HB 600: Social and Behavioral Sciences in Public Health Specialized Course Focused on Diet, Physical Activity and Smoking UNC Gillings School of Global Public Health, Fall 2016

HB 600 is based on the assumption that public health is a multi-disciplinary field aimed at reducing preventable morbidity and premature mortality, and promoting a higher quality of life in populations and groups through health intervention. Although we recognize that biological, physical, and medical care factors contribute to population health outcomes, this course emphasizes the relationship of <u>behaviors</u> to health outcomes. This semester, the course will focus primarily on diet, physical activity, and smoking as key risk factors for morbidity and mortality. After introducing these subjects, we will explore the individual, social and contextual reasons why people engage in specific dietary, activity or smoking behaviors. We will then examine several educational and environmental strategies that can be employed to change these behaviors to improve public health. Although this semester's subject material is more focused, HB 600 is designed as a broad introduction to health promotion planning and practice. Specific theories, practice models, or evaluation methods are introduced to exemplify, and encourage an appreciation of, the wealth of conceptual and methodological approaches in the social and behavioral sciences that can inform public health practice and research.

Core Competencies and Course Objectives:

The class is designed to help students achieve the following UNC Gillings School of Global Public Health core public health competencies in the social and behavioral science discipline:

- Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.
- Identify the causes of social and behavioral factors that affect health of individual and populations.
- Identify individual, organizational and community concerns, assets, resources and deficits for social and behavioral science interventions.
- Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.
- Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.
- Describe the role of social and community factors in both the onset and solution of public health problems.
- Describe the merits of social and behavioral science interventions and policies.
- Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.
- Apply ethical principles to public health program planning, implementation and evaluation.
- Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.

By the end of the course, students will be able to:

- 1. Understand the role of behavior (e.g., diet, smoking, substance use, physical activity, sexual behaviors) in determining individual, group and population patterns of mortality and morbidity.
- 2. Apply social and behavioral science theories, concepts and models to identify causes of health-related behaviors, as well as individual, organizational and community factors that impact the potential success of health behavior interventions.

- 3. Identify ethically appropriate, evidence/theory-based options for addressing a specific health behavior in a specific population.
- 4. Describe steps and procedures for planning, implementing and evaluating programs or policies to enhance healthy behavior, in collaboration with appropriate partners.
- 5. Communicate social and behavioral science concepts with other practitioners and lay audiences.

Course Structure

Course Website: Readings (links to .pdf files), presentations (online lectures featuring Powerpoint slides and an audio lecture), instructions for discussion activities, assignments, and exams will all be made available through the course website, found by entering your onyen and password at http://sakai.unc.edu. You will need to familiarize yourself with the Course Materials, Tests & Quizzes, Assignments and Forums tabs. Note: the presentations require the RealPlayer plug-in. If you are having technical problems with the course website, please contact your TA for assistance, rather than the UNC IT Response Center. If your TA is unavailable, please contact the course instructor, Shelley Golden (sgolden@email.unc.edu).

Course Requirements:

Recitation/Discussion Activities (25% of grade): During most weeks of the course, students will meet in small groups to apply the course material to a specific public health example. Using topics and questions developed by the instructor, students will take turns moderating the discussions. In-person recitation groups meet for a specified 50 minute interval each week; online recitation groups complete discussion activities asynchronously through the Forums link in the website. Each person will receive a group participation grade at the end of the semester, based on your TA's assessment of your participation in the discussion activities over the course of the semester (15% of overall grade), and your efforts at moderating one discussion (10% of overall grade).

Participation points will be based on the extent to which the student consistently:

- 1. Participates in discussion in a timely manner:
 - Participate in each discussion activity. Students who are unable to participate in a specific discussion activity should contact their TA in advance (as feasible) to discuss alternative means of contributing.
 - In-person recitation: Arrive on time, refrain from doing other work during recitation
 - Online recitation: Make initial posts between Monday-Thursday and additional posts between Friday-Sunday (posting at two different time points is required)
- 2. Contributes to each discussion substantively by:
 - Offer new ideas and perspectives (avoid simply agreeing with your classmates)
 - Apply the week's course materials to the specific topic of discussion (completing the readings and presentations prior to participation will facilitate this)
 - Integrate prior course material, or outside materials, to discussion
 - Respectfully respond to points made by your classmates

Moderation points will be based on the extent to which a student successfully does the following during the week he or she is assigned to moderate:

- Develops a plan for discussion in conjunction with the teaching assistant (in advance of section for in-person recitations or by posting the questions/tasks and a timeline on the Group's Discussion Board for online recitations).
- Encourages all people to participate, seeking clarification when needed, asking follow-up questions, or guiding discussion to new, relevant topic areas, if appropriate.
- Summarizes the key points of the discussion (i.e. synthesize postings for the group, or doing a "wrap-up" at the end of the section meeting).

