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Courses Request Tracking

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Open in full window to print or save			
Attachments:			
Browse			
ID Attachment Delete 688 KHP673 syllabus.doc			
Select saved project to retrieve			
	(*denotes	required fields)	
1. General information			
a. * Submitted by the College of:	EDUCATION	Today's Date: 11/19/2012	- ···
b. * Department/Division: Kine	siology - Health Promotion		
G.	Melinda Ickes	Email: melinda.ickes@uky.edu Ph	200 257 1525
* Contact Person Name: * Responsible Faculty ID (if dit			one;
d. * Requested Effective Date:	Semester following approval OR	Specific Term/Year 1	
e.			
Should this course be a UK Co	. 100 / 110		
☐ Inquiry - Arts & Creativity	☐ Composition & Communi	cations - II	
ा Inquiry - Humanities	Quantitative Foundations	s	
☐ Inquiry - Nat/Math/Phys S	ci Statistical Inferential Rea	asoning	
☐ Inquiry - Social Sciences	🖽 U.S. Citizenship, Commu	nity, Diversity	
☐ Composition & Communic	cations - I Global Dynamics		
2. Designation and Description of Pro	oposed Course.		
a. * Will this course also be offere	ed through Distance Learning? • Yes	s ⁴	
b. * Prefix and Number: KHP	673		
c. * Full Title: Health Promotion a	and Bahavior Change		
d. Transcript Title (if full title is mo			
e. To be Cross-Listed ² with (Pref	• •		
F 1 1 1	y at least one of the meeting patterns b	***************************************	and the second s
3 Lecture Indep. Study	Laboratory ¹ Clinical	Recitation Coroquium	Discussion Practicum
Research	Residency	Seminar	Studio
Other	If Other, Please explain:	<u> </u>	
g. * Identify a grading system:	© Letter (A, B, C, etc.) ○ Pass/Fail		
h. * Number of credits: 3.0			
 Is this course repeatable for if YES: Maximum number of on if YES: Will this course allow n 		mester? ○ Yes ○ No	
i. * Course Description for Bulleti			
This course focuses on l	nealth promotion and behavior colicy will be considered as pot	hange strategies; individual, ential factors that can inhibit	interpersonal, organizational, t or promote behavior change.
	,		,
		•	
k. Prerequisites, if any:			

 $\textbf{1.} \ \ \textbf{Supplementary teaching component, if any:} \quad \bigcirc \ \textbf{Community-Based Experience} \quad \bigcirc \ \textbf{Service Learning} \quad \bigcirc \ \textbf{Both}$

3. *Will this course be taught off campus? — \circ Yes \circ No

	If YES, enter the off campus address:
4.	Frequency of Course Offering.
	a. *Course will be offered (check all that apply): E Fall D Spring D Summer D Winter
	b. * Wiff the course be offered every year? SYes SNo
	If No, exptain:
_	* Are facilities and personnel necessary for the proposed new course available?
٥.	<u>, 1</u>
	If No, exptain: The course is currently being taught as KHP 781 and is being made a
6.	*What enrollment (per section per semester) may reasonably be expected? 20
7.	Anticipated Student Demand,
	a. * Will this course serve students primarily within the degree program?
	b. * Will it be of interest to a significant number of students outside the degree pgm? *Yes * No
	If YES, explain:
	in 16.5, openic. Additional programs within the Department of KHP as well as those outside of our Department may be interested in
	behavior change as it relates to various disciplines.
8.	* Check the category most applicable to this course:
	☐ Traditional Offered in Corresponding Departments at Universities Elsewhere ☐ Relatively New New Being Widely Established
	Not Yet Found in Many (or Any) Other Universities
9.	Course Relationship to Program(s).
	a. * Is this course part of a proposed new program? • Yes • No
	If YES, name the proposed new program:
	b. ↑ Will this course be a new requirement ⁵ for ANY program? C Yes ≪ No
	If YES 5. Est affected programs:
	if YES *-, isstanceded programs::
0.	information to be Placed on Syllabus.
	a. * Is the course 400G or 500? • • Yes • No
	If YES, the differentiation for undergraduate and graduate students must be included in the information required in 10.b. You must include: (i) identification of additional assignments by the graduate students; and/or (ii) establishment of different grading criteria in the course for graduate students. (See SR 3.1.4.)
	b. 🖾 * The syllabus, including course description, student learning outcomes, and grading policies (and 400G-/500-level grading differentiation if applicable, from
	10.a above) are attached.
5	es are hydically made effective for the semester following approval. No course will be made effective until all approvals are received.
u c	hair of the cross-listing department must sign off on the Signature Routing Log
ça: Nvo	aret, undergraduate courses are developed on the principle that one semester hour of oradit represents one hour of classroom meeting per wesk for a semester, exclusive of any laboratory meeting. Laboratory meeting, generally, represents at hours per week for a semislate for one credit hours, (from \$1.5.2.1)

