one of these factors being able to influence the physical health status of individuals directly.

Origins of health psychology

The connection between psychology and health has been mentioned by scientists since, at least, the early 20th century years. However, there was no concrete work on the subject until the middle of the century. Studies like the Alameda County Study became more rampant, focused on investigating the physical health conditions of a group of people who engaged in certain positive behavioral habits. People who were predisposed to good behavior like taking regular sleep bouts, physical recreation, good eating habits, no smoking or drinking were observed to live healthier and longer lives than those who did the opposites. Also, specific findings were made by scientists during this time, such as the discovery of the links between the functioning of the immune system and the brain and how the processes could be transformed through learning, and the impact of certain psychosocial activities like exercise on the heart and the immune system (Bennett, 2000). Some sectors in medicine had also begun to discuss and establish factual links between psychological factors and health.

The most significant event that paved the way for the field of health psychology to be accepted as a practice, and established in the United States of America, was the submission of an article, in 1969, to the American Psychological Association by William Schofield, which was titled: The Role of Psychology in the Delivery of Health Services. The report highlighted the common trends in that era, including the different treatments given to physical and mental health by research, the inability of researchers to link physical health to mental health, and the general oversight of the effects of psychological factors on physical health. Schofield, being one of the few who had done considerable work in this field, then outlined new forms of training for psychologists in the future.

The American Psychological Association set up a committee tasked to deliberate on and develop ways in which psychologists could help educate other medical practitioners in forming good physician-patient relationships, manage and treat physical health challenges, and help people pay more attention to behaviors that could impact their health. (Stroebe, 2000).

In 1977, the American Psychological Association fully recognized health psychology as a division within the body. The president of the APA then, Joseph Matarazzo, in his own words, gave a sound definition of health psychology that has been the basis upon which the field was developed. He defined it as "the entirety of the distinct academic, scientific and professional inputs of psychology to the improvement and maintenance of health, the deterrence and handling of illness, the designation of diagnostic and etiologic correlates of health, illness, and related dysfunction, and the inspection and development of the healthcare system and health policy formation." (Matarazzo, 1977). This move accelerated surges of acceptance of health psychology in many countries, like in Japan. Rapidly, health psychology was being offered in institutions of higher learning as a doctorate-awarding and postgraduate program.

Britain caught up with the trend much later in the 1980s. Scientists Marie Johnston and John Weinman wrote to the British Psychological Society, asking them to confer the departmental status on health psychology since it differed significantly from and was broader in scope than medical psychology, which was already in practice then. The department was set up in 1986, and Marie Johnston was its first chair. The department went on to become a division in 1997.

Since then, countless publications, journals, and textbooks have been written on health psychology and its many branches. The rise of health psychology was also boosted by certain unrelated events, which have led to an increase in enlightenment, education, and funding in many First World countries. The discovery of HIV/AIDS led to increased behavioral research, therapies, and additional funding for the health psychology department. Also, more and more findings and analyses have been made and conducted, establishing the links between mental health and physical health, strengthening the cause of health psychology. (Penny et al., 1994).

The goals of health psychology in society

The different approaches and specializations within the field of health psychology will be better understood and more clearly spelled out when the objectives of health psychology are known. Like every innovative field in science, health psychology aims to solve specific problems today, and these objectives are the specializations of the different branches of health psychology. Health psychology seeks to:

• **Prevent illness:** Health psychologists prevent sickness and diseases by influencing character changes In individuals or groups. They attempt to help people live healthy lives through intervention strategies to correct certain behavioral tendencies and break habits like substance addictions and hypersexuality. For instance, programs organized by health psychologists target alcohol consumption and smoking. Most who are given to smoking and drinking are economically unable to afford the cost of those habits. They are consumed by these bad habits and ultimately experience organ failures, weak immune systems, and quickened deterioration of their vitals. (McLeroy et al., 2003). Professionals think that the most productive ways to ensure illness precluding are through adequate enlightenment and

teaching on the dangers of some harmful behavioral patterns and the diseases they cause. Ignorance remains a big problem in our world today. Sadly, due to the ever-mounting pressures of living, most individuals can hardly apply whatever understanding they have gained from health psychology in their daily lives. Also, crusades are organized to encourage disease prevention by discouraging risky habits like unprotected sex and smoking of harmful substances. Unprotected sex and disregard for hygiene have resulted in spreading diseases like HIV/AIDS and the Coronavirus disease. Health psychologists hope to reduce the prevalence of these habits among the population in a country, and thus, prevent illnesses.

