



## 1st UpCare training: Basic elements of the Evaluative Model Health Promotion.

### ***Definition of Mental Health Model Template for the Mental Health Assessment Model***

According to the World Health Organization (WHO), mental health is that psychological and social state in which a person can love, work and have fun, receiving satisfaction from them.

As can be seen from the definition:

- Mental health is not just about the absence of disease, but the ability to be functional and to be satisfied by it.
- Mental health is about all key areas of our lives, especially the area of our relationships with others.

«...*There is no health without mental health....*» (a person cannot be considered healthy if they do not suffer from a physical disease but have, for example, an anxiety disorder).

«...*it is a state of balance between a person and others around him or her and the environment...*» (mental health promotion is understood as an integral part of public health) (WHO 2004a, Thornicroft 1999)

### ***Education and Public Health***

Achieving the goals of mental health promotion as well as the prevention of mental disorders of behaviour, violence and substance abuse is largely related to the provision of appropriate education.

(WHO 2004a, WHO 2004b)

«...*joint education of social and community actors on mental health promotion is of particular importance in cultivating a common language and achieving the necessary goals of mental health promotion...*» (Vassiliadou et al 2004)

«*ethic of cultivation*» → «*Political influence*» (Thrift 2004, 64-72)



Co-funded by  
the European Union

Erasmus+ 2022-1-EL01-KA210-VET-000082477



Education on issues through skill acquisition contributes to:

- Develop or evolve into a normal personality (health) - Reduce levels of psychopathology
- Copes with life difficulties (coping)
- Increases creativity
- Contributes to the achievement of mental health promotion goals
- Helps to reduce risky behaviour in schools
- Beneficial in preventing violence and substance abuse
- Cultivating positive adaptive characters that people possess by nature.

*«...The presence or absence of mental health promotion skills maintain a causal relationship with the onset of mental disorders and development of conflictual relationships...» (Dobson 1998)*

### ***Skills development interventions***

#### **Objectives:**

- Strengthening the elements of personality that are associated with mental health protection
- Control of factors causally related to the occurrence of pathological conditions

*«....The production of the adaptive mechanisms of mental defence raises the possibility of the emergence of a kind of immunity or at least a reduction in vulnerability....» (Quirk 1991, Taylor et al 2000)*

### ***What is a bio-psycho-social pattern?***

Evaluative Anthropology uses the bio-psycho-social model and the evaluative model to understand and address mental health.

1. It looks at parameters-the way one interprets reality-which influences the development or prevention of a pathological mental state (Vassiliadou, 2008)
2. It deals with the social factors that influence the development of a pathological condition



**Co-funded by  
the European Union**

Erasmus+ 2022-1-EL01-KA210-VET-000082477



## **Evaluative Model**

### **Objective:**

- *Proposes the term "evaluative mental constructs" higher brain functions responsible for evaluating any kind of information, stimulus, situation and event leading the organism to corresponding physical and psycho-emotional reactions (Vassiliadou, 2008)*
- *Aims to modify dysfunctional mental constructs through training to replace them with more functional ones. This increases 'resilience' to stressful life events (Vassiliadou, 2008)*

*«...If cognitive constructs are developed in a dysfunctional way they cause distortion and threaten the mental health of the individual...» (Vassiliadou & Goldberg, 2006)*

### **1. Pre-evaluative mental constructs**

- They are typical of earlier stages of development in which higher brain control mechanisms have not been activated, so information is processed in an automatic way and evaluated as pleasant (rewarding) or unpleasant (punishing) (Vassiliadou, 2008).
- At this stage, there is a risk of creating a pleasure-seeking addictive tendency necessary for survival, stimulating specific brain regions associated with the production of pleasant emotions (Vassiliadou, 2008) which may threaten the mental health of the individual (Vassiliadou & Goldberg, 2006; Vassiliadou, 2008)

### **2. Evaluative Cognitive Constructs**

- They relate to the pre-early stages of brain function development, where stimuli are evaluated based on what is considered desirable or avoidable (Vassiliadou, 2008)
- In the case of dysfunctional evaluative constructs, the individual may evaluate something as avoidable or desirable based on what has been pre-evaluated



**Co-funded by  
the European Union**



as pleasant or unpleasant, often creating dysfunctional behaviours (Vassiliadou, 2008)

### 3. Meta-evaluative mental constructs

- These are meta-evaluations of stimuli that occur in the more mature stages of development, which determine what is considered beneficial or harmful. (Vassiliadou, 2008)
- A characteristic of post-evaluations is that they can combine evaluative and pre-evaluative constructs, since something that is considered beneficial or harmful can influence what will be perceived as desirable or avoidable, pleasant or unpleasant. (Vassiliadou, 2008)

#### The role of thought in the behaviour of the individual

Both the Evaluative Model and the Cognitive Model are based on the basic view of human behaviour as the result of thought processes. The Cognitive Model of depression emphasizes the importance of the individual's negative cognitions in the selfworld-future domains (Beck, 1991) , giving weight to the way the patient interprets reality and the self. (Papakostas, 2000)

