

Theory of Planned Behavior Critique

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On our honor, we pledge that we have neither given nor received any unauthorized assistance on
this assignment.

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Introduction

The Theory of Planned Behavior (TPB) was proposed by Dr. Icek Ajzen in 1985 and provides a systematic framework to link beliefs and human behavior. It is recognized as a valid decision-making theory that can predict a wide variety of behaviors. The TPB is based on the concept that, the stronger the intention to perform a given behavior, the greater the likelihood that the individual will engage in that behavior (Herrmann, 2017). Therefore, the TPB posits that actions are controlled by intentions. The TPB's core constructs for intention are threefold. Firstly, is the attitude toward the behavior, which is the positive or negative evaluation of the behavior by the individual (Ajzen, 1991). Secondly, the TPB incorporates social pressure to perform or not perform a behavior, which is termed subjective norm (Ajzen, 1991). Finally, the degree of perceived behavioral control, which refers to the perceived ease or difficulty of performing the behavior and pays tribute to past experiences, in addition to anticipated obstacles (Ajzen, 1991). Predicting human behavior is complex, but using a theoretical model, like that of the TPB, we can develop health educational tools to change behaviors associated with poor health outcomes.

Significance

In evaluating the significance of the context of the TPB, we must consider the implications to the discipline of nursing. We can justify the significance by assessing if there is explicit reference to the philosophical, metaparadigmatic, and conceptual origins of nursing (Fawcett, 2005). The TPB is a useful model to gain understanding of decision-making with regard to behaviors. The critical beliefs underlying attitude, subjective norm, and perceived behavioral control guides the development of interventions to reduce harmful behaviors.

- **Are the metaparadigm concepts and propositions addressed by the theory explicit?**

The four metaparadigms of nursing include person, environment, health, and nursing (Branch, 2016). Though not explicitly stated, the TPB theory is aligned in the metaparadigm of person. The TPB focuses on the person and their unique and unpredictable set of needs and the theory helps to explain behavioral responses based on the individual's interpretation of the task.

- **Are the philosophical claims on which the theory is based explicit?**

The TPB is an extension of the theory of reasoned action and he is explicit about the limitations of the initial theory developed in 1980. Dr. Ajzen (1991) based the TPB on three core philosophical claims that were absent from the theory of reasoned action. In the TPB individual behavior is driven by behavioral intentions where behavioral intentions are a function of three determinants: an individual's attitude toward the behavior (behavioral beliefs), belief about expectations of others and motivations to adhere to these expectations (subjective norms), and beliefs about the presence of factors that may facilitate or impede performance of the behavior and the perceived power of these factors (perceived behavioral control). As a general rule, the combination of the individual's attitude toward the behavior, subjective norm, and perception of behavioral control leads to the formation of a behavioral intention (Javadi, 2013). The philosophical claims are explicit as they are the root of the theory.

- **Is the conceptual model from which the theory was derived explicit?**

The conceptual model in Figure 1 is a schematic representation of the philosophical claims of the TPB and is explicit in the paper (Ajzen, 1991). The TPB has a general rule that the more favorable the attitude and subjective norm, and the greater the perceived control, the stronger an individual's intention to perform the behavior (Javadi, 2013).