• Investigating the effects of diseases: When individuals are diagnosed with a disease, mostly in cases of terminal illnesses, there is a high probability of increased susceptibility to mental disorders as well. One who has been diagnosed with terminal cancer, for instance, begins to lose all sense of joy in living and could enter into depressive phases. The patient's family could also suffer tremendously, psychologically, as the pain of the thought of losing a loved one acts as a stressor on their mental health and the general psychological conditions in the group. Health psychology strives to understand all the possible influences of disease on the patients and their immediate environment, family, friends, et cetera. It then attempts to improve the present living conditions of people suffering from terminal illnesses, help them deal with the situation psychologically, adjust, and spend their remaining days in happiness. (Marks, 2012). Health psychologists also help people deal with the deaths of their loved ones, administering therapeutic sessions to help them adjust to reality and not slip into depression and posttraumatic stress disorder.

- Formation and amendments of health policies: The field of psychology that liaises with the ministry of health in developed countries to formulate beneficial health policies which, when implemented, would result in the improvement of physical and mental healthcare services and delivery in a country is health psychology. Specialists in this field are also required to analyze existing health policies and their effects on the population, giving guided professional advice on the failings of such policies and offering suggestions on policy amendment. (King, 2017). A country whose healthcare system is problematic is either devoid of quality health psychologists in the Ministry of Health or pays little attention to implementing policies on health.
- **Training**: Health psychology aims to improve doctor-patient relationships and equip medical practitioners with better skills in treating diseases and the care of patients. While it is known that the state of mind can impact the health of individuals, not many know that it can also determine the potency of the treatments being administered. Health psychologists drill other medical practitioners on improving their relationships with patients and utilizing the psychological process in treating cases.
- **Research**: A lot is known today about the interrelationships between physical fitness and mental health and how the former is affected by natural, behavioral, and contextual circumstances like environment, culture, and social status, known as the biosociophysical model. This information was not available to the public some years ago. A primary goal of health psychology is to conduct extensive research into the subject of health, and indeed, in First World Countries, generous funds are committed to researching emerging diseases and how this biosociophysical model applies in the cases of individual conditions. Some

health psychology specialists are purely devoted to research, working in Universities and Research Centers.

• Improving general compliance to medical advice: One major limitation of most healthgeared efforts is the inability of the general public to comply with medical advice and instruction. In Nigeria, for instance, during the outbreak of the COVID-19 virus, citizens were always advised to wear face masks, practice regular handwashing and maintain social distancing. Numerous awareness programs were set up to emphasize these instructions. Yet, it was not an uncommon sight to see people publicly flouting these directives and exposing themselves to even more significant harm. Medical advice can only help when compliance is total, and on this basis, health psychology aims to sensitize and enlighten the public about the importance of obeying medical instructions. In healthcare facilities, consultants, doctors, and nurses track patients' compliance to advice and education, using various psychological methods like counseling to ensure patients actively contribute to their treatment process. (McNutty & Fincham, 2012).

Health psychology also aims to find treatment procedures that help manage pain, like acupuncture and cognitive behavioral therapy. Also, it helps to establish the biosociophysical model as it applies to physical health.

Branches of Health Psychology.

Clinical health psychology (CiHP)

The information provided by research in health psychology is applied to solve clinical issues that are likely to originate in healthcare, known as Clinical Health Psychology. CiHP has a significant influence on fields that involve both the prevention and treatment of diseases. Behavioral health is focused on illness deterrence, while alternative medicine is concerned with therapy. CiHP involves three significant aspects: behavioral change procedures, education, and psychotherapy, which covers treatment. (Marmott et al.,1991).

