



건강증진관련 이론 1

Historical Origins of the Model

- Lewin's Field Theory (1935)
 - Introduced the concept of barriers to and facilitators of behavior change
- U.S. Public Health Service (1950's)
 - Group of social psychologists trying to explain why people did not participate in prevention and screening programs.
 - Two major influences from learning theory:
 - Stimulus Response Theory
 - Cognitive Theory

Stimulus Response Theory

- Learning results from events which reduce the psychological drives that cause behavior (reinforcers)
- In other words, we learn to enact new behaviors, change existing behaviors, and reduce or eliminate behaviors because of the consequences of our actions.
- Reinforcers, punishments, rewards

Cognitive Theory

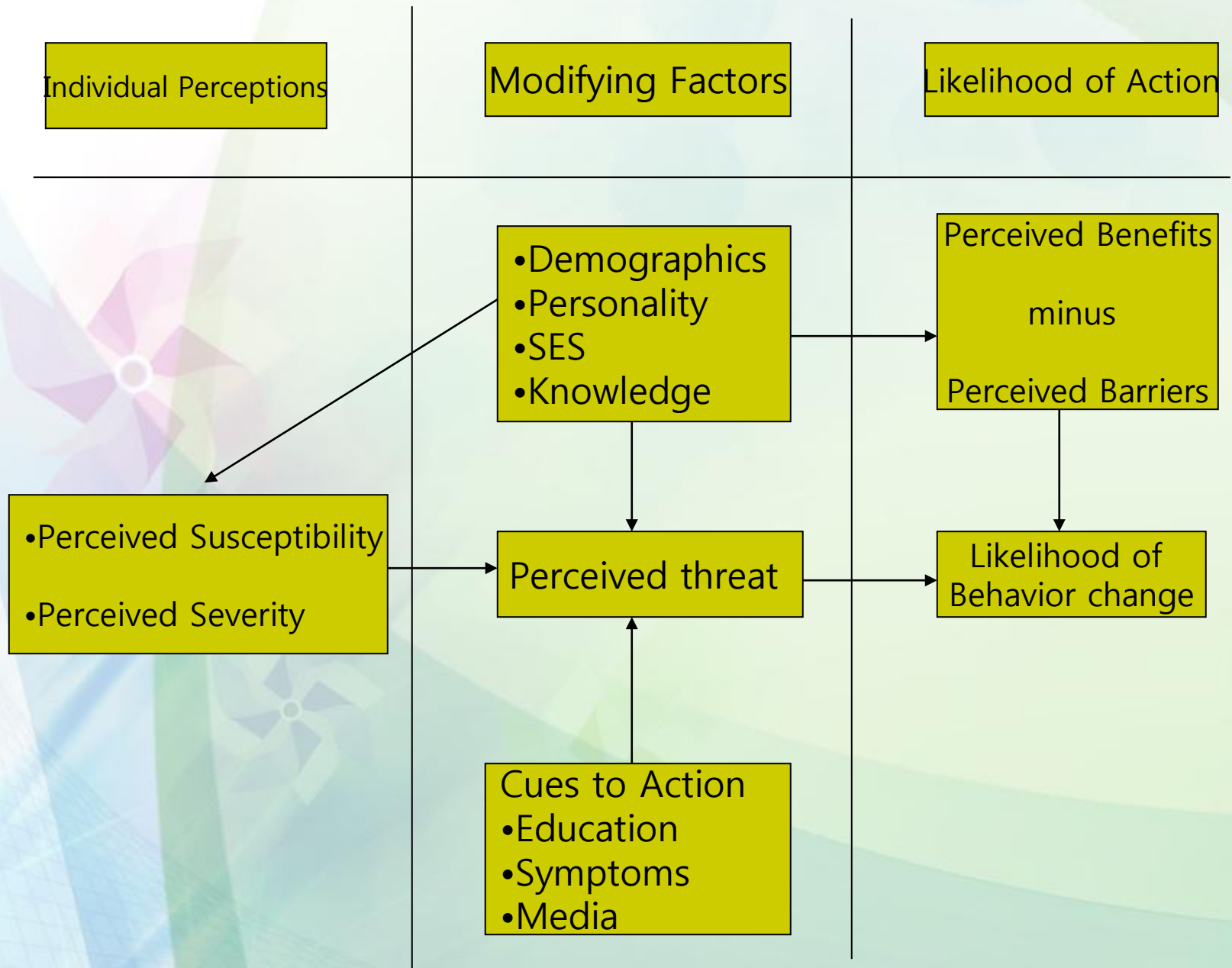
- Emphasize the role of subjective hypotheses and expectations held by the individual.
- Beliefs, attitudes, desires, expectations, etc.
- Influencing beliefs and expectations about the situation can drive behavior change, rather than trying to influence the behavior directly.

HBM

- HBM is a value-expectancy theory
- Based on these assumptions:
 - People desire to avoid illness or get well
 - People believe that a specific health action **that is available to him or her** will prevent illness
- Initial development based on probability-based studies of 1200 adults
 - People who believed they were susceptible AND believed in the benefits of early detection were much more likely to be screened for TB.

Components of HBM

- Perceived Susceptibility: how likely do you think you are to have this health issue?
- Perceived Severity: how serious a problem do you believe this health issue is?
- Perceived Benefits: how well does the recommended behavior reduce the risk(s) associated with this health issue?
- Perceived Barriers: what are the potential negative aspects of doing this recommended behavior?



