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Preventative Care

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NURS 501

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June 3, 2022

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Concept

A concept can be defined as an abstract term that derives from attributes and “symbolic statement describing a phenomenon or a class of phenomena” (McEwen & Wills, 2019 p. 53).

The concepts that I will be discussing are health promotion behaviors, behavior-specific cognitions and affect, behavioral outcomes, and perceived barriers as preventative measures. These are concepts that focus on preventative care as an intervention to help patients reach a healthy state of wellbeing. Healthcare professional should place a focus on educating patients on developing healthy behaviors. One of the main issues in healthcare in the United States is that the healthcare system places a big focus on tertiary care compared to preventative care. The lack of focus that is placed on preventative care and teaching health promotion behaviors causes issues in our healthcare system since tertiary care focuses on management of disease by using interventions such as surgery, specialist, and other more complex interventions.

Focusing on prevention is more cost effective for both the patient and the healthcare system. Not only is tertiary care more expensive but it has worse outcomes than preventative care. Unfortunately, the healthcare system only intervenes when a patient has developed an acute or chronic health problem and by that point it is often too late to reverse the issue. Individuals who do not understand their health and do not practice healthy behaviors are at a higher risk of developing a chronic illness. Chronic illnesses can be prevented if we placed a focus on preventative care such as teaching health promoting behaviors. There is a knowledge deficit that happens when patients do not get the proper preventative care. Every individual will have different characteristics and experiences that will often lead to different perceived barriers and behaviors that could impact their health positively or negatively.

Understanding every individual's definition of health and healthy behaviors is very important since everyone's experiences changes their view on health. Some individuals depending on their background, interpersonal, and situational differences might not see certain high-risk behaviors as unhealthy; therefore, will have no resources or desire to change them and reach optimal health. Educating patients by using positive reinforcement will have better healthcare outcomes.

Conceptual Model

The theory I have chosen to apply to my issue is Nola Pender's Health Promotion Model. Pender's model was first developed in 1982 and then later revised in 1996 and is consider a middle range theory. The first model had a focus on general influences on health behaviors whereas the revised model placed a focus on behavior-specific influences, she strongly believed that behavior-specific influences were more powerful than general influences (Pender, 2011a). Her model was inspired by two other theories', the Expectancy-Value Theory by Martin Fishbein and the Social Cognitive Theory by Albert Bandura (Pender, 1996). Pender's main reason for developing the Health Promotion Model was due to the awareness she had that healthcare professionals were focusing on treating acute or chronic disease rather than preventing them (Pender, 2011a). Her theory allows the healthcare system to incorporate nursing and behavioral science perspective on factors affecting health behaviors.

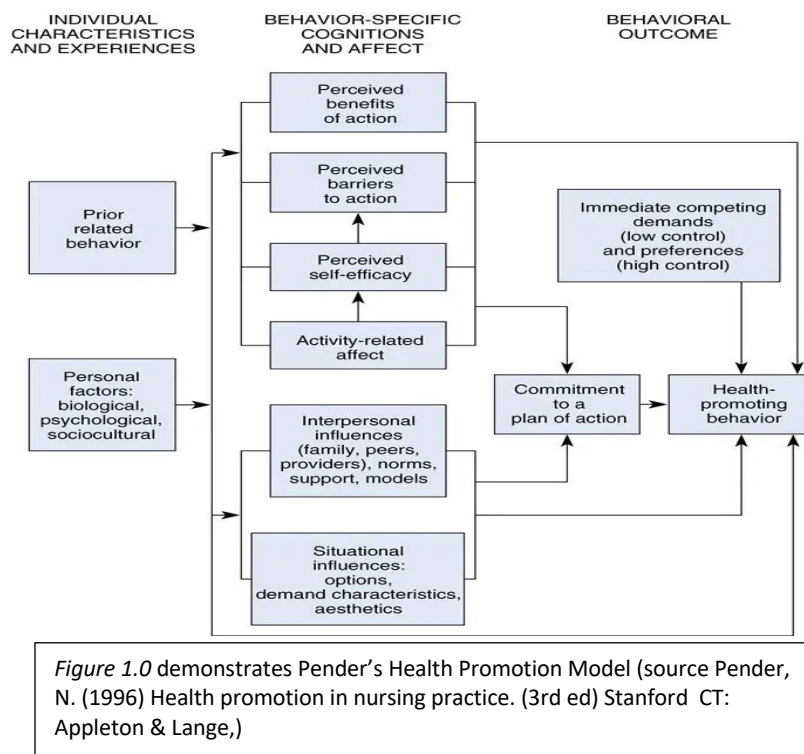
Since the healthcare system focuses on a patient's health once they have developed an acute or chronic disease rather than focusing on the disease prevention, this model will help shift that focus. The Health Promotion Model was designed to help increase an individuals' level of health. Pender Sates that she wanted there to be a positive source of motivation for healthy behaviors (Pender, 2011). There has been research done that demonstrate that healthy lifestyles

will improve a patient's quality of life and can influence those around them to develop healthy lifestyles as well. Pender's Health Promotion Model places as focus on motivating patients to develop positive health behaviors. Placing a focus on preventative care instead of tertiary care will optimize the patients' health outcomes.