Community health psychology (CoHP)

As the name implies, community health psychology is the facet of health psychology that analyzes and fights illnesses at the community tier. CoHP is responsible for conducting investigative research into the factors that affect the fitness of individuals in a community, treating the group as a whole. CoHP is also actively involved in setting up programs to checkmate the spread of and treat diseases within a community. (Mark et al., 2003). For instance, during the early stages of the COVID-19 pandemic, community-based response efforts were the first line of defense against the outbreak until they were overwhelmed. (Ogden, 2010). This branch of health psychology actively involves the community in question, as an active collaboration of all stakeholders is encouraged.

Public health psychology (PHP)

The well-being of citizens within a geographical area is of significant concern in public health psychology. PHP concentrates on investigating and establishing connections between physical, social characteristics in a population and the health of people in question. PHP utilizes the biosociophysocal model to pinpoint the links between these factors and health. Findings are then presented to experts and policymakers, who use the conclusions drawn in promoting adequate healthcare services to the population sample. (Rapkin & Schwartz, 2004). Risk communities are often the beneficiaries of such intervention schemes; population samples of people likely being neglected or denied good healthcare services for those who cannot afford them. PHP is also responsible for setting up health insurance policies for the less privileged. (Ott, 2005).

Critical health psychology (CrHP)

This field of health psychology is most affiliated with politics and the allotment of power and how these political changes impact the health care structure, health policies, and the general wellbeing of members of the population. Critical health psychologists are more disposed to tackling the inequalities in the health sector. The widespread belief within the field is the universality of human rights to health, and it must be provided to all, regardless of socioeconomic status, racial differences, gender, ethnicity, or any other discriminative factor. (Mark, 2009). Critical health seeks to effect change through the practice, so the International Society of Critical Health Psychology is an essential force in this regard. (Paxton, 2002).

The field of health psychology is focused on both investigation and application of analysis's findings in its operations. There is a wide range of studies, and most health psychologists concentrate on broad topics like cardiac psychology, neurophysiology, alcohol consumption, smoking, social support, and so on. Research methods like quasi-experiments, qualitative research, controlled randomized trials, amongst other ways, are employed in sourcing information and obtaining findings.

Discussion

Health psychology deals with both behavioral problems and the treatment of mental disorders, also called behavioral medicine. Different forms of therapy are recommended and used in health psychology to treat mental challenges that ultimately affect physical health conditions.

Cognitive-behavioral therapy

This form of therapy is highly efficient in fixing and handling mental problems or instabilities and emotional conditions. This therapy, in reality, is more expansive than a sole form of psychological treatment as it encompasses different techniques that are all focused on feelings, emotions, thoughts, and thinking patterns. This short-term psychotherapy treatment is concerned with approaches that are both intensive and practical in solving issues that have roots in emotional and behavioral concerns. Depression is the primary reason for creating this technique. Still, it has proven helpful in solving various mental conditions such as anxiety, addictions, post-traumatic stress disorder(PTSD), psychotic disorders, and conduct disorders such as intense aggression in young adults. (Penny et al.,1994).

Founded upon the basis of a cognitive model of emotional responses, it involves helping patients learn to change their unhealthy thinking patterns, beliefs, ideologies, beliefs, and emotions to improve their attitudinal appearances and emotional regulation. This approach holds that mental illnesses and conditions result from our faulty cognitions about others, our world, and us. Therefore, learning to identify and correct these distortions contributes significantly to eliminating mental imbalances and issues.

CBT begins with identifying negative perceptions in a person's mind which have contributed to the irregular dispositions. This essential cognitive input eventually leads to the discovery, realization, and knowledge of oneself, which opens up the individual to the medium of formulating newer thought and thinking patterns. Possessing this proportional reasoning raises a cause for their application to real-life situations where patients begin to interact with strategies aimed at improving behavioral patterns intentionally. Goal setting is paramount as it aids both parties to focus entirely on the achievement of set goals, thereby increases the chances of success. Essentially, the problem-solving process of CBT, gradual monitoring, and steady tracking of patients' progress over time lead to the elimination of mental issues. (Shah, 2016).