Midterm (20% of grade): This is a "take-home" style exam (with no time limit) that will be made available about one week in advance of the due date in Sakai. The exam will be open book, but students will not be permitted to discuss the exam with anyone other than the instructor or their teaching assistant. The exam will focus on basic course concepts and the application of course content to specific behaviors and/or populations. Students must submit their responses to each question through an assignment in the "Tests and Quizzes" tab in Sakai by 11:59 p.m. on Sunday, October 9.

Group Health Promotion Project Proposal (25% of grade): In small groups, students will choose a health topic and associated health behavior of interest to them and design an intervention and/or policy for improving behavioral outcomes in a specific target population. Groups will propose a topic, behavior and population by 5 p.m. on October 19, and then submit a proposed logic model and brief summary of their intervention to their teaching assistant for review by the end of the day on November 6 (10% of overall grade). Then, using a powerpoint presentation, groups will present background about the problem and behavior; suggested intervention strategies, a program logic model, a proposed timeline and ideas about program evaluation (15% of overall grade). Presentations will occur during recitation on November 30 (in-person recitations) and at a mutually agreed upon time using real-time online software between November 28-December 4 (online recitations). Specific instructions for the assignment are available in the course website. Powerpoint presentations must be provided to the TA at least 24 hours in advance of the presentation time.

Final Exam (30% of grade): The final exam will consist of 60-65 multiple choice questions. The exam is open book, but because you will only have 2 hours to complete the exam, you should study and organize your notes to make efficient use of your time. The exam is comprehensive, covering all presentations and readings in the class. **Students will take the exam online during a two hour window of their choosing between Saturday December 10 (at 11:59 a.m.) and Thursday, December 15 (at 11:59 am).**

Honor Code: As a student at UNC-Chapel Hill, you are bound by the university's honor code, which can be viewed at http://instrument.unc.edu/. It is your responsibility to learn about and abide by the code. While the honor code prohibits students from lying, cheating and stealing, at its essence it is a means through which UNC maintains standards of academic excellence and community values. Receiving a degree from a university with a reputation for academic integrity conveys increased value to that degree. Abiding by the honor code takes many forms. In all assignments, students should appropriately credit ideas that are not their own, treat the opinions of others with respect, and work independently on nongroup assignments. We treat suspected Honor Code violations very seriously. Instructors are required to report suspected violations of the honor code, including inappropriate collaborative work or problematic use of secondary materials, to the Honor Court. Honor Court sanctions can include receiving a zero for

the assignment, failing the course and/or suspension from the university. If you have questions about the application of the honor code in this course, you can ask the instructor or TAs. Other resources:

- Honor system tutorial: http://studentconduct.unc.edu/students/honor-system-module
- o UNC library's plagiarism tutorial: http://www.lib.unc.edu/plagiarism/
- o UNC Writing Center handout on plagiarism: http://writingcenter.unc.edu/handouts/plagiarism/.

Academic Writing: All written assignments or presentations should be completed in a manner that demonstrates academic integrity and excellence. Work should be generally completed in your own words (direct quotes should only be used when necessary), but your ideas should be supported with well-cited evidence and theory. The UNC Writing Center provides resources sheets and one-on-one writing assistance (http://www.unc.edu/depts/wcweb/).

Student Evaluation: Final course grades will be assessed on a 100-point scale:

Assignment	Percent
Discussion Activity Participation and Moderation	25
Midterm (Due October 9)	20
Group Health Promotion Project Proposal Topic Posted (October 19) Proposed Logic Model and Project Summary Posted (Nov. 6) Final Project Presentation (Nov. 28- Dec. 4)	25 10 15
Final Exam (Taken through Sakai during a two hour window of student's choosing, between Saturday, December 10 at 11:59 a.m. and Thursday, December 15 at 11:59 a.m.)	30
Total	100

This course includes both graduate and undergraduate students. Each assignment will receive a point score; the letter grade system below can be used to convert scores to letter grades. The H/A/A- grades reflect mastery of course contet at the highest level of attainment and the P/B+/B grades reflect strong performance demonstrating a high level of attainment.

