Health Behavior Theories: Applying Theory to Practice

Why Is Theory Important?

- Theory gives planners tools for moving beyond intuition.
- Consistent with the current emphasis on using evidence-based interventions in public health.
- Similar to those used in previous successful programs.
- Supported by past research in the same area or related ideas.
- Guides evaluation.

Trends in Health Communication Theory

- Until the 80’s, most interventions focused on changing knowledge.

- Health Belief Model was the prevailing theory

- AIDS era ushered in more sophisticated “intervention science”. Behaviorists got involved with intervention development.
The Ecological Perspective

- Multiple levels of influence for health behaviors
  - Intrapersonal or individual factors;
  - Interpersonal factors;
  - Institutional or organizational factors;
  - Community factors (social norms); and
  - Public policy factors.
- Individual behavior shapes and is shaped by the social environment (reciprocal causation)

Health Belief Model

Health Belief Model (Becker 1974)

Six main constructs influence people’s health behaviors.
- Perception of susceptibility to a health threat
- Perceived severity of the health threat
- Perceived benefits of avoiding threat
- Costs of taking action are outweighed by benefits
- Exposed to factors that prompt action
- Environmental or social factors that enable
- Self efficacy

"I'd exercise more if it were accessible."
Theory of Planned Behavior

Associated Theory—Theory of Reasoned Action (Fishbein and Ajzen 1975)

Intention to act is a good predictor of behavior.

Intention is based on:
1. Personal attitude
2. Subjective norm—whether significant others approve or disapprove of behavior.
3. Perceived control to perform behavior

Transtheoretical Model

Stages of Change Model (Prochaska and DiClemente, 1992)

• Describes individuals’ motivation and readiness to change a behavior.
• Behavior change is a process, not an event.

Steps
• Pre-Contemplation
• Contemplation
• Preparation
• Action
• Maintenance
• Relapse possible at any stage
Social Cognitive Theory

Social Cognitive Theory / Social Learning Theory (Bandura 1986)

- Interaction between person and environment — (influences go both ways).
- Three main factors influence behavior.
  1. Behavioral capability (knowledge and skills)
  2. Self-efficacy (set incremental goals)
  3. Anticipated outcome/ expectations
- People learn from modeling and observing others.
- Reinforcement important.

Diffusion of Innovation

How ideas and social practices that are perceived as "new" spread throughout a society.

- Innovations are spread by important people in communities.
- People adopt new behaviors over time.
- Process of adoption — different categories of adopters: e.g., innovators, early adopters, early majority adopters, laggards.

Using Theory in Practice

- Formative work on health issue in target population (e.g., epi data, perceptions, needs, and wants concerning the health behavior).
- Identify the target population’s knowledge, attitudes, and skills related to health behavior.
- Stage the target population — where are they on the stage continuum?
- Determine motivating factors and barriers to behavior.
Theory in Practice

Social Marketing planning should address the 4 Ps.

- **Product** (behavior being promoted) includes the benefits that go along with it.
- **Price** (an exchange of benefits and costs) refers to barriers involved in adopting the behavior (e.g., money, time, effort).
- **Place** makes the behavior change accessible and convenient. It means delivering benefits in the right place at the right time.
- **Promotion** (delivering the message to the audience).

What’s Next?

The planning process in-depth

- Step 1. Planning and strategy selection
- Step 2. Selecting channels and materials
- Step 3. Developing materials and pretesting
- Step 4. Implementation
- Step 5. Assessing effectiveness
- Step 6. Feedback to refine program