

Department of Health Behavior and Health Education
Course No. PBHL 5133 Course Title: Introduction to Health Behavior and Health Education
3 Credit Hours
Instructor: J.S. Richter, EdD, CHES
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Office Hours: By appointment

Recommended Course Materials:

Glanz, K., Rimer, B.K., and Lewis, F.M. Health Behavior and Health Education: Theory, Research, and Practice. (3rd Edition) San Francisco: Jossey-Bass Publishers, 2002. (ISBN: 9780787957155) [Recommend that if you choose to purchase a text please buy a used book on the Internet \(e.g. Amazon.com\).](#)

Recommended Course Materials:

Publication Manual of the American Psychological Association, (2002), 5th Edition, by the American Psychological Association, Washington, DC. (ISBN: 1-55798-791-2); or the American Medical Association Manual of Style: A Guide for Authors and Editors (1997) by Cheryl Iverson, et al. (9th Edition) Lippincott, Williams, and Wilkers Publishers (ISBN: 0683402064); or MLA Style Manual and Guide to Scholarly Publishing (2nd Edition) Modern Language Association Publishers (1998) by Joseph Gibaldi (ISBN: 0873526996).

I. **COURSE DESCRIPTION AND RATIONALE:**

Introduction to health behavior, health education, theory, and practice; key terms/concepts; theories of individual health behavior; variables influencing responses to interventions; interpersonal theories examining environment elements affecting health behavior; basic planning models; and includes discussion of ethical principles and the application of theory in culturally distinct and/or other unique populations.

II. **HEALTH BEHAVIOR/HEALTH EDUCATION DEPARTMENTAL LEARNING OBJECTIVES:**

The specialist will be able to:

- a) Identify, describe, and apply major theories and concepts that are utilized in educational and behavioral approaches to health enhancement and risk reduction.
- b) Describe how cultural, economic, and other demographic factors may influence health behaviors and individuals' responses to various types of behavioral and educational programs and interventions.
- c) Select and apply appropriate health behavior theories and related concepts for public health interventions.
- d) Describe the advantages and disadvantages of various intervention research methodologies, such as qualitative vs. quantitative approaches, or pre-experimental vs. quasi-experimental vs. randomized/controlled designs .
- e) Design and apply a survey to assess the impact of a specific health behavior on a given population in a public health setting.
- f) Discuss the general framework for evaluating community-based interventions and methodologies, addressing qualitative and quantitative approaches as appropriate.
- g) Design appropriate process, impact, and outcome evaluation strategies for community-based health behavior intervention programs.
- h) Describe appropriate evaluation strategies for population-directed social marketing and health communication interventions.
- i) Describe scales, scores, norms, reliability, validity, scale construction and item analysis as they apply to survey development in public health research.

- j) Evaluate peer-reviewed and non-peer-reviewed scientific and technical reports of behavioral and educational health programs, and assess the programs' designs, methodologies, and evaluation strategies, as well as the validity of the reports' conclusions.
- k) Describe the problem definition, program planning, program implementation, and evaluation components of the community-based participatory research model.

III: COURSE OBJECTIVES/COMPETENCIES MAPPED TO HBHE DEPARTMENTAL LEARNING OBJECTIVES (Refer to II):

Upon completion of this course, the student will be able to:

1. Define health and public health and the relationship between good health behavior, health education, and health promotion, and understand the dynamic nature of health education and health behavior in the context of changing patterns of disease and trends in health (HBHE Departmental Learning Objectives: a; b).
2. Explain the role of the health educator as defined by the Role Delineation Project and identify appropriate settings and audiences for health education (HBHE Departmental Learning Objectives: NA).
3. Identify and explain the theories of individual health behavior to include the Health Belief Model, the Transtheoretical Model of Behavior Change and perspectives on intrapersonal theories of health behavior commonly used in planning health education and health promotion programs (HBHE Departmental Learning Objectives: a; c; d).
4. Identify and explain the models of interpersonal health behavior to include the Social Cognitive Theory, social networks and social support, social influence and interpersonal communication, and perspectives on theories of interpersonal health behavior (HBHE Departmental Learning Objectives: a; c; d).
5. Identify and explain the application of the Empowerment Theory as applied at the community level; including perspectives of collaboration and best practices in creating healthier communities (HBHE Departmental Learning Objectives: a; c; d).
6. Introduce the fundamental characteristics of participatory community organization and mutual inquiry (HBHE Departmental Learning Objectives: c; f; h).
7. Discuss and compare the Empowerment Theory, Social Cognitive Theory, Transtheoretical Model of Behavior Change, the Health Belief Model and their application within the PRECEDE-PROCEED Model (HBHE Departmental Learning Objectives: a; b; c; d; e; f; g; h; k).
8. Identify different strategies for implementing health promotion programs including social marketing, ecological models of health behavior including a discussion of ethical principles and the application of theory to culturally diverse and unique populations (HBHE Departmental Learning Objectives: d; e; f).
9. Compare and contrast various types of program evaluation in consideration of planning and conducting evaluation of health behavior change programs (HBHE Departmental Learning Objectives: f; g; h; I; j; k).