Letter Grade Criteria

•	94-100%	H/A	•	80-82	P/B-
•	90-93%	H/A-	•	75-79%	P/C
•	87-89%	P/B+	•	55-74%	L/D
•	83-86%	P/B	•	<55%	F

Course Schedule, Readings, Assignments

WEEK OF:	FORMAT	TOPIC
		OVERVIEW AND COURSE LOGISTICS

WEEK OF:	FORMAT	TOPIC
8/24	Presentation	Course Introduction and Logistics (Live/Recorded during residential recitations on Aug. 24, available for online recitations later that afternoon)
	Objectives	 Become familiar with course structure and student responsibilities Get to know your discussion group members
	Required Reading	Course Syllabus
Finish by: 8/28	Discussion	Course Introductions (10:10 and 11:15 a.m. residential recitation sections will meet in the Mayes Center (2 nd floor Rosenau); 12:20 p.m. residential recitation sections will meet in their assigned rooms).
	Assignment	Health Behavior Quiz (Note: this quiz is not graded, but some questions will reappear for grades on the final. The quiz is designed for us to get a sense of student knowledge at the start of the semester.)
	UNIT 1: BEHAV	IORAL AND ECOLOGICAL APPROACHS TO PUBLIC HEALTH
8/29		Lesson 1: Behavior as a Key Risk Factor for Mortality and Morbidity
	Objectives	 Identify national and global goals for diet, physical activity and smoking Describe current prevalence/patternings of these behaviors Understand the influence of these behaviors on key health outcomes
	Required Reading	 Ezzati M & Riboli E. (2012). Can noncommunicable disease be prevented? Lessons from studies of populations and individuals. <i>Science</i>. 337:1482-1487. Huffman, MD et al. (2012). Cardiovascular health behavior and health factor changes (1988-2008) and projections to 2020: Results from the National Health and Nutrition Examination Surveys. <i>Circulation</i>. 125:2595-2602. Xu F. et al. (2014). Surveillance for Certain Health Behaviors Among States and Selected Local Areas — Behavioral Risk Factor Surveillance System, United States, 2011. <i>MMWR Surveillance Summaries</i>. 63(SS09);1-149. Available at: http://www.cdc.gov/mmwr/preview/mmwrhtml/ss6309a1.htm?s_cid=ss6309a1_w (don't worry about learning all the details but get a sense of how tobacco use, diet and physical activity are measured, and general patterns). CDC video about reaching healthy people 2020 goals: https://www.youtube.com/watch?v=5Lul6KNlw_8 Explore the data visualizations from the Global Burden of Disease Study specific to tobacco and obesity at: http://www.healthdata.org/gbd/data-visualizations Optional: Health, United States 2015. Databook with nationwide trend information about health and various risk factors. Available from the CDC at: http://www.cdc.gov/nchs/data/hus/hus15.pdf#056
Finish by: 9/4	Discussion	The Role of Individual Behavior in Public Health
9/5	Presentation	Lesson 2: Overview of the Social Ecological Model

