

: , , ,

:

:

1.

가 , 가 가 (, 1993). 가 가 30-70 (, 1989; Bee & Mitchell, 1980; Havighourst, 1972; Levinson, 1978; Rogers, 1979; Stevenson, 1977). (Duffy, 1988). (Galloway, 1975).

45-55

(Dunnihoo, 1990; Reeder, Martin, & Koniak, 1992),

(LaRocco & Polit, 1980; Newman & New

man, 1984), 60 가 가 , 가 45 30-44 , 45-59 .

40

, 35 가 10 가 1-2 가

(, 1994; , 1993; Bee & Mitchell, 1980; Gould, 1972).

Drinkwater (1984) , Haas (1988)

가 , Munro(1969)

10%가 가 , 5% , Avis

McKinlay(1990)

가

Nachtigall(1990) Rothert(1990)

, Sporrong (1989) 가

(Heaney et al, 1982; Smith et al,

1981), (Notelovitz, 1990), (Blair et al, 1985)

(, 1986; , 1986; Bareford, 1988; Hunter, 1990; Matthews, 1990), (, 1992)

가 , 가 (LaRocco, 1980). 가

가 가

가 가

Pender 가 Pender (Duffy, 1988; Gillis, 1991; Speake, Cowart & Pellet, 1989; Weitzel, 1989).

(, 1990; , 1990; Duffy, 1988; Speake et al, 1989; Weitzel, 1989). Penderah 가 Duffy(1988), (1994b)

Pender

2.

3.

1)

(1) (Internal Health Locus of Control);

(Wallston,

Wallston, & Develis, 1978)

Wallston (1978)

가

(2) (Self-Efficacy) :

(Bandura, 1977)

(3) (Perceived Health Status) :

(WHO, 1947)

Speak (1989)

가 가

가

(4) (Health Promoting Behavior) :

(Pender & Pender, 1987)

2)

(1) (Interpersonal Influences) :

()

(Pender & Pender, 1987)

가

가 (McCubbin & Petterson, 1987).

(2) (Biological Characteristics) :

(Pender & Pender,

1987).

(Maoz et al,

1977).

4.

1)

가

2)

3)

가

1.

가

40

가

rm

가

가 , , , (, 1991; Maoz et al, 1977; Sherman, Wallace, Bean, Chay, & Schlabaugh, 1981; Spodnik & Cogan, 1989).

가 , , 가 (, 1991; Bee & Mitchell, 1980). , , (Spodnik & Cogan, 1989).

가 , (, 1989).

가 (Newman & Newman, 1984).

Erikson(1963)

, Jung(1933)

, Frankle(1963)

(1992) 660

가 , 가 , (1989) 40-59
가, 59% (1992)

90.8%가 30-60

,가 , 46-60

가 (r=.585, p<.01) 가 ,

, 가

가 ,

, , 가 , , , 가

(, 1992; Newman & Newman, 1984). 가
가
가
가 ,

2.

, ,
(McElmurry et al, 1991; Woods,
1985)
가 , . 가
가
(Maunz et al, 1988; Woods, 1985).

Walker (1987)
6가 , , , , , 가
가 가 (Maslow, 1973). 가
(, 1989)

, , , (Harris & Guten, 1979;
Muhlenkamp & Verran, 1986).

(Berkman & Breslow, 1983).
가
(Gillet et al, 1987).
(Gillet et al, 1987; Walker et al, 1988), 가
(O'Hagen, 1984).

가 ,

가 (Pender & Pender, 1987). Price Luther(1980)

가 가 .

(1992)

45-60

가
가

(, 1990)

가 ,

가

가 .

3.

. Pender

(cognitive-perceptual)

(1)

:

가 ,

가 .

