보건교육학 (04)

PRECEDE – PROCEED Model

- 생태학적 접근
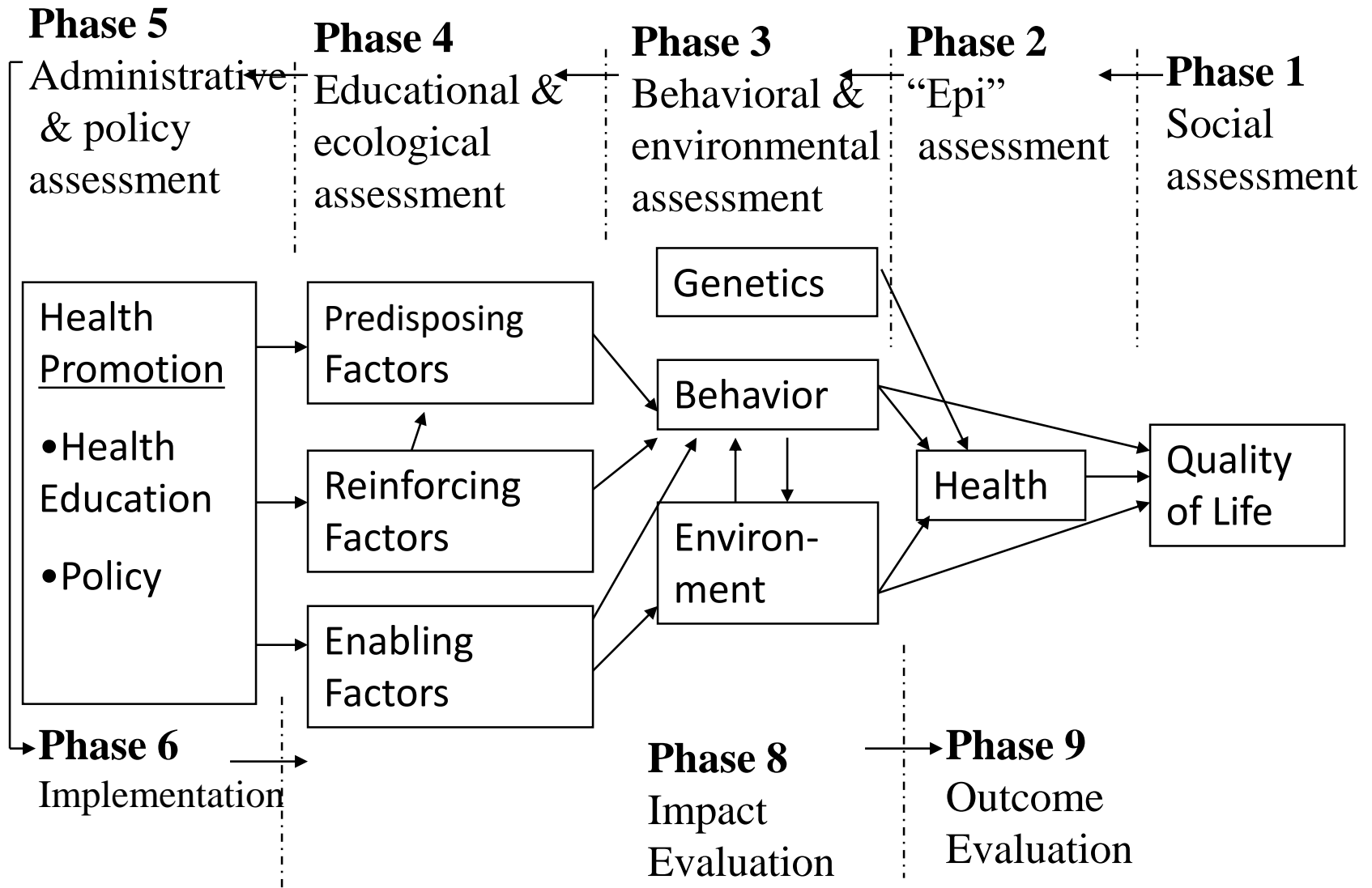
- 국가적 차원의 전문적인 사업을 위한 기초로 활용

PRECEDE – PROCEED Model

■ PRECEDE – based on the premise that just as a medical diagnosis precedes a treatment, so should an educational diagnosis precede an intervention plan , 1970년대 PRECEDE 개발

■ PROCEED - was added in 1991 to recognize environmental factors as determinants of health and health behavior.
■ Green & Kreuter

- 9 (8) – step planning process that begins at the end, focusing on the <u>health-related outcomes</u> of interest and working based backward to diagnose which combination of intervention strategies will best achieve the objectives.