Psychodynamic psychotherapy

The psychological evaluation of both mental and emotional processes, which is rooted in traditional psychoanalysis, is what is considered psychodynamic psychotherapy. This approach is regarded as a simpler alternative to psychoanalysis. Depression, fear, and anxiety are usually tackled and cured with this method which emphasizes the psychological roots and foundations of emotional suffering and pain.

It provides an avenue for the background and connection between the therapist and patient to provide insight into the complicated structures of the person's life.

The elimination of the visible effects usually isn't the objective of this method but rather to aid individuals to live healthier and better lives as it dwells majorly on the explanation and examination of the inner workings of the mind and feelings rather than behavior, thus placing it in contrast with the CBT. (Seligman et al, 2006)

With this method, therapists intend to help patients discover some peculiar styles and structures in the emotional and thought compositions to enable them to gain valuable knowledge in understanding their present personalities. The human mind theory and its development postulated by Sigmund Freud contributed significantly to the foundation of techniques carried out within this approach. Knowing this, therapists help patients by focusing more on their feelings and emotions to recreate better versions of themselves, putting them on a better life path. When an individual understands the emotional workings of his mind, he develops a better thinking and reasoning pattern making the individual healthier. Psychodynamic psychotherapy is carried out using specific strategies and techniques, including a psychodynamic diagnostic manual, Rorschach inkblot, Freudian slip, free association, and dream analysis. (Rashid, n.d)

Rational Emotive Behavior Therapy

This behavioral approach places concern on resolving emotional problems and behavioral disturbances with the sole aim of assisting individuals live worthwhile and fulfilling lives. The technique holds the theory that the incorrect and erroneous beliefs and ideologies embedded in individuals regarding life situations are responsible for the disturbances they experience and are subject to change. According to Albert Ellis, people are acutely affected not by external events but by the decision to dwell and meditate on such occasions, which would then be expressed in the behavioral pattern of individuals. (Mark, 2009)

It is often regarded as the first mode of CBT, and its creation and development are accorded to Albert Ellis, an American psychotherapist greatly inspired by the writings of significant philosophers, ancient and modern. This technique is considered an efficient means of tackling anger issues, addictive habits, intense rage, and aggression. Rational emotive behavioral therapy recognizes certain factors responsible for the thinking and actions of individuals, such as the activating events, beliefs, and consequences. These factors form the basis of thought patterns and reasoning, which results in the display of bad attitudes in different situations.

REBT usually employs some methods to help individuals deal effectively with mental disturbances, including problem-solving techniques, cognitive restructuring processes, and coping mechanisms. Each technique is specifically designed to efficiently solve the problems posed by the factors of the human mind. The problem-solving approach involves embarking on actions to develop specific skills such as conflict resolution and anger management, ultimately addressing the activating event. Strategies that enable individuals to correct unreasonable ideologies and mindsets are developed during cognitive restructuring. Such a change in an individual's belief system puts one in the best

position emotionally to handle the several outcomes of irrational thoughts. There is an emphasis placed on accepting irrational thoughts as a part of the human mind much more than changing them. However, acceptance is a way to alleviate distress, and therefore REBT employs humor in correcting mind reasoning. (Mark, 2004).

Treating trauma and PTSD

In handling and managing PTSD, specific techniques are considered valuable. PTSD is an anxiety disorder that stems from an experience or several witnesses of life-threatening situations that can either be severe or minor, like combat, sexual assault, or car accidents. These experiences leave a mark in the mental structure of persons leading to trauma and PTSD, which displays various symptoms ranging from sleep problems, aggression, and anger to low self-esteem, depression, and reckless behavior. The main objectives of PTSD therapies are to assist the patient in efficiently eliminating the effects of PTSD, help them acquire new skills to deal and cope effectively, ultimately leading to the freedom and wellness of the mind.

