



Are You Ready for Change?

Health Psychology (CMED2006)

LKS Faculty of Medicine

University of Hong Kong



Learning Objectives

At the end of the lecture, student should be able to

- Identify a person's readiness to change according to the Transtheoretical model
- Suggest strategies to change a person's health-related behaviours according to their readiness to change
- Analyse a person's behaviour using the Theory of Planned Behaviour
- Apply the Theory of Planned Behaviour to suggest strategies for behavioural change





Part 1

To Change or Not to Change



Four Goals of Psychology

Four goals of psychology are to
describe, explain, predict, and influence behaviour

To influence is to encourage or discourage a behaviour -
another word for it is to CONTROL behaviour



To Change/Control Behaviours...

Stop and think about how other people / institutions are trying
to change & control your behaviour

Be aware that it happens all the time

Be alarm that although some are benign (and even loving), some
are vicious, heavy-handed, and unwarranted





How Government Control our Behaviours

Behaviours previously legal can be made illegal (and punished by imprisonment and/or fines)

Behaviours previously cheap can be made more expensive (and vice versa)

Behaviours previously easy can be made more difficult (and vice versa)



Other People that Wants to Control us

Commercial entities that want to sell us products/services

Institutes (e.g., universities and hospitals) that want us to conform to the behavioural pattern of a "good student/patient"

Friends and families that want us to be more successful/happier/healthier, or just want us to treat them better



Persuasion, Influence & Manipulation

Trying to persuade someone to change their behaviours through providing information (and to a lesser extend, through nagging) is usually considered morally justifiable

It is more questionable to influence or manipulate people to change their behaviours through exploiting their lack of understanding, biases, and emotional state





Influence

- Reciprocation
- Commitment & consistency
- Social proof
- Liking
- Authority
- Scarcity

Source: Robert B. Cialdini -
Influence: Science and Practice

Manipulation

- Guilt trip
- Gaslighting
- Peer pressure
- Negging
- Emotional blackmail
- Threaten
- False promises

Source: Stanford Encyclopedia of Philosophy -
The Ethics of Manipulation



Marketing & Government Policy

Apart from interventions to change the behaviour of a single person or of a small group, there are also ways to change the behaviour of a large group of people or a whole society

This can be done through marketing (by commercial entities, NGOs, governments and individuals) as well as through policy





Nuffield Intervention Ladder



Source: Nuffield Council of Bioethics: Public health ethical issues.



Nudge Theory & Choice Architecture

Choice architecture refers to the design of how choices are presented to the “chooser”; Nudging is about using choice architecture to encourage the chooser to make the “right” choice

E.g., putting fruit at eye level, ask people to tick a box for cutlery when ordering food delivery, draw a fly at the bottom of a urinal

Arguably preserve people's free-will, but also not long-lasting



Ethical Issues of Behavioural Change

When it comes to ourselves, we have to be aware of whether it is morally justifiable to change someone's behaviour

Both in terms of means and ends

Means: persuasion / influence / manipulation / forcing

Ends: for the benefit of us / of themselves / of the society



Reminder about Intervention

An intervention is the action of
becoming intentionally involved in a difficult situation,
in order to improve it or prevent it from getting worse

- 1) Decide whether YOU should intervene
- 2) Decide what YOU can (practically) do
- 3) Decide what YOU should and should not do





Part 2

Theory of Planned Behaviour (TPB)

J



Theory of Planned Behaviour (TPB)

Proposed by Iek Ajzen,
and is an update to the Theory of Reasoned Action

An attempt to bring together all the elements we talked about
throughout the course to explain and predict behaviour