(1988)

중

(F=2.953, p<.05; F=3.799, p<.05),

(1993)

96

가

(r=.38, p<.01). Speak (1989)

가

(r=.15, p<.05), Weitzel(1989)

가

2%

. Muhlenkamp (1985) 17- 84

175

6가

16%

. Duffy(1988) 35- 65

가

1%

(1985)

761

가

가

가 . Walker

(1988) 18- 88

452

, Weitzel(1989)

3% , Brown (1986) 368 55
가 3.5%

가 , , .

:

,가 , ,가 ,
가

가 .가 가
가 (McCubbin & Patterson,
1987).

Gottlieb (1984) 20-64
, Zimmerman (1989) 가 , ,
, 가 가
. Ruffle (1989) 가 , , ,
가 (1994b) 40-59
, , , 가 , , ,

Hunnard (1984) 55 가 6가
(.37), Muhlenkamp (1985) 가
, Kelly (1991) 가

(2) 가
(Pender & Pender, 1987).

(1986) 40-59 232 가
(p<.005). (1990) 40-59 194
(r=.42, p<.001).
가 가
가

(3) 가 가
: 가 가
가 가
. Wallston (1978) Rotter
, , 가
. 가

Speake (1989) 가 가 (r=.29,

p=.001), 24%
가 5.8%, 3/6%

(1988) 가 . 가 ,
(r=.134, p<.05), Muhlenkamp
(1985) 가 16% .
(1990) 18-60 349 가 5.9% ,
r=.361(p<.001) .
:
(, 1991).
(Stretcher at al. 1986),
(Bandura, 1977).
, Diclemente, Prochaska, Gribertini(1985)
가
Weitzel(1989) 20-60 193 Sherer (1982)
6% ,
15%, 10%, 6%
(1994b) 40-59
(=.26).
Pender(1990) 589 8 6 가
, Kelly (1991) 215 , , , 5가
가 , ,
Stuibergen Becker(1994) 117 (disabled)
, (1993)
(1992) 가
가 (=.653, T =5.519), (1994) 가
:
(Verbrugge & Windgard, 1987 : Wallen et al, 1979).
Dishman (1985) ,
Wetzel(1989)

, (1988) 65
 , Speake (1989) 55-93 297
 가 가 ,
 10.2%, 4.3% .
 Duffy(1988) Ware(1976)
 2%가
 , , , , , , ,
 36.3% , , , , , , ,
 36.5% .
 Gillis Perry (1991) Ware(1976)
 Cantril(1965)
 가 ,
 58% Pender Pender(1987)가
 가 .
 (1994), (1994b)
 가 가 .
 (4) -
 가 (1985)
 (F=4.478, p=.01). Speak (1989)
 (r=.129, p<.05).
 , .
 Johnson (1993) 3025 가
 (t=.123, p<.001) .
 Holahan (1987) 65-75 1
 , Cox(1987) 가
 , (1992) 가 가 (=.163,
 T =2.104) .
 (p=.0021), (1987) 가
 (, 1990; , 1986; ,
 1989) .
 , (1989) ,
 (r=.114, p<=.005)
 (r=.189, p<.001) ,

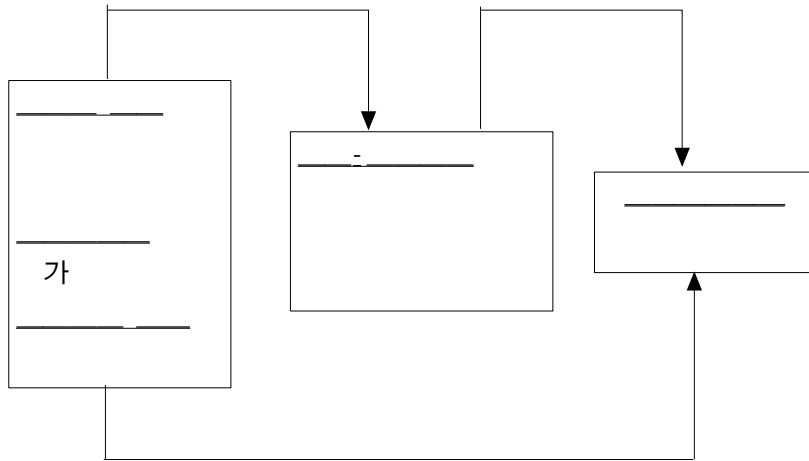
가

1.

