

Health promotion model



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The Health Promotion Model (HPM) . designed by Nola J. Pender. describes the multidimensional nature of individuals as they interact within their environment to prosecute wellness while increasing their degree of wellbeing. Pender offers a theory that places importance on behaviours that improve wellness through a life-time. The HPM offers insight into how influencing factors experienced by an person and their interactions with the environment affect the chase of wellness. HPM remains applicable as wellness publicity and unwellness bar continue to be every bit of import as the intervention of disease.

Health is an active province in which changeless attempts are made by the person. in their environment. to accomplish and keep wellness. The patient has a distinguishable set of factors act uponing their actions to achieve wellness. The success of the HPM is based on the premise that an person is willing and able to play an active function through wellness advancing behaviour (Alligood & A ; Tomey. 2010) . Internal rating and analysis of the theory Identify premises. both expressed and inexplicit. Premises are statements that are understood to be true without cogent evidence or presentation.

They are beliefs about phenomena one accepts as true. Pender’s premises of the Health Promotion Model are expressed and testable. Explicit premises are statements that are clearly defined and extinguish (take any) ambiguity. Due to the expressed nature. this theoretical account has been used as the footing of many research surveies. both nursing and non-nursing. The expressed premises of Pender’s theory include:

1) Persons seek to make conditions of life through which they can show their alone human wellness potency. 2) Persons have the capacity for brooding self-awareness. including appraisal of their ain competencies.) Persons value growing in waies viewed as positive and effort to accomplish a personally acceptable balance between alteration and stableness. 4) Persons seek to actively modulate their ain behaviour. 5) Persons in all their biopsychosocial complexness interact with the environment. increasingly transforming the environment and being transformed over clip. 6) Health professionals constitute a portion of the interpersonal environment. which exerts influence on individuals throughout their life spans. 7) Self-initiated reconfiguration of person-environment synergistic forms is indispensable to behavior alteration (Alligood & A ; Tomey. 2010) .

How does the theoretician specify the four constructs of the paradigm of nursing? These constructs are: Nursing. Environment. Person and Health. Most theoreticians have defined these constructs otherwise. While the HPM focuses on wellness publicity and offers many holistic attacks to understanding wellness. the four major constructs of the nursing paradigm are non defined by Pender. The theoretical account helps nurses program and implement health-promoting alterations. It takes into consideration the multidimensional nature of individuals as they interact within their environment to prosecute wellness while increasing their degree of wellbeing.

How does the theoretician define and inter-relate major constructs of their ain theory? While wellness promoting behaviours are the coveted result of the theoretical account. Pender identifies relationships between constructs.

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The theoretical account links the major constructs under three headers: single features and experiences, behavior-specific knowledges and affect, and behavioural result. Individual features, which include prior related behaviours and personal factors, are the best forecasters of future behaviour. Individual features affect behavior specific knowledges and affect.

The behaviour specific knowledges and affect are listed by Pender as the followers: Perceived benefits barriers, self-efficacy, activity related affect, interpersonal influences, situational influences, committedness to program of action, and immediate viing demands and penchants. Behavior specific knowledges and affect are most conformable to be changed by intercession, which makes them the nucleus for nursing intercession in the HBM. Both single features, experiences, behaviour specific knowledges, and affect have direct effects on the behavioural result (George, 2010) . Identify propositional statements

Pender developed 14 theoretical averments or propositional statements for The Health Promotion Model. These statements demonstrate how the biopsychosocial procedures motivate persons to prosecute in behaviours directed towards the sweetening of wellness (Alligood & A ; Tomey, 2010) . The theoretical averments or statements are the undermentioned:

1) Prior behaviour, every bit good as inherited and acquired features, influence beliefs, affect, and passage of health-promoting behaviour. 2) Persons commit to prosecuting in behaviours from which they anticipate deducing personally valued benefits.) Perceived barriers can restrain the committedness to action, the go-between of behaviour, and the existent

behaviour. 4) Perceived competency or self-efficacy to put to death a given behaviour increases the likeliness of committedness to action and existent public presentation of behaviour. 5) Greater perceived self-efficacy consequences in fewer sensed barriers to specific wellness behaviour. 6) Positive affect toward a behavior consequences in greater sensed self-efficacy. which. in bend. can ensue in increased positive affect. 7) When positive emotions or affect are associated with a behaviour. the chance of committedness and action is increased.) Persons are more likely to perpetrate to and prosecute in health-promoting behaviours when important others model the behaviour. anticipate the behaviour to happen. and supply aid and support to enable the behaviour. 9) Families. equals. and healthcare suppliers are of import beginnings of interpersonal influences that can increase or diminish committedness to and engagement in health-promoting behaviour. 10) Situational influences in the external environment can increase or diminish committedness to or engagement in health-promoting behaviour.

1) The greater the committedness to a specific program of action. the more likely health-promoting behaviours will be maintained over clip. 12) Committedness to a program of action is less likely to ensue in the coveted behaviour when viing demands over which individuals have small control require immediate attending. 13) Committedness to a program of action is less likely to ensue in the coveted behaviour when other actions are more attractive and therefore preferred over the mark behaviour. 14) Persons can modify knowledges. affect. and the interpersonal and physical environments to make inducements for wellness actions (Alligood & A ; Tomey. 2010) .

Analyze consistence of the theory Consistency (logical signifier) refers to systematic development and structural lucidity. Definitions of constructs should be consistent across the theory and relationships across constructs clearly identified. Is the theory logical? The model's conceptual diagram and its variables are easy to understand. The theory is logical because there are many relationships between each construct. many of them both straight and indirectly impacting the ultimate end point of wellness advancing behaviour. Remark on the adequateness. simpleness and generalization of the theory.

