

Psy 474: Health Psychology

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Course Description/Learning Objectives:

This course focuses on health psychology, which attempts to understand the psychological influences of how people stay healthy, why they become ill, and how they respond when they get ill. Health psychology focuses on issues related to social psychology, health promotion, prevention, and evaluation. Lecture and readings will comprise of current theoretical issues and research models in health psychology. In addition, broader models of social change will be examined (e.g., diffusion of innovations, ecological perspectives).

The overall goal of the course is to provide students a rigorous emersion into health psychology, with an additional emphasis on social psychology and health-related issues. Students will also be introduced to research methods specific to health settings, including methods from public health and epidemiology. This course is associated with select Psychology Department student-learning objectives (linked to our Program Goals), including self-understanding, writing skills, understanding theoretical perspectives in psychology and related areas, critical analysis of research, research skills, applying knowledge to real world problems/applications, and working with others. Note: The course content, including lecture materials and readings, may contain material regarding intimacy and sexuality, including HIV/AIDS and STDs (and their spread).

HOW THIS COURSE CONTRIBUTES TO THE PSYCHOLOGY DEPARTMENT'S STUDENT-LEARNING OUTCOMES

In accordance with University policy, the Psychology Department has established a set of Student-Learning Outcomes for the undergraduate program that will help us assess the program's instructional effectiveness. This course covers the outcomes that are checked below, and for each outcome the Mastery Level to be achieved is represented as follows,

I = Introduced.

D = Developed and practiced with feedback.

M = Demonstrated at the mastery level appropriate for graduation.

1. Students can identify appropriate basic research methods to test hypotheses empirically.

Covered at Mastery Level: I D M

2. Students can apply psychological theory to scientific questions and real-world problems.

Covered at Mastery Level: I D M

3. Students can find and evaluate relevant literature.

Covered at Mastery Level: I D M

4. Students can demonstrate proficient writing skills, including scientific writing in APA format.

Covered at Mastery Level: I D M

5. Students can manage and analyze data using appropriate statistical methods.

Covered at Mastery Level: I D M

6. Students can analyze psychological research and theory in relation to their own personal development.

Covered at Mastery Level: I D M

7. Students can identify how diversity impacts individual and social behavior.

Covered at Mastery Level: I D M

8. Students can employ appropriate ethical principles in psychological settings.

Covered at Mastery Level: I D M

Required Texts:

Taylor, S. E. (2014). *Health psychology* (9th ed.). New York: McGraw Hill.

Marelich, W. D., & Erger, J. (Eds). (2004). *The social psychology of health: Essays and readings*. Thousand Oaks, CA: Sage.

Schlosser, E. (2012). *Fast food nation: The dark side of the all-American meal*. New York: Mariner.

Sanders, L. (2010). *Every patient tells a story: Medical mysteries and the art of diagnosis*. New York: Harmony.

Additional Readings:

There will be additional readings posted on the website from various health-related journals and newspaper articles addressing health psychology topics.

Exams:

There will be a midterm and a final exam. Both include multiple choice and T/F.

Task Portfolio:

You will be asked to keep a task portfolio that will be used for class-related projects (e.g., pill regimen task, health-center task, etc.). Due dates will vary given the assignments which will be part of the portfolio. These are assessed as Pass/Redo. If you receive a ‘redo’ on a task, you have 1-week to return the assignment. You may only redo a task twice. For every task not “Passed” by the end of the semester, grade percentage points will be lost (to be determined based on the number of tasks assigned).

Class Participation

Since this course is large, this portion of the grade really reflects your mindfulness as a student. Its an easy 10% unless you do one of the following: 1) always come late, 2) always leave early, 3) are disruptive to other students or to me during lecture.

Grading:

Task Portfolio	20%
Class Participation	10%
Midterm	35%
Final Exam	35%
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	100%

Grading Procedure, late papers, absences:

Grades will be broken down by the following percentages:

90% - 100%	= A
80 – 89.9%	= B
70 – 79.9%	= C
60 – 69.9%	= D
59.9% or lower	= F

Exam make-ups will be made at my convenience. Make-up exams will be slightly different from the original exams, and may be full essay format.

Class attendance: In addition to attending class, students are expected to arrive on time, and stay the entire class period.

Extra Credit: None.

