Introduction to a Catholic Christian Meta-Model of the Person for Mental Health Practice

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ABSTRACT: This chapter introduces the Catholic Christian Meta-Model of the Person (CCMMP) and its implications for mental health practice. In doing so, it begins to respond to five basic questions, which are answered more fully in the rest of the volume. (1) What is the Catholic Christian Meta-Model of the Person? (2) Why is the CCMMP's enriched vision of the person necessary for the mental health field? (3) How does the use of the Meta-Model enrich clinical practice in general? (4) How does the CCMMP's vision of the person benefit the client? And (5) how does the Meta-Model's vision of the person benefit the clinician's understanding of his or her identity as a Christian mental health professional? In addition to these questions, the chapter presents three foundational documents of the Meta-Model: (a) its *Definitions of the Person*, (b) its *Psychological Premises*, and (c) its *Framework for Mental Health Practice*. Finally, this chapter orients the reader to the structure of the book and suggests strategies for its use by readers of different backgrounds.

The two major goals of this book are to provide a comprehensive understanding of the Catholic Christian Meta-Model of the Person (CCMMP) and to explore ways in which this vision of the person can enrich theory and practice within the mental health field. This introductory chapter assists in the accomplishment of this goal by orienting readers to the volume as a whole and by giving a brief introduction to the Meta- Model and pointing out some broad indications of its significance for the mental health field.

To orient the reader, the chapter will introduce three foundational documents that succinctly summarize the CCMMP and implications of its application within mental health practice. These documents include: (a) the *Catholic Christian Meta-Model's Definitions of the Person,* (b) the *Psychological Premises,* and (c) the *Catholic Christian Meta-Model Framework for Mental Health Practice.*

In addition to introducing these major foundational documents, this chapter will give context, or "the big picture," for study of the entire volume by providing preliminary answers to the following questions, which will be answered more comprehensively in the remaining chap-

ters: (1) What is the Catholic Meta-Model of the Person? (2) Why is the CCMMP's enriched vision of the person necessary for the mental health field? (3) How does the use of the Meta-Model enrich clinical practice in general? (4) How does the CCMMP's vision of the person benefit the client? And (5) how does the Meta-Model's vision of the person benefit the clinicians' understanding of their identity as Christian mental health professionals?

The chapter will then provide further orientation to the volume for the reader by overviewing the structure of the book, as well as strategies that readers may wish to adopt in approaching their study of the volume given their different familiarity with the fields of psychology and mental health practice, philosophy, and theology.

What Is the Catholic Christian Meta-Model of the Person?

The Catholic Christian Meta-Model of the Person is a framework that gives a rich comprehensive understanding of the nature of the person. The Meta-Model is developed from core premises or propositions about dimensions of personhood that have been contributed by the wisdom of the psychological sciences, as well as by the two ancient wisdom traditions of philosophy and theology. The core theological, philosophical, and psychological premises of the Meta-Model are introduced in Chapter 2 ("Theological, Philosophical, and Psychological Premises for a Catholic Christian Meta-Model of the Person"). The premises of the Meta-Model are then discussed in a comprehensive way throughout this volume, in Part II, Psychological Support (Chapters 3–6), Part III, Philosophical Support (Chapters 7–16), and Part IV, Theological Support (Chapters 17–19).

The Meta-Model's vision of the person can be summarized succinctly in its three-part definition, which represents its fundamental premises about the person from theological, philosophical, and psychological perspectives, found in Table 1.1 below.

Each of the dimensions or capacities of the person identified in the definitions is explored thoroughly in a chapter of its own: personal wholeness (Chapter 8); uniqueness as man or woman (Chapter 9); fulfilled through vocational callings (Chapter 10); fulfilled in virtue (Chapter 11); interpersonally relational (Chapter 12); sensory-perceptual-cognitive (Chapter 13); emotional (Chapter 14); rational (Chapter 15); volitional and free (Chapter 16); created in the image of God and thus fundamentally good and possessing dignity (Chapter 17); fallen (Chapter 18); and redeemed (Chapter 19).

However, some general comments here about the Meta-Model will provide context and prevent possible misunderstandings from developing. First, it is important to note that the Meta-Model posits that psychology, philosophy, and theology are all sources of truth about the person (John Paul II, 1998; and Chapter 6, "Person as an Integrated Laminate"). They make integrative and complementary contributions to a realist understanding of the person. These disciplines act as "lenses" for viewing the person and together provide the possibility of a richer, clearer vision of the person than is possible when only one lens is utilized. As will be examine in more depth later, these different disciplines use different methodologies (Chapter 7, "Methodology and Presuppositions") and examine the person from different levels of analysis or "laminates" (Chapter 6). Each of these levels of analysis has its own important contributions to

Table 1.1. Definitions of the Person

From a theological perspective, (Scripture, tradition, and the Magisterium), the human person is created in the image of God and made by and for divine and human love, and—although suffering the effects of original, personal, and social sin—is invited to divine redemption in Christ Jesus, sanctification through the Holy Spirit, and beatitude with God the Father.

From a philosophical perspective, the human person is an individual substance of a rational (intellectual), volitional (free), relational (interpersonal), sensory-perceptual-cognitive (pre-rational knowledge), emotional, and unified (body-soul) nature; the person is called to flourishing, moral responsibility, and virtue through his or her vowed or non-vowed vocational state, as well as through life work, service, and meaningful leisure.

From a psychological perspective, the human person is an embodied individual who is intelligent, uses language, and exercises limited free-will. The person is fundamentally interpersonal, experiences and expresses emotions, and has sensory-perceptual-cognitive capacities to be in contact with reality. All of these characteristics are possible because of the unity of the body and unique self-consciousness, and are expressed in behavior and mental life. Furthermore the person is called by human nature to flourishing through virtuous behavior and transcendent growth; through interpersonal commitments to family, friends, and others; and through work, service, and meaningful leisure. From their origins (natural and transcendent), all persons have intrinsic goodness, dignity, and worth. In the course of life, though suffering from many natural, personal, and social disorders and conditions, persons hope for healing, meaning, and flourishing.

understanding the truth about the human person, and when integrated together they result in an enriched and more accurate understanding.

For example, the theological premise that we are made in the image of God gives faith-based certainty that we are interpersonally relational and called to love each other. Theology also provides us with an understanding of the nature of marriage and family life as a calling to self-giving love, and our interpersonal relationship with God as a source of hope, especially for an afterlife.

The philosophical tradition, for its part, gives us deep insight, broad analysis, and a systematic synthesis concerning existential meaning in life, truth and beauty, and ethical aspects of vocations and flourishing. This includes many types of relationships ranging from family relationships, types of friendships, and our relationship with community.

The psychological sciences contribute theories and empirical data that provide developmental perspectives and psychodynamic understandings, but in addition often provide a specificity allowing for the development of clear treatment plans and interventions. For example, the psychological sciences have identified that distressed couples are often characterized by a disproportionate response to criticism and by certain "demand/withdraw" behaviors. Such characteristics of the interpersonal nature of the person would not be identified nor would interventions be developed to address them through

the methods utilized by theology and philosophy. In short, adopting a multidisciplinary perspective for the development of the CCMMP allows for a framework for an understanding of the person that is comprehensive and accurate, while also allowing for more specificity and applicability.

In parallel with the theological and philosophical premises of the Meta-Model, there are the eleven psychological premises (see Table 1.2). These psychological premises are the basis for the Meta-Model's psychological definition of the person (see above). The reader should note that in brackets after each psychological premise is an indication of the corresponding philosophical or theological premise with which the psychological premise is associated. In short, the table presents a brief illustration of how the psychological, philosophical, and theological "laminates," lenses, or levels of understanding are supportive and complementary of each other.

A second important clarification about the Meta-Model that may prevent misunderstandings pertains to the relationship between the Meta-Model and personality theories and models of therapeutic intervention already existing within the mental health field. It is important for the reader to be mindful that the Meta-Model does not replace traditional personality theories or theories of the person found in intervention models. Instead, the Meta-Model is an overarching comprehensive view of the person, which provides a framework for integrating the rich understandings about various dimensions of the person that are explored in existing personality theories, while avoiding the reductionism that results when a vision of the person is based on one or only a few of these personality theories. Similarly, the Meta-Model does not replace existing therapeutic models in the field, but instead provides a framework for the thoughtful selection of one or more interventions based on its comprehensive view of the person.

A final clarification to prevent misunderstandings centers on the claim that the Meta-Model provides a more comprehensive vision of the person. Although the three-part theological, philosophical, and psychological definition may seem to the reader to be rich and complex, it may still come across as missing some essential characteristics of the person. It should be noted that this definition of the person is derived from eleven major premises concerning the person. However, within the individual chapters discussing these eleven major premises of the Meta-Model there are many "sub-premises" or characteristics of the person that fall under each these broad premises. For example, that personhood is characterized by having a spiritual soul, existing as either a man or woman, and developing and maturing over time are all discussed under the premise that the person is a personal unity. The importance of the person as embedded in a family and culture is covered under the premise that the person is interpersonally related. In short, if there seems to the reader to be something missing in the definition, by the end of the book it will be discovered that the Meta-Model framework addresses many aspects of the person not included at the broader definitional level or even at the more specific level of the theological, philosophical, or psychological premises.

Table 1.2. A Psychological Vision of the Person Consistent with the Theological and Philosophical Premises of the Catholic Christian Meta-Model of the Person

The following eleven psychological premises represent a psychological understanding of the person consistent with the theological and philosophical premises of the CCMMP and with the psychological sciences. They serve as an outline that will be augmented with sub-premises that further elucidate the Meta-Model's theoretical and clinical implications for psychology and counseling. Together with the CCMMP's theological and philosophical premises, they deepen and help fill out our understanding of the person, for use in mental health practice. (In parentheses is found the name of the corresponding theological and philosophical premise.)

I. The person has an essential core of goodness, dignity, and value and seeks flourishing of self and others. This dignity and value is independent of age or any ability. Such a core of goodness is foundational for a person to value life, develop morally, and to flourish. (Created)

II. The person commonly experiences types of pain, suffering, anxiety, depression, or other disorders in his or her human capacities and interpersonal relationships. The person is also distressed or injured by natural causes and by others' harmful behavior. People have varying levels of conscious and nonconscious distorted experience, which express that they do not respect and love themselves or others as they should. Moreover, they often do not live according to many of their basic values. (Fallen)

III. The person, with the help of others, can find support and healing, correct harmful behaviors, and find meaning through reason and transcendence, all of which bring about personal and interpersonal flourishing. In short, there is a basis for hoping for positive change in a person's life. (Redeemed)

IV. Each human being is a body-soul unified whole with a unique personal identity that develops over time in a sociocultural context. This unity pertains to the person's whole experience. For instance, physical abuse affects the person's bodily, psychological, and spiritual life. (A Personal Unity)

V. The person flourishes by discerning, responding to, and balancing three callings: (a) called as a person to live a value-guided life while focusing on love and transcendent goals; (b) called to live out vocational commitments to others, such as being single, married, or having a distinct religious calling; and (c) called to participate in socially meaningful work, service, and leisure. (Fulfilled Through Vocation)

VI. The person is fulfilled and serves others through the ongoing development of virtue strengths, moral character, and spiritual maturity, including growth in cognitive, volitional, emotional, and relational capacities. Through effort and practice, the person achieves virtues that allow the attainment of goals and flourishing. For example, a father or a mother who develops patience, justice, forgiveness, and hopefulness is better able to flourish as a parent. (Fulfilled in Virtue)

Table 1.2 (*continued*)

VII. The person is intrinsically interpersonal and formed throughout life by relationships, such as those experienced with family members, romantic partners, friends, co-workers and colleagues, communities, and society. (Interpersonally Relational)

VIII. The person is in sensory-perceptual-cognitive interaction with external reality and has the use of related capacities, such as imagination and memory. Such capacities underlie many of our skills, allowing us to recognize other people, communicate with them, set goals, heal memories, and appreciate beauty. (Sensory-Perceptual-Cognitive)

IX. The person has the capacity for emotion. Emotions, which involve feelings, sensory and physiological responses, and tendencies to respond (conscious or not), provide the person with knowledge of external reality, others, and self. The excess and deficit of certain emotions are important indicators of pathology, while emotional balance is commonly a sign of health. For example, when balanced, the human capacity for empathy can bring about healing for self and others, while a deficit or excess produces indifference or burnout. (Emotional)

X. The person has a rational capacity. This capacity involves reason, self-consciousness, language, and sophisticated cognitive capacities, expressing multiple types of intelligence. These rational capacities can be used to facilitate psychological healing and flourishing by seeking truth about self, others, the external world, and transcendent meaning. (Rational)

XI. The person has a will that is free, in important ways, and is an agent with moral responsibility when free will is exercised. For instance, the human being has the capacity to freely give or withhold forgiveness and to be altruistic or selfish. Increases in freedom from pathology and in freedom to pursue positive life goals and honor commitments are significant for healing and flourishing. (Volitional and Free)

Why Is the CCMMP's Enriched Understanding of the Person Necessary for the Mental Health Field?