Most of the therapies relevant for handling PTSD are affiliations of CBT, even though they can be carried out in diverging processes. In treating PTSD, specific methods have been adopted, most of which have achieved maximum success. Cognitive processing therapy is concerned with the therapist exposing the patient to new skills to evaluate the altercations triggered in his thought patterns or feelings regarding the trauma experience. Understanding the shift in thought pattern and working on changing one's feelings concerning such experience increases the quality of self-thoughts which in turn eradicates the resultant effects of PTSD gradually.

It is believed that public speaking about specific issues gives room for them to be addressed and solved, and it's based on this theory that therapists employ prolonged exposure (PE). It involves making the patient relive the trauma by repeatedly talking about it. This repetition affects the brain

such that the frightening and disturbing memories now have a subtle effect on the patient giving him control over both his thinking structure and the reactions triggered by the trauma. Therapists also adopt eye movement desensitization and reprocessing (EMDR), in which patients are made to focus on sounds or movements while speaking about the trauma, which aided their brain in effectively processing the event. The stress inoculation technique focuses on dealing with the stress associated with the possibility to create a better perspective and ultimately expel symptoms of PTSD. (Machlaclan, 2006)

Neurophysiology and the stress response

Neurophysiology is accurately concerned with the functional and strategic analysis of the nervous system, nerves, and other components of the human brain with experimentation and clinical testings. Neurophysiology is concerned with understanding the working mechanism of the central nervous system and the peripheral nervous system to correct and eliminate mental illnesses. It is arguably more scientific than psychologically often applied alongside anatomy, genetics, and modular biology. Neurophysiological treatments are involved in solving brain-related issues such as epilepsy, multiple sclerosis, and motor neuron disease.

Stress response, on the other hand, is a psychological response that is usually non-specific to environmental threats and perceived dangers. This body reaction is theorized as a fight-or-flight response attributed under the general adaptation syndrome largely credited to Hans Selye. The stress response is evaluated in three phases; alarm, resistance, and exhaustion. When stressors are introduced to the human body, the brain and body are alerted to them, forcing them to either stay with the stressor or seek a means of escape. Coping arises with the notion of resistance when the body keeps functioning and releases high metabolic resources to contend with the actions of stressors efficiently. However, the body cannot maintain such high levels, resulting in a drastic depletion of resources. (Lubek, 2005)

A prolonged state of resistance to stressors, therefore, leads to an acute reduction in resources. This drop would weaken the body's defense system that would eventually cause several illnesses such as diabetes, heart disease, depression, and digestive problems. Stressors can be eustress or distress, but either way, all these changes are bound to occur in the body when stressors are present for a prolonged period. (Mark, 2009).

In First World Countries, health psychology is very well funded. The healthcare sector in most of these countries is highly advanced and affordable due to policies like health insurance for citizens. In 2019, there was an outbreak of the coronavirus, and it spread to most parts of the world in 2020, shutting down air travel and killing millions in total. But for the response of health psychology in recognizing the threat and taking swift measures to arrest the situation, the pandemic would have done more harm and taken more lives. Vaccines have been developed to combat sickness, and the world is on its way to recovery. Though another strain of the virus is resurging in India and some European countries, normalcy is gradually returning to the world. The response of health psychologists to educate the public, draft intervention policies and social support policies that helped during the lockdown phases cannot go unnoticed.

In Third World Countries, however, the response to the pandemic was not as efficient. But for an absence of the killer strain of the virus and commitment on the part of the citizens to protect themselves, the pandemic would have had a devastating impact, as the inadequate healthcare systems in these countries were shown up.

Methods

The information upon which this research has been based was sourced from existing literature material, health ministry journals, newspaper publications, and past works on health psychology. Constructive analysis was also carried out to retrieve sufficient information on the professional procedures used to treat mental challenges related to physical wellbeing.