Rev 8/09

Submit as New Proposal Save Current Changes Delete Form Date and Attachments

KHP 673 – Health Promotion and Behavior Change Department of Kinesiology and Health Promotion

University of Kentucky Spring 2012

1: GENERAL INFORMATION

Class Instructor: Melinda J. Ickes, Ph.D. Office Location: 111 Seaton Building

Class Location: 212 Seaton Building Office Phone: 859-257-1625

Class Time: Wednesday 4:00 p.m. - 6:30 p.m. Email: melinda.ickes@uky.edu

Office Hours: Tuesday 2 p.m. - 4 p.m.; Wednesday 2 p.m. - 4 p.m. & others by appointment.

II. COURSE DESCRIPTION AND OBJECTIVES

KHP 673 is a three-hour course which focuses on health promotion and behavior change. Many acute and chronic diseases can be prevented or at least have their impact lessened by increased attention to the adoption and maintenance of behaviors for optimal health. The issue of behavior change is however complex and necessitates an understanding of the socio-ecological model which includes individual, interpersonal, organizational, community, and public policy as factors that can inhibit or promote behavior change.

The course reinforces the College of Education's Conceptual Framework of, "<u>research and reflection for learning and leading</u>".

- <u>Research</u> serves as one of the major ways for those in health promotion to synthesize the
 evidence-based health promotion programs to aid behavior change. Research provides the basis
 for planning and developing as well as selecting health promotion programs based upon what
 researchers have found to be the most effective in influencing health behavior.
- <u>Reflection</u> is emphasized for the purpose of decision-making in order to gain health related knowledge and skills and to learn how to most effectively enable and empower others in relation to health behavior change. Reflection enables the health promoter to refine selected behavior change strategies.
- Leading is an expectation for all health promoters and health educators. Those trained in health promotion must become leaders in their classroom and school, community agency or organization, in worksite health promotion programs as well as in health care organizations. Health promoters serve as leaders for curriculum development in schools, health promotion program planning and implementation, policy development, creating environmental changes conducive to health, in addition to many other leadership roles.
- All health promoters must commit to <u>Learning</u> by all program participants and the need to address
 different learning styles and the effectiveness of various behavior change strategies in dealing
 with diverse and changing populations in a multicultural environment.

Course Objectives

- Investigate physical, environmental, social, emotional, and intellectual factors that influence health behaviors and that hinder positive health behavior change and maintenance.
- Define and describe social determinants of health and explain how they differ from other (e.g. biological) determinants of health.
- Describe the key components of "core" theories and models of behavior and behavior change for individuals, groups, and communities
- Assess how behavior change theories apply to specific health problems that are influenced by social and societal determinants.
- Identify basic principles that underlie the choice of behavioral change interventions, and evaluate their strength and limitations.
- Explain how behavioral counseling skills can be used to increase behavior change adherence and uccess.
- Understand and practice the skills set used in health promotion to advocate public awareness, campaign development, and community collaboration.
- Describe methods used to develop and evaluate health communication materials and activities.