As stated previously, a basic assumption of this volume is that our understanding of human nature and the person is fundamental to all aspects of mental health practice. Our vision of the person defines the scope of what we see as being human problems, our understanding of how such problems develop, and our construal of what is to be done to promote healing and even flourishing. Another previously mentioned major assumption of this book is that the more complete and accurate our understanding of the person is, the better a foundation it provides for psychological theory building, improvement of psychological research, and development of more effective intervention strategies and methodologies for mental health practitioners.

The fields of psychology, philosophy, and theology have each made major contributions to our understanding of the person. In a relatively short period, a hundred years or so, psychology has developed a large collection of "partial" theories for understanding the person. They are referred to here as partial theories because in many cases these theories have examined one aspect of the person in depth, but have neglected other important dimensions of the person. These partial theories include, for instance, the psychoanalytic tradition with its emphasis on the interior or psychodynamic life of the person; behaviorism with its emphasis on how the environment influences human behavior; interpersonal theory and its emphasis on the importance of relationships; cognitive approaches, which examine the importance of thought processes; and existentialism with its emphasis on human freedom and the importance of meaning in the life of the person.

This list includes only some of the major theoretical schools existing within the mental health field. If taken individually, these theoretical schools provide an important but limited understanding of the person. In the last few decades, notable efforts have been made to bring two or more of these partial theories of the person together to enhance clinical practice. Examples include Cognitive-Behavioral Therapy (Beck, 1979), Rational Emotive Behavioral Therapy (Ellis & Ellis, 2011), Multimodal Therapy (Lazarus, 1989), and the Biopsychosocial Model (Campbell & Rohrbaugh, 2006). A number of contributors to the field of counseling and psychotherapy have also integrated multiple theories and research about the person, which has resulted in an enriched vision of the person in their therapy models, for example: Emotion-Focused Therapy (Greenberg & Goldman, 2018), the Gottman Method of couples therapy (Gottman, 1999), Relationship Enhancement Therapy (Guerney, 1977; Scuka, 2005).

At this point a number of questions could be raised about whether there really is a need for the Catholic Christian Meta-Model of the Person to serve as a new framework for the mental health field. If we are just patient, might not most of the "neglected" aspects of personhood covered in the Meta-Model be discovered and finally included? Might not the forces of integration existing within the mental health field eventually bring all the partial theories together? We believe that this is not forthcoming, for reasons we now briefly explore. More well-developed answers to these questions are provided throughout the text.

There is a need for a unifying framework. Partial theories of the person existing in the mental health field are not simply like pieces cut from the same puzzle and waiting to be combined. Without a unifying framework, which the Meta-Model represents, the pieces cannot so readily be fit together. The numerous partial theories or perspectives on the person offered by the mental health field sometimes contradict one another in terms of their fundamental assumptions about the person, and even more frequently disagree about the relative emphasis that should be placed on various abilities of the person. For example, when it comes to the issue of whether the person has volition or freedom, the conclusion has ranged from a view of the person as completely determined (in the case of radical behaviorism), to having significantly impaired freedom (in the case of both modern behaviorism and classic psychoanalytic theory), to the person's being essentially free (in the case of existentialist schools).

Even more common is the disagreement across personality theories and therapy mod-

els with regard to the emphasis that should be placed on various dimensions of the person. For example, in both theory and clinical practice there is the divide between those who advocate the individual as the most important level of analysis and those who would see the dyadic level, or even the family system, as the most important level of emphasis. This distinction is not a small issue within the field, and these two perspectives have not always peacefully coexisted. One need only consider that during the first fifty years of the history of psychotherapy, when individual psychotherapy dominated, no significant theories or models for couples, marital, or family therapy existed (Gurman, 2002). This divide is also evidenced by the not-uncommon choice made by clinicians to work almost exclusively with individuals—from a psychodynamic or other interior-focused perspective—or, alternatively, to work mostly with couples, parents, families (and individuals)—from a family systems perspective—even when similar problems are being addressed.

The more comprehensive understanding of the person provided by the CCMMP allows the clinician to adjudicate and contextualize the important truths about the person that are contained within the various partial theories. Therefore, the Meta-Model can incorporate the valuable insights from behaviorism, concerning human learning, and acknowledge the important impact of the person's environment, while moderating a view that would excessively limit human freedom. It can also acknowledge the important insights regarding human freedom that are drawn from the existentialist schools, while excluding the idea of some of these schools that the person is almost completely free and able to create his or her own nature. The Meta-Model also advocates for mental health professionals to be trained to assess, conceptualize, and in-

tervene at both the individual interior and dynamic level as well as at the dyadic or systems level, rather than being limited to only one level of analysis.

There is a need for a broad framework. We need to have a framework or meta-model that is broad enough to encompass all of the current personality theories, as well as the understandings of the person coming from both integrative therapeutic models and existing and emerging valid research. In addition, such a meta-model must also include the essential domains of the person that the psychological sciences have either neglected or, without the help of philosophy and theology, are not capable of adequately exploring. These broader domains include vocation and virtue, a normative human nature, relationship with God (the Transcendent), the importance of living a moral life, and the meaning contained within suffering. The CCMMP posits that a synthetic integrated framework for understanding the person can be based on the three wisdom traditions: the psychological sciences and the mental health field, the broader philosophical tradition (a Christian philosophical tradition), and the Catholic-Christian theological tradition. This resulting synthetic integrated framework, the Meta-Model, can then serve to unify the many partial existing psychological theories of the person and provide a broader framework for grounding mental health practice.

There is a need for an integrated approach to clinical training and practice. It is commonly the case in graduate training that personality theories are presented in a survey style with no overarching framework, and that graduate students are introduced to only a few integrated therapeutic methods in depth. This educational approach results in new clinicians'

lacking a comprehensive framework for understanding the person (such as is represented by the Meta-Model), as a foundation for practice. Postgraduate training in new psychotherapy and counseling models, along with ongoing clinical experience, do provide some broadening of a clinician's understanding of the person, but this is often countered by the tendency of clinicians to become experts in certain areas of practice, as well as the tendency to become increasingly reliant on a few selected therapeutic intervention models. The need for the CCMMP as framework for mental health training and professional practice therefore is given support by a combination of factors: the failure of graduate training to provide the mental health professional with a comprehensive understanding of the person; the limited integration occurring within even the most integrated therapeutic models; the fact that even mature clinicians master only a few of these integrated models, so that collectively these many small efforts at integration do not result in the acquisition or use of a rich understanding of the person in clinical work; and

finally, the limitations created by professional specialization. (See Chapter 20, "Principles for Training," for discussion of how the Meta-Model can enrich the training of mental health professionals.)

One final question that might be raised in this section is whether such a multidisciplinary framework, which aims at integrating the truths about the person from psychological, philosophical, and theological perspectives, is methodologically possible. This question immediately initiates a need for exploration of the nature of truth and the relationship between faith, reason, and the scientific method adopted by contemporary psychology. This brief introductory chapter can only state the conclusion that it is possible; satisfactory development of the argumentation of this conclusion is left to the entire book. However, a significant foundation for this conclusion is explored especially in Chapter 5 ("Basic Psychological Support"), Chapter 6 ("Person as an Integrated Laminate"), and Chapter 7 ("Methodology and Presuppositions").

How Does the Use of the Meta-Model Enrich Clinical Practice in General?

Part V of this volume examines both broad and specific ways in which the CCMMP enriches various aspects of clinical practice, such as assessment, diagnosis, case conceptualization, individual psychotherapy, and group psychotherapy. Other chapters in Part V examine how the Meta-Model shapes the training of mental health professionals and how it can influence the conducting of psychological research. This section seeks only to highlight a few of the most important ways the Meta-Model enriches clinical practice.

First, the Meta-Model's vision of the person

greatly expands what is meant by diagnosis. In short, if we ask the question, "what is wrong with this client?" contemporary mental health practice approaches to answering this question range from (a) identifying a biochemical cause, to (b) identifying a symptom cluster associated with a specific diagnostic label, to (c) understanding what is wrong with certain personality features of the client, to (d) identifying dysfunctional interpersonal or family-system patterns of interaction. Taking all four of these levels of analysis for diagnosis of the client's problem can result in a moderately rich understanding of

what needs to be addressed in a treatment plan. However, it is common that mental health professionals stop at a symptom-based diagnosis. In other cases mental health practitioners who are psychodynamically trained will seek to understand the personality structure, and those who work with couples and families will also emphasize obtaining a family systems perspective, but seldom are all four levels of analysis utilized.

The Meta-Model encourages the use all four of the aforementioned levels of analysis. In addition, the Meta-Model, with its emphasis on the client as fulfilled through vocational callings and through virtue, adds important characteristics beyond these four levels of analysis in order to arrive at an adequate diagnosis. For example, the Meta-Model would require that an assessment and diagnosis of how a married client is functioning in his or her call to be a spouse and parent; how this married client is functioning in his or her call to serve others in their life work; whether there is a balance between work and family life; what virtues are needed by this married person to live out commitments to spouse and children, and what other virtues are needed for flourishing. It would require also an exploration of the client's spiritual functioning and desired relationship with God, as well as how the client lives out a moral life consistent with his or her beliefs.

Although clinicians may be able to identify cases in which a majority of these areas were assessed, the benefit of the Meta-Model as a framework is that it seeks to safeguard the consistency of such thoroughness with each client. Seldom do counseling and therapy address every problem or lack of flourishing. However, the Meta-Model benefits the clinician and client by making sure that all important areas of the client's life are assessed and prioritized in the treatment plan.

Note that the vocational approach adopted by the Meta-Model ultimately sees flourishing in one's vocational callings as the highest level of analysis, one that is well beyond the diagnosis made at the symptom level, or even at the personality or family system level. The Meta-Model, instead, sees these other levels as important primarily because they affect the person in his or her current vocational callings. For example, in the case of a married client, his or her depression, rigid personality characteristics, and dysfunctional family of origin, as well as his or her strengths, are seen ultimately in the light of how they impede or promote efforts to be a loving spouse and caring parent, and to be successful in serving God and neighbor through one's life work and living a morally good life.

