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Health and behavior in the field of health psychology: the duality of medical-social interaction and the patient-centered communication model

الصحة والسلوك في مجال علم النفس الصحي: ازدواجية التفاعل الطبي الاجتماعي ونموذج التواصل المتمحور حول المريض

CHIBANI Leila*	AIT ALDJET Megdouda
University of Bejaia, (Algeria)	University of Bejaia, (Algeria)
leila.chibani@univ-bejaia.dz	Megdouda.aitaldjet@univ-bejaia.dz

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- **Abstract:**

Healthy behavior is a pivotal factor in enhancing quality of life and preventing disease. It is linked to both physical and mental health, influenced by a range of biological, psychological, and social factors. This article aims to explore the relationship between behavior and health, and to analyze theoretical models that explain healthy behavior, such as the Health Beliefs Model, the Planned Behavior Model, and the Stages of Change Model. The article also seeks to demonstrate how these models can be applied in health prevention programs and to promote healthy behaviors in individuals.

Keywords:

Health behavior, health psychology, mental health, quality of life.

لملخص:

يُعدّ السلوك الصحي عاملاً محورياً في تحسين جودة الحياة والوقاية من الأمراض. ويرتبط هذا السلوك بالصحة البدنية والنفسية على حد سواء، ويتأثر بمجموعة من العوامل البيولوجية والنفسية والاجتماعية. تهدف هذه المقالة إلى استكشاف العلاقة بين السلوك والصحة، وتحليل النماذج النظرية التي تُفسّر السلوك الصحي، مثل نموذج المعتقدات الصحية، ونموذج السلوك المخطط، ونموذج مراحل التغيير. كما تسعى المقالة إلى توضيح كيفية تطبيق هذه النماذج في برامج الوقاية الصحية، وتعزيز السلوكيات الصحية لدى الأفراد.

الكلمات المفتاحية: السلوك الصحي، علم النفس الصحي، الصحة النفسية، جودة الحياة

* Corresponding author

- # Introduction

Human behavior is central to health psychology, as an individual's actions directly impact their physical and mental health. Healthy behavior is defined as "actions an individual takes to promote their health or prevent disease." The importance of studying explanatory models of health behavior lies in their provision of a framework for understanding the factors that influence health decisions, such as beliefs, attitudes, and the social environment.

Studies indicate that explanatory models enable the design of effective awareness programs and enhance individuals' ability to adopt long-term healthy behaviors. Among the most prominent of these models are the health safety model, which focuses on an individual's perception of the severity of illness and the potential benefits of healthy behavior; the theory of planned behavior, which emphasizes the role of intentions, attitudes, and behavioral control in determining healthy behavior; and the stages of change model, which describes the process of behavioral change in stages from awareness to retention. This is what we will attempt to present in this theoretical approach to behavior and health, Therefore, we will highlight the topic of health and behavior in the field of health psychology and answer the question: How does the duality of medical-social interaction occur?

- ## Research Objectives

Through this research, which focuses on behavior and health using fundamental explanatory models within the field of health psychology, we can focus on the following objectives:

-Reviewing the relationship between behavior and physical and mental health.
-Analyzing theoretical models that explain behavior. Health.
-Explaining how these models can be used in designing health promotion programs
-Highlighting the importance of a theoretical understanding of behavior in disease prevention and improving quality of life.

1. Research Concepts

1.1. Healthy Behavior

Healthy behavior is the set of actions and choices an individual makes that aim to maintain or improve health and prevent disease. This includes healthy eating habits, physical activity, sufficient sleep, maintaining personal hygiene, and effectively managing stress (Ahmed, 2018, p. 45)

1.2. Health Psychology

Health psychology is a branch of psychology that studies how psychological and behavioral factors affect physical health, and how psychological and mental behaviors can contribute to disease prevention or improve the quality of treatment. This field focuses on

the study of psychological stress, psychological adjustment, and the motivation for healthy behaviors (Jones, 2020, p. 12)

1.3. Mental Health

Mental health refers to an individual's state of psychological and emotional well-being, their ability to cope with the stresses of daily life, manage emotions, build positive relationships, and achieve their personal goals. Good mental health helps individuals think clearly, cope with stress, and enjoy life. In life (WHO, 2019)

1.4. Quality of life

Quality of life is an individual's perception of their life situation, including physical, mental, and social health, and their level of comfort, happiness, and life satisfaction. Quality of life is influenced by economic status, education, health, social relationships, and the ability to achieve self-actualization (Lee, 2021, p. 78)

2. Models Explaining Health Behavior

2.1. The Health Safety Model

This model focuses on an individual's perception of the risk of disease and the benefits they may gain from adopting a particular healthy behavior (Rosenstock, 1966, p. 1). It includes four main components: risk perception, sensitivity perception, benefit perception, and barrier perception.

