Health Promotion Foundations - Module Four

1. Health Promotion Foundations - Module Four

1.1 Health Promotion Foundations - Module Four

Notes:

In this module, we will introduce an ecological framework in health promotion, and theory at the individual and interpersonal levels.
1.2 Terms of Use

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Notes:

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1.3 Navigation Menu

**NAVIGATION MENU**

- **Compare Answers:** click this icon to see our response to the exercise
- **Resource:** click this icon for further reading
- **Close Button:** clicking on the ‘X’ button will close any window

**Notes:**

Throughout this module, you will see these icons. To be reminded of what they mean, please refer to the help tab at any point during the module.
1.4 Navigation Menu

**NAVIGATION MENU**

**Glossary**
The glossary tab provides definitions of key words highlighted in this component.

**Help**
The help tab reviews the function of each icon.

**Menu**
The menu tab outlines each section in the module. By clicking on a menu title, you can navigate to that section.

**Resources**
The resources tab contains further reading, and a complete list of references.

**Transcript**
The transcript tab provides a full transcript for each slide.

**Notes:**

In the upper right hand corner of the slide, you will see a selection of ‘tabs’.

The glossary tab contains definitions of key words used in this module.

The help tab reviews the function of each icon.

The menu tab provides a list of all the sections in the module and allows you to navigate to any one of them.

The resources tab contains further reading options, and a complete list of references for this module.

The transcript tab contains a full transcript of each slide.
1.5 Learning Objectives

Notes:

By the end of this module, you will be able to:

1. describe the key principles of the ecological framework;
2. explain how theory can be applied to individual and interpersonal level behaviour change efforts; and
3. gain skills to apply the theories learned in this module to specific behaviour change scenarios.
2. An Ecological Framework

2.1 An Ecological Framework

Notes:

In this module, we will begin by exploring the ecological framework. We will then move on to discuss individual and interpersonal level behaviour change theories.
2.2 Ecological Framework

The ecological framework focuses on the complex interactions between people, groups, and their environments, rather than on each of these factors in isolation. (39) Kenneth McLeroy and colleagues were the first to introduce the concept of five levels of influence on health behaviours. (37) The concentric circles show an ever-widening sphere of influence, starting with individual factors such as skills in the centre, moving out towards public policy factors such as laws in the widest circle. (38) The ecological framework proposes using a combination of theories and strategies that span multiple levels of this framework, in order to create a more comprehensive and ultimately more effective behaviour change intervention.
2.3 Introduction to Behaviour Change Theory

Notes:

Everyday individuals influence and are influenced by the environment in which they live. Researchers have grouped a person’s environmental...
influences into five levels: individual, interpersonal, organizational, community and public policy. (37)

This is Emily. The choices Emily makes in her daily life are constantly being shaped and reshaped by factors at every societal level.

In health promotion we call this multi-level model the ecological framework. (37, 38) Click on each level in Emily's environment to see a specific example of how different societal influences might affect her choices.

2.4 Key Ecological Principles

Notes:

We have presented just one, but there are a number of versions of the ecological framework of health behaviour. The model has evolved through at least thirteen iterations. However, according to James Sallis and his colleagues, all ecological frameworks share four key principles. (37)
First, that there are multiple levels of influences on health behaviours. These include the five levels that we discussed in the previous slides.

Second, that influences interact across multiple levels, meaning that many factors work in combination with one another to influence behaviour.

### 2.5 Key Ecological Principles

#### Notes:

A third principle shared by ecological frameworks described by Sallis and his colleagues, is that multi-level interventions are most effective for promoting health. In other words, a range of complementary strategies are more likely to be effective than a single intervention. (37)

Finally, ecological models are most powerful when they are behaviour-specific and used to identify the most powerful influences to target at each
level. Though there are general behaviour change principles, behaviours such as smoking, healthy eating, physical activity and risky sex, are fundamentally different in terms of barriers and facilitators to change. For this reason, behaviours are best examined in their own context.