Results

Health psychology, a fusion of behavioral management and behavioral medicine, is an aspect of psychology that has a great deal of influence on the healthcare system. It influences policy-making about the healthcare sector, ensures affordable healthcare for all, regardless of color, class, ethnicity, and gender, investigates behavior as it affects physical health, treats mental disorders and pain, educates the public on how behavior, privileges, and status can influence and determine their health conditions and also work with the government to ensure the improvement of the health sector in a country.

Actualization

The applications of health psychology in fulfilling societal needs are numerous. Members of society need to do more regarding their health. Adherence to medical advice and instruction is necessary. Health psychology has found ways to ensure people comply with the medical advice they receive from consultants or the general instructions given to a community. Also, health psychology aims to defeat sickness in rural areas, organizing intervention programs like immunization programs, e.g., polio vaccination in West Africa, and free medical checkups to increase sensitization and awareness in rural communities.

Health psychology's role in determining the quality of healthcare available in a country can never be undermined. The absence of dedicated health psychologists will likely translate to poor healthcare infrastructure.

Conclusion

The mental health of individuals is essential, as it has been proven to have tremendous effects on their physical health. Improvement of physical health conditions within populations requires more than just better healthcare facilities, although infrastructural upgrades are highly needed, especially in Third World Countries. Yet, the administrations must do more for actual progress to be made.

Living conditions, social factors, mental pressure, environmental conditions, socioeconomic status have all been proven to affect the physical well-being of individuals. Hence, the quality of life must be improved, better jobs created, more equity in resource distribution must be encouraged. Education is a fundamental right; thus, persons must be formally educated to ease the dissemination of helpful information and reduce the prevalence of negative behavioral tendencies like smoking, substance intake (hard drugs), and alcohol consumption.

References

Achor, S. (2010). The happiness advantage: The seven principles of positive psychology and performance at work. New York, NY: Crown.

- Asgharipoor, N., Farid, A. A., Arshadi, H., &Sahebi, A. (2012). A comparative study on the effectiveness of positive psychotherapy and group cognitive-behavioral therapy for the patients suffering from major depressive disorder. Iranian Journal of Psychiatry and Behavioral Sciences, 6(2), 33-41.
- Azar, B. (2011). Positive psychology advances, with growing pains. Monitor on Psychology, 42(4), 32. Retrieved 5th May 2021from <u>http://www.apa.org/monitor/2011/04/positive-psychology.aspx/</u>
 - Bennett, P. (2000). *An Introduction to Clinical Health Psychology*. Buckingham: Open University Press.Bowling, A. (1995). *Measuring Disease*. Buckingham: Open University Press.
 - Bowling, A. (2005) Measuring Health: A Review of Quality of Life Measurement Scales, 3rd edn. Maidenhead: Open University Press.
 - Brownell, K.D. (1991) Personal responsibility and control over our health: when expectation exceeds reality, *Health Psychology*, 10: 303–10.
 - Connor, M., & Norman, P. (eds) (1995). Predicting Health Behaviours. Buckingham: Open University Press.
 - Cope, T.A. (2009). Positive Psychotherapy's theory of the capacity to know as explication of the unconscious content, Journal of Religious Health, 48(1):79-89
 - Dekker, J., Lundberg, U. and Williams, A. (eds) (2001) Behavioural Factors and Interventions in Pain and Musculoskeletal Disorders: A Special Issue of the International Journal of Behavioural Medicine. Mahawah, NJ: Lawrence Erlbaum Associates.
- Della Porta, M. D., Lyubomirsky, S., & Sin, N. L. (2010). Tailoring positive psychology interventions to treat depressed individuals. Retrieved 3rd April 2021 from <u>http://sonjalyubomirsky.com/wpcontent/themes/sonjalyubomirsky/papers/SDL2011.pdf/</u>

Evans, P., Hucklebridge, F. and Clow, A. (2000) *Mind, Immunity and Health: The Science of Psychoimmunology*. London: Free Association Books.

