Health Promotion Ideologies

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Nursing is a healthcare profession that has an extensive history. Throughout time, many theories have been created and utilized for patient care, safety, comfort, health, and prevention. The theories that were created in the past are being used presently to deliver adequate patient care. Each nurse will use a combination of different theories or specialize in a couple that signifies his/her background.

My background in public health focuses on health promotion/prevention, and Dr. Nola J. Pender’s Health Promotion Model (HPM). The HPM includes behaviors from an individual that could be used to modify his/her lifestyle, whether to prevent diseases or promoting a healthier lifestyle. Each person has a unique character trait that can lead to specific results. It focuses on individual characteristics, behavior-specific cognitions and affect, and behavioral outcomes. The desired change in health behavior, improved quality of life, and better bodily functioning are the overall goals of the HPM, so future incidences will not reoccur (Alligood, 2018). While like Becker’s health belief model, Pender’s model does not include fears or threats as a source of motivation (Alligood, 2018). Nurses use Pender’s HPM to teach patients how to either prevent their condition or how to improve their health so that their condition does not cause them to deteriorate.

Pender’s HPM is relevant to nursing action as it focuses on health promotion and disease prevention. Despite its purpose in improving an individual’s lifestyle, it does not focus on a community due to each person having different characteristics that can alter the desired outcome. A society cannot be labeled based on one person’s diagnosis. While the community may share the same condition, each person will have different attributes that can drastically alter the plan of care. Also, the HPM cannot be used for individuals who are currently experiencing a crisis such as a heart attack or suffering a stroke, only before or after the incident occurs.

**Study Involving the Pender’s Model**

For educational purposes, the HPM has been used for promoting healthy behaviors. One article discussed the HPM being used for nutritional counseling for boys in secondary schools located in Hamadan. Over two months, two groups containing a total of 120 boys were examined, with one receiving the interventions and the other receiving the school’s traditional instructions. Tests based on the HPM were given before, during, and after the interventions were delivered. The researchers concluded health education programs should be applied rather than traditional instructions (Mohammadi, 2019).

The researchers used ANOVA analysis for gathering results. More secondary schools should have been examined as the sample population consisted of only 120 boys from different counties. While a randomized cluster sampling method and relative randomize method was used to reduce confounding variables, everyone within the sample population were similar regarding education and health. Finally, the researchers could have discussed what questions were given to the sample population to illustrate how it relates to the HPM.

**Personal Application**

Pender’s HPM was quintessential for many of my patients. Before I went into nursing, I volunteered at the YMCA’s diabetes management program. A few months ago, I treated a patient who had a severe hyperglycemic event and was newly diagnosed with Type II diabetes mellitus (T2DM). For years, the patient was a pre-diabetic and did not make any modifications to his lifestyle. He was in complete disbelief and felt regretful for not paying attention.

The patient did not want to experience another similar event, so he was more than ready to listen. I consoled him about his condition and how it can be managed. Pender focuses on individual characteristics, barriers, and expected outcomes. It requires a commitment to achieve the goals related to diabetes management. We discussed possible obstacles such as means in acquiring insulin, financial difficulty, proper education, and possible events that can raise his blood sugar. The family was involved in the care plan, and I discussed with him how blood sugar could be managed well with proper nutrition, exercise, and encouragement. I talked to him about how the YMCA has a diabetes management program that he can participate in if he has been diagnosed with T2DM. Through consulting with a social worker, I discovered that his insurance could cover his insulin, free of charge, for one year. I also spoke to him about how his current job can adjust his schedule based on his condition.

 With all the necessary steps taken, it would allow him to learn how to manage his blood sugar without using too much insulin. He made a goal in which after one year, he will have full control of his diabetes, improve his lifestyle, and continue spending time with his friends and family without impediments. I also had a surprise encounter with him at the local YMCA. He has been adjusting his lifestyle, has lost twenty pounds, and has been receiving support from everyone he knows.

**Personal Philosophy**

The ICN Code of Ethics states, “nursing is the respect for human rights, including the right to life, to dignity, and to be treated with respect” (Code of Ethics for Nurses, 2012). I went into nursing because I believe patients need someone to listen to when they are hurt, and I want to serve as an educator. Nurses spend the most time with their patients, fostering a stronger relationship via a holistic approach compared to other healthcare professionals. The physical, mental, and cognitive needs of the patient must be addressed for him/her to achieve optimal health.

I obtained my Master’s in Public Health (MPH) with an emphasis on health promotion along with my Bachelor’s of Science in Nutrition, focusing on health promotion. Pender’s HPM resonated with my beliefs because the country is struggling with chronic diseases that can be managed if proper education is given. From my past job experiences, the educators I have consulted with did not treat the patient with a holistic approach. I believe that with the knowledge I am obtaining from the bedside, along with my educational background, I can give back to the community, one person at a time.

**Promoting a Healthy Life Lesson**

A common theme for nursing practice is building trust by providing services to others. To do so, nurses in the past have created theories on taking care of the patient. Despite this prevailing ideology, all the theories have a different structure to them, are modified versions of previous theories, or are influenced by other theorists. For example, Dr. Kristen Swanson based her nursing care theory on Dr. Jean Watson’s theory of human caring (textbook source; chapter 35). This assignment made me understand that each theorist wants to take care of the patient by utilizing a different approach. Nursing theory is quintessential in delivering therapeutic care, yet many nurses do not realize they are using them. Throughout my services as a health educator, strength conditioning specialist, and wellness coach, I did not know that I was using sections of Pender’s HPM. Health promotion and education are imperative in improving the quality of life in not only patients, but also in everyone we encounter within our professional career. Now that I understand everyone having a perceived barrier, I will think about Pender’s teachings when I deliver care for my patients.

References

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