2.6 Quiz question

(Drag and Drop, 10 points, 1 attempt permitted)
### Drag and drop properties

<table>
<thead>
<tr>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Return item to start point if dropped outside the correct drop target</td>
</tr>
<tr>
<td>Snap dropped items to drop target (Snap to center)</td>
</tr>
<tr>
<td>Delay item drop states until interaction is submitted</td>
</tr>
</tbody>
</table>

**Feedback when correct:**

That's right! You selected the correct response.

**Feedback when incorrect:**

You did not select the correct response.

**Notes:**

Now, let's take a moment to reflect on some of the concepts we have learned. Complete this matching exercise by clicking and dragging each example in the green box to the matching level of influence within the diagram.
Additional social and behavioural theories practice

Click the link above to access additional exercises similar to the one presented on this slide. To find the relevant exercises, click the “social and behavioural” bar in the “exercises by chapter” section of the webpage.

Remember that there are complex interactions between people, groups, and their environments, rather than each of these factors existing in isolation.
Notes:
The ecological framework helps us understand how the individual, interpersonal, organizational, community, and public policy levels...
continuously interact to affect health, and how people have the capacity to influence and be influenced by the environment in which they live (36, 37). To make maximum use of an ecological framework, it is useful to understand the theories of change that can be applied at each level.

## 2.8 Levels of Behaviour Change Theories

The ecological framework, provides a comprehensive population-wide approach to tackling health behaviour change. (37) However, researchers have developed specific theories of health behaviour change that can be targeted at each of the societal levels discussed in the ecological framework. In modules four, five and six of the Health Promotion Foundations series, we will discuss specific theories and frameworks that can be applied at each of the five societal levels of the ecological framework developed by McLeroy and colleagues.

- Module four will cover common individual and interpersonal level theories,
- module five will explore organizational and community level theories, and
• module six will discuss theories that use a public policy lens.

3. Individual Level Theory

3.1 Individual Level Theory

Notes:

Now let’s move on to the next section in this module: individual level theory.
3.2 Individual Level Theory

Notes:

Individual level theories are those constructed based on a person’s knowledge, beliefs and skills. (37) In the next few slides, we will explore two commonly used individual level theories- the health belief model and the stages of change model.
3.3 Health Belief Model

Notes:

The Health Belief Model was developed by Irwin Rosenstock and colleagues in the 1950s. (36, 40) It is one of the oldest theories designed to explain individual health behaviour. According to this model, behaviour is closely related to one’s beliefs.
3.4 Health Benefit Model: Conditions for Action

Six constructs influence an individual’s willingness to act:

1. Perceived susceptibility
2. Perceived severity
3. Perceived benefits
4. Perceived barriers
5. Cues to action
6. Self-efficacy

Notes:

This model demonstrates that individuals will act in order to protect or promote their health if they believe that:

• they are susceptible to a condition or health problem,
• the consequences of the condition are severe,
• the recommended actions to deal with the problem will be effective and beneficial and,
• the benefits of taking action outweigh the costs or barriers. (36,40)

In later years the model was reformatted to include additional constructs of cues to action and self-efficacy.

• Cues to action are factors that prompt change. For example- a TV commercial reminding men to get a prostate exam.
• Self-efficacy refers to a person's confidence in their ability to perform an action.
3.5 Health Belief Model: Implications for Practice

Notes:

The Health Belief Model can be used as a framework for understanding health behaviour, and as a guide for developing key messages in interventions. This model demonstrates the importance of individual beliefs about severity, consequences, the effectiveness of a recommended action and the overall cost/benefit balance of a preventative action. (36) The Health Belief Model has been shown to be particularly useful for health behaviours such as screening and immunization. (36)
3.6 Health Belief Model: HIV/AIDS Prevention Example

Notes:

For example, according to the Health Belief Model, individuals are more likely to practice safe sex to prevent HIV infection if they believe that:

- they are at risk of HIV infection,
- the consequences of HIV infection are serious,
- safe sex practices (for instance, condom use) are effective in reducing the risk of infection, and
- the benefits of safe sex practices outweigh the potential costs and barriers.

