

Research Methods in Health Promotion
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Week 02
Lecture 14: Models of Interpersonal Health Behavior

So, hello and welcome back to this lecture 14. So, today we will be discussing on Models of Interpersonal Health Behaviour. So, in week 3 we have already discussed regarding the models of individual health behaviour. So, this lecture is on the models of interpersonal health behaviour. Now, here we will cover social cognitive theory, the transactional model of stress and coping and also another important thing this is not exactly any kind of theory or model, but for you know the interpersonal communication is important. So, that is why just because this is all about the you know the interpersonal health behaviour that is why at the end we will also cover key interpersonal functions and health outcomes.

Now, social cognitive theory it was started as the social learning theory. So, initially in 1960s it was named as social learning theory ok. Now, finally, they thought you know it was thought that the importance of cognition ok. So, when they when you know the Albert, Albert Bandura he is the one who actually started and he then developed that social learning theory into the social cognitive theory, because the importance of cognitive factors the importance of cognition was then realized.

So, SCT or social cognitive theory it provides a comprehensive and well supported conceptual framework for understanding factors that influence human behaviour and the process through which learning occurs offering insights into a wide variety of health related issue. Now, according to SCT it is about that human behaviour is the product of the dynamic interplay of the personal I mean the personal factors, the behavioural factors and the environmental influences or factors. Now, important thing it is not about that the only that you know the people they get affected influenced by the environment actually environment is also getting influenced and affected by the particular people. So, it proposes that learning occurs in a social context with a dynamic and reciprocal interaction. Now, this is very important dynamic and reciprocal interaction of the person, environment and behaviour.

So, before we discuss all the you know the concepts in details, first you look at this framework ok. So, you can see the personal factors, the behavioural factors, the environmental factors. Now, this is about what I have mentioned here is reciprocal interaction. So, you can see that all these things you know the behavioural factors, the personal factors and the environmental factors they are interacting among themselves that is why you can see in the arrow. Now, in personal factors we all know the knowledge ok.

So, you a person can have goal, self efficacy. Now, this I will discuss later these are the 5 ways or techniques you can see, you can understand that by which self efficacy can be enhanced or increased. Now, environmental factors you know the social supports it can be support, it can be barriers also both facilitators and barriers. Now, behaviour you know we think now that a particular behaviour what outcome expectation that is why here it is mentioned outcome expectation. Whether that particular behaviour will bring some good to me, some positive to me, whether that particular behaviour is pleasant or unpleasant.

So, it is all about the behavioural factors that particular outcome you know the expectation every person has some expectation of outcome that what that particular behaviour will bring what outcome will happen. Now, here you see reciprocal interaction or the important thing is reciprocal determinism. Now, this is central concept of social and cognitive theory. So, dynamic and reciprocal interaction of person environment and behaviour, we just now we discussed in that particular framework. So, there is dynamic and reciprocal interaction of person, person is individual with a set of learned experiences environment you know the external determinants, the external social context and behaviour to achieve goals you know you have some goal.

So, you will behave you will take actions accordingly the responses to stimuli to achieve goals. So, this is all about reciprocal determinism. Now, another concept in this theory you have to understand is the behavioural capability. Now, it is about a person's actual ability to perform a behaviour through essential knowledge and skill. Now, if a person has you know knowledge to perform when he has the knowledge of that particular thing and he also has a skill to the to perform that particular behaviour or thing.

So, this is all about the person's actual ability to perform and in order to successfully perform a behaviour, a person must know what to do and how to do we all know what to do what exactly we have to do, the knowledge and how to do the skill that is also very important that you have how to do. I can ask a person just for an example of what to do and how to do that here you should eat healthy food. So, first of all that particular person should know that which food are considered healthy food then skill in the sense that you know he or she should know how to cook that particular healthy food then observational learning. Now, observational learning is what happened people can witness and observe a behaviour conducted by others and they reproduce those actions we all know we see somebody he is performing that particular thing, he is doing that particular behaviour. So, what happened that is why the name is observational learning we observe and we learn and then definitely we try to perform.

So, what happened people witness and observe a behaviour which is conducted by other people and then they try and they reproduce those action I can see one of my friend doing a kind of a behaviour. Now, here you see like just for an example you know you can have different examples of chronic diseases or the non communicable diseases. So, there are different factors related to chronic diseases, some behavioural factors you know some external

factors are also there. So, you can apply there are some evidences where you know this is being utilised I mean this is being you know applied rather in many chronic diseases or non communicable diseases. Now, reinforcement is about we all know what is reinforcement it is about the internal or external responses to a person's behaviour that affect the likelihood of continuing or discontinuing the behaviour ok.