WEEK OF:	FORMAT	TOPIC
	Objectives	 Be introduced to the application of a four-level ecological framework for approaching specific public health problems
	Required Reading:	 Sallis, J.F., Owen, N., and Fisher, E.B. (2008). Ecological models of health behavior. In K. Glanz, B. K. Rimer & K. Viswanath (Eds.), <i>Health behavior</i> and health education: Theory, research, and practice (pp. 465–86). San Francisco: Jossey-Bass.
		 Sacks R., Yi, SS & Nonas C. (2015). Increasing access to fruits and vegetables: Perspectives from the New York City experience. American Journal of Public Health, 105(5):e29-e37.
		 In preparation for section, watch clip about Ciclovía in Colombia, available at: https://www.youtube.com/watch?v=ELa5CHsUepo
Finish by: 9/11	Discussion	The SEM Applied to a City-Wide Physical Activity Initiative
	U	NIT 2: DETERMINANTS OF HEALTH BEHAVIOR
9/12	Presentation	Lesson 1: Individual Level Determinants: Constructs of the Health Belief Model and the Theory of Planned Behavior.
	Objectives	 Describe the components of the Health Belief Model & the Theory of Planned Behavior, and apply them to a given health problem.
		 Describe strengths and limitations of individual-level theories
	Required Reading:	 Glanz, K. & Rimer, B.K. (2005). Excerpts: Foundations of Theory, Health Belief Model, Theory of Planned Behavior. In: <i>Theory at a Glance: A Guide</i> for Health Promotion Practice. National Cancer Institute. Excerpts available in Sakai, but full guide is available at: http://www.cancer.gov/cancertopics/cancerlibrary/theory.pdf
		 Poss, J. E. (2001). Developing a new model for cross-cultural research: synthesizing the Health Belief Model and the Theory of Reasoned Action. Advances in Nursing Science, 23(4), 1-15.
		 Sun X, Guo Y, Wang S, Sun J (2006). Predicting iron-fortified soy sauce consumption intention: Application of the Theory of Planned Behavior and Health Belief Model. <i>Journal of Nutrition Education and Behavior</i>, 38(5), 276-285. [focus on how constructs are measured]
		 Montanaro EA & Bryan AD. (2014). Comparing theory-based condom interventions: Health Belief Model versus Theory of Planned Behavior. Health Psychology. 33(10):1251-1260 [focus on how theories are applied in intervention]
Finish by: 9/18	Discussion	Individual Determinants of Physical Activity During Pregnancy Among Latina Women
9/19	Presentation	Lesson 2: Interpersonal/Relationships Level Determinants: Social Suppor and Social Networks
	Objectives	 To define the types of social support and the characteristics of social networks

WEEK OF:	FORMAT	TOPIC
		Identify mechanisms through which social support can influence health behaviors
	Required Reading:	 Heaney CA & Israel BA. (2008). Social networks and social support. In K. Glanz, B. K. Rimer & K. Viswanath (Eds.), Health behavior and health education: Theory, research, and practice (pp. 189-210). San Francisco: Jossey-Bass Publishers.
		 Shelton RC, et al. (2011). The association between social factors and physical activity among low-income adults living in public housing. American Journal of Public Health. 101:2102-2110.
		TED Talk by Nicholas Christakis: http://www.ted.com/talks/nicholas christakis the hidden influence of social networks.html
		Optional (cited in Discussion Activity)
		 Simons-Morton, B.G. & Farhat, T. (2010). Recent findings on peer group influences on adolescent smoking. Journal of Primary Prevention. 31:191- 208.
Finish by: 9/25	Discussion	Social Relationships and Smoking Among African American Youth
9/26	Presentation	Lesson 3: Community and Society Level Determinants: Fundamental Cause Theory and the Physical, Political and Social Environment
	Objectives	Describe characteristics of neighborhoods and and workplaces that can influence health behaviors
		 Articluate pathways through which neighborhood and workplaces might influence health
		Distinguish between contextual and compositional influences on behavior
	Required Reading:	 Phelan, J.C., Link, B.G. & Tehranifar, P. (2010). Social conditions as fundamental causes of health inequalities: Theory, evidence and policy implications. <i>Journal of Health and Social Behavior</i>, 51(s): S28-S40.
		 McNeil LH, Kreuter MW, Subramanian SV. (2006). Social environment and physical activity. Social Science and Medicine. 63(4):1011-1022.
		 Underwood E. (2014). Can disparities be deadly? Science. 344(6186): 829-831.
		 New York City Health Commissioner Mary Bassett discussed neighborhoods and health: http://bigthink.com/videos/mary-bassett-on-new-york-city-health-disparities?utm_campaign=Echobox&utm_medium=Social&utm_source=Twitter#link_time=1446301074
		TEDx Talk by Camara Jones: Allegories of Race and Racism, available at: https://www.youtube.com/watch?v=GNhcY6fTyBM
		Last Week Tonight with John Oliver: Tobacco. From HBO. Clip available at: https://www.youtube.com/watch?v=6UsHHOCH4q8 [Note: some language is appropriate only for adults 1.

is appropriate only for adults.]