(36)

3.7 Quiz question

(Pick Many, 10 points, 1 attempt permitted)
If the Health Belief Model was applied to promote a particular vaccine, individuals would be more likely to get the vaccine if they believed that (select all the options that apply):

- A. they are at risk of contracting the virus.
- B. the consequences of the virus are severe.
- C. the vaccine will protect them from contracting the virus.
- D. they have no choice but to get the vaccine.
- E. the benefits of receiving the vaccine outweigh the potential risks or side effects.

**Correct Choice**

<table>
<thead>
<tr>
<th>Correct</th>
<th>Choice</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>A. they are at risk of contracting the virus.</td>
</tr>
<tr>
<td>X</td>
<td>B. the consequences of the virus are severe.</td>
</tr>
<tr>
<td>X</td>
<td>C. the vaccine will protect them from contracting the virus.</td>
</tr>
<tr>
<td></td>
<td>D. they have no choice but to get the vaccine.</td>
</tr>
<tr>
<td>X</td>
<td>E. the benefits of receiving the vaccine outweigh the potential risks or side effects.</td>
</tr>
</tbody>
</table>

**Feedback when correct:**

That’s right! You selected the correct response.

**Feedback when incorrect:**

You did not select the correct response.

**Notes:**
Let's take a moment to reflect on what we have learned. Select all options that apply.

Correct: You understand how a person's willingness to act depends on their: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy.

Incorrect: Remember the six constructs that influence an individual's willingness to act.

Correct (Slide Layer)

You understand how a person’s willingness to act depends on their perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy.
Notes:

The next individual level theory we will discuss is the Stages of Change Model, also known as the Transtheoretical Model. This theory was developed by

This model is based on the assumption that individuals have varying levels of motivation or readiness to change and that behaviour change is an ongoing process, rather than an event. This theory describes a series of five stages that most people move through as they change their behaviour. (36, 41, 42)

According to the Stages of Change Model, people tend to move through these stages in a predictable way, though at varying speeds. The theory is circular- people can enter or exit at any point. (36, 41)

Click on each of the five stages to find out more.

The first stage is **pre-contemplation**. An individual in this stage has no intention of taking action within the next six months.

The second stage is **contemplation**. An individual in this stage is considering making a specific change within the next six months, but may still be unsure.

The third stage is **preparation**. An individual in this stage is making a serious commitment to taking action within the next 30 days. The individual may have already taken some steps in this direction.

The fourth stage is **action**. An individual in this stage has initiated change, but has been trying for less than six months.

The fifth and final stage is **maintenance**. An individual in this stage has sustained a change for more than six months.
The first stage is **pre-contemplation**. An individual in this stage has no intention of taking action within the next six months.

The second stage is **contemplation**. An individual in this stage is considering making a specific change within the next six months, but may still be unsure.
preparation (Slide Layer)

The third stage is preparation. An individual in this stage is making a serious commitment to taking action within the next 30 days. The individual may have already taken some steps in this direction.

action (Slide Layer)

The fourth stage is action. An individual in this stage has initiated change, but has been trying for less than six months.
3.9 Stages of Change Model: Conditions for Action

Individuals will act when:

- They perceive that the benefits of a change outweigh the costs.
- They have confidence or self-efficacy to change or maintain a behaviour.

Notes:

Two important concepts in the Stages of Change model are decisional balance and self-efficacy. Individuals will take action when they believe that
there is a net benefit to doing so. That is, when the pros outweigh the cons on their decisional balance sheet. A person's decisional balance may shift, depending on the stage of change he or she is in. Individuals must also have the confidence or self-efficacy to change or maintain a behaviour when faced with challenges.

3.10 Processes of Change: Build Self Efficacy

**Notes:**

Processes of change are an important part of the Stages of Change or Transtheoretical model. They help us understand how to move people through the stages. There are ten processes of change.

Four of them are particularly important for shifting decisional balance.

1. Raising consciousness about causes, consequences, and cures.
2. Dramatic relief occurs when a person can express his or her feelings about the problem and the potential solution.
3. Self re-evaluation occurs when an individual assesses and articulates his or her values.