Now, reinforcement can be self initiated or in the environment and it can be positive or negative. Now, expectations so, this is very important now what is the outcome expectations we were discussing. So, anticipation anticipated consequences of a person's behaviour. So, that you know a person he might feel that here what will be the consequences of that particular behaviour what outcome basically what are the outcomes which is going to happen. Now, people anticipate the consequences of the actions before engaging in the behaviour like we also you know we anticipate know that if I am going to do this if I am going to perform this particular behaviour finally, what will be the result finally, what will be the consequences and these anticipated consequences can influence successful completion of the behaviour.

Now, what happens when you anticipate now that here these this particular thing will happen this is my you know result if I do if I perform this then this will happen. Now, then what happened these consequences whatever it comes it basically influences your successful completion of your behaviour. Now, self efficacy the label of a person's confidence we all know in his or ability to successfully perform a behaviour. Now, the important thing is the self efficacy is unique to social cognitive theory although other theories have added this construct later. So, self efficacy is influenced by a person's specific capabilities and other individual factors as well as by environmental factors you know if the different barriers and facilitators.

So, it actually affected how much you will be confident to perform a particular behaviour then it also depends on what are the things which will actually facilitate and what are the things which will actually put a barrier on this or which will be the barriers. Now, here you know to enhance or to increase the self efficacy it is said that these are the 4 things 4 important things. So, in a performance accomplishment what happened your confidence self efficacy is all about confidence you all know by now. So, what happened if you do some behaviour and you see that here I have done this or if it is a kind of challenging one and you are able to perform that challenging thing also challenging behaviour also then what happened a kind of you know performance you know mastery experience it is also said that mastery experience in the sense that you feel that oh I can I could do that in challenging situation also I could do then what will happen it will increase your confidence more. So, it will increase your self efficacy also.

Pecarious experience is about you know if you see that here a person X interpersonal know you have to understand that what my friend is doing what my sister is doing we often get you know influenced and affected. So, vicarious experience is all about if I see that oh if he can do this if he can perform this then what happened it seems that I also get confident that yeah then I can also do. So, in that way what happened my confidence and finally, my self efficacy get

enhanced verbal persuasion is all about what your friend teacher anybody any influencer it is not about only friend teacher anybody it can be your you know relative your family members anybody if that particular individual you know verbal persuasion keep on saying you that yes you can do this you will be able to do this we say you know encouragement it is all about the encouragement by other people then what happens when we see that if that particular person is encouraging me he or she is saying me that yes you can do this you will be able to do this then what happened our own confidence get increased and consequently definitely self efficacy will get enhanced and physiological states is all about you know all the in at what a physical physiological a mental state also you can say. So, you know a person should be relaxed it is you will find in textbook it is written a person should be relaxed they should be no fear no anxiety.

So, this also matters. So, these are the four important points which can enhance the self efficacy. Now, next is the transactional model of stress and coping. Now, this transactional model of stress and coping is a framework for evaluating process of coping with stressful event any kind of stressful event if it occurs like you know a person comes to know suddenly that he is suffering from cancer it can be anything I am just giving you this example then what happened how a person can cope with that particular stress. Now, what is stressors see we all know. So, the word stress has become so common nowadays and we all know that these are the stress these are the problem these are the issues.

So, stressors are demands made by the internal or external environment that upset balance or homeostasis thus affecting physical and psychological well being and requiring action to restore balance or equilibrium. So, any kind of external internal you know stress which basically you know the imbalance occurs the important thing is that imbalance occurs and you get affected both psychologically and physically and now the time has come where you require action. So, that again that imbalance can be changed to the balance situation. Now, stressful experiences are construed at person environment transaction in which the impact of an external stressor or demand is mediated by the person's appraisal of the stressor. What happen if some stress occur you know different people have different coping ability you might have heard some people they become very anxious and they do not you know they are very difficult I mean they could not cope up with the particular thing, but the same time there are some people who cope up they are confident and they cope up you know they do not get that much of anxious and they just cope up with that particular problem or stress.

So, mediated by the person's appraisal of the stressor first the thing is if something happens something bad or very unexpected thing happens I appraise that unexpected thing how much it is you know inconvenient how much it is difficult how much it is problematic we appraise ourselves then and the psychological social and cultural resources at his or her disposal. Now, we will discuss that how actually things starts you can. So, see when faced with a stressor a person evaluates potential threats or harm now with that particular stress what are the threats what are the harm. So, what happen this is known as the primary appraisal the first one. So, this is primary appraisal a person evaluates the potential threats or harms.