2.2. The Theory of Planned Behavior

This theory explains that healthy behavior is influenced by behavioral intentions shaped by situations, social norms, and perceived behavioral control (Ajzen, 1991, p. 182).

2.2.1. The Stages of Change Model

This model views behavioral change as a gradual process involving several stages: preconception, reflection, preparation, action, and maintenance (Prochaska & DiClemente, 1983, p. 110).

Research emphasizes the importance of understanding health behavior and its explanatory models for developing effective disease prevention and public health promotion programs. It demonstrates that a theoretical explanation of behavior contributes to improving quality of life by encouraging the adoption of sustainable healthy behaviors. The Doctor-Patient Relationship and Its Role in Communication and Health

The doctor-patient relationship is central to improving healthcare outcomes and promoting public health. Effective communication between the two parties influences patient adherence to treatment, understanding of their health condition, and satisfaction with the healthcare provided (Street et al., 2009, p. 593). This article aims to analyze the doctor-patient relationship, its role in improving health communication, and its impact on patient health outcomes, focusing on theoretical models of health communication and best practices in this field.

The doctor-patient relationship is defined as "the interaction between a healthcare provider and a patient, which includes emotional, cognitive, and social aspects" (Roter & Hall, 2006, p. 183). Studies have shown that a good relationship is based on mutual respect, active listening, and ensuring patient participation in medical decision-making (Epstein & Street, 2011, p. 163). The importance of this relationship is evident in enhancing patient trust, treatment adherence, and reducing medical error rates.

3. The Doctor-Patient Relationship

The doctor-patient relationship is influenced by several factors:

Effective Communication: This includes the ability to simplify medical information, use clear language, and respond to the patient's concerns (Street et al., 2009, p. 593).

Mutual Respect and Trust: Respecting the patient's opinions and appreciating their feelings is fundamental to building a strong relationship (Roter & Hall, 2006, p. 183).

Participation in Decision-Making: Empowering the patient in choosing their treatment increases adherence and reduces anxiety (Charles et al., 1997, p. 816).

Cultural and Social Factors: Awareness of cultural and religious differences contributes to improving the quality of interaction (Kleinman & Benson, 2006, p. 1673).

3.1. The Role of the Physician-Patient Relationship in Health

Improving Treatment Outcomes: Patients with a strong physician-patient relationship tend to adhere to treatment better and achieve positive health outcomes (Stewart et al., 2000, p. 169).

Reducing Psychological Anxiety: Emotional support from the physician reduces stress and anxiety associated with illness (Epstein & Street, 2011, p. 163).

Promoting Preventive Health: Good communication helps patients adopt preventive health behaviors (Street et al., 2009, p. 594).

Evidence suggests that a good physician-patient relationship is one of the most important factors in improving the quality of healthcare and its outcomes. Effective communication, mutual respect, and shared decision-making are essential elements for promoting health and treatment adherence. Therefore, healthcare systems should develop strategies to train physicians in health communication skills to ensure effective and comprehensive care.

4. Theoretical Models Explaining the Physician-Patient Relationship and Communication and Their Role in Health Improvement

The physician-patient relationship and effective communication are essential elements in achieving genuine health improvement. Several theoretical models have been developed to explain this relationship, such as the medical-social interaction model, the patient-centered communication model, and the joint decision-making model. This article aims to analyze these theoretical models, their role in enhancing doctor-patient communication, and their impact on individual health improvement.

The doctor-patient relationship is not merely an exchange of medical information; it is a dynamic interaction encompassing cognitive, emotional, and social aspects (Roter & Hall, 2006, p. 183). Studies have shown that effective doctor-patient communication contributes to improved treatment adherence, better understanding of health conditions, and reduced anxiety and stress (Street et al., 2009, p. 593). Theoretical models provide a framework for understanding how to build this relationship and apply it in practice to achieve optimal health outcomes (Epstein & Street, 2011, p. 163). Theoretical Models Explaining Relationship and Communication

4.1. Biomedical–Biopsychosocial Model

This model proposes that patient health is influenced by several factors, including biological, psychological, and social ones, and that communication between doctor and patient should take all these factors into account (Engel, 1977, p. 132). The model focuses on the role of the interactive relationship in diagnosing the condition and improving treatment outcomes.

4.2. Patient-Centered Communication Model

This model encourages making the patient the focus of the medical interaction through active listening, addressing their concerns, and involving them in discussions about their health (Stewart et al., 2000, p. 796). Studies have shown that patient-centered communication increases patient satisfaction and enhances adherence to treatment (Roter & Hall, 2006, p. 183).

Shared Decision-Making Model

This model focuses on the participation of both the doctor and the patient in making treatment decisions, with the exchange of information and discussion about treatment alternatives, risks, and benefits (Charles et al., 1997, p. 681). This model is effective in fostering trust and adherence to treatment, thereby improving health outcomes (Elwyn et al., 2012, p. 1361).