4. Individuals may also re-evaluate how their behaviour affects their physical and social environments, or the places and people that they care about. (41)

### 3.11 Processes of Change: Build Self Efficacy

**STAGES OF CHANGE MODEL: BUILD SELF-EFFICACY**

5. Self-liberation
6. Social liberation
7. Counterconditioning
8. Stimulus control
9. Contingency management
10. Helping relationships

**Notes:**

Six of the processes of change are particularly important for building self-efficacy.

5. Self-liberation happens when a person believes that change is possible.
6. Social liberation occurs when one has an awareness that an alternative to current behaviour will be socially acceptable.
7. Counterconditioning is the substitution of a healthy behaviour for an unhealthy one.
8. Stimulus control involves removing personal triggers for an unhealthy
behaviour.

9. Contingency management, or receiving rewards for behaviour change, also builds self efficacy.

10. Finally, building helping relationships is critical for facilitating self-efficacy and ultimately supporting healthy behaviour change. (41)

3.12 Stages of Change Model: Implications for Practice

The Stages of Change Model demonstrates that different messages and strategies are more or less useful depending on where an individual is on the stage of change continuum. This theory has been shown to be useful for smoking cessation programs, and has also been successfully applied to physical activity and weight loss programs. (36, 41)

3.13 Match the following questions to the correct stage:36

(Matching Drop-down, 10 points, 1 attempt permitted)
Match the following questions to the correct stage:

A. Are you interested in trying to quit smoking?  
   Correct Choice: Precontemplation

B. Are you ready to plan how you will quit smoking?  
   Correct Choice: Preparation

C. Are you trying to stay smoke-free?  
   Correct Choice: Maintenance

D. Are you thinking about quitting smoking soon?  
   Correct Choice: Contemplation

E. Are you in the process of trying to quit smoking?  
   Correct Choice: Action

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**Feedback when correct:**

That's right! You selected the correct response.

**Feedback when incorrect:**

You did not select the correct response.
Notes:

Let's take a moment to reflect on what we have learned. The Stages of Change Model has been widely used in programs dealing with smoking cessation programs and other addictive behaviours. Imagine you are a public health worker guiding a participant through a smoking cessation program. Match the following questions to the stage a participant is in.

Correct (Slide Layer)

That's right! You made all the correct matches!
4. Interpersonal Level Theory

4.1 Interpersonal Level Theory
In this final section, we will explore an interpersonal level theory.

4.2 Interpersonal Level Theory

Notes:

Interpersonal level theories view behaviour as a product of multiple influences. One significant source of influence is the web of interactions individuals have with others in their social circles. (36,41)

Social cognitive theory is a commonly used interpersonal theory that explores how a person's goals, expectations and self-efficacy are shaped by the social context in which they live. (36,41)
4.3 Social Cognitive Theory

Notes:

Developed by Albert Bandura in 1977, Social Cognitive Theory is based on Social Learning Theory and the earlier works of Neal Miller, John Dollard, and Julian Rotter. (43)

Social Cognitive Theory is among the most comprehensive theories explaining behaviour change, because it addresses the underlying determinants of health behaviour and suggests methods for promoting change. (43)
4.4 Social Cognitive Theory

Notes:

Social Cognitive Theory emphasizes a dynamic interaction between a person, behaviour and the environment. (43)

This interaction is called ‘Reciprocal Determinism’. This interaction offers a great deal of insight into the ways behaviours can be changed. For example, modifying social norms about smoking is widely considered to be one of the most powerful ways of promoting cessation among adults.
According to Social Cognitive Theory, three main conditions affect health behaviour change. They are: goals, outcome expectations and self-efficacy. (36)

Click on each of the conditions to learn more.

**Personal Goals**

Although Social Cognitive Theory emphasizes the importance of the environment, it also recognizes that individuals can influence their own behaviour, and their environment when they are purposeful and goal-directed. Helping people set goals is a common application of Social Cognitive Theory.