Student Learning Outcomes

After this course, students should be able to:

- Identify physical, environmental, social, emotional, and intellectual factors that influence health behaviors and that hinder positive health behavior change and maintenance.
- Identify social determinants of health and give examples within specific populations.
- Facilitate a group discussion which relates to key components of "core theories and models of behavior and behavior change for individuals, groups and communities.
- Critique strengths and limitations of behavioral change interventions at various levels.
- Create an individual level behavior change program, focusing on behavioral counseling and applying select behavior change strategies.
- Evaluate an individual's behavior change from pre/post program and make recommendations on implications for future approaches.
- Manage time and resources to carry on a long-term semester project of individual level behavior change.
- \Vrite a health advocacy letter to promote public awareness, campaign development, and/or community collaboration.
- Create culturally relevant and age appropriate health communication materials (i.e. brochure or community guide).
- Effectively research health-related databases in order to synthesize the literature on a related health disparity issue.
- Write well reasoned and data supported papers using proper APA style (6th ed.).
- The student will work productively in a team to facilitate a class discussion on a selected behavior change strategy.

The content of this course is designed to help you fulfill responsibilities and demonstrate competencies identified by the updated 2010 publication:

National Commission for Health Education Credentialing, Inc. (NCHEC), Society for Public Health Education (SOPHE), American Association for Health Education (AAHE). (2010a). *A competency-based framework for health education specialists - 2010*. Whitehall, PA: Author.

The Seven Areas of Responsibility are a comprehensive set of Competencies and Sub-competencies defining the role of the health education specialist. These Responsibilities were verified through the 2010 Health Educator Job Analysis Project and serve as the basis of the CHES exam beginning in April 2011 and the MCHES exam in October 2011.

Specifically the course addresses the following responsibilities and competencies:

Responsibility I: Assess Needs, Assets and Capacity for Health Education

Competency 1.2: Access existing information and data related to health.

Competency 1.4: Examine relationships among behavioral, environmental, and genetic factors that enhance or compromise health.

Competency 1.5: Examine factors that influence the learning process.

Competency 1.6: Examine factors that enhance or compromise the process of health education.

Responsibility II: Plan Health Education

Competency 2.2: Develop goals and objectives.

Competency 2.3: Select or design strategies or interventions.

Competency 2.5: Address factors that affect implementation.

Responsibility III: Implement Health Education

Competency 3.1: Implement a plan of action.

Competency 3.2: Monitor implementation of health education.

Responsibility IV: Conduct Evaluation and Research Related to Health Education

Competency 4.1: Develop evaluation/research plan.

Competency 4.3: Collect and analyze evaluation research data.

Competency 4.4: Interpret results of the evaluation/research

Responsibility VI: Serve as a Health Education Research Person

Competency 6.1: Obtain and disseminate health-related information.

Competency 6.3: Serve as a health education consultant.

Responsibility VII: Communicate and Advocate for Health and Health Education

Competency 7.1: Assess and prioritize health information and advocacy needs.

Competency 7.2: Identify and develop a variety of communication strategies, methods and techniques

Competency 7.4: Engage in health education advocacy.

III: COURSE TEXT AND READINGS

Required: Glanz, K., Rimer, B., & Viswanath, K. (2008). Health behavior and health education: Theory, research, and practice (4th ed.). Jossey-Bass. ISBN: 978-0-7879-9614-7

The textbook will be used to give the students general background in the content areas associated with the course. Students should read the corresponding chapters <u>before</u> each lecture to gain a better grasp of the material. Supplemental readings will be posted on Blackboard or given out in class which will complement class discussions and provide students with additional information. Class time is not meant to outline the readings for the students. If something is unclear, please use class time to ask questions. Coming to class prepared is *essential* in understanding the learning activities and class discussions that will take place.

IV: STUDENT ACTIVITIES, EVALUATION, AND GRADING POLICY

We learn best by being actively involved in the process of learning! It is expected that students will attend all class meetings and participate in class discussion and group activities. In addition, I see my role as being here to assist in the flow of the discussion and to challenge you to think and learn. It is not my intention to lecture or to allow you to become overly passive.

Students will be evaluated on the following:

Assignment	Total Points	Percentage
Individual Level Behavior Change Program	100	16.7%
Health Disparity Paper/Brochure	150	25.0%
Article Facilitation	50	8.3%
Advocacy Initiative	50	8.3%
Midterm/Final	200	33.4%
Student Engagement	50 pts.	8.3%
Tota I	600 pts.	100%

GRADING SCALE

A 93-100	B+ 87-89.99	C+ 77-79.99
A 90-92.99	B 83-86.99	C 73-76.99
	B 80-82.99	C 70-72.99

Assignments will be given a letter grade based on departmental grading policy and on the scoring guidelines which accompany each assignment. The instructor reserves the right to modify the above grading system to accommodate any special situations the may arise throughout the semester.