Pender
Pender

1

(, 1985; , 1990; , 1988; Duffy, 1988; Johnson et al, 1993; Kelly et al, 1991; Walker et al, 1988)



1.

2. 가

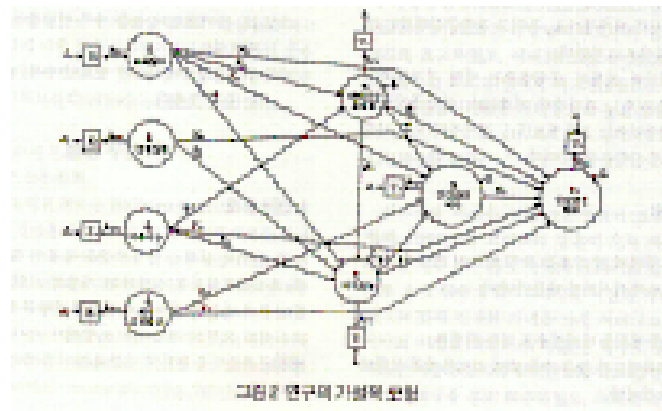
가 2 가

Pender 가 Weitzel(1989) (1990)
가 가 가 가
7가 가
가 Pender

가 가 (Roy, 1984)
(Perceived Benefits & Barriers of Health Promoting Behaviors) 가

Page -265-

2. 가



3

. Speake (1989)

가 5.8%, 3.6%

, Duff(1988)

1%, 13%

(, 1989: , 1985: , 1988: , 1990: Weitzel, 1989).

Pender

가 가 ,

가 ,

가 가 ,

가

(η_1),

(η_2),

(η_3),

(η_4) ,

(ζ_1),

(ζ_2),

가 (ζ_3),

(ζ_4) .

3. 가

가

가

- 가 ,
- 가 1. 가 .
- 가 2. 가 .
- 가 ,
- 가 3. 가 .
- 가 4. 가 .
- 가 5. 가 .
- 가 6. .
- 가
- 가 7. 가 .
- 가 8. .
- 가 9. .
- 가 10. .
- 가 ,
- 가 11. 가 .
- 가 12. 가 .
- 가 13. 가 .
- 가 14. .
- 가 15. .
- 가 16. .
- 가 17. .

1.

가

2.

45-59

3.

- 1)
(1)

'(5) ' '(1) 5 가 가 가 가 ' 가

- (2) 가

(1989), (1988) Olson Schellenberg(1985)가 가

3 17 5 가 . 가 가
 , Cronbach's alpha .903 .

(3)

(Maoz et al, 1977: , 1984)

‘ ’ 0 ‘ ’ 5 6 가 가
 . Cronbach's alpha .796 .

2)

(1)

Wallston (1978) 18

6 '1) 6 가 가 '6
) ‘ ’(1) 6 가 가 가
 . Wallston (1978) .77

Cronbach's alpha .786 .

(2)

(, 1992: Bandura, 1977)

가 12 . 0- 100
 가 가 , 가 . Cronbach's alpha
 .864 .

(3)

Speake (1989) 3

‘ ’(1) ‘ ’(5) 5 가
 가 가
 Cronbach's alpha .726 .

(4)

(, 1991: , 1990: Walker et al, 1987) ,

, , , , 6 53 5
 10 . 20

43

Cronbach's alpha .934 . Walker (1987) alpha .922

, (1990) .90 . 43 215 가
 가

4.

25.5 (, 1992)

20-30 가 4
 가 35 가 45-59 .
 300

, 100 , 30 , 70
 , 가

5.

SAS PC⁺

PC Pearson correlation (skewness) (kurtosis)
 LISREL 7.20 가 가
 (Maximum likelihood method)

1.

