

Concept Analysis of Self-Regulation in Health Behavior

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Abstract

Healthcare providers, especially nurses, are working on developing patients' health outcomes. One of the approaches to do so is by focusing on patients' behavior. Behavior-based care management is important for patients who have chronic conditions. Such conditions need adequate focus on healthy behaviors and remember that it can be one of the pathways to better healthcare. Performing a healthy behavior is not easy; it needs continuous monitoring and surveillance. One of the principles for healthy behaviors is self-regulation concept. Little research have been describing patients' self-regulation toward their health behavior. The purpose of this paper is to extend the meaning of concept of self-regulation in health behavior. The author aims to elucidate the defining attributes of self-regulation in health behavior and identify antecedents and consequences by using Walker and Avant's model. Multiple cases (a model case, borderline case, and contrary case) are also presented to show how self-regulation in health behavior is important to the critical attributes. These cases are reflected on hypertension disease because of the author's interest. Empirical referents are also presented to determine the current perspectives of the concept of self-regulation in health behavior. Healthcare professionals, particularly nurses, should be able to understand the dimensions of concept of self-regulation in health behavior and its importance for designing new guidelines for better self-management.

Keywords

Self-Regulation, Self-Regulation in Health Behavior, Health, Defining Attributes, Antecedents, Consequences

1. Introduction

Good health is of critical significance to human beings, and many people understand that their behavior plays a major role in enhancing health [11]. In different countries, people enhance their health by focusing mainly on visiting physicians and following their prescribed instructions. In Saudi Arabia, for example, changing behaviors depends more heavily on physicians' instructions than patients support to themselves [9]. The questions are: Why "relying on physicians" has become something usual? Why trust is high in physicians or nurses more than in one's own empowerment? Patients should understand their health conditions and learn appropriate behaviors toward their health problems [2]. Understanding the need to enhance health behavior is the pathway to achieving and maintaining physical and emotional well-being [11]. Health-related

behavior needs deeper understanding because of its importance in self-management of chronic conditions [12]. Patients with chronic conditions should seriously look at their own behaviors. However, changing behavior is not as easy a process as it seems; people's abilities to self-regulate are impacted by many factors [1]. Behavior change needs further examination and focus on a concept called "*self-regulation in health behavior*." The purpose of this paper is to provide an in-depth analysis of the concept of self-regulation in health behavior, through the use of Walker and Avant model [13]. Different points will be also presented under this model to help clarify the analysis of self-regulation in health behavior.

2. Literature Review

The literature review presents different scientists' contributions to the concept of self-regulation in health behavior. Self-regulation is important in chronic conditions

as it is essential to improve healthy behaviors [12]. Patients' behaviors need to be attended to and also to increase the focus on the idea of self-regulation. Developments in the field of health and wellness have led to an increased focus on self-regulation concept, which may improve physicians' comprehension to the need for encouraging their patients' efforts to achieve their goals [11]. Other studies also stated that process of self-regulation in health behavior is needed for organizing goals related health enhancement [1]. With regard to the history of self-regulation in health behavior, the concept was developed based on foundational work of Frederick Kanfer during the late 1960s and 1970s [5]. Kanfer was looking for an approach to treat psychosocial disorders. Later, he and another colleague published *Learning Foundations of Behavior Therapy*, which was important in the field of psychotherapy. Including the patient as a partner in the treatment process was under focus because of the need for the behavior modification [6]. In collaboration with other authors, Kanfer expanded his behavior theories in *Self-Regulation and Behavior Change: From Theory to Practice*, in 1982. Based on this historical root, several studies have been published since then [5]. With regard to the field of medicine's efforts to educate patients, self-regulation in health behavior is needed [11]. Level of education is a factor for enhancing health behavior. Students should be encouraged to regulate their desires and plans which lead to achieve their goals [8]. Level of education also helps understand health information and give the ability to search for such information. Adequate awareness, by knowledge or other factors, is required for expanding level of understanding to own health behavior. Self-regulation is the cornerstone of identifying what should be done and what should not [8]. This concept may help set up priorities used for enhancing health status, thus leading to behavior change.

3. Identifying Uses of the Self-Regulation

3.1. Definitions of Self-Regulation from Dictionaries

The *Oxford English Dictionary* [10] was used to understand the meaning of self-regulation. Self-regulation is defined in the OED as helping one's self without intervention from an external factor. Another dictionary was also used to help raise understanding about the meaning. The *Youth Dictionary* [14] defines self-regulation as the regulation of one's own behavior without outside control. The term self-regulation may largely refer to efforts by people to modify their thoughts, emotions, wishes, and actions to help achieve specific goals.

3.2. Theoretical Perspectives of Self-Regulation in Health Behavior

Self-regulation is found in a variety of theories from different fields, such as the self-regulation theory of human

behavior, the cybernetic view of self-regulation, Baumeister's self-control strength theory, and Bandura's self-efficacy theory [3]. These theories focus on a person's volition in addition to the internal enthusiasm to change one's behavior. The self-efficacy theory is the most commonly used in the health field [4]. The theory states that a person is able to perform a specific behavior in order to achieve goals. In addition, the theory explains that people have the ability to master and regulate situations and produce good consequences. Bandura describes the ways that people can self-regulate their behavior, including the consistency of their self-observation and self-monitoring, and the decisions they make concerning their actions [4].