IV. COURSE/CLASSROOM SCHEDULE:

Fridays 1pm-5pm COPH Computer Lab-Room 1230/1250
Saturdays 8:30am-3:30PM
Sundays 1pm-5pm

V. COURSE ASSIGNMENTS AND GRADE EVALUATION:

Core competencies for Public Health Professionals/Linkages between Academia and Practice:
Domain # 1: Analytic Assessment Skills
Domain # 2: Policy Development and Program Planning Skills
Domain # 3: Communication Skills
Domain # 4: Cultural Competency Skills
Domain # 5: Community Dimensions of Practice Skills
Domain # 6: Basic Public Health Sciences Skills

Domain # 7: Financial Planning and Management Skills
Domain # 8: Leadership and Systems Thinking

Assignment Details:

- A. You will interview an individual who has made a major behavior change in their life toward higher level wellness/health due to the threat or diagnosis of an illness or disability (e.g. overeating; stress; smoking./tobacco use; etc.) questions for the interview to reflect/identify applicable constructs from the Transtheoretical Model of Behavior Change. Your discussion should also include the following criteria with discussion/implications as they apply to the individual's behavior change process. The minimum criteria in your paper should address the following:
- a) Constructs from the Transtheoretical Model of Behavior Change as applied to your client's behavior change journey to include an overview of 1) Stages of Change; 2) Decisional Balance; 3) Self Efficacy; and 4) Processes of Change
 - b) Locus of control/self efficacy as it relates to the client as compared and/or contrasted to model's definition and application of self efficacy
 - c) Motivational techniques client relied on as compared and/or contrasted to the TMBC model (e.g. Processes of Change activities the client utilized)
 - d) Utilization of outside support by client as compared and contrasted to the model's description of support and as applied to the Stages of Change and/or Processes of Change
 - e) Utilization of resources by client; compare and contrast with model's recommendations as applied to the Stages of Change and Decisional Balance
 - f) Reinforcement techniques utilized by the client; compared and/or contrasted with model's recommendations in Processes of Change and applied to the other 3 constructs if applicable

The interview paper will be will be no less than 10 and no more than 15 typewritten pages (cover page and reference page do not count towards the 10-15 page requirement). The paper is to be (double spaced, font size no smaller than 11 and no larger than 12, 1 inch margins [sides, header, And footer] and submitted unstapled in a pocket folder. The paper/project will have a cover page and a reference page (APA/ MLA/AMA format is required). You will include a minimum of 6 references from 3 different sources to incorporate appropriately into your paper. Additionally, it should be understood that a quality composition will have unity, structure and cohesion and will reflect correct grammar, spelling, punctuation, tense agreement, and word usage (Refer to Evaluation Rubric).

Your paper should address the criteria in a-f as it applies to the client's experience. The paper's focus is on the client's experience and if the client's experience aligned with the Transtheoretical Model of Behavior Change theory. The question your paper is answering is the following: Did the Transtheoretical Model of Behavior Change theory and the client's experiences towards recovery, match?

Professional articles from the Internet must be full text; and, must have a reference/bibliography citing its' sources at the conclusion of the article. The research paper is to be submitted *unstapled* in a pocket folder placed in the right side pocket. The assignment is worth 150 points. (Domain(s):#1; #2; #4; #5; #6).

The assignment is due by 4:30PM in my office on TBA. A late assignment will be penalized by 25 points to assure equity for those students submitting assignments as scheduled. A late assignment, regardless of circumstances, is due within 3 days past the scheduled due date or a grade of zero is given TBA.

Exam Details:

B. One examination analogous to course content will be administered. (The examination is worth 150 points each). Not taking a scheduled examination without contacting the instructor is an

automatic grade of zero; and, if you do not take the examination as scheduled, you will automatically lose 25 points from the total test grade, regardless of circumstances. This is to assure equity for the students who take the examination as scheduled. The **exam** will be on Sunday **TBA** (Domains: #1; #2; #3; #4; #5; #6; #7; #8).