Gibbon, P. (2020). Martin Seligman and the Rise of Positive Psychology, Humanities, 41(3) 1-20

- GoodTherapy(2018). Health Psychology, Retrieved 4th May 2021 from https://www.goodtherapy.org/learn-about-therapy/types/positive-psychology/
- HarvardHealth(2008). Health Psychology in Practice, Retrieved 4th May 2021 from https://www.health.harvard.edu/mind-and-mood/positive psychology in practice/

Lazarus, R.S. (2000) Towards better research on stress and coping, *American Psychologist*, 55: 665–73. Lee, C. (1998) *Women's Health: Psychological and Social Perspectives*. London: Sage.

Lee, C., and Owens, RG (2002). The psychology of men's health. Open University Press: Buckingham.

- Main C.J. and Spanswick C.C. (eds) (2000) *Pain Management: An Interdisciplinary Approach*. Edinburgh: Churchill Livingstone.
- Malouff, J. A., Thorsteinsson, E. B., Rooke, S. E., Bhullar, N., & Schutte, N. S. (2008). Efficacy of cognitive-behavioral therapy for chronic fatigue syndrome: A meta-analysis. *Clinical Psychology Review*, 28 (5), 736–745.
- Marks, D. F. (2009). Editorial: How should psychology interventions be reported? *Journal of Health Psychology*, *14* (4), 475–489.
- Marks, D. F., Sykes, C. M., & McKinley, J. (2003). Health psychology: Overview and professional issues. In A. M. Nezu, C. M. Nezu, & P. A. Geller (Eds.), *Handbook of psychology: Vol. 9. Health psychology* (pp. 1–23). Hoboken, NJ: Wiley.
- Marmot, M. G., Smith, G. D., Stansfeld, S. Patel, C., North, F., Head, J., . . . Feeney, A. (1991). Health inequalities among British civil servants—The Whitehall-II Study. *Lancet*, *337*, 1387–1393.

- McNulty, J. K., &Fincham, F. D. (2012).Beyond positive psychology?Toward a contextual view of psychological processes and well-being.*American Psychologist*,
- Odysseyware(2018). Introduction to Human Growth and Development, Retrieved 4th May 2021 from https://www.odysseyware.com/courses/introduction-human-growth-and-development/
- Ogden J. (2004). Health Psychology: A Textbook. 3rd edn. Buckingham: Open University Press.
- Ogden, J. (2010) The Psychology of Eating: From Health to Disordered Behaviour. 2nd Edition. Oxford: Blackwell.
- Ott, J. (2005). Level and inequality of happiness in nations: Does greater happiness of a greater number imply greater inequality in happiness? Journal of Happiness Studies, 6(4), 397–420.
- Paxton, P. (2002). Social capital and democracy: An interdependent relationship. American Sociological Review, 67(2), 254–277
- Penny, G., Bennett, P., & Herbert, M. (1994). *Health Psychology: A Lifespan Perspective*. Amsterdam: Harwood.
- Rad, D. (2012). Learning Theories: A Psychological Overview, AgoraSemestrial Journal, 6(1): 6-19
- Rapkin, BD and Schwartz, CE. (2004). Towards a theoretical model of quality of life appraisal: Implications of findings from studies of response shift. Health and quality of life outcomes. 2(14):1-10.
- Rashid, T. (n.d.).Positive psychotherapy. Retrieved 5th May 2021 from http://tayyabrashid.com/pdf/ppt.pdf/
- Seligman, M. E. P., Rashid, T. & Parks, A. C. (2006).Positive psychotherapy.American Psychology, 61(8). 774-788. Retrieved 4th May 2021 from <u>https://www.ncbi.nlm.nih.gov/pubmed/17115810/</u>

Shah, S. (2016). Determinants of Human Development Index: A Cross Country Empirical Analysis, MPRA Paper 73759, University of Munich, Germany

Stroebe, W. (2000). Social Psychology and Health. 2nd edn. Buckingham: Open University Press.

Sunitha, S. &Gururaj, G. (2014). Health behaviors & problems among young people in India: cause for concern & call for action. *The Indian journal of medical research*; 140(2):185-208.

Taylor, S. (1999). Health Psychology. 4th edn. Boston: McGraw-Hill.