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ORIGINAL ARTICLE

Usage of Health Belief Model (HBM) in Health Behavior: A Systematic Review

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ABSTRACT

Introduction: The Health Belief Model has gained widespread popularity and acceptance in the community, yet little is known about its effectiveness as a basis for health behavior intervention. The purpose of this study is to systematically review the evidence on the use of the model in health behavior for Chronic Kidney Disease and the effectiveness of Health Belief Model as a model intervention for facilitating health-related behavioral changes. **Methods:** The databases were manually searched for references and gray literature. Overall, the methodological quality of trials was variable, and there was limited evidence for the effectiveness of Health Belief Model in improving health behavior. **Results:** There are few new trials published that describe the application of Health Belief Model. Limited evidence supports any benefits of Health Belief Model for improving health behavior. **Conclusion:** Studies on the usage of Health Belief Model need to be explored in depth to assess the importance of Health Belief Model.

Keywords: Health Belief Model, Health Behavior Intervention, Systematic Review, Illness Perceptions, Chronic Kidney Disease

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RESEARCH ARTICLE Open Access

The chronic kidney disease perception scale (CKDPS): development and construct validation

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Abstract

Background: Chronic kidney disease has become a major health problem around the world. It displays no symptoms until the later stages. Therefore, its early detection is crucial, and a suitable intervention is necessary to halt its development. The aim of this study was to develop and validate a recently formulated Chronic Kidney Disease Perception Scale (CKDPS) for diabetic patients based on Social Psychology, and their perceptions based on the Health Belief Model (HBM).

Methods: The newly developed CKDPS instrument was tested on 300 patients with diabetes mellitus in a cross-sectional study. The number of domains, model-fit index, construct validity, and internal consistency of this instrument were determined using exploratory (EFA) and confirmatory factor analysis (CFA).

Results: The EFA yielded nine domains: illness identity, timeline motivation, medical practice and co-operation for Social Psychology, and perceived benefit, perceived barriers, perceived susceptibility, perceived severity, and perceived cue to action for HBM. Four items with low factor loading were removed. CFA yielded the following fit indices for Social Psychology: the goodness of fit index (GFI) = 0.889, comparative fit index (CFI) = 0.934, root mean square error of approximation (RMSEA) = 0.053, normed chi-square (NC) = 1.831; and the following for HBM: GFI = 0.834, CFI = 0.957, RMSEA = 0.053, NC = 1.830. Values of Cronbach's α ranged between 0.760 and 0.909.

Conclusions: The CKDPS includes 61 questions across nine domains, divided under two categories of Social Psychology and HBM. It is also a valid and reliable tool for measuring diabetic patients' perception of CKD prevention that can be used in larger studies.

Keywords: Chronic kidney disease perception scale, Factor analysis, Construct validity

Background early detection of the disease is crucial, and suitable inter-

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