Additional Course Evaluation:

C. During the course term, (a minimum of 1 or more) unannounced assignment (s) will be conducted within and/or between class meetings. These assignments will reflect participation and cognitive involvement in the course lecture and class discussion. The points for the assignment (s), regardless of circumstances, cannot be “made up.” These will be worth a combined total of 50 points (Domains: #3; #4; #7; #8).

D. Students are expected to be diligent in the pursuit of their studies and in their class attendance. Students have the responsibility of making arrangements satisfactory to the instructor regarding all absences. Such arrangements should be made prior to the absence if possible. Policies of making up work missed as a result of absence are at the discretion of the instructor, and students should inform themselves at the beginning of each semester concerning the policies of their instructors. **A student absent more than 4 hours of class** will have their grade reduced by one letter.

VII. GRADE EVALUATION:

350-315 =A

314-280 =B

279-245 =C

Extra credit is non-existent in this course

No early examinations will be conducted. No early assignments are to be submitted unless prior arrangements have been made with the instructor.

Grades of “Incomplete” (i.e., “I”) will be assigned only in exceptional circumstances, and require advance approval of the instructor. An agreement, signed by both the student and instructor, specifying what activities must be completed (and by what dates) to effect a change in grade must be completed before a grade of “Incomplete” will be assigned. The instructor has sole discretion regarding the assignment of grades of “Incomplete.”

VIII. ORGANIZING THEME/STRUCTURE/INSTRUCTIONAL PROCESS:

Lecture, small group discussions, role play, mock simulations/settings, peer assessment and application, on-site assessments and observations, self evaluation, student presentations, and oral and written analysis of concepts and theories.

Course Topics include the following:

- Health Education and Health Behavior Foundations
- Models of Individual Health Behavior
- Models of Interpersonal Behavior
- Community and Group Models of Health Behavior Change
- Using Theory in Research and Practice

IX. COURSE SCHEDULE/ASSIGNMENT OUTLINE:

Weekend I

Ethics in Health Behavior and Health Education (HBHE)

Settings for HBHE

Scope of Health Behavior and Health Education

Multiple Determinants/Levels/Interventions for HBHE

Transtheoretical Model of Behavior Change

Weekend II

Continue Transtheoretical Model of Behavior Change

The Health Belief Model
Perspective on Intrapersonal Theories of Health Behavior
Social Cognitive Theory/Social Networks and Support
Social Influence and Interpersonal Communication in Health Behavior
Perspectives on Models of Interpersonal Behavior

Weekend III
Improving Health through Community Organization and Community Building
Community Participatory and Mutual Inquiry Concepts
Empowerment Theory and Health Behavior Change
PRECEDE-PROCEED
Ecological Models of Health Behavior/Research/Interview
Theory and Culturally Diverse and Unique Populations