Pender's Health Promotion Model includes three major concepts: individual characteristics and experiences, behavior-specific cognitions and affect, and behavioral outcomes. Her theory not only addresses nursing and psychology, but it also places an

importance on education. Pender's theory allows nurses to follow a holistic approach when helping their patients. Human beings have interactions with their environment and therefore shape it to meet their needs and goals (Pender, 2011a).

The first concept of Pender's theory introduces an individual's characteristic and experiences. It is important for nurses to understand a



patient's personal factors which include their biological, psychological, and sociocultural. As well as a patient's general characteristics such as age, personality, race, ethnicity, and socioeconomic status. A person's habits have a direct effect on future behaviors since it is a repetitive behavior that one can develop over time (Pender, 1996). Past behaviors are hard to

overcome, whether it's good or bad habits it will have an influence in a patient's future health promoting behaviors and can become a barrier in improving overall health.

The second concept that Pender's theory introduces is behavior-specific cognitions and affect. This concept focuses on the direct impact on the individual's motivation for change. A patient's desire for change can be affected by either direct or indirect factors such as interpersonal influences, situational influences, perceived benefits of actions, perceived barriers to action, perceived self-efficacy and activity-related affect. This is the most critical concept for intervention according to Pender since this concept can be modified through nursing interventions to create a positive change for the patient (Pender, 1996).

The third concept that is introduced is behavioral outcomes. This is the final and important step in the model as it focuses on the individual's commitment to the plan of action that was designed to achieve positive health outcomes (Pender, 1996). A patient must have a strong commitment to be able to move to the plan of action. In this step a patient might encounter many obstacles that can deviate the patient from developing healthy behaviors.

Pender's Health Promotion Model uses the three major concepts intertwined to help the patient who is seeking a healthier lifestyle or attempting to develop positive health behaviors. The overall goal of the model is to help patients and nurses identify barriers that are preventing an individual from living a healthy lifestyle, then a plan of action can be made and modified to adapt new behaviors, and finally a patient can commit to the new lifestyle with the hope that they can develop and maintain their new positive health behaviors. Each concept relies on each other to help the patient progress and develop those healthy behaviors. Pender states that a nurse can help a client change unhealthy behaviors and achieve healthy behavior by using her model

(Pender, 2011b). The three major concepts of the model are part of the eight beliefs that can be assessed by a nurse.

Application of the Model

Primary prevention is defined as “Intervening before health effects occur, through measures such as vaccinations, altering risky behavior (poor eating habits, tobacco and alcohol use) and banned substances known to be associated” (CDC, 2010). Applying Pender’s model as a primary prevention would start in the primary care setting and public health setting. One of the biggest barriers in health care is the lack of education about unhealthy behaviors and how they contribute to diseases. Education is a powerful tool that unfortunately is not use as much as it should in healthcare to prevent diseases. Instead, the healthcare system spends its majority of time managing a disease post diagnoses to help prevent progression rather than redirecting the focus in healthcare to prevent diseases.

Understanding and getting to know the patients and communities that healthcare members will be working with is the first step in adapting Pender’s theory. A person’s health and lifestyle could be impacted if nurses and providers took the time to educate patients on changing their health behaviors using evidence-base approaches. When establishing care with a provider, providers should get to know the patients by asking questions related to personal factors this includes their biological, psychological, and sociocultural. As well as having a conversation about prior related behavior that could become an obstacle when working on a plan to change unhealthy behaviors. This will allow both the provider and patient to understand the barriers the patient can face when changing their habits. Using Pender’s model will help improve patient outcomes by allowing interventions to be performed early in a patient’s lifestyle thus promoting primary prevention rather than focusing on tertiary prevention. It is important for health care

providers to make patients aware of their health behaviors and the consequences that can lead to disease that can be life threatening if not delt or prevented.

For Pender's theory the patient must be able to commit to a better lifestyle for the model to work. A patient can only commit if they have identified the issue and barriers that have prevented the patient to optimizing their health. Once those two things have been identified the patient can create a plan and modified as they go through their journey to health. Finally, a patient will have adapted new health behaviors and will commit to them. A patient can benefit not only from having support from the health care team but having encouragement from family members as well.

In this section I will be discussing obesity and how Pender's theory can be applied to help prevent further disease. Obesity can be defined as "an abnormal or excessive fat accumulation that presents a risk to health. A body mass index (BMI) over 25 is considered overweight, and over 30 is obese" (World Health Organization, 2022). Obesity has become a problem worldwide and it is considered the most metabolic/nutritional disease in the United States. It is not only affecting adults, but it is become a problem with children. Data from The Center for Disease Control and Prevention (CDC) reveals that in 2016 obesity affected 38.8% (93.3 million) adults and 18.5% (13.7 million) children and adolescents.