Originally a numeric model

J

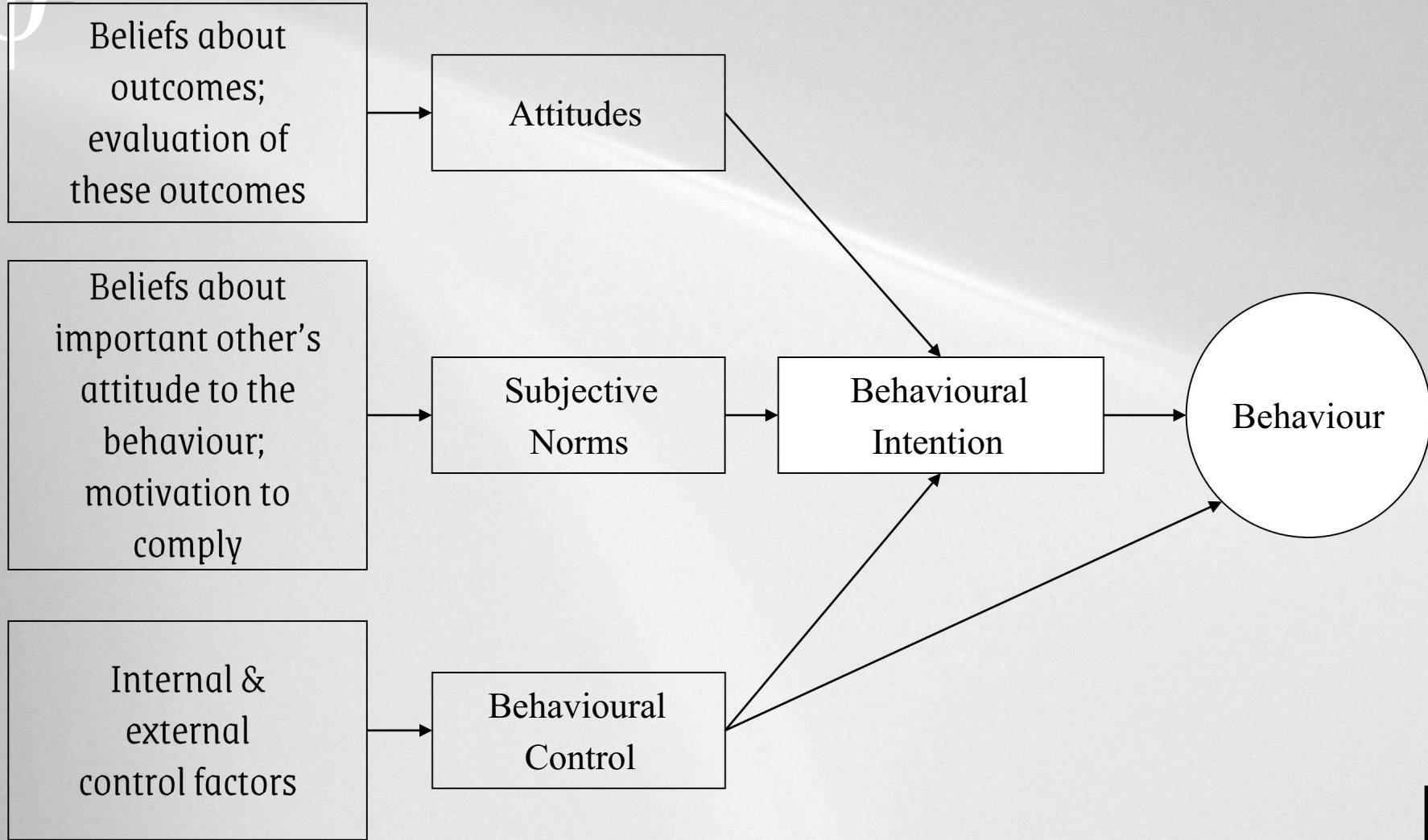


Behaviour & Behavioural Intention

The predicted outcome of the model
is behaviour (and NOT thoughts or illnesses)

Behaviour can be predicted by intention & behavioural control

Behavioural intention can be predicted by attitudes, subjective
norm and behavioural control





Attitudes

Driven by “beliefs about outcomes (of the behaviour)” and
"evaluation of these outcomes"

For example, the believed positive and negative outcomes of smoking (e.g., stress relief, costs, poor skin, COPD); and the evaluation of these outcomes (e.g., stress relief is very important, COPD is terrible but unlikely; does not care about poor skin)



Subjective Norms

Driven by “beliefs about important other’s attitude to the behaviour” (which might or might not be their true attitude) and “motivation to comply (to these important others)”

For example, believe that family and friends are all pro-smoking, but the society as a whole is anti-smoking; also, really cares about how strangers look at him when he is smoking



Behavioural Control

Driven by internal and external control factors

Internal control includes self-efficacy, which is one's confidence that one can carry out (or refrain from) the particular behaviour

External control includes external forces (e.g., legal & financial) that make it easier or harder to engage in the behaviour



Extra Note about using TPB

The model/theory is not perfect, but has predictive power

Even when the behaviour is totally present (or completely absent), note that not all individual beliefs, evaluations, and other factors will point to the same direction

The point is to use TPB to analyze what is really going on



Tool 48: Theory of Planned Behaviour

A behaviour can be explained (more comprehensively) by looking at the person's attitudes, subjective norm, and behavioural control together

Can be treated as a mathematical model or a conceptual one

It can also be used to inform possible interventions



Part 3

Transtheoretical Model (TTM)



Readiness to Change

Another way to analyze a person's behaviour
is to describe their readiness to change
(i.e., from one behaviour to another behaviour)

For this, we can use the generic “Transtheoretical model” -
also known as the “Stages of Change” Model



Stage 1: Precontemplation Stage

Not intending to make any change

Task: Increase awareness & envision possibility of change

Goal: Consideration of change for this behaviour



Stage 2: Contemplation Stage

Considering a change

Task: Analysis of pros & cons of the current behavioural pattern

Goal: Decision to adopt this behaviour





Stage 3: Preparation Stage

Decided to change (but not yet started)

Task: Increasing commitment & creating a change plan
(especially a start date)

Goal: An action plan to be implemented in near future





Stage 4: Action

Actively engaging in a new behaviour

Task: Implementing strategies for change, maybe modify plan

Goal: Successful action to change current pattern





Stage 5: Maintenance

Sustaining the change over time (e.g., for over 6 months)

