Intrapersonal and Interpersonal Health Education

Five levels of influence for health education have been identified: intrapersonal/individual, interpersonal/group, institutional/organizational, community and public policy. Programs can be targeted at just one level, or at two or more levels. It is thought that a multilevel approach employing a combination of different strategies can be most effective.

The Theory of Reasoned Action explains behavior at the intrapersonal level by examining the relationship between an individual's beliefs, attitudes, intentions and behavior. It assumes that the most important determinant of behavior is a person's intention regarding that behavior. A person who believes that behavioral outcomes will be positive is likely to have a positive outlook on a change in behavior. Furthermore, a person who believes that others think he or she should perform certain behaviors will likely have a more positive attitude toward those behavioral changes. The Theory of Reasoned Action assumes that underlying reasons motivate people toward particular behaviors. In planning education at the intrapersonal level, one can influence healthy eating by affecting personal attitudes and increasing awareness of subjective norms related to healthy eating. On a practical level, individuals can be given activities and suggestions for applying health messages.

Intervention at the interpersonal level is predicated on the assumption that the thoughts, advice, examples, assistance and emotional support of others affects one's own feelings, behavior and, therefore, health. People are influenced by and influential in their social environments. Social Cognitive Theory (SCT) explains the interactions among behavior, personal factors as discussed, and environmental influences, including the opinions of others. SCT states that people learn through their own experiences and by observing others. One aspect of SCT is observational learning or modeling; one's beliefs are based on observing the behaviors of others and their behavioral outcomes. Observational learning is most effective when the role model is perceived to be powerful or respected, for example, when the role model is a parent and the target is a child. Group interventions at the interpersonal level can foster peer support and positive behavioral change.

The case that follows exemplifies the use of both intrapersonal and interpersonal education to improve the nutritional health of low-income families.

Eat Healthy. Your Kids Are Watching.

The Michigan Nutrition Support Network is a public-private partnership to improve the nutritional health of Michigan's low-income families. The network's pilot partnership in Kent County included more than 40 active representatives from local business, health care, private practice, nonprofit agencies and schools. "Eat Healthy. Your Kids Are Watching" was the network's focus group-tested message designed to prompt awareness in parents that they are role models for their children.

THEORY OF REASONED ACTION

- Beliefs
- Attitude and subjective norms
- Behavioral intention
- Behavior
GOALS AND OBJECTIVES
The primary goal of the campaign was to improve the nutritional health of Kent County’s low-income families through collaborative efforts among partners. The objectives were to develop and implement “awareness-building” activities promoting healthy eating to the target audience and to the public in general, and to construct a public-private partnership with businesses and agencies to assist with specific programs for the campaign.

METHODOLOGY
Potential partners were located through personal contacts and written invitations to public agencies, commodity groups, food retailers and others who work with community food and nutrition programs. Individual partners, once they became interested in the project, suggested others they believed would benefit from the collaborative effort. The activities of the four-week campaign were categorized into two groups: awareness-building and partnership programming. Awareness-building activities included 30-second cable spots, campaign newsletters in English and Spanish, signs on and in transit buses, a logo and slogan program with grocery stores and school districts, and a toll-free telephone number with messages in English and Spanish. Information on grocery store tours, cooking demonstrations and a WIC module for nutrition education were among the materials and activities available for partners. The extensive partner kit included an events schedule, lesson plans, activity sheets and recipes.

RESULTS
The program reached an estimated 49,000 residents, including close to 7,000 low-income households. A random sample of 800 adults in households with children were surveyed to test awareness of the campaign and acceptance of its core message. Campaign awareness was 52 percent in households with children and 67 percent in the target population of low-income households. Approximately two-thirds of respondents indicated that they understood and agreed with the message when they heard it. An additional 20 percent indicated that they would adopt the message. School lunch menus, billboards and television commercials were seen as most effective for reaching the target population.

LESSONS LEARNED
“The key ingredient in doing this type of campaign is an enthusiastic collaboration among businesses, agencies, and community leaders. The partnership of public and private organizations in Kent County grew very strong as a result of working together on this campaign.”
— Betty Blase, MSU Extension Kent County
Paula Kerr, Michigan Dept. of Education

REFERENCES
QUESTIONS

1. Which of the following is not a level of influence for health education?
   a. Intrapersonal
   b. Interpersonal
   c. Academic
   d. Public policy

2. Which set of intrapersonal factors influence behavior?
   a. Knowledge, attitudes, beliefs
   b. Knowledge, attitudes, genetics
   c. Perception, motivation, financial resources
   d. Perception, motivation, feedback

3. According to the Theory of Reasoned Action, what is the most important determinant of behavior?
   a. Rewards resulting from the behavior
   b. A person’s intention regarding that behavior
   c. The costs and benefits of the behavior
   d. Feedback from others

4. When is observational learning most effective?
   a. When the role model is respected
   b. When many role models are observed
   c. When the individual analyzes his or her own behavior
   d. When the individual chooses whom to observe

5. In the “Eat Healthy, Your Kids Are Watching.” program, which was among the most effective tools for reaching the target population?
   a. Teacher role models
   b. Cable television shows
   c. Celebrity role models
   d. Television commercials

ANSWERS:
1. c
2. a
3. b
4. a
5. d