4. Determining the Defining Attributes

Defining attributes is important for identifying characteristics that are associated with a concept. De-Ridderde and De-Wit [3], stated that the attributes of self-regulation were:

1) A first feature is to construe self-regulation as a dynamic motivational system of setting goals, developing and enacting strategies to achieve those goals, appraising progress, and revising goals and strategies accordingly; 2) Self-regulation is also concerned with the management of emotional responses, which are seen as crucial elements of the motivational system, and that are conceived of as intricately linked with cognitive processes (p 3); 3) Self-regulation is the individual self-control [1]; 4) Self-regulation is another strategy to self-manage and monitor chronic conditions [12]. Thus, I may define self-regulation in health behavior as an internal, emotional, and cognitive motivation produced by a person in order to change behavior and achieve better outcomes and goals.

5. Development of Cases

5.1. Constructing a Model Case

The following case presents attributes of self-regulation in health behavior. Mr. A is 55 years old with a history of hypertension. Mr. A believes that his life belongs to himself only and he should self-manage all aspects of his life. When he was diagnosed by hypertension, he designed a weekly plan to help enhance his health. He thinks that he is the one who is responsible about his health condition enhancement. He looks at the internet and other information sources to find ways that lead to better self-regulation. When Mr. A follows the plan and achieves his expected goals, he is going to reward himself and stay positive all time. His weekly plan focuses on: food care, physical exercise, blood pressure monitoring, and self-control. Few weeks later, Mr. A finds out that his blood pressure is at the optimal level. He has changed his behavior. Today, Mr. A teaches patients the ways to have better self-regulation and management of hypertension.

The model case shares all aspects of self-regulation in health behavior. Mr. A links his internal, emotional, and cognitive motivation in order to have effective self-regulation, resulting in behavior change.

5.2. Borderline Case

The borderline case includes some of the attributes of the main concept but not all of them. Mr. H is 45 years old was diagnosed by hypertension. When he was diagnosed with this disease, he thought that he should self-regulate and manage his health. His plan is to keep his blood pressure at the optimal level. However, he thinks negatively about his health status. He thinks that he may die at any time because of hypertension complications. This idea may reflect his need to additional support and remind him that his case is not the worst ever. If Mr. H changes his view of himself and starts thinking in a positive way, he may have better self-regulation in health behavior.

5.3. Contrary Case

A contrary case is the example which describes the opposite of the concept. The following is a real case. Mr. M is 33 years old who has had hypertension for almost one year and half. After he learned that he had hypertension, he did not give it enough attention. He said to me that "it is only one life and at the end we will die." Based on his principle, he did not take his medications on time, did not focus on his food and salt-intake, did not do some exercises, and did not measure his blood pressure continuously. Unfortunately, he died and I felt bad because of his ignorance to his health status even though he was well-educated and at a good position in his job. Due to lack of internal motivation to try for a better quality of life, the result was unfortunate.

6. Identifying Antecedents and Consequences

6.1. Antecedents

Antecedents are the events or incidents that happen before the existing concept [13]. They include adequate knowledge, self-efficacy, and self-monitoring. First, knowledge is necessary for effective self-regulation in health behavior. Knowledge-based chronic diseases management may be helpful for increasing one's level of self-efficacy. Goal setting and behavior change may also be improved when a patient has a good level of knowledge [3]. Second, self-efficacy can be an additional source for developing goals. The higher self-efficacy patients have, the better self-regulation in health behavior will be [4]. Motivation also may contribute to self-efficacy to better self-regulate behavior. Third, self-monitoring refers to individual awareness and the ability to regulate behavior based on different situations. A high level of self-monitoring may lead to improve self-regulation in health behavior [3].

6.2. Consequences

Consequences are what results from the action on the concept or application of the concept [13]. Improved healthy behavior, enhanced quality of life, and reduced healthcare costs are expected, following better self-regulation in health behavior [7]. Improved healthy behavior may reflect the way patients self-regulate their own behavior. Healthy behavior also tends to enhance their quality of life. A better quality of life contributes to patients' confidence in their abilities to have a good life and join individual or social activities. Healthy behavior and quality of life may be important for reflecting patients' healthcare status. Self-regulation and management are also helpful for reducing health care expenditure. Billions dollars are spent on the hospital services annually. Active self-regulation would help reduce these costs and increase effective individual care [7].

7. Defining Empirical Referents

The final step of Walker and Avant's method is empirical references [13]. A self-report and knowledge acquisition measures should be applied. Patients' reports about their own satisfaction, confidence, and quality of life may be helpful tools to reflect on the meaning of self-regulation. Self-reports may also help identify patients' facilitators or barriers toward self-regulation in health behavior [3]. Knowledge acquisition is used to determine whether patients' knowledge is effective for better self-regulation in health behavior. It is also helpful in giving the patient the ability to show his or her concerns. Knowledge acquisition could be performed with an open-ended question strategy. Those questions would be appropriate for enhancing self-regulation in health behavior and encouraging the skill of dialogue.

8. Conclusion

In conclusion, self-regulation in health behavior is a serious concept used by patients, and it may contribute to patients' families, as well. Studies and literature present evidence of the consequences of self-regulation in health behavior. However, learning about improving self-regulation in health behavior seems to be an ongoing process. This concept may be helpful for enhancing self-management of hypertension in Saudi Arabia. Knowing the actual significance of self-regulation in the self-management process may contribute to exploring deeper gaps in self-management of hypertension. Considering self-regulation in health behavior in multiple research or dissertations may strengthen its focus and importance. It may also provide different areas that require further research in Saudi Arabia. Overall, the concept of self-regulation in health behavior needs further examination because of the little research that have been conducted.

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