Task: Sustain behaviour over time and across situation

Goal: Establish & sustain new behavioural pattern





Stage *: Relapse

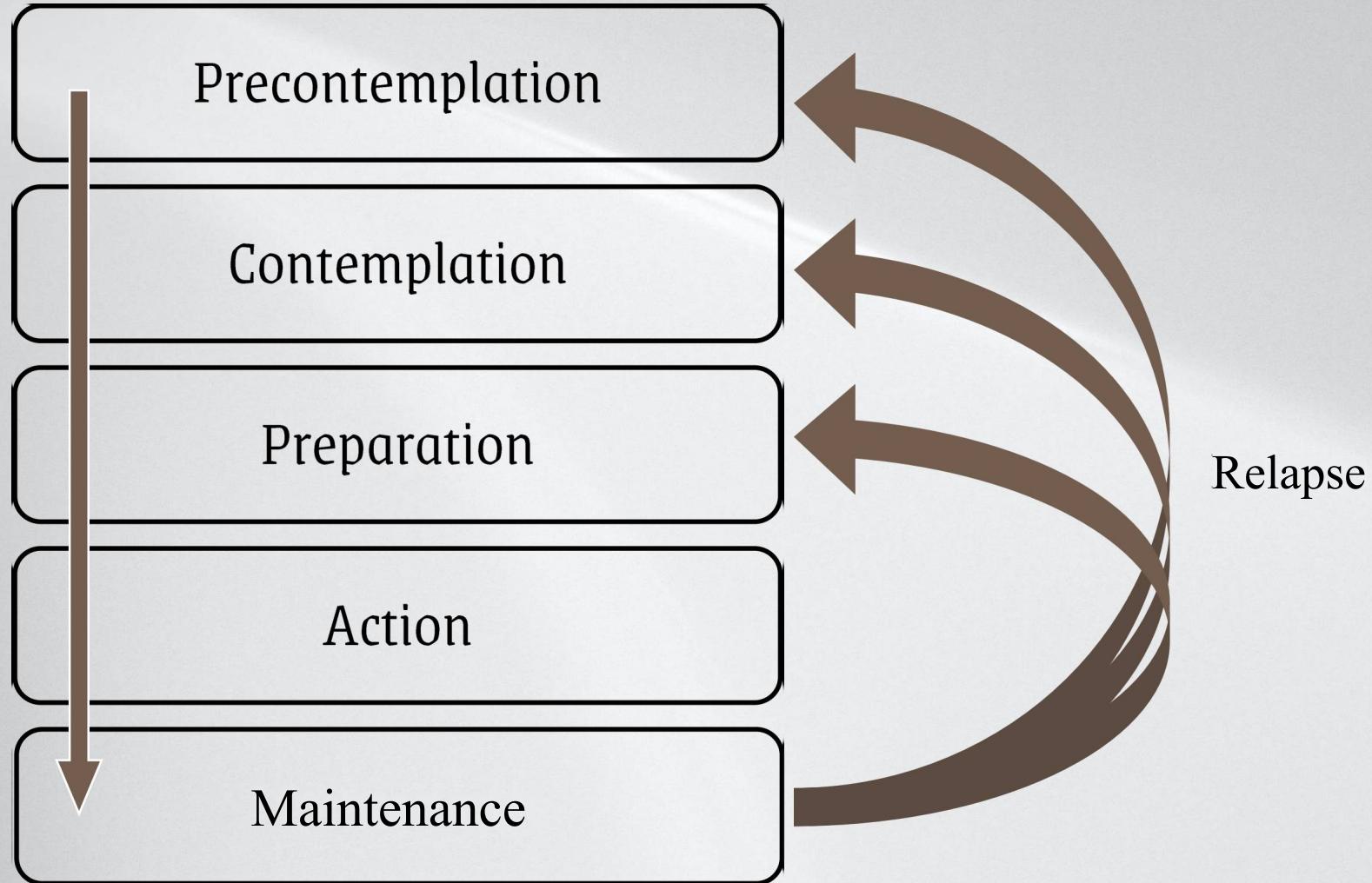
Possible relapse from a later stage to an earlier stage

Abstinence violation effect:

Failure -> reduced self-efficacy ~~self~~-fulfilling prophecy

Perform tasks to reduce risk of relapse







Tool 49: Transtheoretical Model

A behaviour can be viewed as part of a transition between a complete lack of behaviour to a full adoption of a behaviour - or vice versa

We can use this tool to encourage behaviour depending on the person's stage of change - i.e., we identify the stage someone is in, and then intervene accordingly





Tool 50: Self-Fulfilling Prophecy

There are situations where our expectation or prediction about the future causes that prediction to come true

E.g., people who expect their medication to not work → poor adherence → medication does not cure them

E.g., customers expect supermarkets to run out of food soon -> panic buy -> supermarkets run out of food



Part 4

Explaining and Suggesting Behaviours





Scenario 1

Mr Au, 70, is accompanied by his wife to visit a smoking cessation clinic. He is suffering from shortness of breath, and his brother, who is also a long-term smoking, has just been diagnosed with lung cancer.

How can you tell how ready Mr Au is to quit smoking?
Accordingly, what intervention should be given to him?



Scenario 2

Betty, 30, has just been given a gym-membership from her friends as a birthday gift. Although she knows it is a good idea to start doing exercise regularly, she is still unsure about whether she can fit that in her busy schedule. Nonetheless, she visited the gym once to check out the equipment and amenities. In terms of her taking up “going to the gym regularly”, what is her readiness to change?



Scenario 3

For each of the following target behaviours,
describe the characteristics of someone in each stage
AND suggest what a 3rd party can do to encourage
them to move onto the next stage

- (i) Exercise regularly; (ii) Quit smoking; (iii) Take up smoking





Part 5

Behavioural Change



Introduction

For each of the following scenario, try to analyse and explain the behaviour; then, suggest intervention accordingly.

The goal is not to find the completely True answer, but to come up with reasonable hypotheses that lead to possible interventions - that we can try out

(The cheat-sheet, bio-psych-social approach, and TPB are good places to start)





Extra Notes about Explaining Behaviours

Occam's Razor / Rule of Simplicity: Other things being equal, simpler theories are better

Hanlon's Razor: Never attribute to malice that which can be adequately explained by stupidity

Don't assume you know. If possible, ask the person. Verify.





Reminder about Intervention

An intervention is the action of
becoming intentionally involved in a difficult situation,
in order to improve it or prevent it from getting worse

- 1) Decide whether YOU should intervene
- 2) Decide what YOU can (practically) do
- 3) Decide what YOU should and should not do





