

# The Health Belief Model

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January 21, 2009

## History of the HBM

- Developed in 1950's by social psychologists in USA
- Can be used to explain & predict health behaviours and as a framework for creating effective behaviour change interventions

### Stimulus Response Theory

- Learning results when events (reinforcements) decrease physiological forces that activate behaviour
- Frequency of behaviour determined by immediate consequences/reward
- No thought/reasoning involved

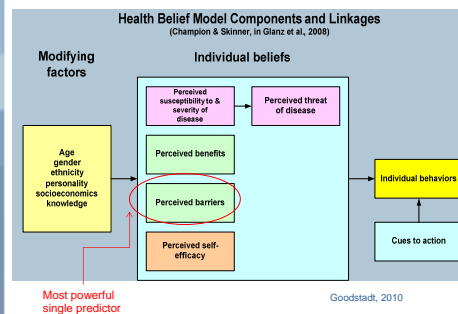
### Cognitive Theory

- Based on value-expectancy theory:
- Behaviour results based on the value of an outcome (subjective, individual) and expectation that the behaviour will achieve the desired outcome
- Thought/reasoning critical

## Key Constructs Defined

- **Perceived Susceptibility:** beliefs about the likelihood of getting a disease/condition
- **Perceived Severity:** beliefs about how serious a condition/consequences are
- **Perceived Benefits:** belief that a certain action will reduce risk / seriousness of impact
- **Perceived Barriers:** belief about costs/negative aspects of action
- **Cues to Action:** instigators to readiness
- **Self Efficacy:** belief in one's ability to produce behaviors to produce desired outcomes

## Champion & Skinner's HBM Framework



## Example



## Example

- **Perceived Susceptibility:** role-playing, youth their age in the video, guided questions, reflective exercises
- **Perceived Severity:** DVD (typical crash, tour from emergency → rehab, testimonials), reflective exercises
- **Perceived Benefits:** class discussion and brainstorming, DVD (e.g. those mentioned in the testimonials), new knowledge (e.g. 95% of injuries are preventable)
- **Perceived Barriers:** class discussion and brainstorming, DVD (e.g. those mentioned in the testimonials)
- **Cues to Action:** the workshop, plus follow-up by teacher in subsequent classes
- **Self Efficacy:** class discussion and brainstorming, new knowledge (e.g. worksite safety rights), plan for change

## Measuring HBM Constructs & Limitations of Model

### Measuring HBM Constructs

- Construct definitions should be aligned with original theory
- Measures should be specific to behaviour & relevant to target population
- Content validity – must be sure to address all factors related to the behaviour

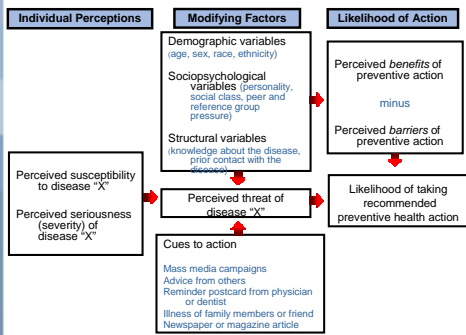
### Limitations of HBM

- Relationships between constructs not well understood
- No emotional construct (ie. fear)
- We don't understand impact of "cues to action"

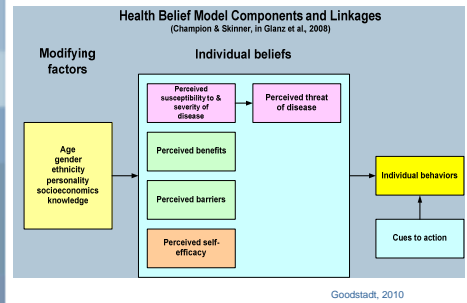
Glanz, 2008

## Discussion

## Becker, Drachman & Kirscht's HBM Framework



## Champion & Skinner's HBM Framework



Thank You