Cognitive theory refers to positive and negative beliefs around self, world and future in depression, while the Evaluative theory respectively uses the terms adaptive and maladaptive evaluative constructs, emphasizing the concept of growth and adaptation as well as the will of the individual (Vassiliadou, 2008) . That is, the individual's will influences -and influencing- the individual's "intention-disposition" and is heavily involved in the way in which the individual evaluates all kinds of stimuli. (Vassiliadou, 2008)

MENTAL HEALTH PROMOTION	COGNITIVE MODEL	EVALUATIVE COGNITIVE MODEL
Self-contradiction Self-esteem	Self	Identity
Coping with difficulties Social mutual support Stress management	World	Adaptation



Co-funded by  
the European Union



Self-development Autonomy Self-improvement	Future	Creativity
--	--------	------------

### Beck's Cognitive Trinity

#### 1. Self

- Difficulties in achieving maturity and autonomy occur when there is an inflexible assessment of personality traits and in the perfectionism that may possess the individual, resulting in maladaptive beliefs such as "Man is born, not made" and "Either I will be perfect or nothing". (Vassiliadou, 2005)
- According to the Evaluative Model, unproductive or inflexible self-evaluation and perfectionism constitute serious obstacles to self-improvement, which is a key prerequisite for achieving self-esteem. (Vassiliadou, 2005)
- It happens to people who suffer from negative emotions stemming from psychopathological conditions such as depression to underestimate their positive qualities and overestimate their weaknesses. (Clark & Beck, 1999)

#### 2. World

- Devaluation of natural human abilities to manage relationship difficulties and dystonia in emotional investment are almost always accompanied by isolation and lack of social support. (Vassiliadou, 2005)
- Communication as well as the provision and recruitment of support are often hindered by dysfunctional interpretive schemas about the alleged malevolent motives or attitudes of others, leading the individual to need to protect him/herself from others and ultimately to isolate him/herself. (Vassiliadou, 2005)
- Such schemas are: "Being successful in life means that you don't need anyone", "first you have to take and then give", "if one acts supportive towards others, they will take advantage of him", "you should not lose by giving to others", "you should take as much as you can from others".



Co-funded by  
the European Union



### 3. Future

- Over- or underestimation of difficulties in relation to the ability to fulfil goals is often associated, among other things, with mental disorder, a tendency to avoid pain and responsibility, and a tendency to self-harm. (Vassiliadou, 2005)
- Typical dysfunctional beliefs are: "It is better not to hope than to hope and be disappointed", "I wait for the worst to happen so that I am prepared", "I do not want to make dreams that may not come true", "I do not invest in goals that do not have a specific outcome". (Vassiliadou, 2008)

It is suggested that training in skills of creative evaluation of the self (identity), the world (adaptation) and the future (creativity) (Vassiliadou, 2005), corresponding to Beck's negative cognitive triad of self, world and future (Beck, 1991)

- 1. Identity:** The Evaluative Model, considers healthy self-concept, creative self-concept and the individual's effort to improve his/her less powerful abilities (Vassiliadou, 2005). To develop healthy self-concept, it suggests that the individual should be self-assessed using positive scales (e.g. how hardworking or not hardworking he/she is), reassessing the standards against which he/she compares and self-assesses and utilizing creative self-criticism to better manage any failures. (Vassiliadou, 2005)
- 2. Adaptation:** Refers to the development of skills to functionally evaluate negative life events and harmoniously support each other through social relationships. (Vassiliadou, 2005) In order to achieve more harmonious management of one's problems and more functional interpretation of negative life events, skills are proposed to address and change the evaluative mental constructs related to overestimation or underestimation of the risks, consequences and coping possibilities of an event. (Vassiliadou, 2005)
- 3. Creation:** The goal is to make evaluative decisions for the future and immediate satisfaction of basic needs and the gradual achievement of goals, based on a realistic self-assessment of one's capabilities. (Vassiliadou, 2005) In order to develop creativity skills, the individual examines and reassesses internal and external "loci of control" (Rotter, 1975) and tries to plan his/her future with more realistic standards, using a more functional way of decision making. (Vassiliadou, 2005)



Co-funded by  
the European Union



### ***DPQ questionnaire***

The DPQ consists of 24 questions, each of which describes an evaluative cognitive construct reflecting a pessimistic assessment of a daily life event commonly found in people with mental health problems. (Vassiliadou, 2008)

Each statement question is divided into two parts which are phenomenologically contradictory to each other and describe a "yes, but" type of dilemma, for example, question 1: "The fact that I have enough, but not as much as I would like to have". (Vassiliadou & Goldberg, 2006).

Each statement question is followed by two sub-questions, the first exploring whether the statement is evaluated as beneficial or not, thus examining the meta-evaluative construct, and the second exploring whether the statement is evaluated as an approach or to those who do not want pharmacological treatment. (Vassiliadou & Goldberg, 2006)

### ***Therapeutic relationship***

The therapist and patient work together to address the latter's current problems and the therapist acts as an experienced partner to the patient's 'research scientist'. (Vassiliadou, 2008)

Both models (Evaluative and Cognitive) emphasize the respect of the patient's wishes and preferences, considering them as the important factor in the development of the "therapeutic alliance". (Beck, 1991)

As has been observed, the therapeutic relationship between therapist-therapist tends to have a need for cooperation and mutual respect between the two for better therapeutic outcomes. (Gournellis et al., 2013)



**Co-funded by  
the European Union**