Class Schedule

Dates

Topic

Week 1-2

Introduction to Health Psychology, Biopsychosocial Model, Systems

Readings from Marelich/Erger Text [except “*”]

-Overviews from Various Fields

Taylor, S.E. (1990). Health Psychology: The science and the field.
American Psychologist, 45, 40-50.

Brown, P. (1991). Themes in medical sociology.
Journal of Health Politics, Policy and Law, 16, 595-604.

Mullan, F. (2000). Don Quixote, Machiavelli, and Robin Hood: Public health practice, past and present. *American Journal of Public Health, 90*, 702-706.

*Pearce, N. (1996). Traditional epidemiology, modern epidemiology, and public health.
American Journal of Public Health, 86, 678-683. **[article on website]**

MacDonald, K.L., Spengler, R.F., Hatheway, C.L., et al. (1985). Type A botulism from sautéed onions: Clinical and epidemiologic observations.
Journal of the American Medical Association, 253, 1275-1278.

-Cause-Effect and Health Status

Engel, G.L. (1977). The need for a new medical model: A challenge for biomedicine.
Science, 196, 129-136.

Conrad, P. (1975). The discovery of Hyperkinesis: Notes on the medicalization of deviant behavior. *Social Problems, 23*, 12-21.

-Health Outcomes

Kaplan, R. M. (1990). Behavior as the central outcome in health care.
American Psychologist, 45, 1211-1220.

Readings from Taylor, and from Fast Food Nation

Week 3-5

Health Behaviors, Behavior Change

-Overview of Change Strategies

Marelich, W.D., & Rotheram-Borus, M.J. (1999). From individual to social change: The present and future directions of health interventions. In T.P. Gullotta, R.L. Hampton, G.R. Adams, B.A. Ryan, & R.P. Weissberg (Eds.), *Child and family health care: Issues for the year 2000 and beyond* (Vol 12, pp. 169-196). Thousand Oaks, CA: Sage.

-Individual and Group Change Models

- Larson, E.B., Bergan, J., Heidrich, F., et al. (1982). Do postcard reminders improve influenza vaccination compliance. *Medical Care, 20*, 639-648.
- Wulfert, E., & Wan, C.K. (1993). Condom use: A self-efficacy model. *Health Psychology, 12*, 346-353.
- Hausenblas, H.A., Carron, A.V., & Mack, D.E. (1997). Application of the theories of reasoned action and planned behavior to exercise behavior: A meta-analysis. *Journal of Sport and Exercise Psychology, 19*, 36-51.
- *Robbins, M.L., Levesque, D.A., Redding, C.A., Johnson, J.L., & Prochaska, J.O. (2001). Assessing family members' motivational readiness and decision making for consenting to cadaveric organ donation. *Journal of Health Psychology, 6*, 523-535.
[article on website]

- Kelly, J.A., Lawrence, J.S.S., Diaz, Y.E., et al. (1991). HIV risk behavior reduction following interventions with key opinion leaders of population: An experimental analysis. *American Journal of Public Health, 81*, 168-171.
- *Siegel, M., & Biener, L. (2000). The impact of an antismoking media campaign on progression to established smoking: Results of a longitudinal youth study. *American Journal of Public Health, 90*, 380-386. **[article on website]**

-Designing Health Behavior Interventions

- Rothman, A. J., Martino, S.C., Bedell, B.T., Detweiler, J.B., & Salovey, P. (1999). The systematic influence of gain- and loss-framed messages on interest in and use of different types of health behavior. *Personality and Social Psychology Bulletin, 25*, 1355-1369.
- *Prochaska, J.O., DiClemente, C.C., & Norcross, J.C. (1992). In search of how people change: Applications to addictive behaviors. *American Psychologist, 47*, 1102-1114.

*New Yorker Article -- Gladwell -- "Tipping Point"

Readings from Taylor, Schlosser Book

Week 6-7 Patients in the Treatment Settings

-Overview of Patient Behavior and Settings

*Taylor, S.E. (1979). Hospital patient behavior: Reactance, helplessness, or control? *Journal of Social Issues, 35*, 156-184. **[article on website]**

-The Interaction

Emerson, J.P. (1970). Behavior in private places: Sustaining definitions of reality in gynecological examinations. In P. Dreitsel (Ed.), *Recent Sociology* (pp. 74-97). NY: Macmillan.