V. COURSE PROJECTS AND EXPERIENCES

- A. Individual Level Behavior Change Program
 - Students will first evaluate the results of an individual's Health Risk Assessment. Students
 will develop an individual level behavior change program based on the HRA results. See
 quidelines and rubric for specific details.
- B. Health Disparity Research Paper/Brochure
 - Students will select a particular health disparity to focus on for the duration of the semester. Examples of issues to focus on can be found at www.healthypeople.gov Students will conduct a literature review of the health disparity and summarize: the background of the issue, the social and economic factors that contribute to the disparity, how the community is affected, and relevant intervention approaches which have been used to address the disparity. Based on all of the background information, students will develop a brochure or community guide related to their chosen health disparity. See guidelines and rubric for specific details.

C. Article Facilitation

Students (in pairs) will present an article related to the topic of the week and promote a 15 minute class discussion related to the article and overall topic. The article must be emailed to the instructor by Sunday at 11 p.m. the week of the presentation (or hard copies may be distributed the week before). Students must distribute a one-page handout to their classmates which summarizes key points of the article, provides at least 3 discussion questions, and provides additional resources on the related topic (minimum 3). See guidelines and rubric for specific details.

D. Advocacy Initiative

Students will identify a health issue in the community that is of concern, and they believe
needs to be brought to the attention of someone specific (private individuals, congressional
members, industry, state agencies, churches, campus community, etc.). Students will then
write a one-two page evidence-based advocacy letter. See guidelines and rubric for specific
details.

E. Exams

- The midterm will be given in-class. The midterm will cover the first half of the semester. Information from assigned readings, class lectures, discussions, and activities will be included. Format will be a combination of multiple choice and short answer/essay. Review sheets will be posted no later than one week before the scheduled Midterm.
- The final will be a cumulative take-home exam. Explicit directions will be given with the exam.

VI: ACADEMIC INTEGRITY, CHEATING AND PLAGIARISM

Students may collaborate on assignments in general terms, but they should individually complete each assignment. Exams are to be taken and completed individually. Take-home exams are to be completed on an honor system. You may not contact fellow nor former students (or non-students) for help on such exams. Inappropriate contact during a take-home exam will be considered cheating and will be prosecuted as such via normal UK channels. The minimum penalty for cheating is a disciplinary E, which cannot be removed from one's transcript by a repeat option. For more information on plagiarism, and UK's new academic offense policy, see http://www.uky.edu/Ombud. For more on UK's policy on academic integrity, see Students Rights and Responsibilities, Part II, Section 6.3 (http://www.uky.edu/StudentAffairs/Code/part2.html).

VII. CLASS ATTENDANCE

Attendance at all class meetings is required, and to a large extent the degree of your success in this course will depend on class attendance. Each student is permitted **ONE unexcused absence**. Each absence following will result in a **loss of 5 points for each class missed**.

As noted above, in-class assignments/discussion/participation is worth 50 pts – do not let this be the difference in the outcome of your grade. If an absence is due to injury or illness, the student must present the instructor with a written medical excuse within one week of the absence. Any other absence due to a personal or family emergency will be excused only if written documentation is provided to the course instructor. The professor will determine the validity of all absences. Any assignments/tests that are

completed in a class that is missed can only be made up if a valid written documentation explaining the absence is provided.

For UK's policy on excused absences, see Students Rights and Responsibilities, Part II, Section 5.2.4.2 (http://www.uky.edu/StudentAffairs/Code/part2.html). If attendance is required or serves as a criterion for a grade in a course, and if a student has excused absences in excess of one–fifth of the class contact hours for that course, a student shall have the right to petition for a "W," and the faculty member may require the student to petition for a "W" or take an "I" in the course. (US: 2/9/87; RC: 11/20/87)

It is your responsibility to understand that missing class will be reflected in your attendance and participation points. By missing class you are missing an opportunity to learn.