It follows from the Meta-Model's implications for diagnosis that other clinical activities, such as the intake interview and other formal assessment processes, are also influenced. A Meta-Model approach to interviewing and assessment does not mean that clinicians have to change their preferred initial approach to gathering information and building the therapeutic relationship in the intake process. However, it does mean that clinicians need to be aware of what gaps in the comprehensive vision presented by the Meta-Model remain unknown and still need to be explored at a later time.

A Meta-Model assessment process does require that clinicians know the limitations of their preferred therapeutic modalities and the specific theoretical orientations of these modalities. For example, marital therapists may need to be aware that although their intake and assessment process will generally yield much information about interpersonal functioning and the clients' functioning in their vocational callings as spouse and perhaps parent, it may not be as effective for assessing each client's personality or spiritual functioning. In short, each

therapeutic modality and even each school of therapy has strengths and weaknesses when it comes to using the Meta-Model for developing an understanding of clients and for planning and implementing treatment.

Another benefit of the Meta-Model for the mental health field is its effect on the role of the practitioner. Generally, there has been a distinction made between clinicians who mostly work with individuals and those who work with dyads or families. There will likely always be specializations based on a clinician's preferences, but the use of the Meta-Model advocates for basic-level training in theory and practice at understanding the person both as an individual and also as interpersonally relational. The Meta-Model also requires the clinician to understand how individual flourishing and interpersonal flourishing are fundamental to vocational flourishing.

How Does the CCMMP's Vision of the Person Benefit the Client?

The Meta-Model's vision of the person improves client care in some ways that are both unique and profound. The Meta-Model's premise that each client is made in the image of God, and thus is foundationally good and possesses innate dignity, has significant implications for the therapeutic relationship. The Meta-Model's vision of the person helps to focus the clinician's awareness that this client, who has made poor life choices, has committed evil acts, exhibits a personality disorder, displays psychotic symptoms, or has racist views, is still foundationally good and possesses dignity. Certainly most clinicians of good will, whether or not they use the Meta-Model, struggle to maintain this awareness when confronted with challenging clients. These efforts of clinicians to struggle to keep in mind the dignity of the person are not generally explicitly motivated by any personality theory or understanding of the person formed during their graduate training. The point being made is that the Meta-Model is explicit about the goodness and dignity of the client in a way not generally present in existing personality theories or therapeutic interventions. And yet, the mental health professional's firm hold on the reality of the goodness and dignity of the client can foster true charity and compassion, which maintains and strengthens the relationship.

The Meta-Model also benefits the client by promoting a deep respect for the uniqueness of each client. An important advancement in the mental health field is its increasing recognition of the fundamental goodness of culture, and more broadly its incorporation of respect for diversity. The Meta-Model supports this development by adding some insights into both the uniqueness of the person and the importance of culture. In the case of the Meta-Model, respect for diversity begins at the level of the individual. This specific client is recognized as a unique and unrepeatable person who has unique vocational callings. For example, this client, a married woman, is created uniquely by God, she is uniquely called to be a spouse to this man and a mother to this child. She has a unique set of talents, is called to a unique life of service aimed toward bringing goodness into the world. She is loved by God and is called to respond to a unique relationship with God (the Transcendent).

In addition, the Meta-Model adds to client care by its adding nuance to the understanding and valuing of the client's culture and other as-

pects of diversity. In the Meta-Model culture is seen as being foundationally good, since it both teaches about and bestows many basic human goods aimed at flourishing, such as relationship and community; moral norms and what it means to live a good life; and meaningful work, leisure, and celebration. However, the Meta-Model has a realist understanding of culture in that, although culture is seen as vitally important in forming the identity of the client and promoting his or her flourishing, cultures are nonetheless imperfect in their teaching about and promotion of flourishing.

The Meta-Model therefore encourages the mental health professional to value and respect culture, but it is also a corrective to the idealization of culture. Aspects of the client's culture that foster flourishing are seen as good, but aspects of culture that hinder flourishing are seen as barriers to the client's well-being. For example, if one culture supports faithfulness in marriage and another does not, then with respect to fostering the client's vocational commitment to marriage, one culture can be seen as a better teacher and aid for both client and clinician.

In short the Meta-Model does not accept a relativistic view that all aspects of a given culture are unequivocally good or that there is no way to evaluate influences of a given culture as positive or negative. However, such judgments about culture are not left to the subjective life experiences and possible cultural biases of either the client or the clinician, but instead are grounded both by objective human nature recognized by the Meta-Model as well as by each client's healthy experiences of his or her culture.

Finally, the Meta-Model helps benefit the client by fostering a deep respect for the client's right to make life decisions and to seek flourishing by following his or her conscience. In the mental health field, one of the most important ethical principles is the imperative for the clinician to avoid exercising undue influence in their relationship with their client or to compromise the client's autonomy and right to make life decisions. Temptations to violate these ethical principles are strongest when the clinician believes the client is making a mistake that will have negative consequences, or when the clinician believes there exists a better solution to a problem. The Meta-Model emphasizes that each client is foundationally good, has inherent dignity, is volitional or free, is a moral being, and is responsible for discerning his or her vocational callings (for example, to marry or not marry, and what life work to pursue). When the client is seen in this light, it can help the clinician to avoid the temptation to use undue influence, since this would do violence to the client's freedom to flourish by following conscience. It also helps clinicians to accept humbly that they cannot reliably know how God is calling this unique client to flourish.

How Does the CCMMP's Vision of the Person Benefit the Clinician's Understanding of His or Her Identity as a Christian Mental Health Professional?

Much of this book examines the Meta-Model's rich understanding of the person, which can be used to understand clients and assist them in healing, growth, and flourishing. However, because the Meta-Model's vision of the person is also equally applicable to the life of each clinician, it can also greatly benefit his or her understanding of what it means to be a Christian mental health professional.

The Meta-Model emphasizes that client and

clinician alike are fulfilled through vocational callings and a life of virtue. Although for all clinicians both vocation and virtue are important dimensions of being a person, they especially highlight for the Christian the realities that (a) there is a call to relationship with God that aims at a holy, just, virtuous life; (b) there is a call to a vocational state that involves deep relational commitments, love, and sacrifice (e.g., marriage); and (c) there is a call to one's life work and other forms of service as a means of loving neighbor. Although these three types of vocational callings are distinguishable, they are ultimately unified in the life of the Christian, supportive of one another, and in need of a balance among them for flourishing. These truths have important implications for what it means to be a Christian mental health professional.

First, the Meta-Model's emphasis on vocation as a fundamental dimension of the person has important implications for the identity of the mental health professional. Christian mental health professionals view professional work as a calling from God and not simply a job. Service to their clients is seen as a way of loving both God and neighbor. While the secular ethical codes of the mental health professions present aspirational principles of doing no harm as well as promoting the best interest of clients and patients (beneficence) (see the codes: American Association for Marriage and Family Therapy, 2015; American Counseling Association, 2014; American Psychiatric Association, 2013; American Psychological Association, 2017; National Association of Social Workers, 2017), Christian mental health professionals experience themselves as called to the even more self-giving ethic of charity (1 Cor 13; Benedict XVI, 2005: American Association of Christian Counselors, 2014; United States Conference of Catholic Bishops. 2009). In practical ways love motivates them

to give of themselves and to persevere for the good of their clients. For example, while doing pro-bono work may be seen, by the secular clinician, as being civic minded, promoting justice and serving the poor is seen as a commandment from Jesus that is embraced as a way of life for the Christian mental health professional.

Second, Christian mental health practitioners, while valuing the development of professional skills, recognize that to be true to their Christian identity and their calling as mental health professionals, they must seek to be holy and virtuous. Indeed, with humility, they recognize that they need to constantly develop the virtues, such as empathy, compassion, patience, and practical wisdom, that are needed in their professional work. In addition, Christian mental health professionals pray for and work to develop the supernatural virtues of faith, hope, and charity. They also seek to help their clients at a natural level to be faithful to their life commitments; hopeful for healing, growth, and flourishing; and compassionate toward self and others.

Third, by recognizing the importance of each of their callings, mental health professionals understand that they must have balance in their lives. For example, a Christian mental health professional who is married recognizes that the calling to professional work must be in balance with and not harm his or her marriage and its accompanying commitments and responsibilities to spouse, children, and family life. Christian clinicians also recognize that their relationship with God, their work for justice, and their growth in holiness not only are good in themselves, but also support and allow growth in all their vocational callings, including their professional life.

In addition, the Meta-Model benefits the Christian mental health professional's awareness of his or her identity by providing clear Chris-

tian ethical principles based on the nature of the person (natural moral law and divine law). These principles both augment traditional professional ethics and allow for resolution of ethical conflicts by mental health professionals in a way that is true to their Christian identity and conscience, while respecting the dignity, rights, and conscience of clients.

Additional insights into how the Meta-Model is used in the training and formation of Christian mental health professionals are given in Chapter 20. Chapter 10, which covers vocational callings, and Chapter 11, which examines the importance of virtue development and moral reasoning, also provide valuable insights crucial for clinicians to understand their calling to be Christian mental health practitioners.

A Summary of the Benefits of the Catholic Christian Meta-Model Framework for Mental Health Practice

This chapter has introduced the Catholic Christian Meta-Model of the Person as a framework for mental health practice. A document summarizing the four major benefits of the model presented in this chapter is found in Table 1.3.

The Structure of the Book and Some Guidance for Mental Health Professionals, Philosophers, and Theologians

Information about the overall structure of the book and the specific content of chapters has been introduced throughout this chapter. In addition, a short, systematic introduction to the structure of the book as a whole, as well as guidance for readers of different backgrounds has been provided in the preface to the book. However, since some readers may not have read the preface, this information is presented again below, since it helps to orient the reader to the volume.

The book has five parts. Part I (Chapters 1–2) orients the reader to the overall work as a whole. The two chapters in combination provide a compact introduction to the Catholic Christian Meta-Model of the Person and its broad implications for the mental health field.

Part II (Chapters 3–6) describes a rationale for how psychology, philosophy, and theology can make unique, complementary, and corrective contributions to our understanding of the person, while recognizing each discipline's methodological limitations. This part of the volume also provides specific psychological support for the Meta-Model.

Part III (Chapters 7–16) presents the philosophical method and premises of the Meta-Model regarding the person as a unified whole, embodied as man or woman, interpersonally relational, sensory-perceptual-cognitive, emotional, rational, and volitional and free. These chapters also identify the ways in which the person is fulfilled through vocational callings and commitments, and through virtues and the moral and spiritual life.

Part IV (Chapters 17–19) discusses the three theological premises of the Meta-Model, specifically the person as created in the image of God (foundationally good), with innate dignity; fallen (sinful), needing to struggle against evil and weakness; but offered redemption (salvation), with hope for new meaning and holiness.

Table 1.3. A Catholic Christian Meta-Model Framework for Mental Health Practice

The following text identifies four ways that the Catholic Christian Meta-Model of the Person (CCMMP) contributes to and benefits mental health practice.

