


Theories of Human Behavior and Health

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Introduction


In the field of behavior change, theoretical frameworks are increasingly being recognized and used by practitioners as a means of informing, developing and evaluating interventions designed to influence behavior. Such theories of behavior provide an integrated summary of constructs, procedures and methods for understanding behavior, and present an explicit account of the hypothesized relationships or causal pathways that influence behavior



Theories of behavior can be classified under various different headings based on considerations such as what are the key determinants contained in the model (e.g., values, attitudes, self-efficacy, habits, emotions), the scale at which the model can be applied (e.g., individual versus organizational/societal), or whether it focuses on understanding or changing behavior

1. Health promotion Model

The health promotion model (HPM) proposed by Nola J Pender was designed to be a “complementary counterpart to models of health protection.”

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- It defines health as "a positive dynamic state not merely the absence of disease".
 - Health promotion is directed at increasing a client's level of well-being.
 - The health promotion model describes the multi-dimensional nature of persons as they interact within their environment to health monitoring.

2. Transtheoretical model

- Instead of viewing behavior change as a dichotomous “on-off switch” or an “event” that happens quickly when motivation strikes, stage theories emphasize a temporal dimension and assume that change involves a transition through a set of discrete stages.


- While different stage theories describe different numbers and categories of individual stages, they all follow a similar pattern that starts with a pre-contemplation stage, moves through a motivation stage, and comes to fruition with the initiation and maintenance of a recommended behavior. Within these models, it is implied that different cognitive factors are important at different stages, and that these subsequently become the foci in stage-matched interventions that are designed to transition people from one stage to the next.

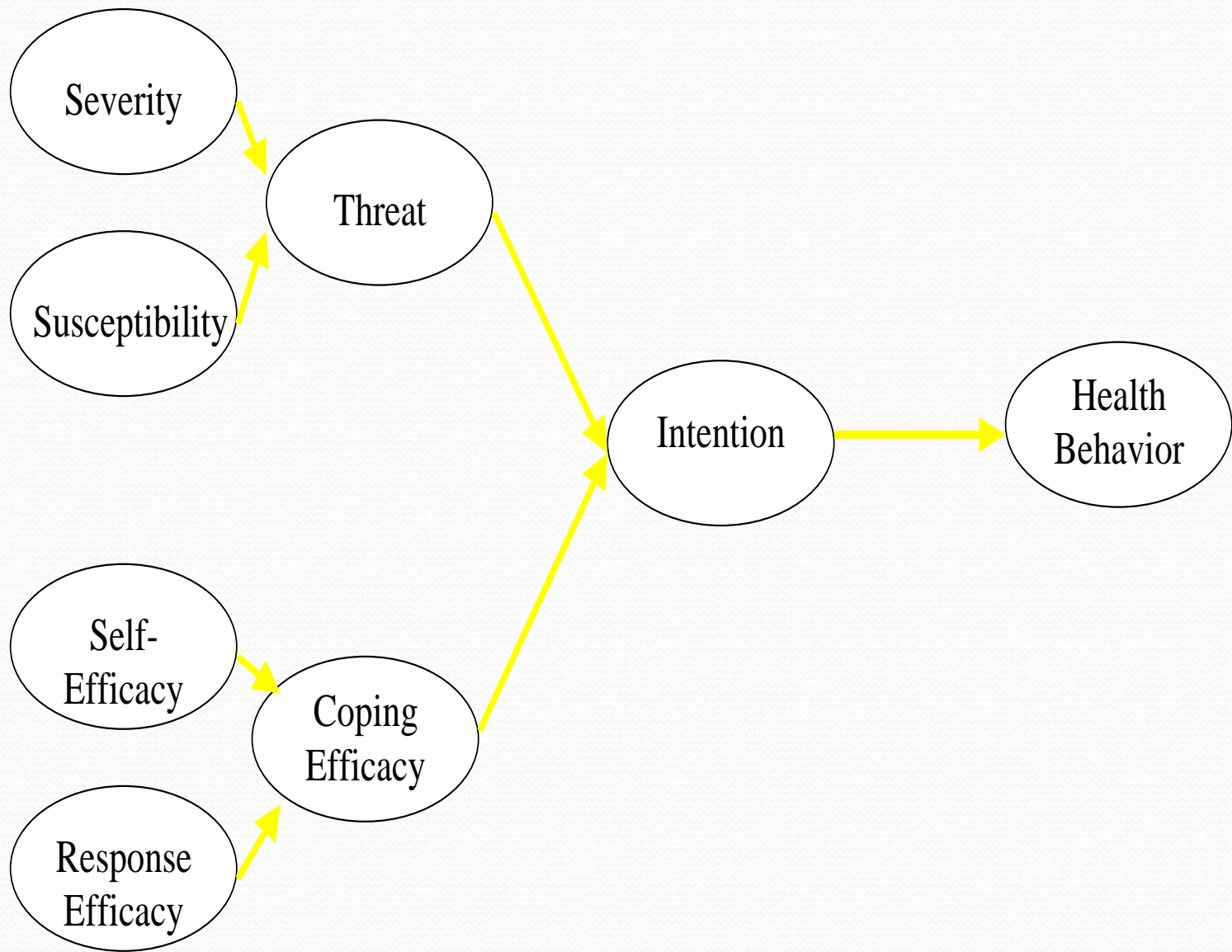
Stages of change in the Transtheoretical model