WEEK OF:	FORMAT	TOPIC
WEEK OI :	1 01111111111	Optional:
		 Lipperman-Kreda S et al. (2013). Density and proximity of tobacco outlets to homes and schools: Relations with youth cigarette smoking. <i>Prevention Science</i>. Pg. 1-7 (online ahead of print).
		 Ham DC, Przybeck T, Strickland JR, Luke DA, Bierut LJ, Evanoff BA.(2011). Occupation and workplace policies predict smoking behaviors: analysis of national data from the current population survey. <i>Journal of Occupational and Environmental Medicine</i>, 53(11):1337-1345.
Finish by: 10/2	Discussion	Applying Fundamental Cause Theory in the Marshall Islands UNIT 3: INTERVENING TO IMPROVE HEALTH
4.040		
10/3	Presentation	Lesson 1: Introduction to Program Planning
		and
		Optional: Presentation by Orange County Department on Aging about local physical activity planning efforts
	Objectives	 Understand how evidence is used in program planning initiatives.
		 Identify individual, organizational and community concerns, assets, resources and deficits as a first step in planning health promotion programs.
		 Identify program objectives based on chageable determinants of health behavior
		Apply ethical principles to health promotion program planning
	Required Reading:	 Jacobs JA, Jones E, Gabella BA, Spring B & Brownson RC. (2012). Tools for implementing an evidence-based approach in public health practice. Preventing Chronic Disease. 9:110324.
		 Michie S, et al. (2011). The behaviour change wheel: A new method for characterising and designing behaviour change interventions. Implementation Science. 6:42. [Skim search methods and focus on the components of the wheel.]
		 Kass, N. E. (2001). An ethics framework for public health. American Journal of Public Health, 91(11), 1776-1782.
		Robert Wood Johnson Foundation blog post: Communities are using a powerful tool to journey toward better health. Available at http://www.rwjf.org/en/culture-of-health/2016/06/communities_are_usin.html?rid=ybd4fWKgYBszQG9_cfC7x
		uH2z0kuF4M9&et_cid=611613 For discussion activity:
		 Pitts SJB, et al. (2013). Formative evaluation for a healthy corner store initiative in Pitt County, North Carolina: Assessing the rural food environment, Part 1. <i>Preventing chronic disease</i>. 10:1-7.

WEEK OF:	FORMAT	TOPIC
		 Pitts SJB, et al. (2013). Formative evaluation for a healthy corner store initiative in Pitt County, North Carolina: Engaging stakeholders for a healthy corner store initiative, Part 2. Preventing Chronic Disease. 10:1-9.
Finish by: 10/9	Discussion	Program planning in Pitt County
Finish by: 10/9	Assignment	The midterm exam must be completed through the "Tests & Quizzes" tab in Sakai by Sunday, Oct 9 at 11:59 p.m.
10/10	Presentations	Lesson 2: Education Strategies for Promoting Healthy Behaviors & Additional Presentation on Cooking Matters Program (with HBHE alumna, Laura Seman, MPH)
	Objectives	 Identify strategies for enhancing health promotion efforts by refining program messages and identifying and training effective messengers.
		 Compare and contrast several educational strategies employed by health promotion efforts, including Motivational Interviewing, tailored messages, targeted messages, and Lay Health Advisors.
	Readings	 Velasquez MM, Hecht J, Quinn VP, Emmons KM, DiClemente CC, Dolan-Mullen P. (2000). Application of motivational interviewing to prenatal smoking cessation: training and implementation issues. Tobacco Control. 9 Suppl 3:III36-40.
		 Noar, S. M., Harrington, N. G., Van Stee, S. K., & Aldrich, R. S. (2011). Tailored health communication to change lifestyle behaviors. <i>American Journal of Lifestyle Medicine</i>, 5(2), 112-122.
		 Grier S., & Bryant, C.A. (2005). Social marketing in public health. Annual Review of Public Health. 26: 319-339.
		 Fleury J, Keller C, Perez A, Lee SM. (2009). The role of lay health advisors in cardiovascular risk reduction: a review. American Journal of Community Psychology. 44(1-2):28-42.
		 Optional: Fisher EB, et al. (2015). Key features of peer support in chronic disease prevention and management. <i>Health Affairs</i>. 35(6): 1523-1530.
Finish by: 10/16	Discussion	Using Health Promotion to Enhance the Cooking Matters Program
Finish by: 10/17	Assignment	No presentations, readings or discussion groups during the week of 10/17. Group project teams must email their TA with their proposed health topic, associated health behavior and population of interest for their group project by 5:00 p.m. on 10/19 (and then enjoy fall break!).
10/24	Presentations	Lesson 3: Policy and Environmental Interventions for Promoting Healthy Behaviors
	Objectives	 Identify strategies (including change to access, price, and marketing) for modifying the physical, economic or political environment to enhance health promoting behaviors
		Identify setting in which policy interventions can be implemented