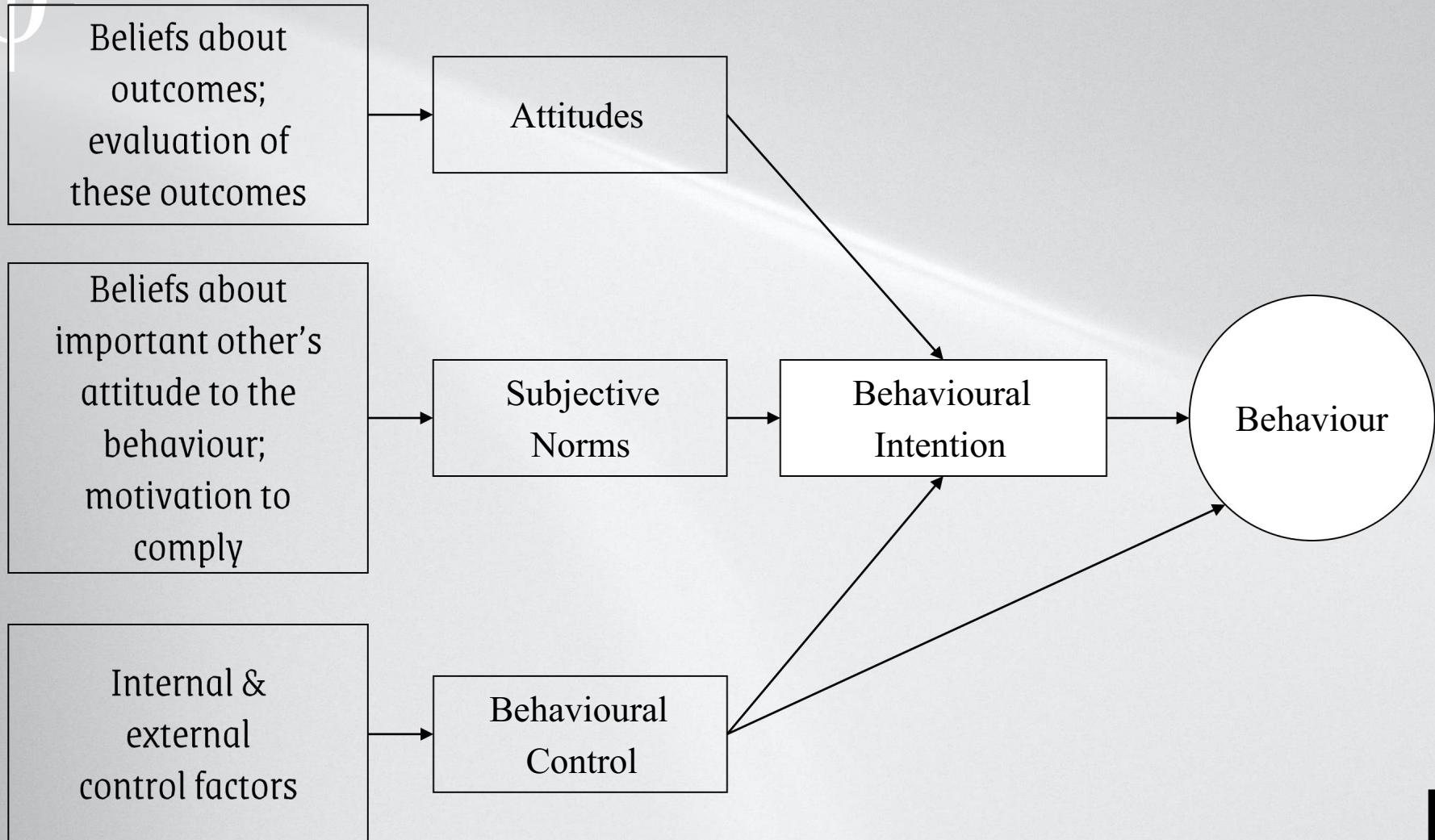
Ethical Issues of Behavioural Change

When it comes to ourselves, we have to be aware of whether it is morally justifiable to change someone's behaviour

Both in terms of means and ends

Means: persuasion / influence / manipulation / forcing

Ends: for the benefit of us / of themselves / of the society





Scenario 4: Person to Understand

Mr Lau, 23, just attempted to commit suicide by jumping out of his apartment. His fall was halted by scaffolding on the lower floors. He is currently staying in a hospital ward due to injury.

Mr Lau was living in Tuen Mun with his father, and recently broken up with his girlfriend. He is currently unemployed, but previously worked as a construction worker. He has 2 previous suicide attempts, but has no history of any mental illness.