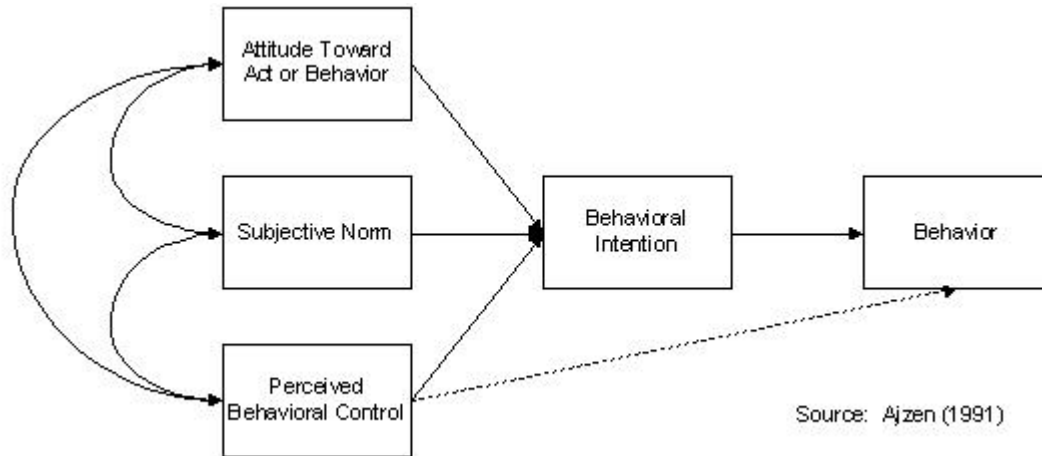


Figure 1. Conceptual Model of the Theory of Planned Behavior (Ajzen, 1991)

- **Are the authors of antecedent knowledge from nursing and adjunctive disciplines acknowledged and are bibliographical citations given?**

Dr. Ajzen is the primary author of the Theory of Planned Behavior. He is not in the field of nursing but is an acclaimed social psychologist. Dr. Ajzen graduated in 1969 with a Doctorate in Psychology from the University of Illinois at Urbana-Champaign and currently holds a Professor of Psychology Emeritus position at the University of Massachusetts (Social Psychology Network, 2016). The development of the TPB does not contain antecedent knowledge from nursing, but social psychology. The paper does not contain bibliographic citation.

Internal Consistency

The context and content of the theory must have internal consistency, which requires the philosophical claims, conceptual model, and theory concepts to be congruent with semantic clarity and consistency (Fawcett, 2005).

- **Are the context and the content of the theory congruent?**

The context of the philosophical model and the content of the concepts of the TPB are congruent. The paper shows that the TPB provides useful conceptual framework for dealing with

the complexities of predicting individuals' behavioral choices (Ajzen, 1991). The central concepts are defined in a way to predict and understand particular behaviors in specific contexts. Incorporating behavior, subjective norms, and perceived behavioral control are found to predict behavioral intentions with a high degree of accuracy (Ajzen, 1991). For instance, research has suggested that critical beliefs, underlying attitude, subjective norms, and perceived behavioral control may help develop the content of interventions to reduce harmful behaviors (Haydon, 2016). With any situation, positive or negative, you can apply the TPB and get an accurate interpretation of a person's expected behavioral outcome, because the context and content are congruent and consistent throughout the paper.

- **Do the concepts reflect semantic clarity and semantic consistency?**

Semantic consistency and clarity are met by Fawcett's criteria as Dr. Ajzen (1991) clearly defines all of the elements of the TPB model (behavioral intention, subjective and normative beliefs, perceived behavioral control, and attitude) and the same definition is maintained throughout the paper (Fawcett, 2005).

- **Do the propositions reflect structural consistency?**

Fawcett states that internal consistency is met when propositions reflect structural consistency which means each core concept (behavioral intention, subjective and normative beliefs, perceived behavioral control, and attitude) of the TPB are specifically linked and there are no contraindications (Fawcett, 2005). Figure 1 presents a clear schematic of the relationship between the core concepts and the resulting behavior. Each core concept is specifically linked to each other and to the outcome. The core concepts are interrelated, but uniquely defined so no misinterpretation or contraindications are present.

Parsimony

- **Is the theory content stated clearly and concisely?**

A parsimonious theory describes a theory that is concise yet comprehensive (Fawcett, 2005). When evaluating the parsimony of a theory, it is important to consider whether or not the content of the theory raises additional questions versus fully explaining the phenomena. The phenomena in the Theory of Planned Behavior is that of the effect of self-control and motivation toward a certain behavior (Ajzen, 1991). In considering the parsimony of a theory, it is also imperative to evaluate the number of criteria and concepts that make up the theory (Fawcett, 2005). The TPB is composed of six individual components that determine an individual's behavioral control: attitudes, behavioral intention, subjective norms, social norms, perceived power, and perceived behavioral control (Ajzen, 1991). These six components are grouped into three pairs of beliefs: behavioral, subjective, and control (Ajzen, 1991). These three concepts are comprehensive in summarizing the crux of this theory and thereby meet Fawcett's parsimony criterion.

