

The Concise Term (Again!) As One Way To View The Domain (Mvo-p Psych)

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It's now:

functionalstructuralinguisticdialogicbiologicalmolecularcomputing-combinatorialandprincipleunfoldinginterconnectedrelationalactionmemes-philosophicalspiritualreligiouspsychologicalspeculativeonhowwethinkandwhyandact-thereflexiveandtheeverydayandresourceinbodyandmind-thementalstatesemotivestatesintentionalstatesphysicalstates-easeilluminationdifficultyproblematicorneutralorareasofcombination-thethreenensensationperceptionsynthesisreason-thesixsensegroundseyeearnosetonguebodymind-thematterfeelingthinkingenactionconsciousnessandtheimmaterial-andthementalexistentialsocialsocietalexperientialphysical-there reliablefactsreasontheexternalworldthepresentmomentandrealitythisworldseeminglysimilar toGod-whenweseethefusionoftheabstractandtheconcreteweseetherealworld-thetenqualitiesformnatureembodimentpowerfunctionlatentcauseexternalcauselatenteffectmanifesteffectthetotalinseparabilityofthese-actionquietudedynamicismtranquilitydisciplinetrainingintegrationdifferentiation-functionasallfunctionsprajna-worldspacebeingsneitherbeingnornonbeingnondual

This is 170 words, in the mvo-p concise term. (This was my idea, upon scrutinizing the term 'psychobiosocial'. That term can be used well, and in dimension form. It should be picked up and dimensioned out, as a step – and if psychiatry had done this in 1977 when Engel proposed the term, psychiatry would be an entirely different field, and the psych unit an entirely different place.)

My mvo-p concise term provides a more totality, profound, and expansive grounds to work with, I feel, and may yield more tractable material for both the professional and the individual – and others. It's also applicable, perhaps, to any number of individuals, in the mvo-p way. It can be studied by the professional and individual, and used as a model, with the term and subterms pointing to the actual – the fusion of the abstract and the concrete, just the real world.

Enthusiasm! I hope you can get the sense from some of my papers and my concise term here: psych unit psychiatry and psychiatry writ large could be so much – significant in dimension, vocabulary, logic, reason, realism, explanation, description, and the participant. Mvo-p psych.

Personal, interpersonal, world-space, and societal!

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Spelled Out

functional, structural, linguistic, dialogic, biological, molecular computing (8)
combinatorial and principle unfolding interconnected relational action-memes (8)
philosophical, spiritual, religious, psychological, speculative on how we think and why and act (13)
the reflective and the everyday, and resource in body and mind (11)
the mental states, emotive states, intentional states, physical states (9)
ease, illumination, difficulty, problematics, or neutral, or areas of combination (10)
the three nen: sensation → perception → synthesis/reason (7)
the six sense grounds: eye, ear, nose, tongue, body, mind (10)
then: matter, feeling, thinking, enaction, consciousness, and the immaterial (9)
and: the mental, existential, social, societal, experiential, physical (8)
the reliable facts: reason, the external world, the present moment, and reality – this world – seemingly similar to God (18)
when we see the fusion of the abstract and the concrete we see the real world (16)
the ten qualities: form, nature, embodiment, power, function, latent cause, external cause, latent effect, manifest effect, the total inseparability of these (21)
action, quietude, dynamicism, tranquility, discipline, training, integration, differentiation (9)
function as all functions, prajna (5)
world-space, beings, neither being nor non-being, nondual (8)

(Numbers denote word count.)

Endnote – Psych Unit Psychiatry, ‘All Of The Above’, And Society

Psychiatrists in psych units, I’ve found, typically omit all of this from their theory and praxis, with respect to the individual and in their usual lack of dialogue at all with the individual – and all the time per the situation. Perhaps this or that psych unit and their psychiatry is different, but this omission seems to be the professional standard and training – and ethic, level of insight, and lack of dimensional awareness.

I have a significant statistical sample, and I’ve been motivated and either routine ethics, or a deeper sense to ethics, ethics which I’ve taken even deeper, in penetrating Zen Buddhism. So – entirely approachable, and always looking for real, tractable material. With exception (one psych unit psychiatrist at the first psych unit and excellent classes with superb psych techs at another psych unit), I did not find this. One other psychiatrist was pretty good, and did the best she could; and yet a third was what I termed ‘modus determinative’, although he had flawed theory (the standard mainstream psychiatric model); otherwise, the psychiatry was dismal.

If psych unit psychiatry and psychiatry writ large would bring such an ‘all of the above’ mvo-p concise term forward, with respect to society, it could offer so much. And this would appeal to thought and praxis both ancient and modern. The concise term represents dimension. Features of insight, at-ease, and the problematic could be set in this framework. The situation is just an unfolding world-space. The idea is deeper modes of treatment; acknowledgment of explanation, description, and ‘what’s

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there'; part and full justification and acknowledgment of actual merit and demerit for the various parties including sometimes the individual and/or person A, person B, person C; possibilities and paths to resolution and beyond; and more just outcomes. And: reason, mind, and truth 'on the table'. Then: with 'all of the above', deep connection with society. Mvo-p psych.

Endnote – Psychiatry's Term

Psychiatry's term is biogenetics, and their paradigm is the disorders paradigm – the individual is described solely in terms of mental or behavioral disorders from the profession's official DSM (Diagnostic And Statistical Manual Of Mental Disorders). That is their worldview. It is how they interpret and describe and talk about things, and it is how they are trained. It is what makes it into their notes. The result is meds only, for a lifetime, sans all else – and sans any of 'all of the above' (from my MVO: 2019 Thesis). (Sometimes the private-practice, independent, intelligent, and aware psychiatrist will have practical advice and insight, to go along with meds, and may not even see meds as the defining and only answer, or even applicable. But not so in the psych unit.)

(It occurs to me that one could do a decision-map that psychiatrists go through in assessing, talking about, deciding, and developing records about an individual encountered and the situation – and that one could develop a wall-sized PDF of what is excluded, around and by these assessment, description, and decision nodes and paths so indicated. Psychiatrists have a worldview, and psychiatry has a logic and is a philosophy – a logic of biogenetics and the social, meaning, and medical treatment of the individual, and a philosophy ultimately of the human and human thought and action – and excludes and tries to preempt all even discussion of the applicability of all other philosophy, and then religion, spirituality, psychology, narrative, art, culture, mind studies, the everyday, the practical, the dialogic, meaning, even language itself, and often the actual, up to and including the domains of life: the mental, the existential, the social, the societal, the experiential, the physical. It would negate a-priori all other thought and praxis from the the ancients to modern times. It never talks about this, but has decided 'stare decisis' and acts thus.)

Endnote – Influence

The concise term is in part infused by my own working-with in Zen Buddhism, in part from Marvin Minsky's books *The Society Of Mind* and *The Emotion Machine*, in part from my own observations and thinking, and in part from some molecular computing, mathematics, and physics.

Related Papers

- [Introduction To Mvo-p And My MVO: 2019 Thesis](#)
- [‘All Of The Above’](#)
- [My Notes On The Psychobiosocial States In Physical Education Article In Frontiers In Psychology \(And Extrapolation\)](#) (See this for a positive, dimension use-case of the term psychobiosocial, and critique of psych unit psychiatry, and what it could tap into.)