Scenario 4: Questions to Ask



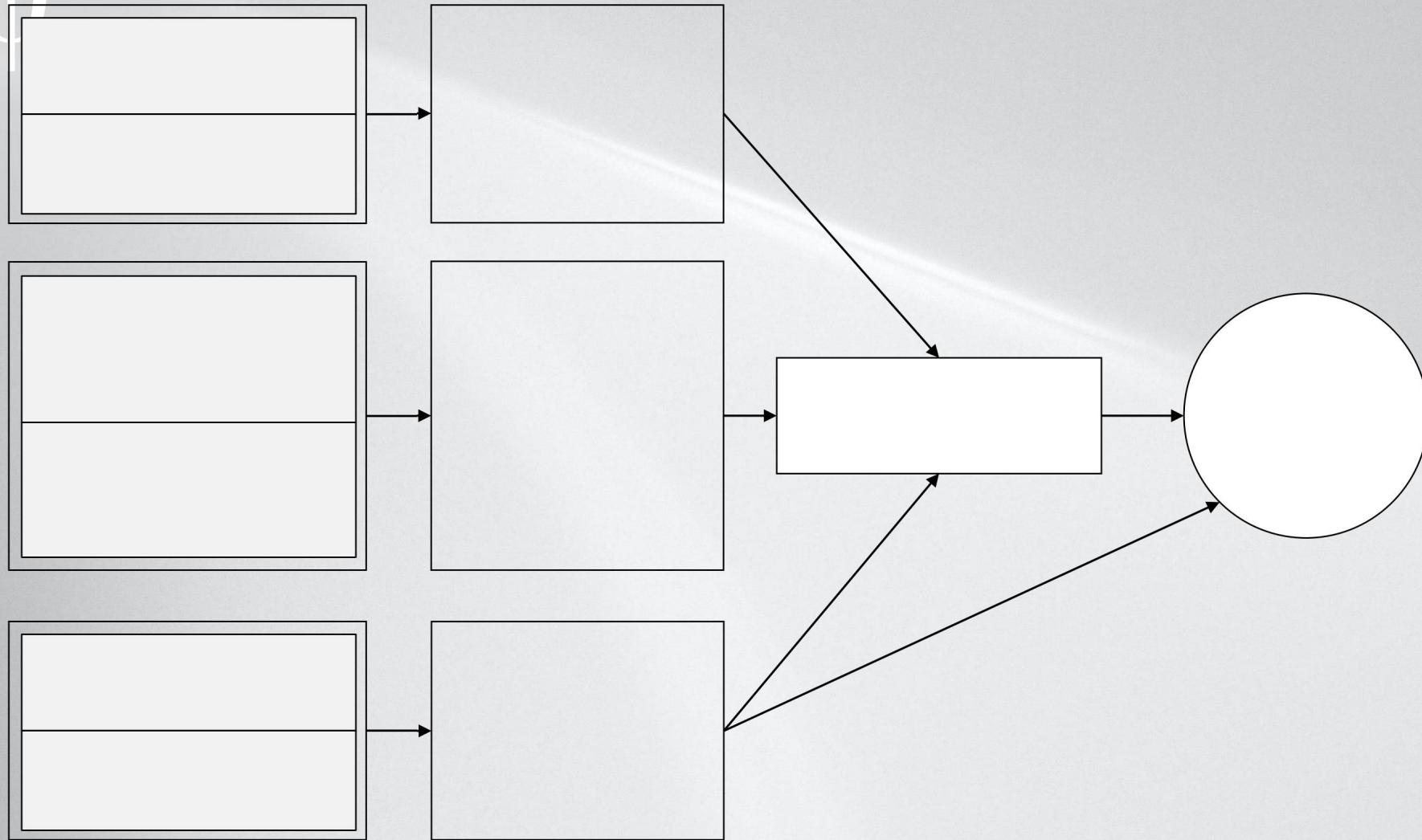
Scenario 4: People to Intervene

What do you think the following people could possibly do to prevent future suicide attempt by Mr Lau?

Mr Lau's father

A clinical psychologist working in the hospital

Head of The Samaritan, a suicide prevention organization





Scenario 5: Person to Understand

Abby, 19, is a Year II student in HKU. Academically, she is an excellent student. On weekdays, she spends the majority of her free-time studying and working on assignments. On weekends, she and her family spend time together cooking, watching Netflix, playing boardgames, and sometimes playing sports.

She has average BMI, eats quite healthily, but on average only does 60 minutes of moderate-intensity physical activity per week.



Scenario 5: Questions to Ask



Scenario 5: People to Intervene

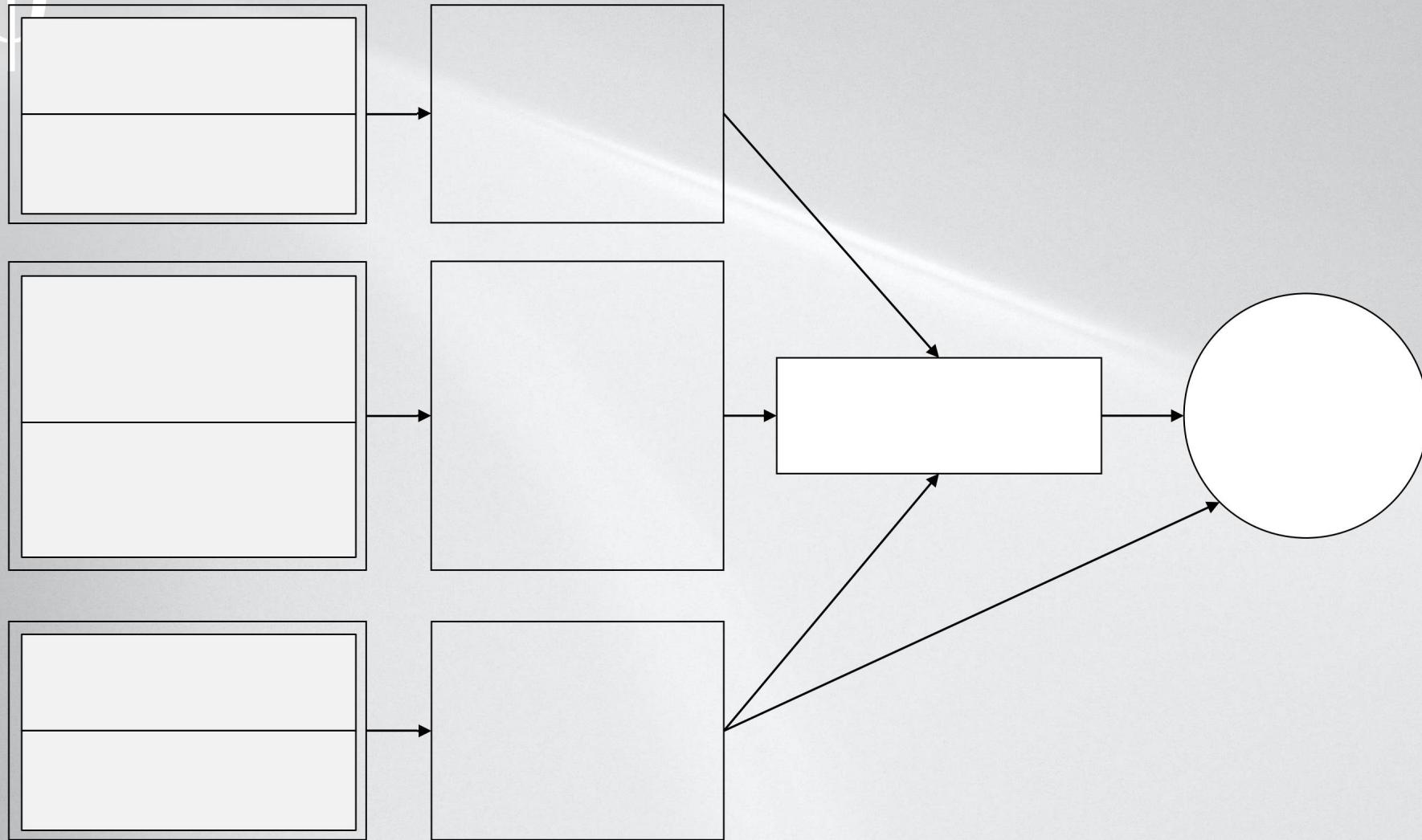
What do you think the following people could possibly do to encourage Abby to do more physical activity?