The CCMMP expands the vision of the person. The Catholic Christian Meta-Model of the Person presents a systematic, integrative, nonreductionist understanding of the person, marriage and family, and society, an understanding that is developed from the psychological sciences, philosophy, and the Catholic theological tradition and worldview. The Meta-Model integrates the methods and findings of these three disciplines to understand eleven essential dimensions of the person. These include the narrative of the person as (1) existing and fundamentally good (created), (2) affected by disorders (fallen), and (3) capable of healing and flourishing (redeemed). The person is (4) a unified whole, (5) fulfilled through three types of vocational callings (individual goodness and relationship with the transcendent; vocational states; and life work), (6) fulfilled in virtue strengths and character development, (7) and fulfilled in interpersonal relationships. The person is (8) sensory-perceptual-cognitive, (9) emotional, (10) rational and intelligent, and (11) volitional and free.

The CCMMP enriches mental health practice. The Meta-Model serves as a framework for mental health practice and for understanding the person. Mental health practitioners can use the Meta-Model to assess and diagnose client strengths and weaknesses, psychological disorders, and problems of everyday living; to explain how problems have developed; to establish treatment goals; and to select and implement evidence-based treatment interventions. Adopting the integrative perspective of the CCMMP as a framework benefits clinical practice, because the Meta-Model provides the structure to integrate existing personality theories and evidence-based therapeutic interventions to fulfill its comprehensive view of persons and the treatment of their problems. Furthermore, the Meta-Model approach also brings benefits by identifying the importance of life callings and vocations of clients and of the development of virtue and character to fulfill them. Finally, the Meta-Model enhances ethical practice by grounding traditional professional ethical principles and the respect for diversity in a moral normative understanding of the person, who possesses innate goodness and dignity in being created unique and in the image of God.

The CCMMP benefits the client. The Meta-Model approach to mental health practice helps the clinician and client to understand the client's life narrative and its challenges through this nonreductionist framework. This framework requires consideration of personal development, interpersonal relationships, values, character strengths and weaknesses, vocational commitments, existential issues, diversity, social contexts, and spiritual life. The client is viewed as a unique person, essentially good and possessing dignity. The practitioner acts collaboratively with the client to understand and implement treatment. In doing so, the clinician acts for the client's healing and flourishing in a manner that reflects love of neighbor and respect for the client's conscience and freedom to make life decisions.

The CCMMP clarifies and supports the clinician's Christian identity. The CCMMP clarifies how practitioners' lives and faith are integrated with their professional practice. Becoming a mental health professional is experienced as a calling by God to serve his people. In accepting this call the clinician becomes responsible for developing the professional competencies and virtues (such as empathy, patience, practical wisdom) needed for effective practice. The Meta-Model's worldview motivates a capacity and willingness to generously and unselfishly help all people, especially poor and disadvantaged populations. It also motivates working with Church ministries and brothers and sisters in the faith.

Christian practitioners integrate both professional and Christian ethics in their clinical work to promote their client's freely chosen goals aimed at psychological, moral, and spiritual flourishing. When some aspects of the clients' goals are contrary to Christian ethics and to their ultimate welfare, the practitioner works in a compassionate and nonjudgmental way to assist with as many of their goals as is allowable, according to professional and Christian ethics. This ethical attentiveness allows respect for the client's dignity, conscience, character development, and freedom, while also enabling practitioners to remain faithful to their own consciences.

Part V (Chapters 20–26) introduces ways that the Meta-Model can enrich the psychological sciences and mental health practice. These chapters examine implications of the Meta-Model for the training of mental health professionals, case conceptualization, assessment, diagnosis, and individual and group psychotherapy, as well as how it might influence psychological research.

Because the content of this volume is drawn from psychology and the mental health field, philosophy, and theology, some readers will find challenges as they engage material that is not primarily associated with their particular discipline. Therefore, readers from different backgrounds may wish to take varying approaches to studying the CCMMP volume. Below are three strategies for engaging with the volume according to each reader's background.

First, mental health professionals who have little training in philosophy and theology may find it helpful to read Part I and Part II of the volume, and then skip to Part V. Although all of the chapters in Part V will be of interest to most mental health professionals, Chapters 20–22, which cover the areas of training, case conceptualization, and group psychotherapy collectively, provide a foundational introduction to the implications of Meta-Model for mental health practice. However, ultimately one must thoroughly understand the whole vision of the person presented in the Meta-Model in order to understand possible contributions it can make to the psychological sciences and mental health practice. Therefore, mental health professionals will eventually need to read the philosophical and theological parts of the volume as well (Parts III and IV, respectively).

Second, those trained more exclusively in philosophy may want to employ another strategy for reading this book. After starting with

Part I, to get the overview and foundational premises of the Meta-Model, they may wish to engage Part III, which presents the philosophical method and premises in more detail. This part provides a vision of the person that is wider and deeper than a rationalist one, because of its realist approach. It also presents the Meta-Model as a framework for the three disciplines to reflect together on reality in order to identify the ultimate meaning and truth of the person. Next, these readers may want to turn to Part IV, which investigates the Meta-Model's theological supports and premises and how the Meta-Model integrates the moral and spiritual nature of the person. Those who have chosen this volume because of its philosophical bridging with the psychological sciences and mental health practice will be prepared to explore the psychological premises and supports (Part II) and theoretical and clinical applications of the Meta-Model (Part V). In particular, Chapters 20–22 collectively provide both a foundational introduction and representative sampling of the implications of the Meta-Model for mental health practice.

Last, those readers with theological and spiritual backgrounds, but little preparation in the mental health field, may take still another tack in engaging this book. Similarly to the others, they will want to start with the big picture described in Part I. Then, they may want to read Part IV on how the Meta-Model incorporates Catholic Christian theology (revelation and faith-based reflection) and practice (Christian moral and spiritual life) regarding the difference it makes to propose that the person is created, fallen, and offered redemption. But since such reflections on the person and divine grace require a deep understanding of the person, this reader will also want to explore the psychological (Part II) and philosophical (Part III) supports and prem-

ises of the CCMMP. Then these readers will also be prepared to explore the clinical implications of the Meta-Model (Part V). Again, Chapters 20–22 collectively provide both a foundation- al introduction and representative sampling of the implications of the Meta-Model for mental health practice.

REFERENCES

American Association of Christian Counselors. (2014). *AACC code of ethics*. Forest, VA: Author.

American Association for Marriage and Family Ther- apy. (2015). *AAMFT code of ethical principles for marriage and family therapists*. Washington, DC: Author.

American Counseling Association. (2014). *ACA code of ethics*. Alexandria, VA: Author.

American Psychiatric Association. (2013). *The prin- ciples of medical ethics: With annotations especially applicable to psychiatry*. Washington, DC: Author.

American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct*. Wash- ington, DC: Author.

Beck, A. T. (1979). *Cognitive therapy and the emotional disorders*. New York, NY: Penguin.

Benedict XVI. (2005). *Deus caritas est* [Encyclical, on Christian love]. Vatican City, Vatican: Libreria Editrice Vaticana.

Campbell, W. H., & Rohrbaugh, R. M. (2006). *The biopsychosocial formulation manual: A guide for mental health professionals*. New York, NY: Rout- ledge.

Ellis, A., & Ellis, D. J. (2011). *Rational emotive behavior therapy*. Washington, DC: American Psychological Association.

Gottman, J. M. (1999). *The marriage clinic: A scientifi- cally based marital therapy*. New York, NY: Norton.

Greenberg, L., & Goldman, R. (2018). *Clinical hand- book of emotion-focused therapy*. Washington, DC: American Psychological Association.

Guerney, B., Jr. (1977). *Relationship enhancement*. San Francisco, CA: Jossey-Bass.

Gurman, A. (2002). The history of couple therapy: A millennial review. *Family Process, 41*, 199–260.

John Paul II. (1998). *Fides et ratio* [Encyclical, on the relationship between faith and reason]. Vatican City, Vatican: Libreria Editrice Vaticana.

Lazarus, A. (1989). *The practice of multimodal therapy: Systematic, comprehensive, and effective psychother- apy*. Baltimore, MD: John Hopkins University Press.

National Association of Social Workers. (2017). *Code of ethics of the National Association of Social Work- ers*. Retrieved from https://www.socialworkers .org/About/Ethics/Code-of-Ethics/Code-of- Ethics-English.

Scuka, R. (2005). *Relationship enhancement therapy: Healing through deep empathy and intimate dialogue*. New York, NY: Routledge.

United States Conference of Catholic Bishops. (2009). *Ethical and religious directives for Catholic health care services*. Washington, DC: Author.

Theological, Philosophical, and Psychological Premises for a Catholic Christian Meta-Model of the Person

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ABSTRACT: This chapter presents an integrated Catholic Christian Meta-Model of the Person (CCMMP). The Meta-Model is a framework that explicitly employs major theological and philosophical premises (foundational principles) and briefly identifies the basic corresponding psychological premises. The Meta-Model proposes a view that is informed by Christian faith and by reason and the psychological sciences. The text outlines and organizes the distinctive qualities of complex human nature and the dynamic human person. The intention is to produce a richer and truer understanding of the person for the mental health field, one that will enhance theory, research, and practice. How it does this is addressed in the chapters that follow. This chapter also provides a specific, synthetic, Christian definition of the person using theological, philosophical, and psychological perspectives for a deep understanding of the person.

We start with a three-part definition of the person that informs the integrated project presented in this volume. This definition is derived from theological, philosophical, and psychological premises that are introduced in this chapter and are developed throughout the entire book.

The Catholic Christian Meta-Model's Definition of the Person

From a theological perspective (Scripture, tradition, and the Magisterium), the human person is created in the image of God and made by and for divine and human love, and—although suffering the effects of original, personal, and social sin—is invited to divine redemption in Christ Jesus, sanctification through the Holy Spirit, and beatitude with God the Father.

From a philosophical perspective, the human person is an individual substance of a rational (intellectual), volitional (free), relational (interpersonal), sensory-perceptual-cognitive (pre-rational knowledge), emotional, and unified (body-soul) nature; the person is called to flourishing, moral responsibility, and virtue through his or her vowed or non-vowed vocational state, as well as through life work, service, and meaningful leisure.

From a psychological perspective, the human person is an embodied individual who is intelligent, uses language, and exercises limited free-will. The person is fundamentally interpersonal, experiences and expresses emotions, and has sensory-perceptual-cognitive capacities to be in contact with reality. All of these characteristics are possible because of the unity of the body and unique self-consciousness, and are expressed in behavior and mental life. Furthermore the person is called by human nature to flourishing through virtuous behavior and transcendent growth; through interpersonal commitments to family, friends, and others; and through work, service, and meaningful leisure. From their origins (natural and transcendent), all persons have intrinsic goodness, dignity, and worth. In the course of life, though suffering from many natural, personal, and social disorders and conditions, persons hope for healing, meaning, and flourishing.

Part I of this volume (this chapter and the prior chapter) gives a foundational introduction to the CCMMP. The remaining parts of the volume provide systematic support for the Meta-Model: Part II, psychological theory and research; Part III, philosophical rationale; Part IV, theological support; and, finally, Part V, theoretical and practical applications of the Meta-Model in mental health practice.

[A] *A Theological Vision of the Person* that is based on Christian faith and tradition (the teaching of the Bible and the Catholic Magisterium) and accords with a tripartite ordering of salvation history.

The Person Is ...

I. CREATED

Humans are created by God "in the image" and "after the likeness" of God (Gen 1:26); "in the image of God he created them; male and female he created them" (Gen 1:27).

1. *Goodness and dignity.* They are good (as is everything created by God) and have special, intrinsic dignity and value as persons (Gen 1:31).

2. *Gift of love.* Their lives (and every good thing) are ultimately a gift of love that has been given and is continually sustained by God (Jas 1:17). In turn, acceptance of the gift, gratitude, worship, service, and self-gift (love of God and of others as oneself) are appropriate responses to the original gift.

