PSYCHOLOGY

Budiyanskiy N.F. Psychological health of personality: the age-related aspect

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Abstract: The article presents the results of empirical research aimed at the study of individual manifestations of the personal psychological health. The age differences in psychological health depending on its type, which are associated with the personal biological development, have been investigated. It has been found out that the priorities in the psychological health manifestation connected with harmonization and comfort in various spheres of human activity, vary throughout the life and are determined by age.

Keywords: individual psychological health, types of psychological health, psychological health manifestation

Currently, health is one of the major social and personal values, but numerous studies show decrease in the quality of physical, mental, psychological, and social health of the society as a whole and of its individuals [2 etc.]. The most important problem in the modern science is the one of psychological health as an integral personal phenomenon.

Psychological health is a quite new concept for the modern national psychology, but the relevance and timeliness of access to it in the theoretical and practical aspects are confirmed by the areas related to this definition, namely, the search and definition of objective criteria and conditions of personal psychological safety, deep and full study of various conditions and dynamics of psychological security and so on.

The literature analysis allowed us to determine psychological health as a dynamic state of personal inner well-being (consistency), which represents its essence and can update individual and age-psychological abilities at any stage of development. On the other hand, psychological disease is seen as a special quality that expresses the individual dysfunctional relationship with the world, embodied in non-pathological disorders of personal development and socialization [1, 2, 6].

In our study, we consider psychological health as an integral phenomenon that contains mental, subjective and individual levels combined to determine the possibility of the individual full psychological functioning.

In accordance with this idea, we selected a set of characteristics, presenting these levels: mental (self-actualization and psychological well-being), subjective (vitality), individual (adaptability and subjective well-being). As a result of the statistical tests, a two-factor model of individual psychological health was obtained. This model shows that mental health should not be considered as a homogeneous formation, but as the one which has a complex level structure. Self-actualization, vitality, adaptability, personal psychological and emotional well-being act as an integral consequence of the psychologically healthy person double factor model [4].

The conducted quantitative and qualitative analysis allowed to identify empirically such personality types (for the severity of properties included in the structure of mental health) as psychologically healthy, psychologically unhealthy, self-actualizing, resilient, adaptive [3].

As diagnostic tools which let us indicate the intensity of each of the properties that represent the levels of psychological health, we used: for self-actualization diagnosis – The

test to evaluate the self-actualization level (adapted by N.F. Kalina, A.V. Lazukin [7]); to measure the viability – The questionnaire of personal viability (created by D.A. Leontiev and I.E. Rasskazova [5]); to evaluate adaptability – The survey "Emotional activity adaptiveness evaluation," offered in the collection of tests by N.P. Fetiskin, V.V. Kozlov, G.M. Maynulov [9]. Comprehensive evaluation of all three parameters was the basis of types selection.

The type of "psychologically healthy" individuals contains harmonious combination of all three identified options: self-actualization, vitality and adaptability, which are expressed in a large extent. These individuals are characterized by complete self-realization, life comprehension, the ability to set goals, the adequacy of their inner selves. They have spiritual powers of self-development, self-actualization and creative fulfilment, based on a good capacity to adapt and maintain stability in different situations. They combine willingness to take life in all its contradictions, complexities and uncertainties, showing courage in the life struggle and fidelity to himself with the ability to move forward in the process of internal "spiritual construction", to make a choice in favour of development.

The type of "psychologically unhealthy" individuals suggests weak development of the basic constructs for psychological health such as self-actualization, vitality and adaptability. Therefore, these individuals are biased in dysfunctional states, the complexity of interaction with the world, the inner strength and the presence of personal conflicts. This type has difficulty implementing its capacity, coping with stress, which results in a loss of vital goals, the substitution of their vocation, in the absence of a dominant conscious choice in favour of self-fulfilment. These people are conservative, depending on the group and authorities, they are over-pressured by the environment and it is difficult for them to adapt to it.

The type of "self-actualizing personalities" in the context of psychological health is expressed as a combination of the qualities of self-actualization at low resilience and adaptability levels. These individuals assert their distinctive way of life, adhere to the values of self-actualization, and express I devotion, but in a life struggle they are not hardy and intrepid, lose their ability to cope with stress, included in the maelstrom of events and receive destiny calls. These people have difficulty in adjusting; do not find a common language with their environment, which prevents establishing social relationships, resolve conflicts, take appropriate social roles.

The type of "viable identity" in the context of psychological health represents individuals with developed resilience but low self-actualization and adaptability levels. These individuals have high stress tolerance level and stability in the process of active interaction with the environment, endurance, strength, courage, courage, audacity. They take life as a challenge, as a struggle, but show no tendency to self-development and creative self-incarnation, they do not tend to the hard spiritual work, finding oneself, and disclosure of their potential. Their life choices are not always compatible with deep meanings and are not built on the basis of entry into their main interests. In this case there are violations of adaptation to the social and psychological environment, difficulty socializing.