Suddenly when we come to know when we face a stress then the next thing is his or her ability to alter the situation and manage negative emotional reactions. So, it is about the secondary appraisal. So, self you know now at this point of time in secondary appraisal now problem is very clear in primary appraisal you have a very clear picture of a problem for somebody it can be huge problem for someone else it can be not that big problem ok. Now, in secondary appraisal we start thinking how much we can alter the situation what resources do we have how can we basically from you know the not only the problem management, but also about the emotions ok. So, what can be done for this problem how can we manage all the negative emotions all the emotional reactions.

Now, next thing is the coping efforts actual coping efforts aimed at problem management and emotional regulation. Now, you start thinking about the coping efforts what are actually you have to do what you are going to do. So, when you start thinking about that what are the solutions that I can do the coping efforts you think about both the emotional regulations you have so, many you know negative emotions that you have to do you should have that coping ability ok. And you should have also all the resources. So, that you can you know regulate your emotions then also about definite problem management that for this particular problem these solutions should be done.

Then actual so, what I have mentioned actual coping efforts aimed at problem management and emotional regulation it give rise to outcomes of the coping process. Now, coping efforts and coping process are done finally, outcome will be your well being ok. Your physical and psychological well being you well you know a proper functional status and adherence. So, finally, what happened you are now with the outcome. So, you can understand this primary appraisal first we start thinking about the threat then you know you start secondary appraisal that how actually you can alter the situation how this is very important.

How much do you feel that you have the ability, how much do you feel that you have the resource in your own ok. So, that you can alter the situation and also how can you manage such negative emotional situations and reactions. And coping efforts you do you perform. So, these are the coping effort these are the things that will be done and it often aims at a particular problem management a problem has to be solved along with that as we all are you know. So, we have so, many negative emotions inside us whenever we face with some problem or stress that has to be managed and finally, when you manage a outcome comes ok.

So, the entire coping process you are now with the outcome. So, that outcome can be as I said physical psychological well being the functional status and the adherence. Now, here see I have mentioned about in details what is primary appraisal this is evaluation of the significance of a stressor or threatening event. So, we have already discussed that it is about the you evaluate how much that stress or threatening event is ok, how much you feel threatened. Secondary

appraisal is about evaluation of controllability of the stressor and persons coping resources I was just discussing that here you have to understand that what resources do you have.

So, that you can cope up coping efforts actual strategies the actions which you use used to mediate primary and secondary appraisal. So, the first two point what we have discussed that these are the appraisals and in coping efforts we start doing. So, the strategies which we have to do so, that we can mediate the basically used to mediate the primary and secondary appraisals. Now, you have all different negative you know emotion the problem thing the threat you have all the problems, but you do strategies. So, that you perform strategies you know you have the solution you perform actions.

So, that you can cope up with that particular stress. Then dispositional coping style this is nothing, it is just the generalized ways of behaving that affect a persons emotional or functional reaction to a stressor. So, it is all about you know how basically very general a very generalized ways of a persons behavior a persons behaving that can affect a persons emotional or functional reaction to that particular stressor. Now, meaning based coping is about induce positive emotion. Now, these are some concepts you have to understand when you are you know learning about the transactional model of stress and coping.

So, meaning based coping is all about you know the negative you have to finally, go through some positive emotions. So, it is mentioned that coping process that induce positive emotion this is very important you have negative emotion. Now, meaning based coping is not only about that you have to just solve a problem your emotional regulation is also very important. So, from negative you get induced by positive emotion which in turn sustains the coping process by allowing reenactment of problem or emotion focused coping. Because, it assumes you know it has been assumed that the emotion it is not about just you are focusing on the particular problem management, but some from you know negative to positive emotions development that is why it is mentioned emotion focused coping that is also very important that is why the concept is the meaning based coping.

And at the end you know the outcome the emotional well being functional status and health behaviours we already have discussed then it can be the psychological or physical well being your you know the well very functional status health behaviours the adherence. So, these are the outcomes. Now, this is about the key interpersonal functions and health outcomes. Now, interpersonal communication is one of the key sources of social influence a process critical to change in health behaviour. Now, one thing you have to remember it is not only about a physician or patient it can be you know you know the interpersonal communication is important at all it all aspects like for the health worker to a participant for health worker to a patient physician to a participant physician to a patient or clinician to a patient.

So, interpersonal communication is one of the very important and you know this is in this is one of the very a process which critically influences to change up I mean another person's behaviour. Now, interpersonal communication may take place in informal relationship you all know families friends or in more formal physicians and patients or health worker participants or community members. So, you can have you know when at the end when you will know the different key interpersonal functions and everything then it is not about that it is related to only the clinician and patient everywhere it can be applied. A strong physician patient relationship is particularly important for patients because of the fear and worry associated with threats to health and well being you know a patient when he suffer from some disease. So, he is under you know a very anxious condition he is on the fear and he has so many worries.