**Positive Outcomes:**

Outcome expectations are the results that an individual expects from engaging in a particular behaviour. When someone believes that the outcome of a recommended action will be positive, they are more likely to
act. (36, 43) For example, if you believe that exercise will help you lose or maintain weight, and you place great importance on maintaining physical fitness, then you will be more likely to exercise. Providing evidence about the type of results that can be expected from a particular healthy behaviour is another application of Social Cognitive Theory.

**Self-efficacy or Collective-efficacy**

Bandura considers self-efficacy to be the most important personal factor in behaviour change (36). Self-efficacy is an individual’s confidence in her or his ability to successfully perform a behaviour despite challenges. Collective efficacy is a related concept, that is, the collective confidence of a group to successfully perform a behaviour. (43) For example, the belief among all household members that they can adopt healthier eating habits. Helping an individual or group build self-efficacy through small, concrete steps is a classic application of Social Cognitive Theory.

### 4.6 Key Concepts: Behavioural Capability

**SOCIAL COGNITIVE THEORY**

**FACILITATION:**

- The necessary knowledge and skills to perform a behaviour.
- Providing resources, tools and changes in the environment can support new behaviours.⁴³

Notes:
There are a number of other key concepts related to this theory which provide direction on how to encourage change. Facilitation, observational learning, incentive motivation, self-regulation, and moral disengagement should be understood in order to apply this theory in practice.

Facilitation, otherwise known as behavioural capability, is the necessary knowledge and skills to perform a behaviour.

The implication is that by providing resources, tools and changes in the environment, new behaviours can be supported. (43)

4.7 Key Concepts: Observational Learning

Observational Learning is another key concept related to Social Cognitive Theory which provides direction on how to encourage change.

Social Cognitive Theory evolved from Social Learning Theory which asserts that people learn not only from their own experiences, but by observing the
actions of others, and the benefits of those actions. The implication is that by promoting credible role models who successfully perform a target behaviour, it may increase the confidence of others to move toward behaviour change. (43)

4.8 Key Concepts: Reinforcements

**SOCIAL CONGITIVE THEORY**

**INCENTIVE MOTIVATION:**
- Incentives or reactions received when carrying out a behaviour
- A positive reward or outcome encourages behaviour
- May be material or social
- May come from someone else or oneself

**Notes:**

Another key concept is incentive motivation, otherwise known as reinforcements. This refers to the incentives, responses or reactions a person receives when he or she carries out a behaviour. A positive reward or outcome encourages behaviour, where a negative reaction or punishment can discourage behaviour. (43) These rewards or reinforcements may be material or social and may come from others or oneself. For example, a person may receive a complement after quitting smoking - 'your skin has never looked better!', or a person might reward him or herself with a new pair of jeans after sticking to a workout regime. The implication of this concept is that by encouraging individuals to set up their own reward system, or by setting up an external reward system, healthy behaviour can be reinforced and success is more likely.
4.9 Key Concepts: Self Regulation

Self-regulation: control behaviour, even when challenged

Moral disengagement: violating personal standards

Notes:

Self-regulation allows a person to control his or her behaviour, even when challenged.

A risk to self-regulation is moral disengagement. This occurs when someone shuts down his or her self-regulation, and violates his or her personal or moral standards. People can do this by justifying their behaviour in ways such as blaming, displacement of responsibility, or minimizing or ignoring the consequences.

Health promotion interventions can bolster one’s ability to self-regulate by encouraging self-monitoring, mobilizing social support networks and providing incentives. (43, 44)
4.10 Key Concepts: Social Implications for Practice

Social Cognitive Theory draws on a wide range of approaches to the physical and social environment, as well as individual attitudes and skills that lead to behaviour change. Health promoters can act as ‘change agents’ by modifying the physical and social environment and developing skills that enable individuals to make healthy changes.

Social Cognitive Theory has recently been applied to such large scale interventions as increasing preparedness for infectious diseases and disasters, and the promotion of environmentally responsible behaviours. (43)
4.11 Stop and Think

Notes:

Now, let's take a moment to reflect on some of the concepts that we've learned.

