

Psy 520T: Social Psychology and Health

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Fall Semester, CSUF
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Course Description/Objectives:

The course will focus on the social psychology of health, with an emphasis in application of social psychological perspectives to health promotion, prevention, and evaluation. Lecture and readings will comprise of current theoretical issues and research models in Health Psychology, including the Health Belief Model, Self-Efficacy, and Stages of Change. In addition, broader models of social change will be examined (e.g., Diffusion of Innovations, Ecological Perspectives). Applied health issues to be examined will include HIV/AIDS, cancer, medicine adherence, smoking, obesity, and exercise.

The overall goal of the course is to provide students a rigorous emersion into applying social psychology to health-related issues. Given the nature of the course, students will develop an acute understanding of the barriers in implementing individual and social change models, and ways to successfully circumvent such problems. Students will also be introduced to research methods specific to health settings, including methods from public health and epidemiology.

Required Texts:

Foreman, C.H. (1994). *Plagues, products, & politics: Emergent public health hazards and national policymaking*. Washington, D.C.: Brookings.

Course Reader

Exams:

There will be a midterm exam, and a final essay exam.

Group Paper & Presentations:

In pairs, students will produce a 10-15 page paper (APA format) addressing a health-related area -- in essence a literature review of a particular area. Papers will be graded on a 9-pt scale.

A formal presentation will also be given by the student dyad presenting results of the literature review. The presentation will be approximately 20 minutes in length and may utilize any appropriate media presentation tools.

Grading:

Midterm	15%
Final Exam	30%
Group Presentation	15%
Group Paper	30%
Class Participation	10%
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	100%

Grading Procedure, late papers, absences:

Grades will be assigned based on total points from exams and section assignments. Grades will be broken down by the following percentages:

90% - 100%	= A
80% - 89%	= B
70% - 79%	= C
60% - 69%	= D

Late assignments will be penalized 1 pt each week late. It will benefit students to turn in all assignments no matter how late because grades are based on total points. In addition to attending class, students are expected to stay the entire class period.

Class Schedule and Reading Assignments

Dates

Topic

Week 1-2

Biopsychosocial Model of Health and Epidemiologic Foundation

Engel, G.L. (1977). The need for a new medical model: A challenge for biomedicine. *Science*, 196(4286), 129-136.

Taylor, S.E. (1990). Health Psychology: The science and the field. *American Psychologist*, 45(1), 40-50.

Lilienfeld, A. M., & Lilienfeld, D.E. (1980). *Foundations of epidemiology* (2nd ed.). NY: Oxford Univ. Press. [Chapter 1 -- pp. 1-22]

Lilienfeld, A. M., & Lilienfeld, D.E. (1980). *Foundations of epidemiology* (2nd ed.). NY: Oxford Univ. Press. [Chapter 2 -- pp. 23-45]

Kaplan, R. M. (1990). Behavior as the central outcome in health care. *American Psychologist*, 45(11), 1211-1220.

Week 3

Overview of Theory-Driven Perspectives

Van Ryn, M., & Heaney, C.A. (1992). What's the use of theory? *Health Education Quarterly*, 19(3), 315-330.

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.

Week 4

Application of Individual-Level Health Attitude Change Models

Taylor, S.E. (1995). *Health Psychology* (3rd ed.). NY: McGraw-Hill. [Chapter 4 - pp. 83-130]

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.

Prochaska, J.O., DiClemente, C.C., & Norcross, J.C. (1992). Applications to addictive behaviors. *American Psychologist*, 47(9), 1102-1114.

Fisher, J.D., & Fisher, W.A. (1992). Changing AIDS-risk behavior. *Psychological Bulletin*, 111(3), 455-474.

Week 5 Patient/Provider Interactions and Health

Reiser, S.J. (1993). The era of the patient: Using the experience of illness in shaping the missions of health care. *Journal of the American Medical Association*, 269(8), 1012-1017.

Strull, W.M., Lo, B., & Charles, G. (1984). Do patients want to participate in medical decision making? *Journal of the American Medical Association*, 252(21), 2990-2994.

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(5), 259-268.

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Week 6 Health Prevention and Intervention

Taylor, S.E. (1995). *Health Psychology* (3rd ed.). NY: McGraw-Hill. [Chapter 3 - pp. 61-82]

Mann, T., Nolen-Hoeksema, S, Huang, K., et al. (1997). Are two interventions worse than none? Joint primary and secondary prevention of eating disorders in college females. *Health Psychology*, 16(3), 215-225.

Bruvold, W.H. (1993). A meta-analysis of adolescent smoking prevention programs. *American Journal of Public Health*, 83(6), 872-880.

Week 7 Health Promotion

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(11), 1355-1369.

Marelich, W.D., Berger, D.E., & McKenna, R. (2000). Gender differences in the control of alcohol-impaired driving in California. *Journal of Studies on Alcohol*, 61(3), 396-401.

Week 8 Prevention and Promotion in the Social Group

Rogers, E.M. (1995). *Diffusion of innovations* (4th ed.). NY: Free Press. [Chapter 1 - pp. 1-37]

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(2), 168-172.

Kelly, J.A., Murphy, D.A., Sikkema, K., et al. (1997). Randomised, controlled, community-level HIV-prevention intervention for sexual-risk behaviour among homosexual men in US cities. *The Lancet*, 350(9090), 1500-1505.

Gladwell, M. (1996, June 3). The tipping point: Why is the city suddenly so much safer – Could it be that crime really is an epidemic? *The New Yorker*, pp. 32-38.

Week 9 Social Ecology and Health

Wicker, A.W. (1984). *An introduction to ecological psychology*. NY: Cambridge University Press. [Chapter 1 – pp. 1 - 19]

Rotello, G. (1997). *Sexual ecology: AIDS and the destiny of gay men*. NY: Dutton. [Introduction – pp. 1 - 18]

Rotello, G. (1997). *Sexual ecology: AIDS and the destiny of gay men*. NY: Dutton. [Chapter 2 – pp. 38- 64]

Stokols, D. (1992). Toward a social ecology of health promotion. *American Psychologist*, 47(1), 6-22.

Week 10 Large-Scale Community Interventions

Susser, M. (1995). Editorial: The tribulations of trials – Intervention in communities. *American Journal of Public Health*, 85(2), 156-158.

Farquahr, J.W., Fortmann, S.P., Flora, J.A., et al. (1990). Effects of communitywide education on cardiovascular disease risk factors. *Journal of the American Medical Association*, 264(3), 359-365.

Week 11-12 Politics and Health Hazards

Foreman, C.H. (1994). *Plagues, products, & politics: Emergent public health hazards and national policymaking*. Washington, D.C.: Brookings.

Week 13-15 Presentations

Week 16 Final Exam

The above schedule and procedures in this course are subject to change in the event of unforeseen circumstances.