Testability: Middle-Range Theories

If the testability criterion of a theory is not met, the theory cannot be considered scientifically useful (Fawcett, 2005).

- **Are the middle-range theory concepts observable through instruments that are appropriate empirical indicators of these concepts?**

The concepts of the TPB, behavioral beliefs, normative beliefs, and control beliefs, in the majority of applications of the theory are measured using a likert scale and bipolar scoring to measure belief strength (Ajzen, 1991). It should be noted, however, that there are many variables identified which influence the measurement context, such as the affective state of the study

participants, which in turn influence the predictability (Ajzen, 2011). A meta-analysis examined difference in predictability between self-reported data and more objective observational data (Armitage & Connor, 2001). The results of these scales are synthesized into empirical data by applying results to a mathematical formula which yield a score that can be categorized into data sets (Fawcett, 2005).

- **Do the data analysis techniques permit measurement of the middle-range theory propositions?**

The TPB proposes that attitude, subjective norm, and perceived behavioral control are the predictors of behavioral intention (Ajzen, 1991). Predictability of these constructs is analyzed using both correlation and regression analyses (Ajzen, 1991). More than twenty years after its inception, Ajzen himself recognizes the limits and variation of predictive validity using these techniques (Ajzen, 2011), however, a meta-analytic review by Armitage and Conner concludes that overall these data analysis techniques yield results in support of measurement of the TPB's propositions (Armitage & Conner, 2001).

Empirical Adequacy: Middle-Range Theories

- **Are theoretical assertions congruent with empirical evidence?**

Empirical evidence in the context of this question is results of every study which has used the theory of planned behavior to conduct research. The degree to which a systematic review of all the data support the assertion of the theory of planned behavior determines whether we can accept the theory as adequate (Fawcett, 2005). While a systematic review of every study which has ever used this theory is not feasible by this team, we can draw upon the meta-analytic review by Armitage and Conner which reviewed 185 studies (Armitage, 2001). This analysis revealed strong empirical support for the theory of planned behavior. In addition, thousands of studies

since this review have applied this theory to subjects such as health, travel, food consumption, driving behaviors and even in sports. The theory has broad application and efficacy across many disciplines. All in all, assertions are congruent with the evidence that the theory of planned behavior does accurately predict planned behavior.

Pragmatic Adequacy

This theory is generally pragmatically adequate because it provides a framework to predict types of behaviors. If, as healthcare professionals, we know what predicts behaviors this theory may help us in properly targeting ways to change those behaviors in order to increase health and decrease burden of disease or danger to health. For example, this theory has been applied to many nursing issues such as smoking cessation, treatment adherence in chronic disease, healthy food choices and many more (Nah, 2017; Rich, 2015; Malek, 2017). Nurses are uniquely positioned to provide education to patients because we are typically the health care worker who spends the most time with the patient. With this extended amount of time nurses may be positioned best to change behaviors of patients.

- **Are education and special skill training required before application of the theory in nursing practice?**

There is minimal special skill training required before application in nursing practice. The use of a likert scale is ubiquitous within the nursing practice and is simple to explain to participants answering questions. Reviewing concepts central to the theory to nurses conducting the study prior to implementation may be necessary in order for them to master the content.

- **Is it generally feasible to implement practice derived from the theory?**

Because the theory has application to countless nursing-related practices feasibility must be determined on a case by case basis when being applied. Implications of the use of the theory

may result in the need for large, moderate or small scale changes in practice based on study conclusions.

- **Does the practitioner have the legal ability to implement and measure the effectiveness of theory-based nursing actions?**

This legal ability will depend upon the practice within which the nurse is practicing, the support of their institution, support of their peers and level of resistance from other entities.

Conclusion

After extensive evaluation, we conclude that the Theory of Planned Behavior is an essential framework within which to examine human behavior and continues to be useful for nursing and a wide range of other disciplines. Fawcett's criteria for evaluation of nursing theories is an integral tool to assessing nursing theories such as the TBP and we feel that these criteria are overall satisfied by by the Theory of Planned Behavior.

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