*DiMatteo, M.R., Hays, R.D., & Prince, L.M. (1986). Relationship of physicians' nonverbal communication skill to patient satisfaction, appointment noncompliance, and physician workload. *Health Psychology, 5*, 581-594.

Erger, J., Grusky, O., Mann, T., & Marelich, W.D. (2000). HIV health care provider/patient interaction: Observations of the process of providing antiretroviral treatment. *AIDS Patient Care and STDs, 14*, 259-268.

-Setting Defining the Illness

Rosenhan, D.L. (1973). On being sane in insane places. *Science, 179*, 250-258.

Readings from Taylor

Week 8-9 Stress & Coping

-Social Relationships

House, J.S., Landis, K.R., & Umberson, D. (1988). Social relationships and health. *Science, 241*, 540-545.

*Wortman, C., & Dunkel-Schetter (1979). Interpersonal relationships and cancer: A theoretical analysis. *Journal of Social Issues, 35*, 120-155. **[article on website]**

-Stress & Coping

Rabkin, J.G., & Struening, E.L. (1976). Life events, stress, and illness. *Science, 194*, 1013-1020.

*Folkman, S., & Lazarus, R.S. (1980). An analysis of coping in a middle-aged community sample. *Journal of Health and Social Behavior, 21*, 219-239. **[article on website]**

-Responsibility and Empowerment

Langer, E.J., & Rodin, J. (1976). The effects of choice and enhanced personal responsibility for the aged: A field experiment in an institutional setting. *Journal of Personality and Social Psychology, 34*, 191-198.

Marelich, W.D., Roberts, K. J., Murphy D.A., Callari T (2002). HIV/AIDS patient involvement in antiretroviral treatment decisions. *AIDS Care, 14*, 17-26.

Readings from Taylor, Sanders

Week 10-11 Chronic & Terminal Illness, Focus on HIV/AIDS

Readings from Taylor, Sanders, additional readings online

Week 12-15 Policy, Ethics, Future of Health Psychology

-Health Policy and Activism

Foreman, C.H. (1994). Institutions. In Forman, *Plagues, products, & politics: Emergent public health hazards and national policymaking* (pp. 14-28). Washington, D.C.: Brookings.

Wachter, R.M. (1992). AIDS, activism, and the politics of health. *New England Journal of Medicine*, 326, 128-133.

-Behavior Change and Ethics

Kipnis, D. (1994). Accounting for the use of behavior technologies in social psychology. *American Psychologist*, 49, 165-172.

-Looking to the Future of Health

Kaplan, R.M. (2000). Two pathways to prevention. *American Psychologist*, 55, 382-396.

*McKinlay, J.B., Marceau, L.D. (2000). To boldly go. . .

American Journal of Public Health, 90, 25-33. **[article on website]**

Stokols, D. (1992). Toward a social ecology of health promotion. *American Psychologist*, 47, 6-22.

Holloway, H.C., Norwood, M.D., Fullerton, C.S., Engel, C.C., & Ursano, M.D. (1997). The threat of biological weapons: Prophylaxis and mitigation of psychological and social consequences. *Journal of the American Medical Association*, 278, 425-427.

Readings from Taylor, Sanders

Week 16 Final Exam Dec 15, 9:30-11:20am

Additional reading assignments throughout the semester. The above schedule and procedures are subject to change, as is the flat grade (+/- Grade "may" be granted to a few based on performance). Midterm will be sometime in weeks 8, 9, or 10.