3. *Unity of person.* Human persons are created as a unified whole, constituted of a material body and a spiritual soul (Gen 2:7).

4. *Communion with God.* By knowledge and by love, humans are created as persons to enter into communion with God (Jn 17:26), who is a knowing and loving communion—a Trinity of Persons.

5. *Communion with others.* They are created to enter into communion and friendship also with other persons. In the beginning, Adam experienced loneliness in original solitude, which was overcome by an original unity when God created Eve to be Adam's wife, "a helper fit for him," and "the mother of all the living" (Gen 2:18–20). The nuptial meaning of the body (its basic structure to receive and give, to know and love) informs all vocations to married and celibate life. Being created in the image of God is the basis for all vocations.

6. *Flourishing.* Human persons are called to flourishing, that is, perfection and holiness, through the interpersonal accepting and giving of love: "be perfect, as your heavenly Father is perfect" (Mt 5:48). Although perfect flourishing is reserved for heaven, human persons are called at present to flourish in the integrity of the individual (psychological, moral, and spiritual level), as well as in the integrity of relationships with God and neighbor (including the distinct relationships related to one's vocational state in life and the application of the virtues needed for that state).

7. *Divine order and natural law.* Creation is marked by a divine order that humans can know in terms of the divine law (e.g., the Decalogue, Ex 20:1–17) and the natural moral law (which is the human rational participation in the eternal law; see Rom 2:14). Divine law and natural law are made concrete in the Christian life. Even the happiness of the non-believer is dependent on living in accord with natural law.

II. FALLEN

Because of the sin of Adam and Eve, the divine likeness in mankind is wounded and disfigured (Gen 3:16–19).

1. *Disorder and trials.* Experiences of sin, weakness, decay, death, and disorder constitute the difficulties and trials experienced in human temporal life (1 Pet 1:6).

2. *Consequences of sin.* Original sin and the consequences of every personal and social sin pit mankind against God, each human person against himself, person against person, and mankind against nature (Ps 78:19).

3. *Goodness is foundational and evil is not.* The tendency toward evil is a disordering of inclinations that are themselves basically good. While the wounds of evil are not foundational, the enduring goodness of God's creation is: "where sin increased, grace abounded all the more" (Rom 5:20).

4. *Our struggle with evil.* Evil and sin put human flourishing in peril. Evil is a disordering and privation of what should be, according to human nature created in the image of God: emotions (hatred), thoughts (lies), choices (harming self or others), commitments (adultery instead of fidelity), or development (failures to develop one's human capacities or to fulfill other responsibilities). Evil opposes God through disobedience to the law of love, through demonic obsessions, and through spiritual opposition, for example. In the context of struggles with evil and the restlessness that results from sin, God offers redemption and can make all things work for the good (Rom 8:28).

III. REDEEMED

In Jesus Christ's incarnation, God gives a new dignity to human nature and, through Christ's death and resurrection, redeems mankind, calling each person to communion with God and neighbor and to interior healing and growth (Titus 2:14).

1. *Eternal happiness and beatitude.* Human persons are called to the communion with God that is fully granted only through divine assistance in the loving presence and beatific vision of God in the life to come. However, this communion is already received, as a foretaste, in this life, through the gifts of faith, hope, and love (the theological virtues) and through the flourishing experienced in our vocations (1 Jn 3:2; Mt 5:8).

2. *Faith.* Through faith in God and union with Jesus Christ in Baptism, every human person is invited to become God's son or daughter (Gal 4:5; 1 Jn 3:1) and to receive the Gift of the Holy Spirit (Acts 2:38; Jn 14:26). They are called to partake in the redemptive work of evangelization and sanctification that Christ achieves through his Body the Church.

3. *Hope.* Sin, death, and disorder are definitively overcome by Jesus' redemption (1 Cor 15:54–55). Moreover, the suffering caused by their effects can be turned to salvific purposes (Rom 5:3). Supported by hope and spiritual sacrifice in the midst of suffering (1 Pet 2:5; Rom 12:1), human persons participate in overcoming the effects of sin through the redemptive work of Christ, who has promised the guidance of the Holy Spirit, eternal beatitude with God, the resurrection of the body, and the other promises of the Kingdom of God at the end of time (Rom 6:3–6; Mt 4:17).

4. *Love.* The whole law and the prophets depend on two commandments: to love God, "with your whole heart, with all your soul, and with all your mind … and to love your neighbor as yourself" (Mt 22:37–40; see also Deut 6:5; Lev 19:18; Mk 12:30; Lk 17:33). Jesus Christ makes mankind known to itself, making clear the supreme calling through his definitive gift of self, which is love (Vatican Council II, 1965, *Gaudium et spes* [*GS*] §22); having a likeness to God, man "cannot find himself except through a sincere gift of himself" (*GS* §24). Self-gift is rooted in communion and often involves a form of self-sacrifice.

5. *Nature and grace.* Human nature always remains weakened by sin (*concupiscence*—disordered emotions, weakness of reason and will) but can be assisted, and in certain ways healed and divinized, by divine grace (1 Thess 5:23). Persons can become holy through a life of faith, hope, and love as well as through the other infused virtues and the Gift of the Holy Spirit. They can become "participants in the divine nature" (2 Pet 1:4). All people are called to live a morally good life and are offered divine assistance to do good.

6. *Vocation.* A vocation is often understood as a religious phenomenon, in which people respond to a "calling" from God to fulfill a spiritual function or life work. From a Christian perspective, vocations or callings take three basic forms: (a) a person's call to relationship with God—through a pursuit of holiness; (b) a person's committed state in life—single, married, ordained, or religious; and (c) a person's work and service—through paid work, volunteer efforts, and everyday service within families and among friends. They are all forms of self-gift and are all graced transformations of human capacities. (On the philosophical underpinning of vocations, see Premise V.1–4, this chapter.)

7. *Vocation to holiness.* The common vocation to holiness is based upon the call in this world to love God and neighbor as oneself, and to live a life of good works, which God prepared beforehand for each person (Lk 10:27; 1 Thess 4:3; Eph 2:10). God gives to each a personal vocation: the unique and unrepeatable role God calls each person to play in carrying out the divine plan (2 Tim 1:9; Vatican Council II, 1964, *Lumen gentium* [*LG*] §39).

8. *Vocational States.* All people start life as single and may continue their lives as single in love and service to God and neighbor. In general, being a member of a family is the first vocational state, and it is within the family that receiving and giving of love are taught. There are also committed

vocations to a state in life, that is, vocations to commit oneself to be married, ordained, or consecrated (religious). All these states involve collaboration in God's work of sanctifying oneself and other people (1 Pet 5:1–4; *LG* §41–43).

9. ***Work and service.*** Through a third level of vocation, human persons engage in work and service, paid or not, and this serves their personal flourishing and sanctification, while contributing to the good of the family, of other persons, and of the world (Gen 2:15; Mt 25:20). It is through such work that one can exercise the divine command to reach beyond one's friends and family to love one's neighbor, to welcome the stranger, to exercise justice for the poor, and to do good to one's enemy.

10. ***Prayer and sacraments.*** Each person is called to communion with God through prayer. Religious practices of prayer unite individuals to community and to God. Because of the importance of the whole person, worship involves the body (through silence and song, standing and kneeling, eating and drinking) and relationship (through greetings and signs of peace, through blessings and communal responses). In this way, our body participates in and even knows the faith. God offers not only eternal salvation but also temporal support, healing, and guidance through the sacraments, which are available to Christian believers. Starting with Baptism, the sacraments are the seven efficacious signs of divine grace, instituted by Jesus Christ, offered through the work of the Holy Spirit, and entrusted to the Church (2 Cor 5:17; Lk 22:19–20; *Catechism of the Catholic Church* [*CCC*], 2000, §1210). God's grace is not limited to the sacraments though, for it enables the baptism of desire, which through God's justice and mercy is offered even to unbelievers.

This Christian theological vision of the person (outlined through the premises in sections A.I–III) refers to an ontological, existential, and teleological reality for all temporal human life. The following section addresses metaphysical or ontological, epistemological, and ethical issues in a synthetic approach to the person that is grounded in human experience and reason and that comes from a perspective of Christian philosophy.

[B] *A Christian Philosophical Vision of the Person* that is based on human experience, reason, and Christian philosophical tradition in dialogue with the sciences and other forms of knowledge.

The Person Is …

IV. A PERSONAL UNITY

The spiritual soul, created by God, is the animating principle and substantial form of the living human body (Ps 139:13; *CCC* §§362–68). Because of their body-soul unity, all humans have the capacity for a distinctively human personal consciousness, as different from merely animal consciousness.

1. *Human dignity*. Every living human being has basic dignity and a complete human soul, including human intellectual powers, even if a person is permanently or temporarily not able to express them because of disorders or lack of development (Gen 1:31; *GS* §§14–15).

2. *Body-soul unity as gift of life*. A human person is a complete, wholly unified, living being constituted of a material body and an immaterial, incorruptible, and immortal soul. The body-soul unity constitutes the gift of life that is always dependent on God. Since the person's spiritual intellect subsists in a body, without being reduced to the bodily aspect per se, a person's soul survives the body's death. The human soul is so deeply united to the body that it is considered the substantial form of the body (Gen 1 & 2; *GS* §14; *CCC* §§364–365). The deepest aspect of the person is sometimes called the *soul*, the *spirit*, the *heart*, or the *mind* (Mt 22:37–40; Lk 10:27; Mk 12:30; Deut 6:5).

3. *Either male or female*. Males and females are complementary embodiments of human nature. Sex differences are not mere social conventions. While equal in dignity and worth, and while bearing many characteristics in common, male and female persons are not identical at the levels of the physical body or at the level of mental and emotional life. Their complementarity has a nuptial significance, which is revealed and actualized through a *disinterested gift of self*, typified not only in marital sexual love

but also in celibate forms of self-giving and service to others. Sex differences reach beyond the marital relationship and the home, inasmuch as there are masculine and feminine characteristics that influence behavior in society (Eph 5:28–33).

4. *Natural law and the personalist norm.* The natural (moral) law grounds professional ethics—such as the principles of conscience and responsibility, respect for individual freedom, doing no harm, beneficence, and respect for a person's basic dignity regardless of differences. It also grounds the additional demands of Christian ethics by rooting them in the natural inclinations—such as seeking good and avoiding evil, or loving God and neighbor—which lead to both social justice and worship of God. As expressed in the personalist norm, the person is a self-possessing subject with distinct personal ends and should not be used instrumentally as a mere object or as a mere means to someone else's ends (Mt 7:12). From a philosophical perspective and an experiential basis, natural law is a human, rational participation in the normative dimension of reality, which directs humans to their final end of flourishing through a law written in their inner being. However, it can be difficult to discern the ordering of the natural inclinations and the related principles of the natural law, or the best way to apply them in everyday settings. From a faith-based perspective, natural law is a rational participation in the wisdom and love of God's eternal law (Rom 1:19–20, 2:14–15). Its divine origin is confirmed and its content clarified in divine revelation, for example in the two tablets of the Decalogue, that is, in love of God and love of neighbor as self (Ex 20:1–17; Lev 19:18; Mt 22: 38–39; Rom 13:9). However, sinfulness and the other effects of the fall often hinder knowledge and awareness of the principles of natural moral law and their application.

5. *Multiple capacities.* Animate human nature includes multiple capacities at the organic (vegetative and motoric), cognitive (sensation-perception and reason or rational intellect), and affective (emotion and will or volitional intellect) levels of the person (Lk 10:27).