So, that is important because so, many negative things are there. So, if there is no good you know a strong relation if there is no proper interpersonal communication then what will happen that particular patient or participant will not get benefit and will not get convinced also. Now, good communication is associated with improved physical health more effective chronic diseases management and better health related quality of life we all know that you know more effective for chronic disease why because you know they have to deal with that particular disease for a very long time medication adherence lifestyle modifications. So, many things are there and that determines the quality of life also. So, if there is no proper and strong communication between them then what will happen a participant or patient they will not feel that I should continue with this lifestyle modification or he will not feel that I should be adhere to this particular you know medication.

So, now 6 communication functions that are key to promoting improve health outcomes. These are you know some you can say functions or points which are basically assume that it can be I mean beneficial for promoting a positive health outcomes. The first one is see this very simple establishing and mentoring the physician patient relations you know it is very important you know trust a person you know trust is a very important issue a very important factor a particular patient or a particular you know participant. So, he or she should trust his or her physician or the health worker trust at the same time you know the health worker they also have to show you respect empathy.

So, that the relationship is strong. So, for establishing and maintaining a strong relationship is very important otherwise what will happen they will not feel good and they will see they will not feel important or if you know health worker behaves very badly to a particular patient then what will happen he or she will think that no no no I will not go to him again I will not do this I will he will not feel any motivated he will not be motivated to perform any positive behavior. Now, exchanging and managing information is also important. So, the information which is being given to the participant to the patient should be very clear you know should be understandable that is very important. Sometimes what happen you talk in such language to the participant to the patient that they do not understand only. So, what happen they do not feel that yeah I mean they will feel very confused and if that is not understandable to them if that is not clear to them then definitely they will not feel like for an example of a chronic disease

this is what diabetes management and everything they will not feel that yeah I should be adhere to that particular medication or I should do all these you know a lifestyle modifications.

So, exchanging and managing information is very important it should be very clear it should be understandable to the opposite person it should be acceptable to the particular person. Now, validating and responding to emotions. So, this is also very important if some very you know unpredictable things happen then you know a patient gets very he or she is in a very worried condition very anxious you know the fear is there. So, you know some very negative emotions this is very important. So, at that time a health worker you know a clinician has to be very they have to keep patience and they have to understand that to that negative emotion how should he or she will respond.

I mean you cannot just say that yeah these are things you will be doing and you can just ask that particular person yeah you can go now. So, the important thing is you have to understand his or her mental condition what negative emotions you will be try to at least you will try. So, that that particular negative emotions can be changed to some positive. Managing a certainty now what happens when something happens you know a very difficult situation a very a certain uncertain things happen then what happen here the things the messages should be very very clear that what happened when which is not expected that particular person never expected that this thing can happen at that time your solutions should be very, you know, you have to understand that these are the unpredictable situation which has occurred and at the same time you have to be, you have to behave differently I mean differently in the sense that that uncertainty has to be managed in a different way not exactly the same way which you do with the other participant.

ok. Like you know you cannot just keep too much information which will make them more confused or you cannot use some vague thing you have to be very clear that here these are this unpredictable uncertainty has happened these are the things that has to be done. So, this is also very important making decisions say it is not about you will just keep on saying and that particular person you know has to accept it might happen that he or she is not in a condition or he or she is not in a condition to accept that particular thing a solution. Now in that case both way it should come from both ways. So, making decision is not about you know one way that only a health worker a clinician will keep on saying that yeah these are the things that has to be done discussion is required whenever we think about making decisions the decision making ok. So, that particular patient that particular participant should also be involved that these are the things you have we are doing what else you want to say what else you can say on this ok.

So, these are the things. So, that particular patients views what he has thought about this problem what solutions is feasible or acceptable to that particular you know patient is also important. So, decision making is not just one way you have to think in both way. Then enabling patient self management it is all about empowering and enabling ok. So, it is not like that you have to empower people you know you have to empower you have to enable that patient for

the self management. So, that empowering is also important not like just you can just say you will you are the one you feel that these are the things should be happen should be done.

So, that self management things should also be you know done from the patient side or from the participant side also. So, enabling the patient self management this is also the responsibility of any health worker or clinician ok. So, in conclusion social I mean cognitive theory ACT posits that human behavior is the product of the dynamic interplay of personal behavior environmental influences. And the transactional model of stress and coping we all know that it is a framework for evaluating process of coping with stressful events. So, these are the learning resources you can go through all these three textbooks. Thank you