91.4%가 45054
 48.6 (3.8) 가 83.5% , 가
 34.3% . 93.3%가 가 , 70.5%가 가
 2.6 , 가 4.5 (1).
 < 1> :417

	()	(%)	()
()	45-49	282	67.6
	50-54	99	23.8
	55-59	36	8.6
		143	34.3
		274	65.7
		348	83.5
		69	16.5
		289	83.5
		69	16.5
		294	70.5
		123	29.5
가	- 100	48	11.5
()	101-200	212	50.8
	201-300	113	57.1
	301-	44	10.8
	2	212	50.8
	3	205	49.2
가	4	222	53.2
	5	195	46.8

45-49 61.7%가 , 8.5%가
 , 50-54 52.5%가 , 37.4%가 , 55-59 94.4%가

50 가 가 . ()
 (p=0.001), 12
 49.7 (2).

< 2> :141

()	No.(%)	No.(%)	No.(%)	No.(%)
45-49	84(29.8)	174(61.7)	24(8.5)	282(100.0)
50-54	10(10.1)	37(37.4)	52(52.5)	99(100.0)
55-59	2(5.6)	0(0)	34(94.4)	36(100.0)
	96(23.0)	211(50.0)	110(26.4)	417(100.0)
				F=10.46
()	7.85(6.22)	11.50(6.85)	11.59(7.57)	P=0.001

1.0 .
 가
 가 0 가
 가
 12.9 (2-25) , 223.4
 (70-1000) , 가 가 2.9 (1-5)
 . 가 59.5 (17-85)
 , 10.68 (0-40) 가
 .
 24.1 (5-30) ,
 782.4 (0-1200) , 가 가
 6.3 (2-10) .
 140.4 (43-215) ,
 3.7 (1-5) , 2.6 , 가 3.6 ,
 2.6 , 가 3.7 , 3.1 , , 가
 , , (1994a) 35069
 .
 2.
 3 .
 5% , 가 , , ,
 , .103 .495 ,
 (r=-.119). , 가 ,
 (.143-.182), (r=-.130), , 가
 , (.140-.343), 가
 (r=.228). 가
 (r=-.211).

< 3 >

	1	2	3	4	5	6	7
1.							
2. 가	-.056						
3. 가	.068	-.053					
4.	-.010	.056	-.211**				
5.	.032	-.046	.228***	-.069			
6.	.140*	-.008	.343***	-.153*	.281**		
7.	.143**	.014	.182***	-.130*	.084	.155**	
8.	.174***	.007	.376***	-.119*	.288***	.469***	.103*

* Statistical Significance Level:P<.05

** Statistical Significance Level:P<.01

*** Statistical Significance Level:P<.001

3. 가

가

가 가

가

(, , , 1988: , 1990).

1)

가

가 가

chi-square, chi-square/df, Goodness of Fit Index(GFI), Adjusted Goodness of Fit Index(AGFI), Root Mean Wquare Residual(RMSR), Modified-Normed Fit Index(MNFI), Normed Fit Index(NFI), Critical Number(CN)

Chi-square 가 가 가 (Boyd, Frey, & Aaronson, 1988) chi-square=4.42(df=5, p=.490) 가

가

GFI

0 1

9

, AGFI GFI

가

GFI=.995, AGFI=.962

RMSR

가

가

가

.05

가

RMSR .024

가

NFI()

chi-square

0 1

.9

(Bentler & Bonnett, 1980).

NFI

.946

가

NFI

MNFI()

1.0

1.0 가

(Bollen, 1989).