VIII: OTHER POLICIES

- A. *Technology:* Please refer to this syllabus on a regular basis for class dates, assignment info, etc. The use of BlackBoard will be employed in this course for the dissemination of course materials such as syllabus, handouts, course notes and assignments. Therefore, you MUST have access to a computer to partake in this course and need to check the Blackboard on-line learning website for this course on a regular basis (*at least weekly*) for class announcements, discussion forums, etc.
- B. *Cell Phones*: Respect your class time and fellow classmates by turning off and not using pagers, cell-phones, PDAs, etc. Laptops are to be used during class <u>for class purposes only.</u> If students are abusing this right, they will be asked to put their laptop away and refrain from using it in the future.
- C. Late Assignments: For work that is turned in after the due date, <u>one letter grade will be deducted</u> each day it is late from the final grade. ALL MISSED WORK MUST BE COMPLETED WITHIN ONE WEEK FROM THE ORIGINAL DUE DATE or it will NOT be accepted.
- D. *Emailed Assignments*: Emailed assignments will <u>NOT</u> be accepted unless specified in the assignment guidelines. Students must submit a hard copy of their assignment the day it is due. Until the instructor receives the hard copy, the assignment will be considered late. See late policy above.
- E. Exam Make-ups: All exams are due on the day they are scheduled unless due to a documented emergency or if a prior arrangement was made with the professor.
- F. Academic Accommodations: If you have a documented disability that requires academic accommodations, please see me as soon as possible. In order to receive accommodations in this course, you must provide me with a Letter of Accommodations from the Disability Resource Center (Room 2, Alumni Gym, 257-2754, jkarnes@uky.edu) for coordination of campus disability services available to students with disabilities. We can then collaborate on the best solution.

IX: TENTATIVE COURSE SCHEDULE

**** The instructor reserves the right to make updates and changes to the syllabus at any time. Students are expected to have read the assigned material prior to class meetings.

Date		Topic	Reading	Assignment	
Wed.	1/11	Introduction to Health Behavior Change Social and Behavioral Determinants of Health	Glanz – Chapt. 1, 2		
Wed.	1/18	Understanding Health Inequalities Cultural Considerations	HBC – Chapt. 29*		
Wed.	1/25	Individual Level Behavior Change Knowledge, Attitudes, Skills	Group #1 – Article! Glanz – Chapt. 3		
Wed.	2/1	Health Risk Appraisal Behavior Management Plan/Behavioral Contracting	Group #2 – Article! Glanz – Chapt. 5		
Wed.	2/8	Individual Level Behavior Change Motivational Interviewing	Group #3 – Article! HBC – Chapt. 8* Glanz – Chapt. 7	Health Disparity Outline Check	
Wed.	2/15	Relapse Prevention and the Maintenance of Optimal Health	Group #4 – Article! HBC – Chapt. 7*		
Wed.	2/22	Interpersonal Models of Behavior Change How Individuals, Environments, and Health Behavior Interact	Group #5 – Article! Glanz – Chapt. 8	Individual Level Behavior Change Check #1	
Wed.	2/29	Social Networks and Social Support	Group #6 – Article! HBC – Chapt. 9* Glanz – Chapt. 9, 12		
Wed.	3/7	MIDTERM			
Wed.	3/14	SPRING BREAK			
Wed.	3/21	Community and Group Models of Behavior Change Community Organization and Community Building	Group #7 – Article! Glanz – Chapt. 13, 15		
Wed.	3/28	Diffusion of Innovations Communication Theory	Group #8 – Article! Glanz – Chapt. 14, 16, 17	Health Disparity Peer Review	
Wed.	4/4	Public Policy Models of Behavior Change	Group #9 – Article! Reading T.B.A.		
Wed.	4/11	Advocacy - Your Voice	Group #10 – Article! Reading T.B.A.	Individual Level Behavior Change DUE	
Wed.	4/18	Evaluation of Health Promotion Programs	Glanz – Chapt. 21	Health Disparity Paper DUE	
Wed.	4/25	Wrap-Up Discussion of class projects *Take Home Final will be distributed		Advocacy Initiative DUE	
+1100	4/30- 5/4	FINAL DUE 5/2 @ 11 p.m.			

^{*} HBC Readings will be posted on Blackboard.

[!] Group Articles will be posted on Blackboard by Sunday at 11 p.m. OR handed out in class the week before.

