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**BEHAVIORAL BELIEFS IN CHRONIC WOUND MANAGEMENT: A THEORY  
OF PLANNED BEHAVIOR PERSPECTIVE**

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**Objective:** This qualitative inquiry explored the spectrum of behavioral beliefs held by individuals with chronic wounds concerning their consistent, daily engagement with nurse-guided wound dressing at a healthcare facility until full recovery. This qualitative study was grounded in the Theory of Planned Behavior and conducted between May and July 2024 in inpatient and outpatient units of a university hospital in southern Brazil. Adult participants (aged 18 years and above), of all genders, with chronic wounds of any etiology, were included in the belief analysis. Qualitative data were analyzed following the Theory of Planned Behavior. The local Research Ethics Committee approved the study.

**Results:** A total of 22 participants with chronic wounds took part in the study. Most were older adults, white, male, married, had low educational attainment, and lived with chronic conditions such as Diabetes Mellitus and Hypertension. The target behavior was defined as attending the health unit daily to have the wound dressing performed exactly as instructed by the nurse, until complete

healing. Thirteen salient beliefs were identified, five of which were related to advantages and disadvantages, such as feeling good, being cared for, and having the wound monitored; four were linked to normative beliefs, that is, those that describe significant others for performing or not performing the behavior, such as children and spouse. Regarding perceived control beliefs, the participants described that having a ride or a car, weather conditions, and physical limitations can either facilitate or hinder the performance of the behavior. Conclusion: This research revealed that individuals' personal and cultural beliefs affect their treatment adherence. It was observed that the perception of self-care and wound treatment are influenced by beliefs related to various aspects of the life of a person with chronic wounds, such as the need for monitoring of healing, care from health professionals in the Basic Health Unit and inpatient units of the hospital, transportation, and support from family and friends during treatment.

Palavras-chave: nursing; wounds and injuries; theory of planned behavior.