6. *Organic living beings.* Humans are capable of bodily health and flourishing. They possess a natural inclination to preserve and promote their bodily well-being. Bodily health (at its different levels) is known to influence, without being equated to, overall personal flourishing (Ps 16:9).

7. *Behaviors and actions.* Persons express themselves through behavior and are moved in response to cognitions (pre-rational, intellectual, and intuitive), and affections (emotional, intellectual, and intuitive) regarding things to be sought and avoided (2 Tim 4:7).

8. *Culturally, historically, and ecologically located.* Human beings are situated in history and culture. They shape and are shaped, but not totally determined, by their sociocultural and physical environment (Gal 4:4; Lk 2:1–2).

9. *Wholeness.* A unified notion of the whole person includes a transcendent and personal dimension and recognizes that flourishing (through virtue and vocation) requires an interconnection between the five domains: relationality, sensory-perception (including imagination), emotion, reason, and will (Prov 20:7). This view of wholeness also avoids distorted understandings of the person that develop as a result of individualist, materialistic, reductionist, relativist, determinist, dualist, or behaviorist conceptualizations. All of the identified capacities and qualities of the person work together in a holistic way in the healthy person. To understand and serve persons requires keeping in mind their integrated wholeness.

V. FULFILLED THROUGH VOCATION

Human flourishing also involves a teleological (purposeful) development through three levels of vocation: (a) distinct responses to the call to personal goodness and holiness, (b) different vowed and non-vowed vocational states, and (c) work and service.

1. *Calling or vocation.* In the strict sense, "vocation" means the personal response to the call of goodness and truth that characterizes a person's life globally, but especially through the personal development of the *gift of self*. The basic notion of a calling comes from a source: from the world, a person, or God that attracts as intrinsically good. For example, people report being attracted to a *soul mate*, committing themselves in marriage, and, thus, finding their true calling. The callings are perfective of the human person (Deut 6:18; Mt 19:16–21). (For an explicitly theological treatment of these callings or vocations, see Premise III.6–9, this chapter.)

2. *Calling to goodness.* Through a first type of calling or vocation, each person is attracted to and perfected through existence (being), truth (knowledge), goodness (love), relationship (family, friends, and society), and beauty (integrity, ordering, and clarity). Such goods underlie human experiences of the world, which is, nonetheless, a place not only of wonder and good, but also of fatigue and evil. A fitting human response requires, first, affirming the goodness and beauty that one finds and, then, contributing to the goodness through choices, before experiencing some sense of flourishing in the act. For example, one can choose to be compassionate instead of cruel, to defend the weak instead of taking advantage of their plight, to help families in need, and to enrich human culture.

Such responses to the many faces of goodness contribute to one's both everyday and ultimate flourishing (Mt 5:2–12).

3. *Calling to committed vocational states.* Through a second type of calling, a human being responds to natural and transcendent desires to enter into committed vocational states: (a) to commit oneself to a husband or a wife in order to form a family through the marriage bond; (b) to commit oneself to ultimate goodness in service of God and others through ordained or religious commitments; as well as (c) to seek, in integrity of life, to contribute one's intelligence, goodwill, and resources to others and society as a single person (Gen 2; Eph 5).

4. *Calling to work, service, and meaningful leisure.* Through a third type of calling, a person engages in the diverse kinds of work and service that one must do in order to flourish personally and to contribute to the well-being of other members of one's family, community, and society. For example, people report being attracted to the beauty, purposefulness, and useful nature of work with wood, and commit themselves to learn and practice carpentry in an honest manner, creating goods for others, and, thus, finding meaning in their call to work and service (Gen 2:15; Mt 25:20). Work has great value in itself, but non-work does as well. There is the call to types of leisure, that is, to the meaningful non-work that allows not only rest, exercise, and self-care, but also family, interpersonal relationships, and cultural activities, as well as contemplation of truth and beauty, and finally participation in the worship of God and the life of the Church (Ps 46:10).

VI. FULFILLED IN VIRTUE

Human flourishing involves a teleological (purposeful) development of the person's capacities and relationships, through virtue, vocation, and related practices that aim at the good life. By contrast, much of human languishing and suffering results from experiences of trauma, misdirected choices, unsuitable practices, or damaged relationships, which may often be outside of the person's full responsibility.

1. *Inclined toward flourishing and God.* From a Christian philosophical perspective, every human person, from the first moment of existence, has a capacity to grow toward temporal well-being, moral goodness, and ultimate flourishing. This teleological movement shapes human life from conception until death. The human person has a natural capacity to know that there is an ultimate source and purpose of human life (the creator God); in this way, humans express a natural desire for God (Mt 5:8; Acts 17:27; *GS* §19).

2. ***Natural inclinations.*** Human capacities express basic positive inclinations toward existence (being), truth (knowledge), goodness (love), relationship (family, friends, and society), and beauty (integrity, ordering, and clarity). These natural inclinations are the seeds of the natural human virtues, callings, and flourishing. They are also a basis for recognizing the natural law as a rational participation in eternal law (Rom 1 & 2).

3. ***Development over time.*** The person comes into existence when his or her living body-soul unity comes into existence at conception. The unfolding of the multiple capacities of human nature is subject to development over time through biological growth as well as through family and social experiences, which prepare for growth understood in terms of virtues and vocations. This mature development is manifest in relationships, especially marriage and family, friends and community, work and service, and religion. Through this moral and spiritual development, the person seeks to overcome a divided heart, social discord, and religious indifference (1 Cor 13:11).

4. ***Health and illness.*** Health can be conceived in terms of integral human development. It is a function of the expression, at the proper time and to the proper degree, of bodily, psychological, and spiritual capacities. Illness is a function of some privation or deterioration of the proper fulfillment of one or more of these three capacities (Ps 1:3).

5. ***Virtues.*** Virtues are distinguished by the capacities that they perfect and the ends that they attain. For example, the moral virtue of prudence perfects the human inclination to act in the light of truth and the intellectual capacity to attain reasonable goals through fitting action, as when a mother and father take counsel, make decisions, and act concretely in order to raise their children to be honest and caring. The nature of the person demands that virtues be expansive and interconnected, for example, that prudence also be loving (1 Cor 13:1–3) and that the criteria for justice and mercy be met together.

6. ***Types of virtue.*** Virtues perfect human capacities, as they aim at full flourishing. They are differentiated in three major types. First, theological virtues (faith, hope, and charity or love) are divine gifts that also influence the other virtues (see Premise III.2–4, this chapter), for example, as when theological hope encourages a person's confidence in daily activities. Second, the natural virtues are acquired. These virtues are called cardinal virtues (prudence, justice, courage, and temperance or self-control), which draw together related virtues or character strengths, such as patience and perseverance. Third, the intellectual virtues are theoretical (wisdom, un-

derstanding, and knowledge or science) or practical (art and practical wisdom).

7. ***Connection of the virtues through practices.*** The basic virtues, associated virtues, and practices create the interconnected paths of intellectual, moral, and spiritual development. The virtues are known best in performance. For example, the natural virtue of courage (a basic or cardinal virtue), along with the natural virtues of hope and perseverance (two of its associated virtues) must be formed through particular practices, such as when a person is being trained to experience hope, to practice self control, and to show courage and perseverance when confronted with emergency situations. While each of the virtues primarily perfect one of the human capacities (listed later, in the chapter on virtue), they interrelate in a dynamic connection of intellectual, moral, and theological strengths (1 Cor 13:13; Gal 5:22–26).

8. ***Moral disorder and evil.*** Often people make evil choices as if they were good, because of prior distorted interpretations and actions (defensive interpretations, denials of compromise, rationalization of ideologies, etc.). Because of moral disorders at personal and social levels, humans tend to inordinately seek pleasure, power, and recognition. Distorted emotions, cognitions, or volitions impede flourishing—as when fear results in the failure to act rightly, or when anger blocks true love and justice (Gal 5:19–21).

9. ***Vice.*** The Christian tradition identifies pride as the root of all sin, and the seven capital sins or deadly vices as vanity, envy, hatred (and wrath), sloth, greed, gluttony, and lust. In the face of moral evil and vice, human beings are in need not only of development, but also of healing, forgiveness, and reconciliation at personal, interpersonal, and religious levels (Lk 15; Mt 1:21).

10. ***Prevention.*** Integral human development in virtue helps to prevent and overcome inadequacies in moral judgment such as relativism (the denial of objective truth), emotivism (the construal of ethical judgments as mere expressions of positive or negative emotions about a thing), subjectivism (the affirmation that one's own perception or knowledge is necessarily correct), consequentialism (the determination of goodness by an act's consequences alone, and the denial that any acts are intrinsically evil), and materialism (the reduction of the person to biological determinants, such as genetic and neural processes).

Although the human body and spiritual soul are naturally inseparable and purposeful and always in relationship with other persons, for the sake of analysis we distinguish the following structures or capacities of human nature, which are available to each person in the search for purpose and flourishing.

VII. INTERPERSONALLY RELATIONAL

Humans are naturally social, with inclinations and needs for family, friendship, life in society, and other interpersonal relationships.

1. *Receptive and interpersonal.* Human persons are intrinsically receptive and oriented toward other persons. This orientation is expressed through communicative acts of receiving and giving. Furthermore, social acts serve personal flourishing only inasmuch as they serve the good of other persons and the common good (1 Jn 3:17–18).

2. *Centered in love.* The highest expression of interpersonal communication is the self-giving love that is also known as the virtue of charity (*philia* and *agapē*). While having a unity of purpose, love takes different forms depending on the type of interpersonal relationship at hand. It informs and interconnects all the other virtues, while being served by them as well, especially the virtues that concern relationships, such as justice, religion, chastity, courage, and obedience (1 Jn 4:8) (see Premise XI.3, on the "Types of human love").

3. *Relationship with God.* Humans have a natural desire to know, love, and be united with God, who is not only the creator (first cause) and sustainer (efficient cause) of human life, but also its ultimate end (final cause). It is therefore fitting that human persons enter into religious practices (such as prayer, rituals, scriptural readings and sacraments, and other expressions of faith, hope, and love) in order to worship, respect, and love God (Jn 1:12–13).

4. *Spousal relationships and the spousal meaning of the body.* The natural institution of marriage is built upon the spousal complementarity of the sexes and an attraction to the opposite sex (see Premise IV.3, "Either male or female"). This type of marriage involves a lifelong covenantal commitment and gift of self (union). This love is formalized in monogamous marriage that is open to the gift of new life (procreation) and committed to the goods of family, including the holiness of spouses. In the sacrament of marriage, God provides graces for the spouses to face the challenges of intimacy, fidelity, and family. In response to a call to holiness, some persons commit themselves to celibate spousal relationships with God to love and serve God and his people (Gen 2:18–24).

5. *Family.* Interpersonal relationality is first developed in the family, which is the basic unit of society. Humans have both a natural need for family and natural inclinations to establish families, that is, inclinations toward the goods of marriage and the procreation and education of children (Lk 2:51). All families, regardless of structure, deserve support, including assistance for the difficulties that they face.

6. *Friends.* Human friendship contributes to human fulfillment. It underlies the relationships of affection, companionship, and intimacy that are grounded on a mutual gift of self and a common sharing of the good, in ways other than through sexual love (Jn 15:15).

7. *Communities.* Humans are situated in a community of persons, expressed in sociocultural, civic political, and faith based contexts, all of which shape persons but do not totally determine them. Humans contribute to community by working and expressing responsibility for others. Friendship serves as the bonding force for community (Eph 4:4–13; Ps 122:1–2).