Imagine your friend Stephen is trying to reduce his alcohol consumption. After learning about the concept of interpersonal behaviour change, you think that Stephen could use Social Cognitive Theory to create a successful strategy for this. How would you explain the concept of self-efficacy and collective-efficacy to Stephen? Give him specific examples of how he could change his drinking behaviour when explaining this concept.

After you've typed your answer click the compare answers icon to compare your answer to the one provided.
4.12 Common Conditions: For Change

**Common Conditions for Behaviour Change**

1. Strong, positive intention to perform the behaviour
2. Social pressure to perform the behaviour
3. Absence of environmental barriers preventing the behaviour
4. Consistency between the behaviour and a person’s self-image
5. Skills to perform the behaviour
6. A more positive than negative emotional reaction to performing the behaviour
7. Advantages of performing the behaviour outweigh the disadvantages
8. Perceived self-efficacy (or confidence) to perform the behaviour

**Notes:**

Theories of behaviour change such as the Health Belief model, the Stages of Change Model and the Social Cognitive Theory, share a number of common
A framework for integrating these theories was developed at a consensus conference of prominent behavioural scientists. These scientists identified eight conditions, one or more of which must be true in order for a person to make a successful health-related behaviour change (45, 46).”

4.13 Review

Learning Objective #1:
Describe the key principles of the ecological framework

An ecological framework of health behaviour focuses on the complex interactions between five levels of influence: individual, interpersonal, organizational, community and public policy. It has the ability to guide comprehensive and complex health promotion interventions.

Notes:

This brings us to the end of Module Four: Introduction to an Ecological Framework, and Theory at the Individual and Interpersonal Levels.

We began this module by outlining three learning objectives.
The first indicated that by the end of this module you would be able to describe the key principles of the ecological framework.

We have now learned that an ecological framework can be used as the basis of behaviour-specific models for health behaviour change. The ecological approach to health behaviour focuses on the complex interactions between five levels of influence: individual, interpersonal, organizational, community and public policy. As the ecological approach stresses many factors interacting at different levels within the environment, it has the ability to guide comprehensive and complex health promotion interventions.

4.14 Review

**Review**

**Learning Objective #2:**
Explain how theory can be applied to individual and interpersonal level behaviour change efforts

The Health Belief Model, The Stages of Change (Transtheoretical) Model, and Social Cognitive Theory are common individual and interpersonal level theories used in health promotion practice.

By now you know the key concepts of each of these theories and have seen examples of how they might be applied to behaviour change situations.

**Notes:**

Our second learning objective indicated that by the end of this module, you would be able to explain how theory can be applied to individual and interpersonal level behaviour change efforts.

In this module we learned that The Health Belief Model, The Stages of Change Model, and Social Cognitive Theory are common individual and
interpersonal level theories used in health promotion practice.

By now you know the key concepts of each of these theories and have seen examples of how they might be applied to behaviour change situations.

4.15 Review

Notes:

Our third objective indicated that by the end of this module, you would have gained the necessary skills to apply the theories learned to specific behaviour change scenarios.

Through the examples and quizzes we learned how public health practitioners might apply each of these theories to different behaviour change scenarios.
4.16 PHO Health Promotion Capacity Building

Notes:

This resource is supported and maintained by the health promotion capacity building team at Public Health Ontario. We offer a variety of health promotion services including consultations, webinars, in-person workshops and other resources related to health promotion planning, evaluation, health communication and building healthy public policy.

To request support or for more information, please follow the links on this slide.

http://www.publichealthontario.ca/en/ServicesAndTools/HealthPromotionServices/Pages/service-request-form.aspx

Our events calendar is at:

http://www.publichealthontario.ca/en/LearningAndDevelopment/Events/Pages/default.aspx
4.17 Thank you

Thank you for your participation in Module Four: Introduction to an Ecological Framework, and Theory at the Individual and Interpersonal Levels, part of our Health Promotion Foundations course.

Please take a few minutes to provide your feedback on this module and the content we have covered.
5. Help Tab

5.1 Navigation Menu

**NAVIGATION MENU**

- **Compare Answers:** click this icon to see our response to the exercise
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