Abby's friend

Abby's family doctor

The University of Hong Kong







Scenario 6: Person to Understand

Barry, 70, is a retired office worker. He has been a regular drinker of alcohol for 50 years. Not long ago, his older brother died from liver disease, and now he is a bit worried about getting liver disease himself.

He drinks about 2 cans of beer every day, mostly at night during or after dinner. However, he binge drinks with his friends every weekend when they play mahjong together. He has 2 married children who are not living with him.





Scenario 6: Questions to Ask



Scenario 6: People to Intervene

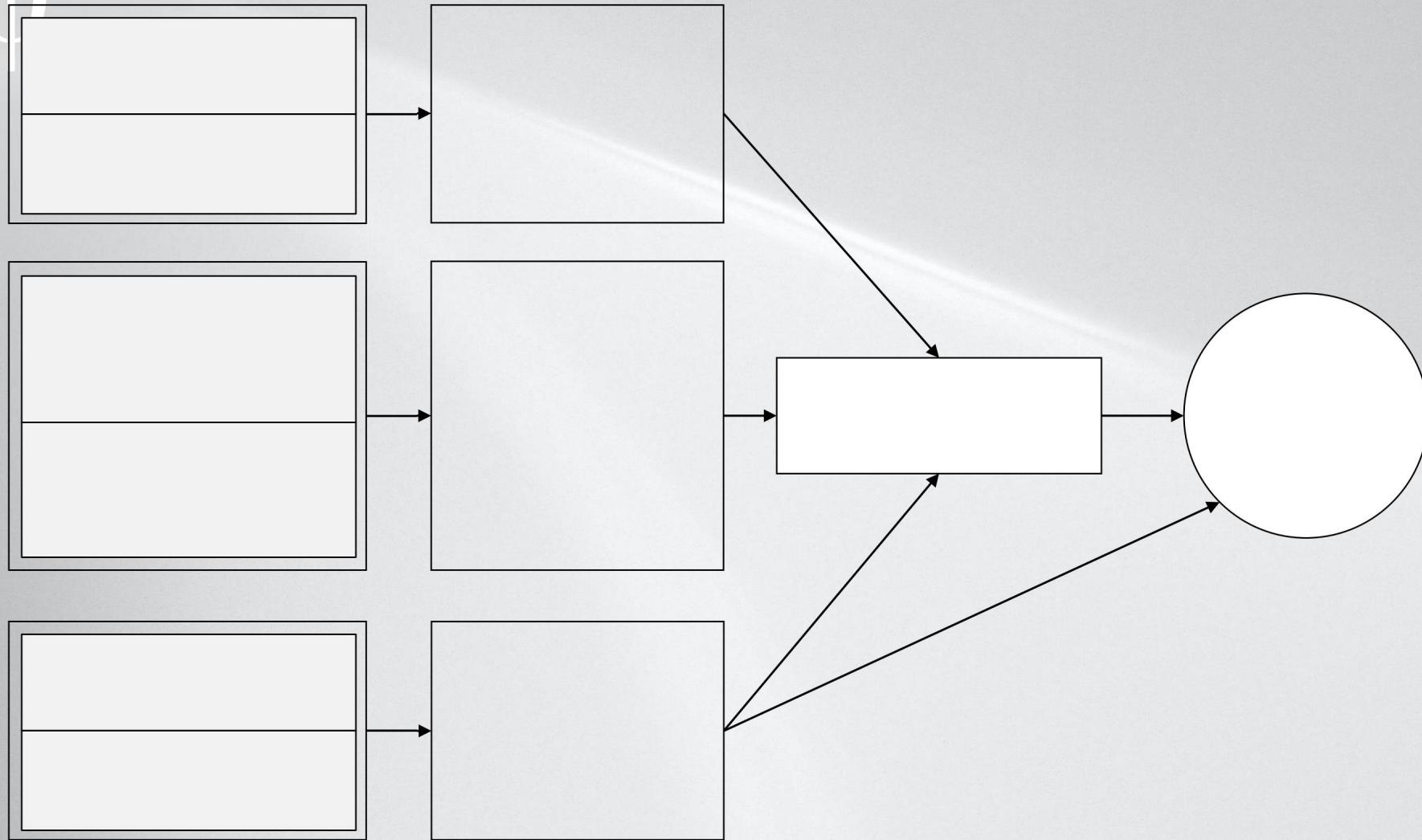
What do you think the following people could possibly do to encourage Barry to quit binge drinking?

Barry's wife

Barry's mahjong-friend

Barry's family doctor

J





Scenario 7: Person to Understand

On 24 Feb 2022, President Putin of Russia declared that Russia is threatened by Ukraine. Russia subsequently launched an attack on Ukraine.

Assuming Putin was the person who ordered the attack. Can you (try to) explain why he attacked Ukraine?





Scenario 7: Questions to Ask

What does Putin hope to gain from this attack?

Are there “important others” that Putin cares about?

What external control factors are there to stop or deter Putin?

Control factors that were present but now absent?