Adequacy is a term that refers to how the theory is accepted by the nursing community. Is it applicable to pattern? Does this theory explain nursing? The Health Promotion Model is applicable to nursing and accepted by the nursing community due to the usage of the nursing procedure. The nursing procedure is a goal-oriented method of caring that provides a model to nursing attention. It involves five major interconnected cyclic stairss: appraisal. diagnosing. rating. planning. and execution. The most of import stairss of the nursing procedure as it relates to this theoretical account affect the execution and rating stages.

Although appraisal. diagnosing and planning stages are of import to the development of the HPM. they are non straight reflected in the theoretical account. Execution can be found throughout the full theoretical account through the usage of the features. experiences. knowledges. and affect information to place how to back up the committedness to a program of action and how to promote the client to seek to avoid viing demands and non go embroiled by viing penchants. Evaluation is based upon the public

presentation of the mark health-promoting behaviour (George. 2010) .

Simplicity refers to holding few constructs and simple relationships.

Complex theory would hold many constructs and multiple relationships.

Pender's constructs are simple and easy understood. The constructs can be logically applied to any state of affairs in which a client aspires to alter wellness related behaviours and those environmental influences to back up this alteration. Flexibility of the theoretical account allows for designation of the most of import variables in relation to a selected wellness behaviour.

Generality refers to the range of constructs and ends. The more limited the constructs and ends, the less general the theory. The more general the theory, the greater the applications.

Generalizability of a theoretical account centres on measuring its pertinence to other state of affairss or phenomena. This theoretical account focuses on measuring the person but is non easy generalizable to groups or community populations. It can be applied to different scenes and is non limited to specific civilizations as it allows for the diverseness of the person. Type of theory refers to: Grand theory, Middle scope or Micro theory, Philosophy. The Health Promotion Model is considered a in-between scope theory. It has been formulated through initiation by the usage of bing research to organize a form of cognition about wellness behaviour.

Middle scope theories normally are generated through this attack. These theories are more precise, with a focal point on replying specific nursing pattern inquiries. External rating and analysis Relationship of theory to pattern The purpose of the theoretical account is to supply counsel to nurses

when placing how to be most supportive to a patient when planning and implementing wellness related alteration. It takes into consideration that persons are alone, and their life experiences and personal features influence wellness behaviour alterations.

With the ability to see all of these variables, this theoretical account acts as an appropriate tool for advancing positive wellness related behaviours. It has strength of usage in pattern because looking at all variables provides a more complete image of the client. This completeness in bend should heighten the possibility of positive results (George, 2010). One survey read for this assignment proposed the demand for wellness publicity and disease bar for household health professionals of post-stroke patients in Taiwan.

Formal wellness attention and societal service resources for post-stroke attention in Taiwan are limited. Patients are cared for at place with household members as the primary beginnings of attention. The Health Promotion Model provides a model for a modified theoretical account in this survey, which in bend facilitates analyzing the relationship between and among caregiver's personal factors, the attention recipient's functional position, the caregiver's perceived self-efficacy, societal support, reactions to caregiving, and wellness publicity behaviours in household health professionals of community brooding shot patients in Taiwan.

Nurses frequently neglect integrating societal support into instruction of household members. Social support is an of import facet for health professionals because the health professionals need as much support as possible from others. Nurses can mention these health professionals to, and

even set up. community preparation plans and support groups for household health professionals. The findings of this survey indicated the demand to follow up with health professionals and mentioning them to the appropriate wellness attention services where necessary (Tang and Chen. 2002) . ?

Relationship of theory to instruction

This theoretical account and its variables provide a tool for successfully integrating wellness instruction into pattern. The variables can be modified through nursing actions. which facilitates easiness of following health-related behavioural alteration and is more realistic because it takes into history a client's behaviours and penchants. This allows the nurse to develop a alone attention program that takes these behaviours into history. Nurses are in a place to act upon healthy behaviours and integrate them into patient instruction.

A recent survey utilizing Pender's Health Promotion Theory as the model focused on the relationship between nurses' beliefs sing the benefits of exercising. their exercising behaviour and their recommendation of exercising for wellness publicity or as portion of a intervention program. Beliefs of the benefits of exercising were measured utilizing the Exercise Benefits/Barriers Scale (EBBS) . The beliefs of benefits were determined utilizing the EBBS benefits subscale mark. with a higher mark reflecting the individual's feelings of stronger positive benefits of exercising.

Consequences showed positive correlativities between exercising benefits. physical activity and recommendation of exercising to patients. Nurses who believe in wellness publicity and embracing healthy behaviours are more

likely to be positive function theoretical accounts and learn healthy behaviours to their patients (Esposito and Fitzpatrick. 2011) . We believe that nurses have a professional duty to supply the best attention for their patients. and are in the place to be function theoretical accounts.

Nurses spend the most clip with patients and. as a consequence. impact patient wellness by learning healthy behaviours and wellness publicity. Relationship of theory to research Pender revised and based the Health Promotion Model on her old research surveies placing factors affecting surveies of how persons make determinations about their ain wellness attention in a nursing context. This theoretical account has served as a model for research intending to show desirableness for clients to seek behaviour alteration and perchance altering the environment to back up healthy behaviour (George. 2010) .

Both quantitative and qualitative methods have been used. with descriptive surveies being most common. One illustration of utilizing the theory in research is as follows. Nola Pender’s Health Promotion Model was the model for a non-experimental. quality confidence survey utilizing descriptive retrospective chart reappraisal in rural household pattern clinic in the southern United States. The intent of this survey was to measure smoke surcease intercession by primary attention suppliers for patients who smoke with a known history of CAD.