WEEK OF:	FORMAT	TOPIC
		 Identify the advantages and disadvantages of voluntary vs. mandatory, and active vs. passive, environmental and policy approaches.
	Required Reading:	• Katz MH (2009). Structural interventions for addressing chronic health problems. <i>The Journal of American Medical Association</i> . 302(6):683-685.
		 Bowen DJ, Barrington WE & Beresford SAA. (2015). Identifying the effects of environmental and policy change interventions on healthy eating. <i>Annual Review of Public Health</i>. 36:289-306.
		 Garrett BE, Dube SR, Babb S & McAfee T. (2015). Addressing the social determinants of health to reduce tobacco-related disparities. <i>Nicotine & Tobacco Research</i>. 17(8): 892-7.
		Choose one of:
		 [for those interested in public policy] Sorg A., et al. (2013). Regulating price discounting in Providence, RI. Innovative point-of-sale policies: Case study #1. Produced by the Center for Public Health Systems Science at the George Warren Brown School of Social Work at Washington University in St. Louis. Available at: http://countertobacco.org/sites/default/files/ProvidenceCaseStudy_Oct2013.pdf
		 [for those interested in community organized change] Gavin VR, Seeholzer EL, Leon JB, Chappelle SB & Sehgal AR. (2015). If we build it, we will come: A model for community-led change to transform neighborhood conditions to support healthy eating and active living. American Journal of Public Health. 105:1072-1077.
		 [for those interested in organizational change] Carnethon M et al. (2009). American Heart Association Advocacy Coordinating Committee; Council on Epidemiology and Prevention; Council on the Kidney in Cardiovascular Disease; Council on Nutrition, Physical Activity and Metabolism. Worksite wellness programs for cardiovascular disease prevention: a policy statement from the American Heart Association. Circulation, 120(17):1725-1741.
Finish by: 10/30	Discussion	Policy Debate: Extension of smokefree laws to e-cigarettes
10/31	Presentation	Lesson 4: Health Promotion Program and Policy Logic Models
	Objectives	Apply multilevel approach to intervention development and implementation among a specfici population
		Understand how logic models can work as a tool for multilevel intervention development (J Lee article on college campuses and smoking)
	Reading:	 WK Kellogg Foundation. (2004). Logic Model Development Guide. Note: pp. 1-34 are required for this week; the rest of the guide is optional, and likely useful as we transition to program evaluation. Review material related to the health behavior you are targeting for your group project at: http://www.thecommunityguide.org/index.html (you may

WEEK OF:	FORMAT	TOPIC
		also consider the Cochrane Libraries at www.cochrane.org , and, for those of you focused on diet-related interventions: the Center for Training and Research Translation at http://www.centertrt.org/ .
Finish by 11/6	Assignment	No formal discussion activity. Recitation time will be used by group project teams to develop project ideas and logic models. Teams must complete a draft version of their proposed program logic model and send it to their TA. More information about the group project assignment is available in the Course Materials tab.
	UNI	Γ 4: EVALUATING CHANGE ON MULTIPLE LEVELS
11/7	Presentation	Lesson 1: Introduction to Program and Policy Evaluation: REAIM
	Objectives	Introduce a framework for program evaluation and improvement
		 Define dimensions about intervention implementation and intervention impact along which evaluation should be assessed.
		 Write evaluation questions and "SMART objectives" for specific health promotion programs
		To write evaluation objectives for specific program components.
	Required Reading:	• Jilcott, S., Ammerman A., Sommers, J., & Glasgow, R.E. (2007). Applying the RE-AIM framework to assess the public health impact of policy change. <i>Annuals of Behavioral Medicine</i> , <i>34</i> (2), 105-114.
		• Glasgow RE, Vogt TM, Boles SM. (1999). Evaluating the public health impact of health promotion interventions: the RE-AIM framework. <i>American Journal of Public Health</i> , 89(9):1322-1327.
		Handout on SMART objective writing
		 For discussion activity: Torres, A., Sarmiento, O.L., Stauber, C. & Zarama, R. (2013). The Ciclovia and Cicloruta programs: Promising interventions to promote physical activity and social capital in Bogotá, Colombia. American Journal of Public Health. 103: e23-e30.
		Optional (examples of RE-AIM applied to health promotion programs):
		 Glasgow RE, Whitlock EP, Eakin EG, Lichtenstein E. (2000). A brief smoking cessation intervention for women in low-income planned parenthood clinics. American Journal of Public Health, 90(5):786-789.
		 Dunton GF, Lagloire R, Robertson T. (2009). Using the RE-AIM framework to evaluate the statewide dissemination of a school-based physical activity and nutrition curriculum: "Exercise Your Options". American Journal of Health Promotion, 23(4):229-232.
Finish by: 11/13	Discussion	Applying RE-AIM to program evaluation
11/14	Presentation	Lesson 2: Data Sources for Program and Policy Evaluation