Scenario 7: People to Intervene

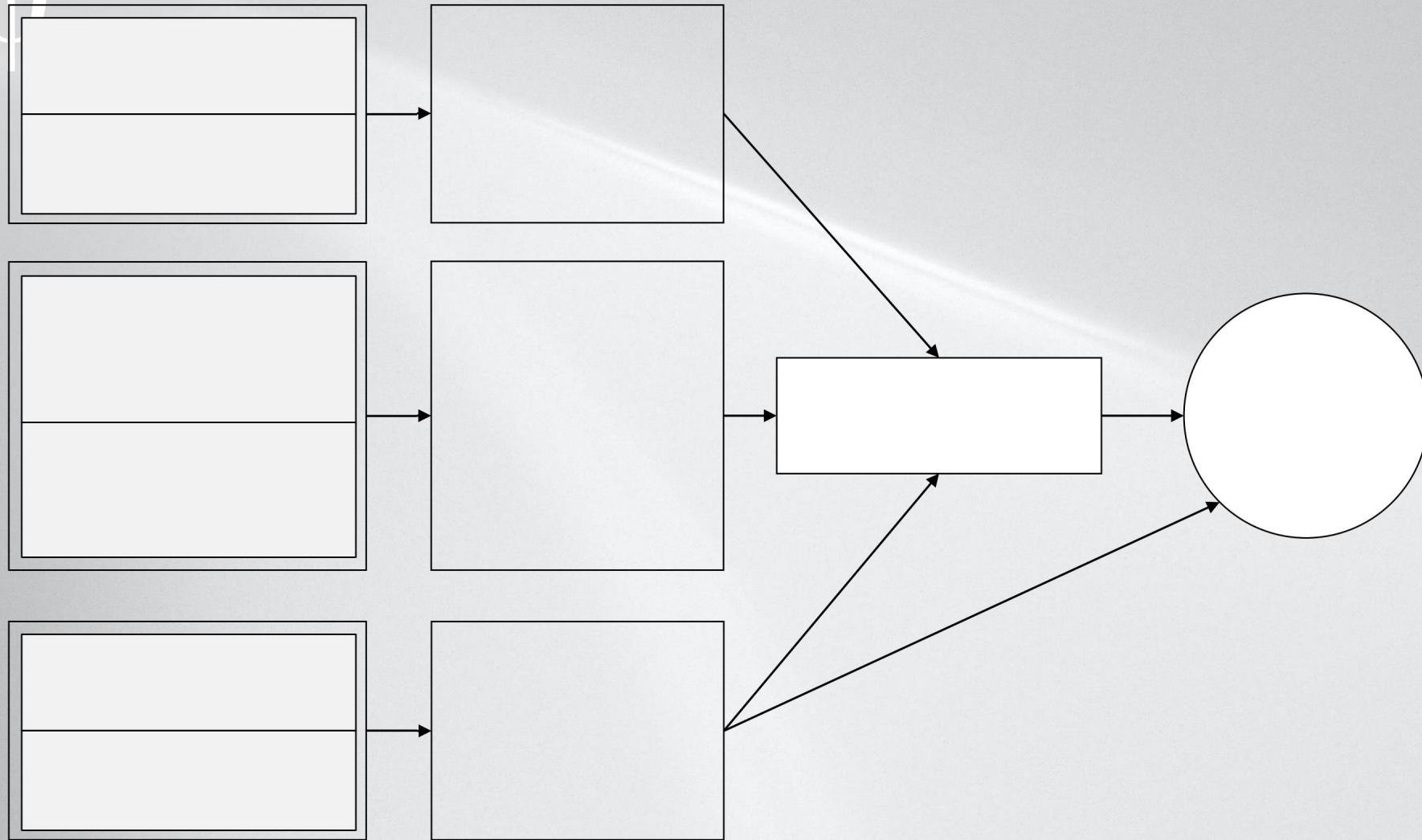
What do you think the following people could possibly do to end Russia's attack (i.e., encourage Putin to stop the behaviour)?

