



# Chapter 1

## Biopsychosocial Model

**Simon George Taukeni**

 <https://orcid.org/0000-0003-0170-7238>  
*University of Namibia, Namibia*

**Joyce Mathwasa**

 <https://orcid.org/0000-0003-4289-8843>  
*Fort Hare University, South Africa*

**Zoleka Ntshuntshe**

*Sol Plaatje University, South Africa*

### ABSTRACT

*The emphasis in health psychology is to persuade people using diverse approaches to embrace health promotion, maintenance, and illness prevention. Health psychology studies how biological, psychological, and social factors influence people's attitudes toward their health. This chapter aims to investigate potential contributory relationships between bio-psychosocial factors and population health. The book delves into the bio-psychosocial model, which can assist individuals in developing and maintaining healthy lifestyles in order to promote good health and prevent illness. It endeavours to accelerate the integration of biopsychosocial model in public health systems and healthcare facilities in the context of biological, psychological, and social factors to promote better health and prevent illnesses at a population level. A desk research was adopted to come with relevant literature at the same time adhering to the ethics code. The BPS model is recommended for its robust holistic focus on the person rather than just their infirmity.*

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## **INTRODUCTION**

This chapter endeavors to elucidate the significance of the biopsychosocial (BPS) model of health and medication exploring the way in which three factors; biological, psychological, and social intermingle in relation to healthiness or illness. The BPS model emphasizes how these factors are interdependent and their responsibility for the progression of diseases to develop comprehensive prevention and intervention measures. When employed in health, this model explains the significance of preserving health in all facets of people's lives. Furthermore, the emphasis is on the inextricable relationship of the three factors. When one or more of the threesome is distressed, there could be instant and often negative consequences for the others (Hardie, 2021). It is critical to raise awareness in order to accelerate the use of the biopsychosocial model, which focuses on the individual as a whole rather than just the disease or illness.

Despite acknowledging significant innovations in medicine, Engel contests the biopsychosocial model by citing its limitations and insufficiencies on the various facets of medical science and healthcare. Such limitations were found to be extensive, as well as failing to consider the following: the individual who has the disease, the individual's experience with, explanation of, and the attitude concerning the ailment; whether the individual or others actually see the disorder as an ailment; maintenance of the patient as an individual; for some diseases, like schizophrenia and diabetes, the consequence of dwelling environments on onset, presentation, and course; and eventually, the health care system itself (Varela, Thompson & Rosch, 1991 pp. 131–135). This book has been compiled by health care professionals who have embraced the BPS model in their day-to-day operation.

## **BACKGROUND**

Public health is largely assumed to be concerned with populace health instead of personal health, and takes a populace health tactic that recognises behavioural, genetic and socioeconomic issues that influence health and well-being (Levesque, Bergeron & Roy, 2013). There has been a noticeable shift towards understanding health from a holistic standpoint of the health of the public contributing to population health (Scutchfield & Ingram, 2013). In 1977 George Engel and John Romano created the BPS aiming to holistically shed light on human health and illness (Engel, 1977: Frankel, Quill & McDaniel, 2003). Engel (1977) proposed that the biomedical model presumed that every incidence of disease was a result of a divergence of biological molecules inside a person's body. As the biomedical model suggests, an individual

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