MNFI

1.007

가

(), Q plot, 가

가 2.58
 가 1.523
 Q plot X , Y Q plot
 1 가 1 (, 1990). 가 Q plot
 가 1 가 (modification index)
 가 가 가 가 5 (Jöreskog & Sörbom, 1988) , ()
 가 가 가 2.62 가
 가 가
 2) 가
 (Beta, Gamma) T , (SMC, Squared Multiple Correlation) (residual error variance=Psi) 4 , 가
 가 , 5 T 가 2
 (P=.05) (, 1990).
 < 4> 가 (BETA, GAMMA) T , Squared Multiple Correlation(SMC) PSI()

	(SE)	T	SMC	PSI
			.094	.906
가	-.006(.76) .307(.081)	-.081 3.783*	.160	.840
가	.137(.071) .112(.075) .208(.080) .191(.084)	1.814 1.499 2.607* 2.263	.332	.668
가	.171(.068) -.524(.073) .028(.076) .041(.074)	2.496* -7.120* .363 .557	.328	.672
가	.136(.066) .096(.064) .272(.071) .101(.086) .211(.073) .199(.071) .082(.083)	1.986 1.456 3.714* 1.143 2.797* 2.717* .967		

SE:Standard Erroe *Statistical Significance Level:T ≥ |2.0|,P< .05

$t_{21} = .137, T = 1.814$).

가 4. 가

가 (

$t_{22} = .112, T = 1.499$).

가 5. 가

($t_{23} = .208,$

$T = 2.607$).

가 6.

($t_{21} = .191,$

$T = 2.263$).

가 7. 가

($t_{31} = .71, T = 2.496$).

가 8.

($t_{34} = -.524,$

$T = -7.120$).

가 9.

=

($t_{31} = .028, T = 3.63$).

가 10.

($t_{32} = .041, T = .557$).

가 11. 가

($t_{41} = .136, T = 1.986$)

, ,

가 가

($t_{41} = .175, T = 2.552$).

가 12. 가

($t_{42} = .095, T = 1.456$).

가 13. 가

($t_{43} = .272, T = 3.714$).

가 14.

($t_{44} = .101,$

$T = 1.143$).

가 15.

($t_{41} = .211,$

$T = 2.797$).

가 16.

($t_{42} = .199, T = 2.717$).

가 17.

($t_{43} = .082,$

$T = .967$).

4. 가

가

가

가

(, 1990).

가

가가

Q-plot

가

(, 1994: , 1994b),

가

가

가

,

가

NFI

.945, MFI 1.019

가 1.568 Q plot 가 1
 가 2.67
 T , SMC PSI
 6, 7, 4).
 7
 < 6> (BETA, GAMMA) T , Squared Multiple
 Correlation(SMC) PSI

	(SE)	T	SMC	PSI
			.093	.907
가	-.006(.079) .306(.081)	-.077 3.776*	.160	.840
가	.137(.076) .112(.075) .209(.080) .191(.084)	1.813 1.467 2.610 2.266*	.332	.668
가	.170(.068) -.525(.073) .049(.071)	2.487* -7.156* .697	.327	.673
가	.136(.066) .095(.064) .273(.071) .102(.086) .212(.073) .199(.071) .084(.083)	1.982 1.456 3.714* 1.153 2.807* 2.717 .988		

SE:Standard Error *Statistical Significance Level:T ≥|2.0|,P<.05

< 7> (Effect Coefficient)

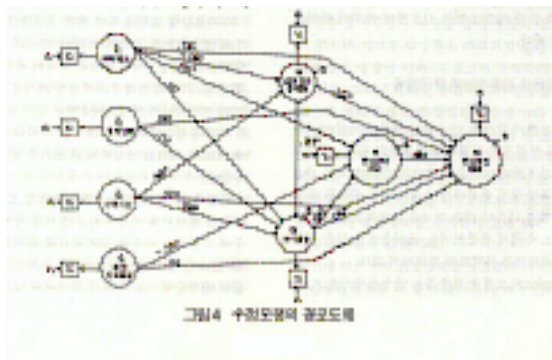
	T	(T)
가	-.006 .306	— — -.006(-.076) .306(3.778)*
가	.137 .112 .209 .191	-.001(.067) — .058(1.993) — .136(1.789) .112(1.493) .267(3.513)* .191(2.285)*
가	.170 — —	.007(.700) .005(.556) .013(.684) .177(2.274)* .005(.556) .013(.684)

	- .525	—	- .525)-7.178)*
	—	.009(.643)	.009(.643)
	.049	—	.049(.690)
가	.136	.039(1.300)	.175(2.552)*
	.095	.022(1.294)	.117(1.756)
	.273	.116(3.314)*	.389(5.507)*
	.102	-.043(-.977)	.059(.819)
	.212	.038(1.810)	.250(3.329)*
	.199	.004(.571)	.084(.988)
	.084	—	

SE:Standard Error *Statistical Significance Level:T ≥ |2.0|,P < .05

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4.