The type of "adaptive identity" in the context of psychological health is formed by the combination of high adaptability with low vitality and self-actualization levels. This type is considered as the predominance of the ability to adapt, orientation to the needs and expectations of the environment, the rules of propriety, standards of public morality. Individuals of this type are marked by homeostatic direction, willingness to compliance and conformal behavior. They stand firmly "on their feet", because they are based on the recognition of the group, but suffer from a lack of selfexpression, individuality and assert their identity. They are not looking for freedom and creative self, do not go contrary to the circumstances, they do not have an ignition and soul for life struggles. Self-development, the embodiment of the potential, spiritual search are not a value for them. People of this type are not focused on the completeness of involvement in life when a person feels the need to periodically inside "blow up" an established and quite prosperous, well-adjusted life for new experiences, new challenges, new self-testing. An adaptive person is looking everywhere for peace, harmony, balance, resulting at times in certain stagnation in life where too much space is occupied by tradition, social rituals, stereotypes, ready samples.

Considering the problem of development L.S. Vygotsky emphasized that the basic development law is time difference in personality individual aspects and various properties "ripening". However, the process of development in each age period, despite the complexity of its organization and composition, and on the diversity of its individual processes, forms a whole having a certain structure [1]. These arguments give the reason to consider individual psychological health manifestations in each age period, to find similarities and differences between age groups.

Before turning to the analysis of age differences in the individual psychological health manifestation, we should mention the following. As the results of the theoretical analysis by D. Bell, K. Muzdybaev, V. Zapf showed psychological health important indicators are the life quality [8], which allowed us to choose the specific set of types to describe the quality of life, the presence of stressors, vulnerable areas, and the sources of strength and resources to overcome in each age group. To diagnose the quality of life we used test questionnaire "Life Quality Index" (LQI) proposed by R.S. Elliot [11].

In this study, these are: Kg1 - career (work); Kg2 - private long-term (short-term) aspirations and achievements; Kg3 – health; Kg 4 – personalized communication (bosses, colleagues, etc.); Kg5 - lonely pastime (outside, not doing work); Kg6 - relationships with children; Kg7 - relationships with parents; Kg8 - relationships at work (with colleagues, bosses, etc.); Kg9 - relationships with friends, neighbours, and others; Kg10 – religious and spiritual support; Kg12 – pets; Kg13 – hobby (passion); Kg14 – time management; Kg15 – environment; Kg16 – phone; Kg17 – business trips (travel); Kg18 – physical condition and environment; Kg19 - finance; Kg20 - life crises over the last six months; Kg21 - relaxation and meditation; Kg22 promising career; Kg23 - humour (games); Kg24 - interpersonal communication; Kg25 - physical activity; Kg26 sleep; Kg28 – alcohol consumption.

In the study of psychological health age-manifestations periodicity presented in the modern fundamental publication on the psychology by Mr. Craig is used [10]. In accordance with this periodicity three age periods are identified: adolescence (17–19 years old), early adulthood (20–39 years old), middle adulthood (40–55 years old). Table 1 presents information reflecting the age periodicity in the psychological health types' distribution and the number of each group.

Table 1. The age of respondents.	representatives of the studied types	of individual psychological health

	The age periodization			
Type	Adolescence	Early adulthood	Middle adulthood	Total number of respondents
П3+	25	25	6	56
П3-	10	17	9	36
$\Pi 3_{\mathrm{A}}$	8	10	13	31
ПЗж	9	10	7	26
П3 _С	7	9	7	23
Number of respondents by age	59	71	42	172

Note: PH+- type of individual psychological health, PH-- type of individual psychological unhealth, PH_A- adaptive type of psychological health, PH_v- viable type of psychological health, PH_s- self-actualizing type of psychological health.

As it can be seen from the table, adolescence group with the type PH+ includes 25 respondents, with the type PH- -10 respondents, with the type PH_A -8 respondents, with the type PH_v -9 respondents, with the type PH_s -7 respondents. Early adulthood group includes 25 respondents with the type PH+, with the type PH- -17 respondents, with the type PH_a -10 respondents, with the type PH_v -10 respondents, with the type PH_s -9 respondents. And middle adulthood group includes 6 respondents with the type PH+, 9 respondents - with the type PH-, 13 respondents - with

the type PH_A , 7 respondents – with the type PH_v , 7 respondents – with the type PH_s .

This article discusses the results of the comparative analysis carried out only between the two groups of respondents: psychologically healthy and unhealthy personality type.