WEEK OF:	FORMAT	TOPIC
	Objectives	 To identify strategies for collecting information about the intervention process, as well as level-specific, behavioral and environmental change during an intervention process.
		Understand data collection modes and their advantages and disadvantages
	Required Reading:	 Tips & Tools #1: Choosing A Data Collection Method. Produced by the Center for Evaluation and Research, Tobacco Control Evaluation Center. Note: full set of tools available at: http://tobaccoeval.ucdavis.edu/tools.php
		 For recitation: Center TRT food policy coalition sample logic model and evaluation guide: available at: http://www.centertrt.org/?a=intervention&id=1143&section=10
		Choose among:
		 Phillips, M.M., Raczynski, J.M., West, D.S., Pulley, L., Bursac, Z. & Leviton, L.C. (2013). The evaluation of Arkansas Act 1220 of 2003 to reduce childhood obesity: Conceptualization, design, and special challenges. <i>American Journal of Community Psychology</i>. 51: 289-298.
		 Cohen JFW, Richardson S, Austin SB, Economos CD & Rimm EB. (2013). School lunch waste among middle school students: nutrients consumed and costs. American Journal of Preventive Medicine. 44(2):114-121.
		 Boles M, Adams A, Gredler A & Manhas S. (2014). Ability of a mass media campaign to influence knowledge, attitudes, and behaviors about sugary drinks and obesity. <i>Preventive Medicine</i>. 67(Supp. 1): S40-5.
Finish by: 11/20	Discussion	Data Collection and Evaluation Planing for Food Policy Coalitions
		SYNTHESIS
11/28	Presentation	Group Project Presentations No formal presentation. Students will present the results of their group projects.
	Objectives	 Integrate and apply course concepts to specific health topics and populations
	Reading:	No readings assigned this week.
Finish by 12/4	Discussion	Group Project Presentations (online groups will schedule real-time presentations)
		No class the week of 11/23
12/5	Presentation	Reflections on the Field. No formal presentation. Discussion based on assigned readings.
	Objectives	 Identify outstanding issues in health promotion research and practice. Discuss intersections of health behavior and other public health fields. Provide meaningful feedback about course to TAs and instructors.
	Reading:	 Hirsch G, Homer J, Trogdon J, Wile K & Orenstein D. (2014). Using simulation to compare 4 categories of intervention for reducing

WEEK OF:	FORMAT	TOPIC
		cardiovascular disease risks. <i>American Journal of Public Health</i> . 104(7): 1187-1195.
		 Golden SD & Earp JL. (2012). Social ecological approaches to individuals and their contexts: Twenty years of HEB health promotion interventions. Health Education & Behavior. 39: 364-372.
Finish by 12/7	Discussion	Reflections on the field
	Assignment	Course evaluations (please bring laptops to residential sections to complete online evaluation; online students complete evaluations during the week).
12/10-12/15		Final Exam Available (students choose 2 hour window between Saturday Dec. 10 at 11:59 a.m. (i.e. noon) and Thursday Dec. 15 at 11:59 a.m. EST (i.e., noon) in which to complete the exam online)