The behavior change philosophy designs and implements health education interventions according to measurable objectives and promotes voluntary changes in health related actions. The design of a health education intervention based on the behavior change philosophy begins with a preliminary analysis to identify triggers for a negative health behavior, and then identifies short and long term goals to change that behavior. After establishing objectives to reach those goals, strategies are developed to carry out those objectives. As well as finally setting up an awards plan for every objective and goal accomplished (Cottrell, 2009). For example, a person who is excessively smoking cigarettes daily, some triggers could be stress, anxiety, or suffering. A person could excessively smoke cigarettes when stressed because it takes them away from the stressful situation and gives them a mental break. A person could smoke a lot of cigarettes when anxious because they feel that it calms their nerves. Or a person could smoke a large amount of cigarettes when experiencing suffering such as a family relative’s death or personal pain because they do not have an alternative coping strategy.

Hence the next step would be to identify short and long term goals to decrease and ultimately stop smoking. Some short term goals for this person who smokes an excessive amount of cigarettes daily would be to smoke only three-fourths of the usual number of cigarettes. Meaning that they would have decreased their cigarette number by one-fourth of what they currently smoke. Or to only smoke every other day could be another option. The ideal long term goal would be to not smoke at all. Objectives to reach these goals could be to buy fewer cigarettes therefore the person would have fewer cigarettes to smoke. Wearing a nicotine patch or chewing gum such as Nicorette during the off days of smoking could be used to ease the cravings.
Strategies to reach these objectives would be to identify ways to recognize situations that promote the identified triggers and practice alternative coping methods. For example with the trigger of stress, situations such as a large work load could possibly be handled by improved time management skills. For the trigger of anxiety, situations such as having a job interview could be handled by preparing paperwork well in advance and practicing interviewing skills with someone. For the trigger of suffering, situations such as physical ailments could be handled with learning physical therapy techniques.

Furthermore, to encourage the achievement of the goals and strategies set an awards plan should be constructed. For example, for every objective the person utilizes they could treat themselves to buying something with the money that they saved from not purchasing cigarettes. For every strategy utilized the person could treat themselves to decrease use of nicotine patches and/or chewing gum such as Nicorette, resulting in some extra money to buy something else they really enjoy. Meanwhile, the ultimate award for accomplishing the objectives and strategies to decrease and ultimately stop smoking would be a healthier lifestyle.

The success of this philosophy in changing a behavior can be attributed to goal desires. By linking behavioral intentions with a strongly desired goal, a person can have a self-regulatory influence on the strength of the connection between intentions and behavior (Prestwich, Perugini, & Hurling, 2008). However, even though goal desires moderate the impact of intentions, health behavior change is not predicted well by behavioral intentions alone. Action planning and coping planning are two self-regulatory strategies that may help bridge the gap between intentions and behavior. Action planning includes the when, where and how of implementing a behavior. Coping planning involves the anticipation of barriers and ways to overcome them (Scholz,
Schuz, Ziegelmann, Lippke, & Schwarzer, 2008). Therefore by using the behavioral change philosophy one is truly capable of changing negative health behaviors effectively.
References