가

1. 가

Pender

가

Pender

가 가 , 가

가 (Frank-Stromborg et al, 1990: Johnson et al, 1993: Stuibergen et al. 1994: , 1994b; , 1994)

가

가

가

가

(1988) .
, 가 가
Jordan-March (1985)
가 Speake
(1989) Duffy(1988) 가
(, 1994b; , 1994; Desmond et al, 1993; Fehir, 1989; Pender, Walker,
Schrist & Frankstromborg, 1990)
, Stretcher (1986) 가 , Bandura(1977)
가 가
(Duffy, 1988; Pender et al, 1990; Speake et al, 1989; Weitzel, 1989; Weitzel et al, 1990)
(1994) 가 (1994b), (1994)
(1994b) 가
가 (Emery,1980)
가 , 가 가 Nicholas(1993)
가
(1989) Walker (1988) , 가 Speake
(Speake et al, 1989)

가 . 가 가
 가 . 가 가
 , 가 , ,
 가 , , , .
 가 .

가 . 51.8%
 , , .
2.

1) 가 , , ,
 , , , , 가가

2) , , , .

3) , , , 가

4) 가 가 .

5) 가 가 가

1. (1990). , 4,
 10- 19.
 2. (1987).
 3. , , (1988).
 4. (1992).

5. (1991).
6. (1992). : , .
7. (1989).
- , 11, 91-109.
8. , (1992).
. 22(4). 569-588.
9. (1989). , - , 가
10. (1985).
, 15(2), 49-59.
11. (1987).
12. (1991).
13. (1994).
14. (1990).
15. (1993). 29 .
16. (1989). Crain. W.C. .
17. (1988).
. 29(1), 87-96.
18. (1994a). , 3(1),
93-115.
19. (1994b).
20. (1988). 가
21. (1994).
22. (1993). . 23(4), 617- =630.
23. (1990).
24. (1992). . 8 , 94-125.
25. (1990).
26. (1988).
, 18(2), 118-125.
27. (1990).
28. (1992).
29. (1986).

30. (1989). , 28(3), 84-91.
31. (1986).
32. (1984).
33. (1989). , 11, 51-72.
34. (1989). , 659-663.
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- Abstract -

**Key Word : health promoting behavior, late-middle age women,
self-efficacy, model construction**

A Model for Health Promoting Behaviors in Late-middle Aged Woman

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Recent improvements in living standard and development in medical care led to an increased interest in life expectancy and personal health, and also led to a more demand for higher quality of life. Thus, the problem of women's health draw a fresh interest nowadays. Since late-middle aged women experience various physical and socio-psychological changes and tend to have chronic illnesses, these women have to take initiatives for their health control by realizing their own responsibility. The basic elements for a healthy life of these women are understanding of their physical and psychological changes and acceptance of these changes.

Health promoting behaviors of an individual or a group are actions toward increasing the level of well-being and self-actualization, and are affected by various variables. In Pender's health promoting model, variables are categorized into cognitive factors(individual perceptions), modifying factors, and variables affecting the likelihood for actions, and the model assumes the health promoting behaviors are affected by cognitive factors which are again affected by demographic factors. Since Pender's model was proposed based on a too broad conceptual frame, many studies done afterwards have included only a limited number of variables of Pender's model. Furthermore, Pender's model did not precisely explain the possibilities of direct and indirect paths effects.

