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# Is Psychological Science Serving More Health or Control?

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## ABSTRACT

This editorial highlights a modern paradox: insights from psychology and behavioral economics—originally developed to improve health—are now widely deployed in political campaigns, corporate advertising, and digital governance to steer choices, exploit cognitive shortcuts, and amplify compulsive engagement. It frames psychology as a double-edged sword in public health, noting strong evidence that psychological well-being protects physical health and that behavioral science can help populations make better choices. Yet, while "attention merchants" aggressively leverage these tools, public health systems underutilize proven approaches at scale. The result is an anxious, hyper-competitive environment shaped by status anxiety and hedonic adaptation, sustaining addictive consumption and emotional volatility. Ironically, the knowledge to counter these dynamics already exists—from "nudges" that structure healthier defaults to psychological levers that improve treatment adherence. Amid escalating threats—including climate instability, geopolitical risk, economic precarity, and the rapid advance of AI—the piece urges humanizing health and informatics systems and deploying transparent, population-level behavioral interventions that restore autonomy and well-being.

**Keywords:** behavioral economics, public health, cognitive manipulation, psychological well-being.

The modern age presents us with a profound and deeply frustrating paradox. Psychology, particularly the rigorous insights drawn from behavioral economics and cognitive science, represents one of humanity's most powerful tools for understanding and improving life and health. Much of this knowledge, from the mechanics of motivation to the architecture of decision-making, was painstakingly developed within the health system to foster well-being. This paradox becomes apparent when we consider how behavioral insights are increasingly harnessed beyond the clinical sphere within the relentless architecture of marketing control's instrumental rationality. Political campaigns, corporate advertising, and digital governance mechanisms have become major arenas for applied behavioral science. They expertly exploit cognitive shortcuts and biases to fuel consumption, partisan allegiance, and compulsive engagement.

At its heart, psychology is a double-edged sword in public health: does it truly help us live healthier lives, or is it just a clever way to control our choices? This tension is a huge ethical debate (Zimmerman, 2017). On the positive side, it is the foundation of modern health efforts (Sharby, 2005). It teaches us that feeling good mentally—what researchers call Psychological Well-being (PWB)—actually protects us physically, lowering our risk of illness or death (Trudel-Fitzgerald, 2019). Psychologists provide the tools and strategies to address significant problems such as stress, mental illnesses, and health behaviors, helping entire populations make better choices and improve overall health (Sharby, 2005).

However, in practice, this knowledge often finds itself caught in a situation aptly captured by an ancient Persian proverb: "The potter drinks water from a broken pot." The public health system, which must wield psychology for the collective good, is largely failing to do so at the scale demanded by our current global crises. At the same time, free trade and attention merchants push people into consumerism through all the psychological tricks, regardless of their sustainable well-being.

The instrumental manipulation of cognition creates an environment saturated with anxiety. As Vlaev (2019) notes, much of our modern dissatisfaction is rooted in status anxiety and hedonic adaptation, amplified by hyper-competitive digital ecosystems. This environment sustains the very behavioral cycles that psychology once sought to overcome—driving individuals toward addictive consumption and emotional volatility. What is our actual share and benefit from the knowledge of belief and behavior change in the health system, compared to unscrupulous profiteers who are uncommitted to health?

This instrumental turn comes at a high cost: the neglect of genuine innovation in public health. The irony is heartbreaking—the knowledge required to counter these forces and to foster sustained, healthy behavioral change is already available. We know how to "nudge" people toward better choices by shaping their environments (Thaler & Sunstein, 2003). We understand the psychological levers that enhance adherence to life-saving treatments (Loewenstein, 2007).

Nevertheless, the scale of our response remains tragically inadequate. We are living through an era of accelerating existential threats: climate collapse, geopolitical instability, economic precarity, and the disorienting pace of the transition to artificial intelligence. These factors compound already rising mental health burdens worldwide. As historian Yuval Noah Harari (2018) argues, the ultimate threat of our time is not physical destruction but the "hacking of human beings"—the manipulation of our deepest feelings and choices by forces outside the health sector. Without humanizing health and informatics systems, this unprecedented intrusion produces a crisis of meaning and anxiety.

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