VIII. SENSORY-PERCEPTUAL-COGNITIVE

Each human exercises pre-rational sensory-perceptual-cognitive capacities as a body-soul unity. These pre-rational capacities serve as important foundations for the rational human linguistic, interpersonal, and moral dimensions, and the higher cognitive capacities so central to the unique character of human life.

1. *Receptive to the external world.* The human person receives and seeks basic knowledge of other people, the world, and oneself through instincts, primary senses, and higher-order perceptions and pre-rational and rational cognitions.

   a. The bio-physiological bases for knowledge include instincts, such as visual, tactile, and survival instincts, as well as intrinsic curiosity. In this Meta-Model, these characteristics serve the natural inclinations for goodness and relationship that aim at flourishing.

   b. The five primary senses and their organs or systems provide unique contact with the perceivable world and reality. They are biologically based means of gathering particular information and interpreting stimuli.

   c. Higher-order perceptions and pre-rational cognitions process instincts and the primary senses. The higher-order internal perceptions, along with the simpler sensory perception experience, provide the human person a means to be receptive to objects, persons, and meaning. The higher-order pre-rational perceptions and

cognitions are, however, distinct from and yet contribute to still higher order rational cognition.

2. *The five primary senses.* Traditionally called "external senses," the five primary senses are identified as vision, hearing, smell, taste, and touch. Each of these senses gathers particular information, and together they serve the larger, unique, and active experience of people.

a. *Vision* is the most abstract of these senses. It is prized for the information that it gives of sources of life and danger, and, at higher levels, it is instrumental in the communication of meaning and beauty.

b. *Hearing* adds a greater experience of external reality, especially through its basic role in communication, which it serves, at higher levels, in spoken language and music.

c. The sense of *smell* is a capacity that provides distinct smell of objects and various means for self-preservation (e.g., fire and food) and, at a higher level, it serves the knowledge and memory of others (e.g., scent of cookies and memory of Grandma).

d. The sense of *taste* is useful in determining whether food is good or spoiled. Its pleasure incites people to one of the most necessary human activities, namely, eating, and at a higher level it is an integral part of ritual and celebration.

e. *Touch* and *pain* involve generalized tactile and pain systems. Touch provides the most concrete type of sensory contact with other people and the world. And at a higher level, it mediates the connection and attachment with other people that is necessary for life and flourishing. Pain has great relevance for knowledge of limits and physical survival.

Science provides a rich understanding of the working of these primary senses, their organs, and the neurological systems through which they function. It has also provided further knowledge of related or complementary sensory perceptions and processes, such as the perception of balance and motion, known as the vestibular sense. There is, in addition, a proprioceptive-kinesthetic sensory perception, which gives us an understanding of our body's movement and position and is especially operative in dance and music.

3. *Higher-order perceptions and pre-rational cognitions.* There are, of course, higher levels of knowledge based on the information of sensory-perceptual-cognitive input. Classical realist philosophical sources recognize examples of higher-order, pre-rational types of knowledge or cognition: the synthetic perception of embodied identity, memory,

imagination, and the evaluative sense. In this realist approach, these systems have been called the *internal senses* or *passive intellect*, because they passively receive sense data about particular things and form perceptual judgments that influence sensory affect (emotional reactions) and active intellectual rational and affective processes (e.g., intuition, abstraction, intention, reasoning, and choice).

> a. *Synthetic capacity*. There is the *synthetic perception of identity* or wholeness, that is, the capacity to know oneself, another person, or a thing as a single object of different primary senses, for example, the sight of hair, sound of crying, smell of dampness, and feeling of pressure on your leg all belong to one thing, namely, your child. There is also a related proprioceptive (or kinesthetic) perception of feeling whole and having a sense of the position of one's whole body in space.

> b. *Memory capacity*. There are pre-rational and rational types of *memory*. There are memories based on time, such as immediate, short-term, and long-term memories. There are memories of a different kind, such as episodic memory (autobiographical details) and semantic memory (factual memory). There are also emotional memory (memory of fear based on earlier experiences) and "muscle" memory (memory of how to perform certain acts).

> c. *Imaginative Capacity. Imagination* is the capacity to employ particular images in spontaneous or rational and willfully evoked (negative or positive) ways, for example, in the experience of dreaming, in planning for one's wedding, in the creative flow of a jazz musician, and in a soldier's reaction, evoked by a past trauma, to a loud noise.

> d. *Evaluative capacity.* There is also an *evaluative capacity,* that is, the attractions and repulsions that draw on instinctual reactions, memory of related experiences, and past thoughts and choices, in order to make a type of pre-discursive or pre- rational judgment about what is sensed. This has also been called "gut sense" or "a gut feeling." This sense is also called "particular reason," by philosophers, because it involves the recognition of the meaning of particular things, such as, the immediate reaction to a baby's smile.

4. **Cognitive habitual dispositions.** The plasticity of these perceptual and cognitive capacities allows the development of habitual dispositions, which include memory and the evaluative capacity. The cognitive habitual dispositions activate, organize, and extend the higher-order perceptions and cognitions mentioned above. In particular, sensory-perceptual-

cognitive knowledge is solidified through activity, that is, through behavior that uses sensory-perceptual cognition. This type of disposition formation requires the activation of response systems, as referred to by the ideas of "muscle memory," "practice makes perfect," and "neurons that fire together wire together."

5. ***Basis for active knowledge.*** From a realist perspective, there is a unity and distinction in the types of human knowledge. Human knowledge is rooted in the unity of reality's intelligible order. There are, however, distinct types of knowledge. For example, there are the hierarchically ascending types of sensation, perception, and cognition, which ground still higher mental capacities and action:

   a. *primary sensation* (e.g., the visual cortex's recognition of the contrast of black and white, and of the form of an "A");

   b. *higher-order perception* (recognition of "A" as a letter in the alphabet);

   c. *rational cognition* (reasoning about the meaning of "A" in the context of a narrative, as in *The Scarlet Letter,* where "A" was used as a sign to identify a person as an adulterer);

   d. *spiritual intuition* (understanding of a need for personal forgiveness and interpersonal reconciliation in cases of adultery); and

   e. *practical action* (practical commitment to forgive and to work toward reconciliation in such situations, and to "go, and do not sin again" [Jn 8: 11]).

The more complex and active types of reason are not epiphenomena of the higher-level pre-rational capacities that are of concern here. The higher forms of reason are considered nonmaterial and qualitatively distinct from these lower capacities, as discussed in Chapter 15, on the person as "Rational."

6. ***Active encounter with the world and its conditions.*** Through reflection on sensory perceptions and cognitions, persons gain knowledge of objects to study. Moreover, such perceptions are a basis for the process of metaphysical discovery of the un-sensed conditions or causes of existence, goodness, truth, interpersonal relationality, and beauty. That is, they provide a basis for further rational reflection, and they are needed to know the world and to encounter others, oneself, and God (Rom 1:20).

IX. EMOTIONAL

Human emotional capacities (sensory affect) are significant for personal self-understanding, interpersonal relations, moral action, and spiritual life. Humans are emotional in a unique and personal way because of their body-soul spiritual unity. There are other differences in the emotional life of humans, differences that reflect their being created as man or woman, that are based on biological predispositions, and that are rooted in experience.

1. *Emotionally aware.* In response not only to sensations and perceptions, but also to rational intentions and commitments, humans experience emotional appraisals (initial reactions and responses) and can become aware of their emotions. The emotions are a passageway between the sensations and conscious thought, and they influence both. Although a person is often not initially responsible for the first movements of emotion (such as joy at seeing a friend, anger at being hurt, or sadness at the loss of a loved one), humans can develop enduring emotional dispositions or ways of regulating emotions. On the one hand, emotions can impair the free exercise of reason or will, and emotional dispositions can be harmful and even pathological. Addressing harmful and pathological emotions is an important part of psychotherapy. On the other hand, emotions can be useful and even necessary indicators of personal goods, and important aids in understanding the world and acting morally. For example, sorrow can aid one in becoming contrite, fear can make one attentive to danger, and so on. Furthermore, emotions can be ordered in accord with reason and vocations, and with the flourishing of the person and others.

2. *Emotions are inherently good.* Emotional capacities are inherently good. Nonetheless, particular emotions can strengthen or can harm a person—they can aid in flourishing or lead to languishing. In terms of morality, depending on the way they relate to love, reason, choice, truth, and flourishing of self and others, emotions can become good or evil. They are a basic human capacity that opens a way to understand other people, the world, and oneself. There are two types of emotion. First, there are sensory-perceptual, pre-rational judgments or automatic reactions (first movements). These emotions are neither good nor evil. Second, there are the emotions that are attributable to the effects of rational choices (volitional stimuli), social interactions, and spiritual conditions, or reactions to other emotions (second movements). These emotions (at the level of action and disposition) can become good or evil, that is, they can lead to flourishing or languishing through choices. There are different sensory-perceptual-cognitive affects (as distinct from the will), including

emotions or feelings, moods, sentiments, and temperaments. They are rooted in the biopsychosocial and spiritual experience of the person.

3. ***Emotions influence intellectual and spiritual capacities.*** Emotions have an influence on intellectual and spiritual capacities either positively and negatively; for example, positively when righteous anger aids one to act justly, or negatively when a strong reaction of anger in the face of an injustice blinds a person to his rational and charitable commitments and prevents him from seeing the person who committed the injustice and the conditions that may have made the injustice less than fully voluntary.

4. ***Intellectual and spiritual capacities influence emotions.*** Emotions are influenced by intellectual judgments and spiritual commitments. Emotions are created or refined, for example, when a reasonable decision to right a wrong gives rise to righteous anger, which motivates the person to be attentive to the injustice, to face opposition courageously, and to persevere to the end (Mk 7:11).

5. ***Social influence on emotions.*** Emotions have an interpersonal and cultural context. Emotions are influenced by other people and by groups, both in the present and from early experience. For example, a person's emotional life is influenced by experiences with spouses, parents, family, friends, colleagues, political settings, and religious communities, and, of course, in our model, by grace. Furthermore, an individual does not only depend upon the emotional balancing that comes through social networks, an individual also aids others to regulate their commitments and choices. This two-way street of regulating emotions requires that individuals and groups seek to understand emotion and to employ it for the good of themselves and others.

6. ***Emotion-based virtues.*** A person may develop habitual dispositions (virtues) that help to regulate emotions in seeking the good. Distinctions are made among the other virtues, that is, cognitive-based (practical reason) and will-based (hope, charity, and justice) virtues. The primarily emotion-based virtues aim at integrating the person by using reason, will, and interpersonal commitments. Recognition of the plasticity of emotions, of their capacity to be involved in habitual dispositions and to be influenced by reason and will, underlies the conviction that emotional capacities can be formed into moral virtues. The characteristics of emotion outline the emotion-based virtues (e.g., as acts, as dispositions to act, as reasons to act, and in the transcendent dimension of acts). Emotion-based virtues include courage, patience, righteous anger, perseverance, hope, and self-control. Emotion-based vices include cowardice, impatience, destructive anger, indifference, despair, and indulgence (Jn 2:15 & 11:35).