The primary cause of obesity is due to poor health choices. Most people know the consequences of obesity and still disregard the information and continue to live there life as is, regardless of the consequences. Having research that demonstrate how living a healthy lifestyle has improved people's quality of life might help influence others to develop a healthy lifestyle. The Health Promotion Model focuses on motivating individuals to develop positive health behaviors.

There have been multiple studies using the Health Promotion Model by Nola Pender, research has shown to have positive outcome while using this model. A study was done to improve the nutritional behavior of overweight and obese women using the Health Promotion Model. The study consisted of 108 women, ages ranging from 18-60, the participants were separated using a randomized method and placed in either a control or experimental group. After two months of using interventions that study concluded that using Pender's model had a positive effect on women's nutritional behaviors (Khodaveisi et al., 2017).

Strengths and Benefit of Health Promotion Model

Pender's models have many strengths. One of the major strengths that I discover is that nurses can adopt this model into their practice and use it to counsel patient on health promotion. Another concept that I believe is a strength although has been previously critiqued and could be viewed as a weakness. This model has been previously critiqued on focusing only on prevention, disease-centered, behavior and lifestyle orientated, rather than addressing the broader concepts of health promotion paradigm (Raingruber, B. 2017). I strongly believe that focusing on health promotion and disease prevention is very important to prevent disease process from progressing to a chronic illness. Many people will wait to change their lifestyle habits until they begin to face a preventable disease. When the focus is on preventative measure it will not only benefit the individual, but it will also take a burden off the health care system. Many diseases can be prevented with healthy habits and understanding the risk of developing such diseases.

Weakness in Health Promotion Model

A weakness that I found on Pender's Health Promotion Model is that it is designed to be used on individualized patients. This model focuses on creating interventions for an individual by identifying any personal barriers that they could possibly face and might affect them

developing healthy behaviors. This model was not designed to be used on a family or community. Pender's model was created by gaining inspiration from two other theories', one of them being the expectancy-value theory by Martin Fishbein (Pender, 1996). Pender's theory focuses on an individual being engaged with their care to achieve their goals therefore resulting in valued outcomes (Pender, 2011a). The final step in Pender's model is for the individual to commit to their specific plan and modify any barriers as they might present, thus it would be impossible to do this with a community or family since every individual is different and would have different barriers.

Summary

Pender's Health Promotion Model was created to help guide nurses counsel patients on living a healthier life and preventing disease. Pender's model does not discriminate against race, gender, culture, ethnicity, religion, etc. The model helps identify background factors that can influence health behaviors. Pender does mention that race and ethnicity can play a powerful influence on health behavior's (Pender, 1996). Health barriers are identified during the process of using the health promotion model.

Pender's Health Promotion Model has made great contributions in the nursing field. Pender's purpose to creating this model was to help create a framework to integrated nursing and science perspective on elements that affect health behaviors (Pender, 1996). While this model was created to guide nurses counsel patients on living a healthier life and preventing disease thus providing some relief on the health care system from treating preventable diseases, this model can be used by health care providers as well. Spending more time, the patient using Pender's models can have great outcomes compare to only being used by nurses. If the health care team focused more on primary prevention, the cost in health care would decrease and people would

live healthier lives. According to the CDC Chronic disease has a significant health and economic cost in the United States, thus preventing chronic disease and managing symptoms when prevention is not possible can reduce the medical cost (2022). Pender's Model has influenced the health care community and she has previously worked with international scholars to help them apply her theory to education, research, and practice (Pender, 2011b).

The Health Promotion Model can be utilized by health care providers as well as nurses. In future practice every physical/wellness check should be accompanied by a counseling session done either by the provider or nurse. Ideally the counseling session should be done by the primary provider but realistically it might be impossible for some clinics. The counseling session should incorporate Pender's Health Promotion Model, making an effort in promoting better health behaviors. This model focuses on optimizing health by promoting positive health behaviors. The counseling session should be used to further get to know the patient and helping the patient identify barriers they could face to be able to achieve optimal health. Promoting positive behaviors during the counseling session can help prevent many health problems before they occur, which should be the focus for preventative care. Pender's goal is to intervene before a problem occurs rather than intervening after a patient already developed an acute or chronic health problem (Pender, 2011).

By using the three major concepts of Pender's Health Promotion Model providers can help individuals optimize their health by helping them develop healthier behaviors. Behavior-specific cognitions and affect are "categories that have major motivational significance and are critical for interventions due to their modifiability" (Hwang & Kim, 2020, p. 2). A patient can modify their health behaviors as barriers arise and will be able to achieve positive health outcomes. By using Pender's theory patient will be encouraged to achieve their desired

behavioral health outcome being prepared for action (Pender, 2011b). The overall goal is to help patients recognize barriers that are preventing them from reaching a healthy lifestyle and helping them understand the consequences of unhealthy behaviors to help prevent disease.

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