Stage of change	Description
<i>Precontemplation</i>	The individual has no intention to take action within the next 6 months and is generally unaware or under-aware of the problem.
<i>Contemplation</i>	The individual intends to take action within the next 6 months. He or she is aware that a problem exists but has not yet made a commitment to take action
<i>Preparation</i>	The individual intends to take action within the next 30 days and has taken some behavioural steps in this direction
<i>Action</i>	The individual changes his or her overt behaviour for less than 6 months
<i>Maintenance</i>	The individual changes his or her overt behaviour for more than 6 months and works to prevent relapse and consolidate the gains attained
<i>Termination</i>	The individual has no temptation to relapse and has 100% confidence in maintaining the change

3. Protection Motivation Theory


- Is one of the theories adopted and applied behavior change in health promotion depend on the four components:
 - 1) perceived susceptibility
 - 2) perceived severity
 - 3) Self-efficacy
 - 4) Response efficacy

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- Susceptibility and severity are considered “perceived threat”
 - Response efficacy and self-efficacy are considered “coping efficacy”



4. The Theory of Planned Behavior


The theory was intended to explain all behaviors over which people have the ability to exert self-control. The key component to this model is behavioral intent; behavioral intentions are influenced by the attitude about the likelihood that the behavior will have the expected outcome and the subjective evaluation of the risks and benefits of that outcome.




The TPB has been used successfully to predict and explain a wide range of health behaviors and intentions including smoking, drinking, health services utilization, breastfeeding, and substance use, among others. The TPB states that behavioral achievement depends on both motivation (intention) and ability (behavioral control). It distinguishes between three types of beliefs - behavioral, normative, and control. The TPB is comprised of six constructs that collectively represent a person's actual control over the behavior.

5. Social cognitive theory

The Social Cognitive Theory is relevant to health communication. First, the theory deals with cognitive, emotional aspects and aspects of behavior for understanding behavioral change. Second, the concepts of the SCT provide ways for new behavioral research in health education. Finally, ideas for other theoretical areas such as psychology are welcome to provide new insights and understanding.



The social cognitive theory explains how people acquire and maintain certain behavioral patterns, while also providing the basis for intervention strategies. Evaluating behavioral change depends on the factors environment, people and behavior. SCT provides a framework for designing, implementing and evaluating programs. The three factors environment, people and behavior are constantly influencing each other.



Behavior is not simply the result of the environment and the person, just as the environment is not simply the result of the person and behavior. The environment provides models for behavior. *Observational learning* occurs when a person watches the actions of another person and the reinforcements that the person receives. The concept of behavior can be viewed in many ways. *Behavioral capability* means that if a person is to perform a behavior he must know what the behavior is and have the skills to perform it.



Thank you for listening