7. ***Significance of emotions in moral action.*** Emotion is necessary but not sufficient for moral action. Well-regulated emotions, along with the contributions of reason, volition, and other people, are necessary for virtuous moral action. Emotions make one aware of important goods, values, and goals. They motivate one to attend to moral choices and to realize them. They contribute to development and healing by connecting basic essential capacities and by linking us interpersonally. They constitute a part of everyday flourishing and a foretaste of divine beatitude. Well-ordered emotions, moreover, serve as a contrast and corrective to tendencies toward vices, such as pride, greed, adultery, presumption, fearfulness, or impatience. Disordered emotions play different roles in immoral action or in blocking moral acts. They blind or distort one's vision of the truth of what is good, for example, through self-serving bias and rationalizations. They make concentrating on the purpose and fulfillment of virtuous moral action more difficult. They tend to distract a person from the moral and spiritual goals that form the call to goodness, life commitments, and work.

8. ***Unity yet distinction of affect (emotion and will).*** Human affect is understood in the philosophical tradition as involving both emotional affect and volitional affect. Sensory affect (emotion) is the type of attraction mediated by sensory-perceptual experience, for example, when we feel hope of attaining a distant and difficult good, such as the hope of finding a meal in the midst of a famine. Intellectual affect (will or volition) is the type of attraction mediated by reason, as when we choose a good means to a good end proposed by reason, such as a truly good and satisfying solution to a troubling family conflict. As sensate and intellectual capacities respectively, emotion and will express different dimensions of affect, for example, the distinction between love (as emotion) and charity (as willed). (This distinction is discussed further in Premise XI, on the human person as volitional and free.)

9. ***Religious or spiritual emotion.*** There is a special type of emotion found in spiritual emotion. Since the theological virtues, such as charity, are rooted in the whole person, religious emotion overflows from the transcendent life of grace. God's gift of grace informs and perfects nature, and, in this case, it informs the nature of emotions. People feel confident, encouraged, and attached in the midst of experiences of faith, hope, and charity for God, neighbor, and self. However, the volitional motivation and commitment of charity influences the emotion of love without being reduced to it. Charity does not always accompany feelings of tenderness or bonding, nor do tender feelings necessarily come with charity. Nonetheless, a firm commitment of charity helps to mediate both everyday and religious experiences of emotion.

X. RATIONAL

Human persons are intelligent and actively seek truth and freedom. In being rational, they have different levels and types of intelligence and knowledge. They express rationality in language, often in a narrative form.

1. *Rational inclinations.* Humans have rational inclinations to seek and know the truth and to find flourishing (Jn 8:31–32).

2. *Objects of knowledge.* Humans are capable of knowing (a) themselves, others, and God (Rom 1:19–20); (b) the created order (Ps 8:6–7); (c) truth, including divinely revealed truth (Lk 8:10); (d) the beauty of all creation and of God (Ps 8:1–2); and (e) good and evil, and that good is to be done and pursued and evil avoided (Jn 14:15).

3. *Sense and intellectual knowledge.* Human knowledge is sensory (including instinct), perceptual, cognitive, and intellectual, the last of which can be intuitive (e.g., insight), discursive (e.g., reasoning), and infused (or graced). Self-knowledge and knowledge of the world are supported by bottom-up and top-down influences, which can come even from sources that are originally non-conscious. Examples of non-conscious bottom-up influences are natural inclinations to family involving instincts (e.g., the sexual urge) and other non-conscious cognitive schemas and defenses concerning family life. Examples of non-conscious top-down influences are of two sorts. One involves the natural top-down influences such as the spiritual inclination to know the truth, which is made conscious, for example, in the intellectual intuitions about good and evil that ground moral decisions. The other involves top-down influences of grace, such as intuitions (e.g., about divine mercy that affect one's being merciful) and other movements of grace (e.g., inspiration that supports the giving of good counsel) (Lk 1:77–78).

4. *Types of belief.* Belief, in general, requires the witness of a trusted authority. It involves assent, choice, or judgment that first arises from cognitive (sensory-perception or thought) or affective (emotion or will) engagement with a trusted source. On the one hand, an everyday belief requires some intelligible object (e.g., a friend saying: "I am suffering") and an affirmation concerning the authority found in oneself or the other person (e.g., I have confidence in my friend). On the other hand, religious belief or faith is directly a gift of grace that entails that we ponder with assent God and his authority (and related intelligible objects, such as the propositions that Jesus of Nazareth is the Christ and head of his Body the Church, and that the human person is created in the image of God).

Religious faith is communicated indirectly through witnesses (e.g., Sacred Scripture and tradition) (2 Cor 5:7).

5. ***Self-knowledge and self-control.*** Through a realist knowledge of oneself and the world, human persons can knowingly choose to influence their emotions indirectly and their behavior directly. The aim of developing rational beliefs and virtues is to aid the person in making free choices that contribute to their flourishing (Eph 5:8–9).

6. ***Rational virtues and natural law.*** Rational inclinations can be further developed in knowledge, beliefs, and enduring dispositions of mind called intellectual virtues, at theoretical and practical levels (wisdom, understanding, and knowledge or science). On the moral side, right practical reason, concerning self and others, is manifested through the cardinal virtue of prudence and its associated virtues, which aid in discerning and counseling, adjudicating, and performing moral action. Moral norms guide human judgment (conscience) and action in accordance with good and away from evil. These norms are rooted in the natural law and divine law (Jn 14:26; Rom 2:15).

7. ***Beauty.*** Humans are aesthetic and seek beauty. They are drawn to the deeper levels of beauty, as found in beautiful persons, nature, actions, or things, through the classical properties of luminosity, harmony, and integrity. Beauty has these qualities, and they are expressed in culture, creation, and God. The experience of beauty also elicits a thirst to contemplate the ultimate source of beauty (Ps 27:4).

XI. VOLITIONAL AND FREE

Humans are the subject of moral action, capable of responsible volition and free choice.

1. ***Responsibility.*** To a large degree, human persons are capable of responsibility for their own actions concerning themselves and in regard to others (Jn 8:10–11).

2. ***Self-determination.*** They can act so as to shape their moral characters, that is, the enduring dispositions of their minds, wills, and affect (Rom 12:2).

3. ***Types of human love.*** They are capable of loving natural and divine goods and persons. Although exhibiting a basic common structure, human love is manifest distinctly in affection (*storgē*), friendship (*philia*), romance, courtship, and marriage (*eros*), and the virtue of charity (*agapē*), which can purify and rightly order all the other loves (1 Cor 13:4–13).

4. *Creativity.* Like God (by analogy), humans are able to conceive of and deliberately bring into existence things that once were not, although not from nothing, that is, not *ex nihilo* (Gen 2:15). For example, we find human creativity in the procreation of and caring for children, the making of art and literature, and the development of knowledge, science, and technology.

5. *Limitation.* There are two types of limitation. First, humans are naturally very limited in the number and quality of our interpersonal relations. Our bodies are quite limited, our rational capacities are prone to error, and our will is often weak. We are greatly limited in time. Second, we experience moral and spiritual limitations due to original, social, and personal sin (Rom 7:19).

6. *Volitional inclinations.* Human persons have natural volitional tendencies or inclinations to actualize diverse human goods and, through grace and faith, divine goods. Even in the midst of the challenges of negative influences of family, friends, and society, humans have a natural tendency toward virtues related to love and justice (Mt 6:19–21).

7. *Capacity for growth in freedom.* The human capacity for freedom can be developed in two ways. The *freedom for excellence* and flourishing involves growth in the human capacities to know truth and reality, to choose good, and to avoid evil, and ultimately to love God and neighbor. Freedom for excellence is intimately linked to truth and cannot be reduced simply to the second type of freedom, which involves attaining *freedom from* things that limit our human capacities, such as psychological disorders, or from outside influences (e.g., unjust laws, poverty). Freedom develops over time and, obviously, has certain limits. It requires both growth and healing as found in the intellectual and moral virtues, especially justice, self-control, courage, and forgiveness, as well as in the theological virtues, especially faith, hope, and charity. True freedom, therefore, is an expression of the whole person (Phil 4:8–9).

[C] *A Psychological Vision of the Person* that is consistent with the theological and philosophical premises of the Catholic Christian Meta-Model of the Person (CCMMP).

The following eleven psychological premises represent a psychological understanding of the person consistent with the theological and philosophical premises of the CCMMP and with the psychological sciences. They serve as an outline that will be augmented with sub-premises that further elucidate the Meta-Model's the-

oretical and clinical implications for psychology and counseling. Together with the CCMMP's theological and philosophical premises, they deepen and help fill out our understanding of the person, for use in mental health practice. (In parentheses is found the name of the corresponding theological and philosophical premise.)

I. The person has an essential core of goodness, dignity, and value and seeks flourishing of self and others. This dignity and value is independent of age or any ability. Such a core of goodness is foundational for a person to value life, develop morally, and to flourish. (Created)

II. The person commonly experiences types of pain, suffering, anxiety, depression, or other disorders in his or her human capacities and interpersonal relationships. The person is also distressed or injured by natural causes and by others' harmful behavior. People have varying levels of conscious and nonconscious distorted experience, which express that they do not respect and love themselves or others as they should. Moreover, they often do not live according to many of their basic values. (Fallen)

III. The person, with the help of others, can find support and healing, correct harmful behaviors, and find meaning through reason and transcendence, all of which bring about personal and interpersonal flourishing. In short, there is a basis for hoping for positive change in a person's life. (Redeemed)

IV. Each human being is a body-soul unified whole with a unique personal identity that develops over time in a sociocultural context. This unity pertains to the person's whole experience. For instance, physical abuse affects the person's bodily, psychological, and spiritual life. (A Personal Unity)

V. The person flourishes by discerning, responding to, and balancing three callings: (a) called as a person to live a value-guided life while focusing on love and transcendent goals; (b) called to live out vocational commitments to others, such as being single, married, or having a distinct religious calling; and (c) called to participate in socially meaningful work, service, and leisure. (Fulfilled Through Vocation)

VI. The person is fulfilled and serves others through the ongoing development of virtue strengths, moral character, and spiritual maturity, including growth in cognitive, volitional, emotional, and relational capacities. Through effort and practice, the person achieves virtues that allow the attainment of goals and flourishing. For example, a father or a mother who develops patience, justice, forgiveness, and hopefulness is better able to flourish as a parent. (Fulfilled in Virtue)

VII. The person is intrinsically interpersonal and formed throughout life by relationships, such as those experienced with family members, romantic partners, friends, co-workers and colleagues, communities, and society. (Interpersonally Relational)

VIII. The person is in sensory-perceptual-cognitive interaction with external reality and has the use of related capacities, such as imagination and memory. Such capacities underlie many of our skills, allowing us to recognize other people, communicate with them, set goals, heal memories, and appreciate beauty. (Sensory-Perceptual-Cognitive)

IX. The person has the capacity for emotion. Emotions, which involve feelings, sensory and physiological responses, and tendencies to respond (conscious or not), provide the person with knowledge of external reality, others, and self. The excess and deficit of certain emotions are important indicators of pathology, while emotional balance is commonly a sign of health. For example, when balanced, the human capacity for empathy can bring about healing for self and others, while a deficit or excess produces indifference or burnout. (Emotional)

X. The person has a rational capacity. This capacity involves reason, self-consciousness, language, and sophisticated cognitive capacities, expressing multiple types of intelligence. These rational capacities can be used to facilitate psychological healing and flourishing by seeking truth about self, others, the external world, and transcendent meaning. (Rational)

XI. The person has a will that is free, in important ways, and is an agent with moral responsibility when free will is exercised. For instance, the human being has the capacity to freely give or withhold forgiveness and to be altruistic or selfish. Increases in freedom from pathology and in freedom to pursue positive life goals and honor commitments are significant for healing and flourishing. (Volitional and Free)