Volodymyr Zelensky, President of Ukraine

Xi Jinping, President of the People's Republic of China

A local student of HKU

J

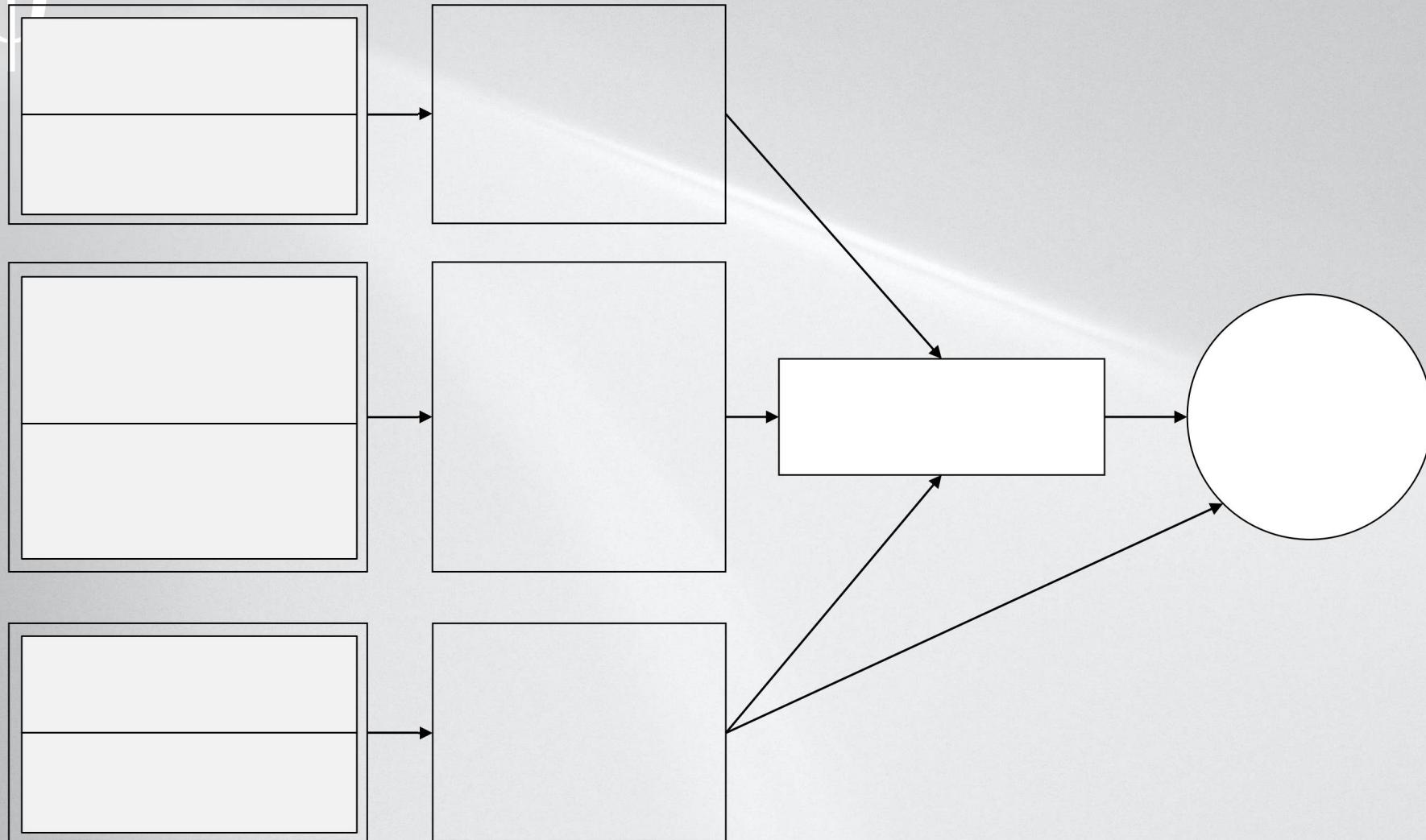




Case 10

Canice, 20, is a HI<U student in the B.Nursing (Full-time) programme. He attends most classes, but seldom attends Health Psychology lectures.

What questions would you ask to establish Canice's attitude (towards attending Health Psychology lectures), subjective norm, behavioural control, and intention?

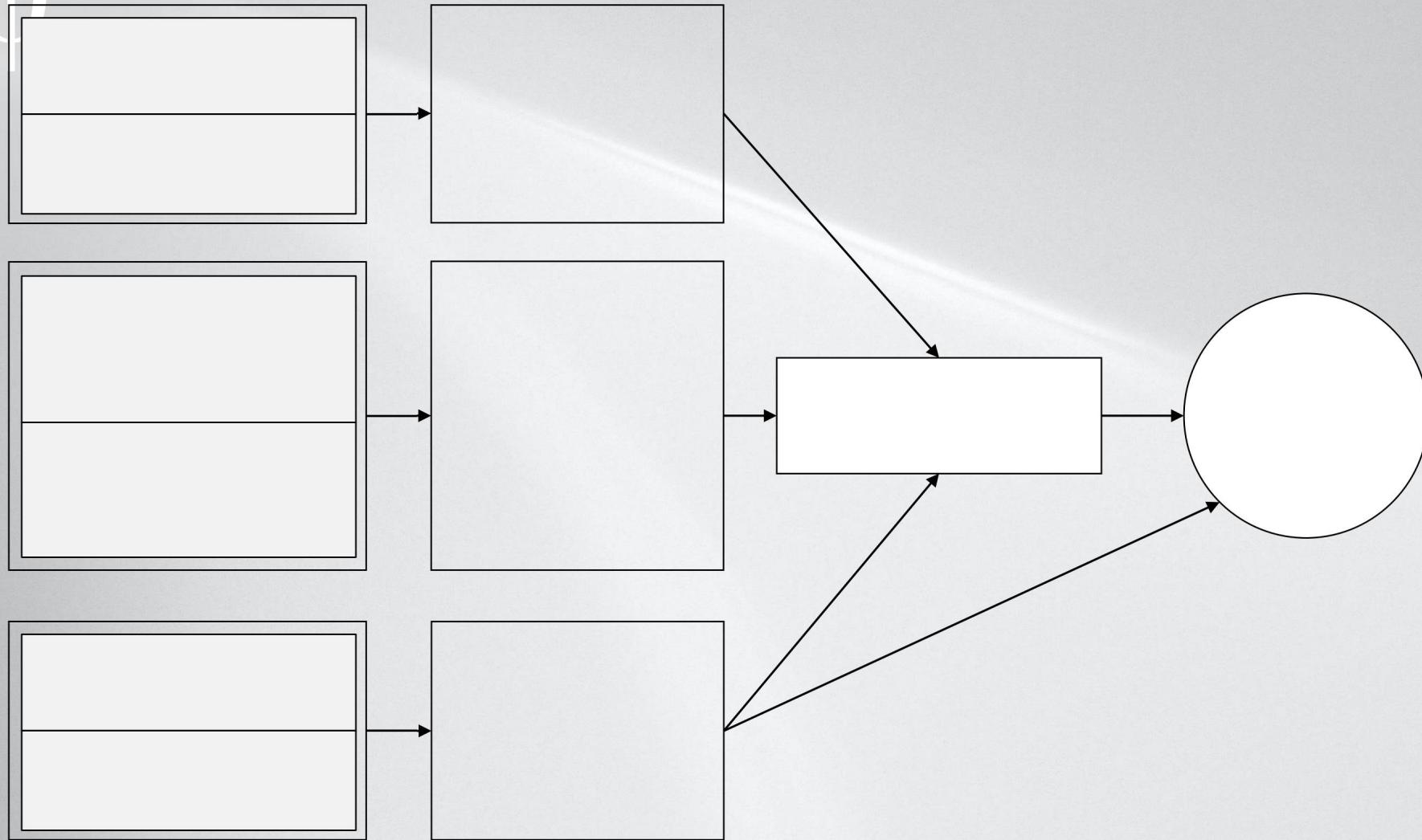




Case 11

Canice, 45, is a lecturer of a local university. On average, he spends 10 hours per day in front of a screen. Six hours at his office (preparing for class, reading papers and marking assignments), three hours at home (playing video games, watching YouTube videos and browsing the internet), and one hour on his phone while travelling and waiting.

What questions would you ask to establish Canice's attitude, subjective norm, behavioural control, and intention? What (if any) interventions would you suggest? What is the goal(s) of the intervention(s)?





Conclusion

Theory of Planned Behaviour and Transtheoretical Model are two of the simplest models to integrate what we covered in the previous lectures into a workable plan for behaviour change

However, please be aware of the practical and ethical issues surrounding any interventions for changing people's behaviour



Reading / References

- Taylor, SE & Stanton, AL (2021) Health Psychology (11th ed.).
Chapter 3: Health Behaviors. McGraw-Hill.

Ψ

~ End of lecture ~

J