4.3. The Role of Theoretical Models in Health Improvement

- Enhancing Treatment Adherence: Through patient engagement and understanding of medical information (Charles et al., 1997, p. 681).
- Improving Psychological Outcomes: Such as reducing anxiety and stress associated with illness (Epstein & Street, 2011, p. 163).
- Increasing Health Satisfaction: Patients who feel listened to and cared for by their physician are more satisfied with their care (Stewart et al., 2000, p. 796).
- Improving Physical Therapy Outcomes: Effective communication contributes to accurate treatment follow-up and reduces medical errors (Street et al., 2009, p. 595).

Theoretical models demonstrate that the doctor-patient relationship and effective communication are key to overall health improvement. Research indicates that adopting these models in daily medical practice yields multiple benefits, including physical and psychological improvement and increased patient satisfaction. Therefore, physician training programs should focus on developing patient-centered communication skills, conveying knowledge clearly, and involving patients in treatment decisions.

5. Theoretical Models of Health Improvement: The Doctor-Patient Relationship and Communication

Theoretical models are an important tool for understanding the doctor-patient relationship and how to improve health outcomes. This research focuses on the most important theoretical models used to explain health behavior and medical communication, including the social interaction model, the patient-centered communication model, the shared decision-making model, the health belief model, and the stages of change model. The article also explains how these models can be applied to promote physical and psychological health improvement, increase patient satisfaction, and improve treatment adherence.

The doctor-patient relationship is the cornerstone of healthcare. Its goal is not only to provide diagnosis and treatment but also to support the patient psychologically and socially, and to empower them to make informed health decisions (Roter & Hall, 2006, p. 183). Good doctor-patient communication is associated with improved treatment adherence, reduced anxiety, and increased healthcare effectiveness (Street et al., 2009, p. 593). To explain and practically apply this relationship, theoretical models have been developed to help understand patient behavior, the nature of interaction, and the impact of communication on health improvement (Epstein & Street, 2011, p. 163).

5.1. The Biomedical–Biopsychosocial Model

This model suggests that patient health is influenced by several dimensions: biological, psychological, and social, and that effective healthcare should consider all these aspects (Engel, 1977, p. 132).

Relationship and Communication: This model encourages clinicians to listen to the patient and understand their social and psychological context before developing a treatment plan (Engel, 1977, p. 133).

Its Role in Health Improvement: When this model is applied, treatment adherence improves, medical errors decrease, and patient satisfaction increases (Stewart et al., 2000, p. 796). Patient-Centered Communication Model

This model focuses on making the patient the center of medical communication through active listening, involving them in medical discussions, and understanding their needs and concerns (Stewart et al., 2000, p. 796).

5.2. Shared Decision-Making Model

This model relies on involving the patient in the medical decision-making process, while providing the necessary information to weigh the benefits and risks (Charles et al., 1997, p. 681). Relationship and Communication: This model promotes open dialogue between the doctor and patient and encourages participation in treatment decisions (Elwyn et al., 2012, p. 1361).

Its Role in Health Improvement: It increases patient satisfaction, treatment adherence, and trust in the healthcare provider, leading to better health outcomes (Street et al., 2009, p. 595).
Health Belief Model: This model focuses on an individual's awareness of disease risks and the benefits associated with healthy behaviors, and their willingness to take preventive measures (Rosenstock, 1966, p. 1).

6. ***Relationship and Communication***

This model creates an atmosphere of trust and mutual respect, allowing the clinician to understand the patient's expectations and priorities (Roter & Hall, 2006, p. 183).
Its Role in Health Improvement: Patient-centered communication leads to increased adherence to treatment, reduced psychological stress, and improved physical therapy outcomes (Epstein & Street, 2011, p. 163).

The doctor can use this model to interpret patient behavior and motivate adherence to treatment by simplifying health information (Becker, 1974, p. 2).
It increases the adoption of preventive health behaviors and reduces health complications associated with neglect (Glanz et al., 2015, p. 7). The Transtheoretical Model of Change describes behavioral change as a gradual process involving the stages of preconception, reflection, preparation, action, and retention (Prochaska & DiClemente, 1983, p. 390).
This model helps the clinician assess the patient's stage and provide appropriate support at each stage (Prochaska & Velicer, 1997, p. 110).

- ## Conclusion

These theoretical models demonstrate that the clinician-patient relationship and effective communication are fundamental to health improvement. By applying these models, clinicians can improve treatment outcomes, enhance adherence to treatment, and increase patient satisfaction. Understanding the stages of change and health belief also contributes to the adoption of sustainable health behaviors. Therefore, training programs should focus on developing communication skills and involving patients in decision-making to ensure effective and comprehensive healthcare.

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