The objectives of this study are to evaluate Pender's model and thus propose a model that explains health promoting behaviors among late-middle aged women in order to facilitate nursing intervention for this group of population. The hypothetical model was developed based on the Pender's health promoting model and the findings from past studies on women's health.

Data were collected by self-reported questionnaires from 417 women living in Seoul, between July and November 1994. Questionnaires were developed based on instruments of Walker and others' health promotion lifestyle profile, Wallston and others' multidimensional health locus of control, Maoz's menopausal symptom check list and Speake and others' health self-rating scale. IN addition, items measuring self-efficacy were made by the present author based on past studies. In a pretest, the questionnaire items were reliable with Cronbach's alpha ranging from .786 to .934. The models for health promoting behaviors were tested by using structural equation modelling technique with LISREL 7.20.

The results were summarized as follows :

1. The overall fit of the hypothetical model to the data was good (chi-square=4.42, df=5, p=.490, GFI=.995, AGFI=.962, RMSR=.024).

2. Paths of the model were modified by considering both its theoretical implication and statistical significance of the parameter estimates. Compared to the hypothetical model, the revised model has become parsimonious and had a better fit to the data (chi-square =4.55, df=6, p=.602, GFI=.995, AGFI=.967, RMSR=.024).

3. The results of statistical testing were as follows :

1) Family function internal health locus of control, self-efficacy, and education level exerted significant effects on health promoting behaviors($\beta_{43}=.272$, $T=3.714$; $\beta_{41}=.211$, $T=2.797$; $\beta_{42}=.199$, $T=2.717$; $\beta_{41}=.136$, $T=1.986$). The effect of economic status, physical menopausal symptoms, and perceived health status on health promoting behavior were insignificant($\beta_{42}=.095$, $T=1.456$; $\beta_{44}=.101$, $T=1.143$; $\beta_{43}=.082$, $T=.967$).

2) Family function had a significance direct effect on internal health locus of control ($\beta_{13}=.307$, $T=3.784$). The direct effect of education level on internal health locus of control was insignificant($\beta_{11}=-.006$, $T=-.081$).

3) The directs effects of family functions & internal health locus of control on self-efficacy were significant($\beta_{23}=.208$, $T=2.607$; $\beta_{21}=.191$, $T=2.2693$). But education level and economic status did not exert a significant effect on self-efficacy($\beta_{21}=.137$, $T=1.814$; $\beta_{22}=.137$, $T=1.814$; $\beta_{22}=.112$, $T=1.499$).

4) Education level had a direct and positive effect on perceived health status, but physical menopausal symptoms had a negative effect on perceived health status and these effects were all significant($\beta_{31}=.171$, $T=2.496$; $\beta_{34}=.524$, $T=-7.120$). Internal health locus and self-efficacy had an insignificant direct effect on perceived health status($\beta_{31}=.028$, $T=.363$; $\beta_{32}=.041$, $T=.557$).

5) All predictive variables of health promoting behaviors explained 51.8% of the total variance in the model.

The above findings show that health promoting behaviors are explained by personal, environmental and perceptual factors : family function, internal health locus of control, self-efficacy, and education level had stronger effects on health promoting behaviors than predictors in the model.

A significant effect of family function on health promoting behaviors reflects an important role of the Korean late-middle aged women in family relationships. Therefore, health professionals first need to have a proper evaluation of family function in order to reflect the family function style into nursing interventions and development of strategies. These interventions and strategies will enhance internal health locus of control and self-efficacy for promoting health behaviors. Possible strategies include management of health promoting programs, use of a health information booklets, and individual health counseling, which will enhance internal health locus of control and self-efficacy of the late-middle aged women by making them aware of health responsibilities and value for oneself.

In this study, an insignificant effect of physical menopausal symptoms and perceived health status on health promoting behaviors implies that they are not motive factors for health promoting behaviors. Further analytic researches are required to clarify the influence of physical menopausal symptoms and perceived health status on health promoting behaviors with-middle aged women.