Student Responsibilities and Lecture/Course Topics Disclaimer

- 1) Portfolios are due when they are due – redos will be given a strict date to turn-in again.
- 2) Email: You must check your University email at least ONCE a day during the week (Monday thru Friday) for any updated assignments or class information.
- 3) Lecture examples (including online comments) may contain material that you may deem offensive, philosophically disagree with, or that may be striking in terms of subjective content. Uncomfortable topics may include: conducting intervention studies on real populations such as those infected or affected by HIV/AIDS or other STDs, the spread of such diseases, risky-behaviors, and illegal drug use or alcohol consumption. This may be in the form of office or classroom, films, music, or other audio/visual material. This material is not intended to offend anyone. The "offensive" or "controversial" material/ideas expressed in the material presented do not necessarily reflect the views of the instructor, the Department of Psychology, or CSU Fullerton. Nonetheless, because these materials speak to issues relevant in psychology, they are essential. By continuing with this course you are agreeing to be held academically accountable for all required material in this course, regardless of the "offensive" or "controversial" nature.
- 4) All lecture materials noted in class (including online comments) are backed by peer-reviewed published research and/or from textbooks (unless noted). In addition, as a well-published and active researcher in the field of Applied Social Psychology and related areas (e.g., health psychology, research on close relationships and sexuality), and in Applied Quantitative Methods, it is my right to present my on-going research and share my thoughts on research-related issues.
- 5) Though you may disagree with some conclusions presented in the class, please note that the material presented is science, at least one truth as part of science and the scientific method. There are of course multiple truths in science, and there are other courses in College that may present alternative truths. Be open to new things, and be open to multiple truths.
- 6) If you have any issues with the above, feel free to contact me at wmarelich@fullerton.edu or (657) 278-7374. You may also contact Student Affairs at StudentAffairs@fullerton.edu or (657) 278-3221 or Human Resources, Diversity & Inclusion at mosorio@fullerton.edu or (657) 278-7169 or mtapper@fullerton.edu or (657) 278-4207.

DEPARTMENT OF PSYCHOLOGY

Student Responsibility Code

The Department of Psychology is dedicated to providing you with the highest quality educational program. In order to maximize the benefits of our program, it is important that you meet your responsibilities as a student. Listed below are some of the responsibilities to be met.

Advisement – Please familiarize yourself with university and departmental policies and deadlines.

You should obtain and read pertinent sections of the University Catalog, Class Schedule booklet, and instructor course outlines. If you are a psychology major or minor, you should read the Psychology Student Handbook and meet with a psychology undergraduate advisor (Room H-830J) at least once a year to review your study plan and career goals. The Handbook is available to you at no charge from the Psychology Department Office (H-830M) or from the Psychology Undergraduate Advisement Office (H-830J). Please also consult <http://psychology.fullerton.edu> for further information.

Class Attendance – Please remember that you are responsible for attending all classes and laboratory meetings, and for being on time. The benefit you derive from your education is often lost if you are lost too!

The Learning Environment – Please be mindful of your fellow students and the instructors.

Behavior that persistently interferes with classroom activities may be subject to disciplinary action. Such behavior may include, but is not limited to, cell phones or beepers ringing, entering the class late, leaving the class prematurely, eating in class or chatting with other students during class. A student responsible for continual disruptive behavior may be required to leave class pending discussion and resolution of the problem.

Workload – Please be realistic in adjusting your outside responsibilities (work, family, social obligations, etc.) in order to allow sufficient time for your education.

In order to receive a quality education, you must not overload yourself. As a general rule, you should allow two to three hours of study outside of class, for each hour spent in class. Additional information on this topic is discussed in the Psychology Student Handbook.

Academic Integrity – The world of academia is completely dependent on straightforward honesty and integrity, and it protects these values in many ways. Your ability to think of yourself as an educated person depends on these same values. For these reasons the University imposes serious penalties for breaches of academic honesty and cases of suspected breaches of honesty may be reported. Please familiarize yourself with the academic integrity guidelines found in the current student handbook.

- Work produced through academic misconduct (e.g., cheating on exams, plagiarism) will be dealt with according to the policies of the academic integrity guidelines. Students who violate university standards of academic integrity are subject to disciplinary sanctions, including failure in the course and suspension from the university. Since dishonesty in any form harms the individual, other students and the University, policies on academic integrity are of great concern to us all.
- Your exams, homework, research reports, and term papers should reflect your own work, unless your instructor directs you otherwise.

- o Proper methods of referencing outside sources of information should be used at all times. Additional information on this requirement may be obtained by reading the University Catalog section on Academic Dishonesty.

Special Needs – If you need special assistance in the classroom, please inform the instructor in order to facilitate contact with Dr. Paul Miller at the office of Disability Support Services located at UH-101, (657) 278-3117.

Emergency Procedures- In the event of an emergency, please adhere to these university guidelines.
<http://prepare.fullerton.edu/campuspreparedness/ClassroomPreparedness.asp>

If you have any questions concerning the above responsibilities, please contact your psychology instructor or the Psychology Department Chair. Rev. 11-13