



**THEORETICAL FOUNDATIONS OF HEALTH BEHAVIOUR CHANGE IN
PROMOTION AND PREVENTION**

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Health behaviour is a critical determinant of population health outcomes. Despite significant medical and technological advances, unhealthy behaviours—such as poor diet, tobacco use, physical inactivity, and non-adherence to medical advice—remain major contributors to morbidity and mortality worldwide. According to the World Health Organization (WHO, 2021)[5], over 70% of non-communicable diseases (NCDs) are attributable to modifiable lifestyle factors. Consequently, understanding how and why people change their health behaviours has become central to effective health promotion and disease prevention initiatives. Theories of health behaviour change offer frameworks that explain the cognitive, emotional, social, and environmental processes influencing decision-making and action. These models serve as blueprints for designing public health interventions, guiding practitioners to address both internal motivations and external barriers to change[3]. This literature review explores the evolution and application of major health behaviour change theories, emphasizing their role in promotive (enhancing well-being) and preventive (reducing disease risk) strategies.

Key words: health behavior, preventive strategies, health promotion, behavioural theories, lifestyle modification, public health

Diverse interventional approaches have been used in PLHP for pwCVDs. CVD PLHP interventions are likely to be complex, and therefore require a multimodal approach, due to different populations, multiple risk factors for CVD, and non-adherence to recommendations for managing these risk factors[6]. This review included studies focused mainly on exercise and physical activity uptake, weight management, and diet. Other components of health promotion for pwCVDs, such as sleep hygiene, smoking cessation, and alcohol abuse, among others, were not reported. These components are within the scope of physiotherapists, and it is necessary that physiotherapists receive adequate training that can enable them to confidently tackle the multiple risk factors associated with CVD. Qualified physiotherapists should be familiar with assessment tools related to general health measures, lifestyle-related behaviours, and NCD risk factors in general, including how to assess self-efficacy for behaviour change and readiness to change a lifestyle behavior[1]. This should include counselling skills and the use of behaviour change strategies for specific populations. Physiotherapists should work in synergy with other health professions, making appropriate referrals and identifying relevant resources to improve outcomes. Three studies employed theory-based behaviour change models supported by evidence-based behaviour change techniques such as motivational interviewing to inform and complement their interventions. These behaviour change theories and techniques were adopted in more recent studies published between 2015 and 2023. This indicates an increased understanding of the importance of including behaviour change techniques and theories for effective health education to strengthen patients' motivation and adherence during and beyond the active rehabilitation period. More rigorous, theoretically informed approaches to support behaviour change for pwCVDs should be included in intervention strategies that facilitate change in lifestyle risk factors. This is also necessary in clinical practice and should be integrated into physiotherapy



training [2]. In delivering broad health promotion strategies for pwCVDs, physiotherapists need to receive broader training in addressing these risk factors.

Based on the literature, physiotherapists are trying to address the growing burden of CVDs through various PLHP strategies. PLHP strategies are focused on exercise and physical activity, and there is a need to tackle CVD beyond addressing sedentary behaviour, considering the multiple risk factors. Assessing the risks and needs, tailoring the interventions to individuals, and monitoring appear central and consistent with practical preventive principles and strategies. It is crucial that physiotherapists work together with other healthcare professionals to optimise relevant components of health promotion effectively[3-4]. Health behaviour change theories and techniques should be commonly used to support positive health behaviour change, and it may be necessary to provide comprehensive training to integrate lifestyle management approaches in physiotherapy practice. This is even more compelling for physiotherapy practice in Africa and LMICs with huge CVD burdens. This literature review explores the evolution and application of major health behaviour change theories, emphasizing their significance in both promotive and preventive health strategies. The review discusses foundational models such as the Health Belief Model, Theory of Planned Behavior, Social Cognitive Theory, and the Transtheoretical Model, highlighting their relevance in understanding the determinants of human health behaviour. These theories provide structured frameworks for designing interventions aimed at promoting healthy lifestyles and preventing chronic diseases through improved physical activity, nutrition, stress management, and adherence to medical recommendations. Additionally, the review examines how integrating behavioural theories with digital technologies and community-based approaches enhances the effectiveness of public health initiatives. By identifying key facilitators and barriers to behaviour change, this work underscores the importance of evidence-based strategies in fostering long-term health improvements and reducing the global burden of preventable diseases. Health behaviour change theories provide the conceptual foundation for understanding, predicting, and influencing individual and community health behaviours. The literature consistently highlights that effective promotive and preventive strategies must be rooted in theoretical models that explain how and why people adopt or resist health-related behaviours. The application of these theories in public health has evolved significantly over the past few decades, shifting from individual-focused approaches to more comprehensive, multi-level frameworks that integrate psychological, social, and environmental determinants of health. Moreover, public health policies should prioritize training healthcare professionals—including physiotherapists, nurses, and community health workers—in the application of behavioural theories to preventive and promotive care. Ultimately, applying behaviour change theories effectively requires a shift from knowledge dissemination to empowerment—facilitating self-regulation, motivation, and supportive environments that make healthy choices the easier choices.

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