X. RESOURCE MATERIALS/BIBLIOGRAPHY:

- Adjzen, I. *The Theory of Planned Behavior*. Organizational Behavior and Human Decision Processes, 1991, 50, 179-211.
- Bandura, A. *Social Foundations of Thought and Action*. Englewood Cliffs, NJ: Prentice Hall, 1986.
- Bandura, A. *Self-Efficacy: The Exercise of Control*. New York: W.H. Freeman and Company, 1997.
- Barrera, M. "Social Support Research in Community Psychology. In J. Rappaport and E. Seidman (eds), Handbook of Community Psychology. New York: Kluwer Academic/Plenum, 2000.
- Blackwell, A.G., and Colmenar, R. "Community Building: From Local Wisdom to Public Policy." *Public Health Reports*. 2000, 113 (2 and 3), 167-173.
- Breckon, D.J., Harvey, J. R., and Lancaster, R. B. *Community Health Education: Settings, Roles, and Skills for the 21st Century*. Gaithersburg, MD: Aspen Publishers, 1994.
- Butterfoss, F., Goodman, R., and Wandersman, A. "Community Coalitions for Prevention and Health Promotion: Factors Predicting Satisfaction, Participation and Planning." *Health Education Quarterly*, 1996, 23 (1), 65-79.
- Connor, M. and Norman, P. *Predicting Health Behavior*. Philadelphia: Open University Press, 1995.
- Gochman, D.S. "Health Behavior Research: Definitions and Diversity" In D.S. Gochman (ed), *Handbook of Health Behavior Research*, Vol. 1. Personal and Social Determinants. New York: Plenum Press, 1997.
- Green, L. W. and Kreuter, M.W. *health promotion Planning: An educational and Ecological Approach* (3rd ed) Mountain View, CA: 1991.
- Green, L. W. and Kreuter, M.W. *health promotion Planning: An educational and Environmental Approach* (2nd ed) Mountain View, CA: 1999.
- House, J.S. and Williams, D. R. "Understanding and Reducing Socioeconomic and Racial/Ethnic Disparities in Health." In D.B. Smedley and S. L. Syme (eds) Promoting Health: Intervention Strategies from Social and Behavioral Research. Washington, DC: National Academy Press, 2000.
- Johnson Kathryn, Grossman, Wynne, and Cassidy, Anne. (Editors), *Collaborating to Improve Community Health: Workbook and Guide in Creating Healthier Communities and Populations*, San Francisco, CA: Jossey-Bass Publishers, 1996.
- Kerlinger, F. N. *Foundations of Behavioral Research*, New York: Holt Rhinehart and Winston, 1996.
- Marmot, M. "Multilevel Approaches to Understanding Social Determinants." In L. F. Beckman and I. Kawachi (eds), *Social Epidemiology*. New York: Oxford University Press, 2000.
- Minkler, M. and Wallerstein, N (Editors), *Community Based Participatory Research for Health*, San Francisco, CA: Jossey-Bass Publishers, 2003.
- Prochaska, J. O. "Stages of Change and Decisional Balance for 12 Problem Behaviors." *Health Psychology*, 1994, 13, 39-46

- Reifman, A. *Social Relationships, Recovery from Illness, and Survival: A Literature Review*. *Annals of Behavioral Medicine*, 1995, 17, 124-131.
- Rollnick, S., Mason, P. and Butler, C. *Health Behavior Change: A Guide for Practitioners*. London: Churchill-Livingstone, 2000.
- Rogers, E. M. *Diffusion of Innovations*. (4th ed) New York: Free Press, 1995.
- Turow, J. *Media Systems in Society. Understanding Industries, Strategies and Power*. New York: Longman, 1992.

XI. COLLEGE OF PUBLIC HEALTH POLICIES/LATE ASSIGNMENTS/MAKE UP TESTS/GENERAL CLASSROOM PARAMETERS:

Attendance: Students are expected to be diligent in the pursuit of their studies and in their class attendance. Students have the responsibility of making arrangements satisfactory to the instructor regarding all absences. Such arrangements should be made prior to the absence if possible. Policies of making up work missed as a result of absence are at the discretion of the instructor, and students should inform themselves at the beginning of each semester concerning the policies of their instructors.

Attendance Policies of the Instructor: **A student absent more than 4 hours of class** will have their grade reduced by one letter (exceptions will be at the discretion of the instructor). If a student misses a scheduled assignment date and/or exam, regardless of the circumstances, 25-points will automatically be deducted from each assignment and/or test grade to compensate for the advantage of additional time. All assignments are due on the date assigned in the syllabus or they are designated late. Make up assignments/late assignments are due on the 3rd day after the scheduled due date or a grade of zero is given. Make-up exams will be conducted by appointment. Not taking the scheduled final examination, without prior consultation with the instructor, is an automatic grade of zero.

Chronic tardiness can cost a student 5 points for each tardy and can be applied at the discretion of the instructor. A tardy is arriving to class after the roll has been taken or after breaks have been concluded. Chronic tardiness occurs after 2 late arrivals.

Students with a Disability: It is the policy of the UAMS College of Public Health to accommodate students with disabilities pursuant to federal law, state law, and the University's commitment to equal educational opportunities. Any student with a **documented disability** who needs accommodation which are articulated by a licensed medical/health professional should request to meet with the course instructor or the Associate Dean of Academic Affairs on or before but no later than the end of the first day of the first class meeting for a weekend course to develop an accommodation plan. Any student with a documented disability who determines later than the first day of class to seek accommodations or who develops a disability during the class, should refer to the procedures outlined in the college catalogue. Failure to follow these procedures may be construed as a waiver of your rights under the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990.

Academic Integrity: UAMS College of Public Health has an Honor Council that responds to allegations of violations of common rules of academic integrity, including plagiarism; giving or receiving any form of aid on quizzes or examinations that is not expressly permitted by the instructor; or falsification of any report, experimental results, or research data. Please review the Honor Code in the COPH Student Handbook, which can be found at <http://www.uams.edu/coph/cophandbook.pdf>. **Note:** All work submitted for this course is required to be original work developed for class assignments and should not have been submitted for assignments made as part of previous and/or concurrent courses without the instructors prior knowledge and approval; to do otherwise constitutes academic dishonesty and will be addressed as such in this course.