Health Belief Model -- Revised

(Rosenstock, Strecher, & Becker, 1988)

BACKGROUND

**Sociodemographic
Factors**

(e.g., education, age,
sex, race, ethnicity)

PERCEPTIONS

Threat

- Perceived susceptibility
(or acceptance of the
diagnosis)
- Perceived severity of
ill-health condition

Expectations

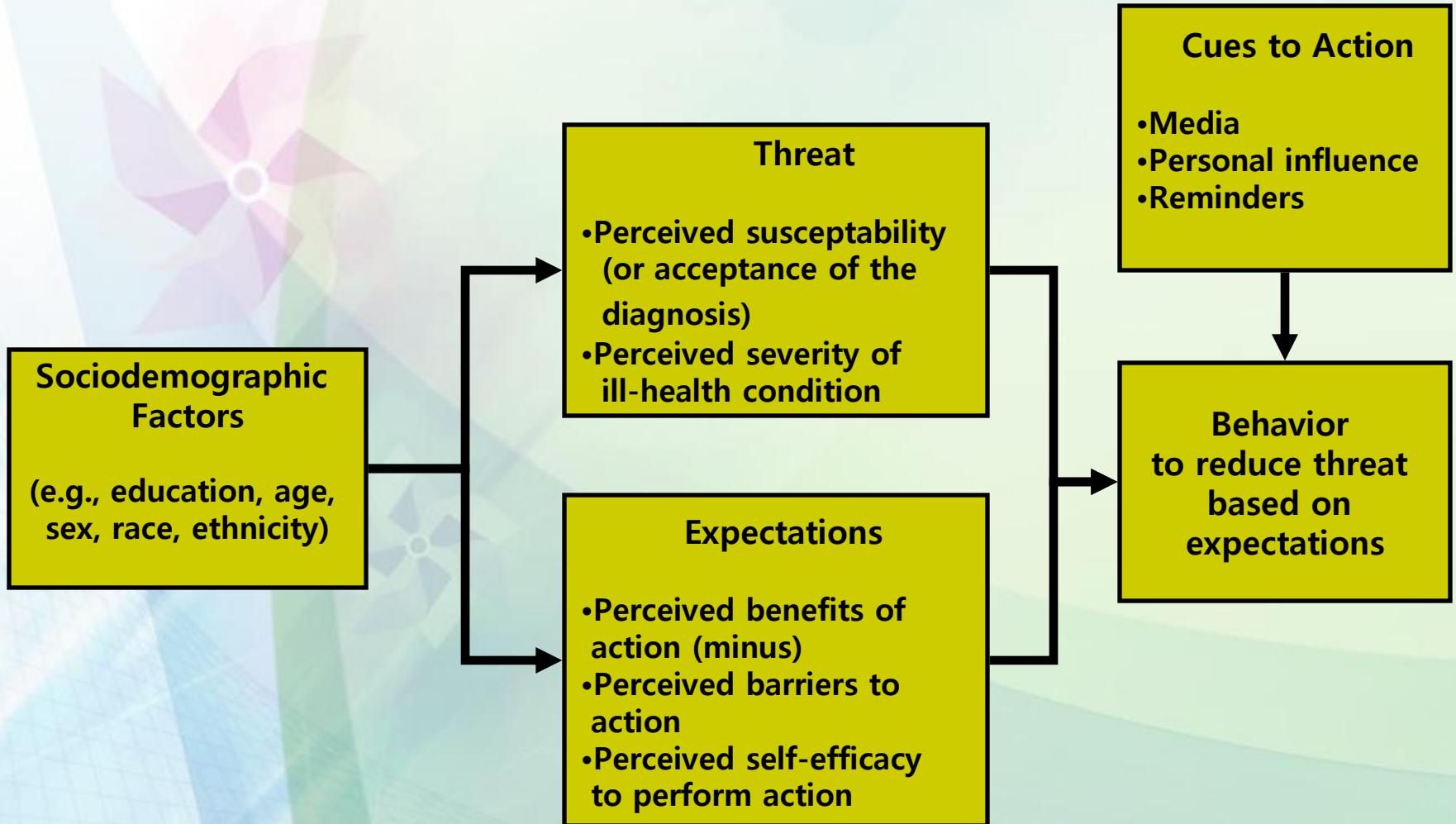
- Perceived benefits of
action (minus)
- Perceived barriers to
action
- Perceived self-efficacy
to perform action

ACTION

Cues to Action

- Media
- Personal influence
- Reminders

**Behavior
to reduce threat
based on
expectations**



Checklist

- Elicit patient's health beliefs.
- Reinforce positive attitudes to health.
 - i.e. praise for giving up smoking for a period in the past, don't dwell on the fact they re-started.
- Counter myths and negative attitudes.
- Inform patient about causes and prognosis
- Plan an *appropriate* course of action to suit his/her needs and lifestyle.
 - Don't ask them to give up cigarettes, alcohol all at once !

Exercise

건강신념 모형을 이용하여 학생이 임상에서 간호한 대상자의 지각을 사정할 구체적인 질문을 만들어 보라

- 지각된 민감성과 심각성을 사정할 질문
- 지각된 이익과 장애를 사정할 질문