The analysis of the profiles, reflecting age-specific life quality, the representatives of psychologically healthy and unhealthy types found no statistically significant differences by Student's t-test by such indicators: a group of adolescents in terms of: Kg1 (career / work plan), Kg2 (per-

sonal aspirations), Kg3 (health), Kg4 (personal communication), Kg8 (relationships at work), Kg10 (religious and spiritual support), Kg15 (environment), Kg18 (physical condition and environment), Kg20 (life crises in the previous six months), Kg26 (sleep), which predominate in the profile of *psychologically healthy personality type*. Life quality index of Kg5 (lonely pastime) dominates in the profile of *psychologically unhealthy personality type*.

In the group of early adulthood such significant differences between the indices were revealed: Kg1 (career / work plan), Kg2 (personal aspirations), Kg3 (health), Kg4 (personal communication), Kg8 (relationships at work), Kg9 (relationships with friends, neighbours etc.), Kg12 (pets), Kg13 (hobby), Kg15 (environment), Kg16 (phone), Kg17 (business trips), Kg18 (physical condition and environment), Kg19 (finance), Kg20 (life crises in the previous six months), Kg23 (humor, games), Kg24 (personal communication), Kg25 (physical activity), which predominate in the profile of the *psychologically healthy type*. Life quality indexes of Kg5 (lonely pastime), Kg14 (time management) and Kg21 (relaxation and meditation) predominate in the profile of *psychologically unhealthy personality type*.

In the group of middle adulthood such significant differences between the indices were revealed: Kg1 (career / work plan), Kg2 (personal aspirations), Kg3 (health), Kg4 (personal communication), Kg8 (relationships at work), Kg9 (relationships with friends, neighbours etc.), Kg12 (pets), Kg15 (environment), Kg18 (physical condition and environment), Kg20 (life crises in the previous six months), Kg22 (career prospects), Kg25 (physical activity), which dominate in the profile of *psychologically healthy personality type*. Life quality indexes of Kg5 (lonely pastime), Kg6 (relationships with the children), Kg21 (relaxation and meditation), Kg28 (alcohol consumption) predominate in the profile of *psychologically unhealthy personality type*.

Summarizing the obtained results, it can be noted that the differences found are clear priorities for most indicators of life quality, as in the manifestation of both types and age. So, the respondents' age repertoire of life qualities, by the representatives of psychologically healthy personality type has been revealed. Age dynamic of repertoire saturation has been set, for example, an adolescent identified 10 dominant spheres, to the period of early adulthood, it becomes more diverse (found 17 dominant spheres), in the

period of middle adulthood the repertoire of the preferable life qualities reduces (12 spheres).

Dominant for adolescence respondents, relatively early and middle adulthood, are such qualities-values as: religious and spiritual support (Kg10), they will care about the environment (Kg15), the ability to communicate with others by telephone (Kg16). For respondents in early adulthood, relatively adolescence and the middle adulthood, such life qualities are becoming valuable as: the ability to have a good job, career promotion and financial independence (Kg1, Kg19), becoming a personality (Kg2), being physically active, maintaining and improving health (Kg3, Kg18, Kg25), having partners in communication (Kg4), having friendly relations with acquaintances, neighbours and colleagues (Kg8, Kg9), the opportunity to have pets (Kg12). As for respondents of middle adulthood, no clear priorities in terms of life quality were found.

As for the age differences in the life quality manifestation by the representatives of the psychologically unhealthy type, it should be noted the following. The representatives of the psychologically unhealthy type versus psychologically healthy type, life quality indexes are significantly reduced and the repertoire is rather poor. The dominant life qualities are represented by those spheres that are in the end either destructive (lonely pastime, time management (overloading), alcohol consumption or stressful for them (relationships with the children). Thus, the adolescence respondents, as compared with those of the early and middle adulthood, the need for lonely pastime is clearly expressed (Kg5). For the representatives of early adulthood, as compared with the other two groups the valuable life qualities are the opportunity to make a career, the prospect of promotion (Kg22), personal realization (Kg2), the possibility of relaxation and meditation (Kg21). However, these aspirations for psychologically unhealthy personality become the sources of life's difficulties, psychological barriers that drive them into stress. For the respondents of middle adulthood no apparent dominance in life quality was found.

Summing up the results of the empirical study we can say that the priorities in the psychological health manifestations related to harmonization and comfort in various spheres of human activity vary with age and are determined by it.

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Будиянский Н.Ф. Психологическое здоровье личности: возрастной аспект

Аннотация: В статье представлены результаты эмпирического исследования, направленные на изучение индивидуальных проявлений психологического здоровья личности. Выявлены возрастные различия в проявления психологического здоровья в зависимости от его типа, которые связанны с биологическим развитием человека. Установлено, что приоритеты в проявлениях психологического здоровья, связанных с гармонизацией и обеспечением комфорта в разных сферах жизнедеятельности человека, меняются с возрастом и им обусловливаются.

Ключевые слова: психологическое здоровье личности, типы психологического здоровья, качества жизни