PRECEDE – PROCEED Model

Phase 5
Administrative
& policy
assessment

Phase 4
Educational &
ecological
assessment

Phase 3
Behavioral &
environmental
assessment

Phase 2
"Epi"
assessment

Phase 1
Social
assessment

Health
Promotion

•Health
Education

•Policy

Predisposing
Factors

Reinforcing
Factors

Enabling
Factors

Genetics

Behavior

Environ-
ment

Health

Quality
of Life

Phase 6
Implementation

Phase 8
Impact
Evaluation

Phase 9
Outcome
Evaluation

PHASE 1: Social Assessment (사회적 사정)

• The SOCIAL ASSESMENT expands the <u>understanding of people</u> through both objective and subjective sources of information.

<u>Understanding the community</u> (a geographic area or groups with shared characteristics, could also be a virtual community) though multiple data collection activities.

- Interviews, surveys, focus groups, observation

PHASE 2 : Epidemiological Assessments (역학적 사정)

Identify the health priorities and their behavioral and environmental determinants.

Epidemiological Assessment –

1. Identify health problems, issues or aspirations on which the program will focus .

2. Uncover behavioral and environmental factors most likely to influence identified priority health concerns

3. Translate those priorities into measurable objectives

PRECEDE – PROCEED Model

Phase 3: behavioral, and environment Assessments (행동적, 환경적 사정)

Occasionally secondary data analysis is done using existing data sources such as vital statistics, and other data bases.

1. Genetics (유전)
The use of genetics – Can be helpful to identify high risk groups for intervention

2. Behavior

3. Environment determinants

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Phase 3: behavioral, and environment Assessments (행동적, 환경적 사정)

2. Behavior and lifestyle (행동과 생활양식)
A.   Proximal(근접) – behaviors or lifestyles that contribute to severity of a
      health problem – teen smokers tobacco use; Cardiac patient's poor diet

B.   More distal determinant – behavior of others that can impact the behavior
      of those at risk, teen smokers parents keeping cigarettes in the house,
      spouse of cardiac patient buying bacon.

C.   Most distal factor – action of decision makers that may affect the social or
      physical environment influencing the individual at risk, action by police in
      enforcing laws that restrict teen smoking; food served at a seniors center
      or hospital.

Phase 3: behavioral, and environment Assessments (행동적, 환경적 사정)

3.   Environment determinants

Social and physical factors external to the individual – often beyond their control, that can be modified to support the behavior or influence the health outcome. This stage requires strategies other than education

Phase 4:Educational and Ecological Assessment (교육적, 생태학적 사정)

Once behavioral and environment factors have been selected for intervention the next step is to identify antecedent and reinforcing factors that need to be in place to initiate and sustain the change process. There are 3 specified:

- Predisposing factors (성향)
- Reinforcing Factors (강화)
- Enabling Factors (촉진)

Phase 5: Administrative and policy assessment and intervention alignment (행정적, 정책적 사정 및 중재)

The planner will select and align the programs components, priority is the determinants of change previously identified.

- Identify resources

- Identify organizational barriers & facilitators

- Identify policies that are needed for program implementation

PRECEDE – PROCEED Model

Phase 5: Administrative and policy assessment and intervention alignment
(행정적, 정책적 사정 및 중재)

- Macro level – organizational and environmental systems
- Micro level – focus is on the individual, peer, family and others who can influence the desired change. Interventions at this level are directly aimed at predisposing, reinforcing, and enabling factors.

PRECEDE – PROCEED   Model

Phase 6-8 Implementation and Evaluation (수행과 평가)

At this stage data collection plans should be in place for evaluation of the programs success. Specifically evaluating the process, impact, and outcome.

▪Process evaluation – evaluation of how the program was implemented according the protocol
▪Impact evolution- assess change in predisposing, reinforcing and enabling factors as well as in behavioral and environmental factors
▪Outcome evaluation – determine the effect of the program on health and quality of life indicators.