Plagiarism: Plagiarism is defined as adopting, appropriating for one's own use and/or incorporating in one's own work, without acknowledgement, passages, tables, photographs, models, figures, and illustrations from the writings or works of others; presenting parts of passages of other's writing as products of one's own mind. Any student who plagiarizes may be subject to receiving a zero on the written work and may be dismissed from the College of Public Health. Other penalties may be imposed by the COPH Honor Council, as described in the COPH Student Handbook. The College of Public Health

subscribes to a web based plagiarism detection and prevention system that is used by colleges and universities nationwide. The system works by scanning the submitted document and matching the document against databases of texts, journals, electronic and web sources including web sites that sell or distribute pre-written essays or term papers. As your course instructor, at my discretion, I can submit students' written work to the plagiarism detection system for the purpose of evaluating whether a document has been plagiarized. As your instructor I am informing you via this syllabus that I reserve the right to use this plagiarism detection system at my discretion for this course.

The student is expected to be familiar with the policies, for sexual harassment and academic misconduct, in the student handbook and college catalogue.

All beepers and/or phones are to be turned off in the classroom. The instructor may impose a 25 point deduction from the student's final grade if such an interruption/infracton occurs.

Due to legal liability, the student's children and/or the student's personal guests/friends cannot attend class.

* APA Internet address: <http://www.wooster.edu/psychology/apa-crib.html> **Professional articles must be full text; and, must have a reference and/or bibliography citing its' sources at the conclusion of the article.

Interview Paper/Rubric

Student's Name: _____

Student's Overall Score: _____

Excellent to Very Good (Total Score: _____)
150-135
Content: Informative/Persuasive-appropriate to purpose-substantive-content relevant to topic-effective synthesis-creative. _____
Organization: Fluent expression-ideas clearly stated-well organized-logical sequencing/cohesive. _____
Vocabulary: Sophisticated range-precise word choice and usage-word form mastery-effective figurative language. _____
Language Use: Sentence variety-mastery of compound/complex structures-parallelism-agreement, tense, word order/function, pronouns, prepositions, negatives and articles. _____
Mechanics: Demonstrates mastery of conventions-one or less errors of spelling, punctuation, capitalization, and paragraphing. _____

Good to Average (Total Score: _____):
134-120
Content: Some perception of topic-adequate range-limited development of topic-mostly relevant , but lacks details. _____
Organization: Somewhat choppy-few transitions-loosely organized, but main idea stands out-logical but incomplete. _____
Vocabulary: Adequate range-somewhat vague-occasional errors of word form, choice, or usage-some figurative language. _____
Language Use: Limited sentence variety-effective but simple constructions-minor problems in complex constructions-faulty parallelism-few errors of agreement in tense, word order/function, pronouns, prepositions, negatives and articles. _____
Mechanics: Two or less errors of spelling, punctuation, capitalization, paragraphing, but meaning not obscured. _____

Fair to Poor (Total Score: _____)
119-105
Content: Limited perception of topic-little substance-inadequate development of topic-faulty reasoning. _____
Organization: Non-fluent-no transitions-ideas confused and disconnected-lacks logical (u)(sequencing and development. _____
Vocabulary: Limited range-frequent errors of word form, choice, and usage-redundancies-little or no figurative language. _____
Language Use: Major problems in simple/complex constructions-frequent errors of negations, agreement in tense, word order/function, articles, pronouns, prepositions and/or fragments, run-ons, deletions, comma faults-confused meaning. _____
Mechanics: Three or less errors of spelling, punctuation, capitalization, paragraphing, confused or obscure meaning. _____

Very Poor (Total Score: _____)
104 and below
Content: Does not show perception of topic-non-substantive-not pertinent OR not enough to evaluate. _____
Organization: Does not communicate-no organization-OR not enough to evaluate. _____
Vocabulary: Meaning confused or obscured-inadequate command of vocabulary OR not enough to evaluate. _____
Language Use: Virtually no mastery of sentence construction rules-dominated by errors-does not communicate OR not enough to evaluate. _____
Mechanics: No mastery of conventions-dominated by errors of spelling, punctuation, capitalization, paragraphing OR not enough to evaluate. _____

Names and Contacts of Fellow Students:
