

Seminar in Interdisciplinary Health Communication

JOMC/HBEH 825

University of North Carolina at Chapel Hill

Fall 2017

Fridays 12:00 – 2:45 p.m.

340A Carroll Hall

Seth M. Noar, Ph.D.

Professor
School of Journalism and Mass Communication
Lineberger Comprehensive Cancer Center
Phone: 919-962-4075
Email: noar@email.unc.edu

Office Hours:

382 Carroll Hall
Wednesdays 2-4
and by appointment

Course Objectives:

As the core course for the UNC Certificate in Interdisciplinary Health Communication, the main goal is to provide an in-depth analysis of theory-based approaches in the interdisciplinary field of health communication. Much of the course will focus on the nature of persuasive communication – an inquiry into how communication and messaging can be used most effectively to persuade individuals to adopt and maintain healthy behaviors.

We will take an ecological perspective that sees an individual living within interpersonal relationships, in communities, and in social, economic, and political systems that affect the possibility of healthy lives. This course emphasizes the application of principles developed in diverse disciplines including communication, psychology, public health, medicine, information and library science, and journalism and mass communication.

Students in this course will learn frameworks for analyzing the basic components of communication; identify theory-based principles and approaches applicable to health communication practice; study and critique the application of these principles in health communication campaigns and interventions; and learn research methods unique to health communication research and practice. A research project gives students the opportunity to explore, in great depth, an area of health communication of interest to them.

Readings

We will use two books as our main texts. Other readings will be posted on the course Sakai website.

1. Cho, Hyunyi (Ed., 2012), Health communication message design: Theory and practice. Thousand Oaks, CA: Sage.

2. Office of Cancer Communications, National Cancer Institute (2002). *Making health communication programs work: A planner's guide*. NIH Pub. No. 02-5145. Available online at: <http://www.cancer.gov/pinkbook>

Course Requirements and Grading

Grades will be based on the following:

Discussion activities and class participation	10%
Reaction Papers	20%
Research Proposal Project	70%
Draft Literature Review	15
Research Proposal	40
Research Presentation	15

All students should come to the seminar prepared to discuss the day's readings. Assignments should be turned in on time. You cannot fully participate if you are not in class. Please stay in communication with me if you have a conflict.

Grading for the class will be determined as follows:

H Student reads and critically engages with all of the assigned material. Participation in discussion and written assignments exhibit the ability not only to apply the material, but also to extrapolate ideas, expand into new areas, and contribute to the body of scholarship in the area. Reserved for truly extraordinary work (i.e., A+).

P Student usually reads and engages critically with the assigned material. Able to apply material and extrapolate ideas. Consistently good work done on time (i.e., A/B).

L Student reads and engages critically with only some of the assigned material. Able to apply the material and extrapolate ideas in only some instances (i.e., C).

F Student occasionally misses class, does not always read the material, fails to critically engage with it, and is unable or unwilling to apply the material (i.e., below C).

Discussion Questions and Class Participation

This course is designed to use both lecture and discussion to achieve our learning goals. To ensure that everyone reads and has an active stake in the discussion process, students are required to submit at least 2 discussion questions each week. Questions should be thoughtful inquiries related to the week's readings that will help foster discussion on that particular week's topics. Please post your questions on the Sakai website (under "Forum" where the entire class can view them) by 9am on the Friday morning of class. These questions will help stimulate discussion each day. Active class participation in discussions is very important for a collaborative learning environment.

Also, all students will sign up to be 'discussion leaders' for 1 week of class. What this means is that you should read extra closely that week, and bring additional questions with you to help co-lead the discussion that day. Our goal is to have 1 or 2 discussion leaders for each of those days so that we can co-lead the discussion together. Students will lead the discussion for that particular week's topic after the lecture portion of the class has ended. All of the discussion activities (developing discussion questions, leading 1 day of discussion, and class participation) will contribute a portion to your grade for the course (10% of grade).

Reaction Papers

Each week a number of readings will be assigned with a particular topic in mind, and every few weeks students will write a reaction paper on the topic for that week. For these papers, you should choose an issue from the readings that you believe is either central to the topic or important in some way, and write a reaction paper on it, reflecting on your thoughts and reactions to what is being presented in the readings (in some cases you may want to tie readings to your personal experience). These can be general, such as: "What do I think about the author's proposition that XX message approach or XX attribute is critical to changing health behavior? Do I agree with the author's suggestion that the evidence is strong to support this proposition? If not, what approach do I think might work better?" Or, some weeks you may want to be more specific, such as: "On page XX of the Author (2010) reading, she suggests that we need to test a particular mediating mechanism in a particular approach. Do I agree with this statement? Why or why not?" Or, some weeks you may want to tie the readings to your personal experience with the issues at hand.

This assignment is intended to foster critical thinking and reflection with regard to the readings and topics. The papers should be approximately 2-3 double-spaced pages... please keep to this page limit. In addition, each paper will count 5% toward the final grade. There will be 4 reaction papers across the semester (20% of grade).

Research Proposal and Presentation

Research Proposal

For this major paper, you will research a specialized area of health communication of interest to you. The purpose of the assignment is twofold: First, to summarize the current literature in a specific area of health communication, with emphasis on the role of theory in that area. Second, to propose a theory-based research study to examine an important issue in this area of health communication. The assignment will put to work many of the skills that you are learning in your graduate program, including: reviewing and synthesizing the literature, proposing innovative ideas in a field of study, and applying research methods to a proposed study in a real-world context. More details on the paper will be provided early in the semester. The length of the paper should be approximately 20-25

double-spaced pages. An outline of the paper is due on 9/22, a draft literature review is due on 10/27 (15% of grade), and the full research proposal is due on 12/8 (40% of grade).

Research Presentation

You will also give an oral presentation of your research proposal (~15 minutes – may vary based on how much time we have). This is meant to “mimic” the academic practice of presenting at a conference and it also will allow you to share your completed proposal with the class. These presentations will take place at the end of the semester. As we get closer to this date, more specific guidelines will be handed out. Generally, though, you will want to conceive of this as a presentation where you present all of the major sections of your paper in a format that is guided by a PowerPoint presentation (15% of grade).

Semester Schedule Overview		
Date	Topics	Assignments Due
	Part 1: Introduction to communicating about health	
Wk 1: 8/25	Introductions and course overview; overview of health communication field; where this course fits in context	
Wk 2: 9/1	Process of using communication for health; Guiding models and frameworks	
Wk 3: 9/8	Audiences: segmentation and targeting	*Reaction paper #1 due
Wk 4: 9/15	Tailoring, interactivity, and eHealth: New frontiers in health communication	
	Part 2: Theory-based approaches to message design and their application	
Wk 5: 9/22	<i>Will they listen?</i> Activation model, sensation seeking targeting, elaboration likelihood model	*Proposal outline due
Wk 6: 9/29	<i>Scare the hell out of 'em or connect with 'em?</i> : Fear appeals, extended parallel process model, emotional appeals, & branding	*Reaction paper #2 due (Jane Brown lecture today – possible we will begin a few minutes late)
Wk 7: 10/6	<i>It's all what you believe:</i> Value-expectancy, Integrated behavioral model, stage of change, gain/loss framing <i>Everyone else is doing it, so why shouldn't I?</i> Social norms approaches	
Wk 8: 10/13	<i>Tell the right story:</i> Narratives, transportation theory, entertainment education	*Reaction paper #3 due
Wk 9: 10/20	No class: Fall break	
Wk 10: 10/27	<i>Culture matters:</i> Cultural health communication, health literacy	*Draft literature review due

Part 3: Communication channels; methods & evaluation		
Wk 11: 11/3	Channel selection; message diffusion	*Reaction paper #4 due
Wk 12: 11/10	<i>Methods:</i> Formative and process evaluation of health communication	
Wk 13: 11/17	<i>Methods:</i> Outcome evaluation of health communication programs	
Wk 14: 11/24	No class – Thanksgiving break!	
Wk 15: 12/1	Health communication project presentations ¹	**Project Presentations
Wk 16: 12/8	Health communication project presentations ¹	**Project Presentations *Research proposal due

¹Note: Project presentations will begin on 12/1. They will also take place on 12/8 (or another day that works for everyone). [According to the UNC schedule, classes end on 12/6].

Participation, Special Needs, Diversity, Academic Integrity and AEJMC Core Competencies

Participation: The seminar format of this course requires full attendance and active participation by all students. The assigned readings should be read by the scheduled date. *All* students are expected to be able to participate in the discussion of each reading. Please let me know as soon as possible if there is an emergency or if you have a prior academic commitment that will keep you from attending a class session.

Special Needs or Concerns: If you have questions or needs related to a disability or any other area of concern, please come see me in person to discuss any accommodations that may be of help.

Diversity: UNC is committed to providing an inclusive and welcoming environment for all members of our community and does not discriminate in offering access to its educational programs and activities based on age, gender, race, color, national origin, religion, creed, disability, veteran’s status, sexual orientation, gender identity, or gender expression. The School of Media and Journalism adopted Diversity and Inclusion Mission and Vision statements in spring 2016 with accompanying goals - <http://www.mj.unc.edu/diversity-and-inclusion>.

Academic Integrity: All UNC-CH students are expected to adhere to the University’s Honor Code, which includes the following re: Academic Dishonesty:

It shall be the responsibility of every student enrolled at the University of North Carolina to support the principles of academic integrity and to refrain from all forms of academic dishonesty, including but not limited to, the following:

1. Plagiarism in the form of deliberate or reckless representation of another's words, thoughts, or ideas as one's own without attribution in connection with submission of academic work, whether graded or otherwise.

2. Falsification, fabrication, or misrepresentation of data, other information, or citations in connection with an academic assignment, whether graded or otherwise.

3. Unauthorized assistance or unauthorized collaboration in connection with academic work, whether graded or otherwise.

(For the full text of the Honor Code see <http://instrument.unc.edu/instrument.text.html>)

AEJMC Core Competencies: The following AEJMC core competencies are relevant to this course:

- Think critically, creatively and independently
- Understand concepts and apply theories in the use and presentation of images and information
- Conduct research and evaluate information by methods appropriate to the communications professions in which they work
- Write correctly and clearly in forms and styles appropriate for the communications professions, audiences and purposes they serve
- Apply tools and technologies appropriate for the communications professions in which they work

JOMC/HBEH 825 Seminar Readings

Week 1 - 8/25

No readings – first day of class

Week 2 - 9/1

Making Health Communication Programs Work (The Pink Book). www.cancer.gov/pinkbook (Introduction, Overview, Stage 1)

Johns Hopkins University. (2008). Communication--A process, not a product. *Population Reports*(16), 11-20.

McGuire, W. J. (1989). Theoretical foundations of campaigns. In R. E. Rice & C. Atkin (Eds.), *Public communication campaigns* (2nd ed., pp. 43-67). Newbury Park, CA: Sage.

Noar, S. M. (2006). A 10-year retrospective of research in health mass media campaigns: Where do we go from here? *Journal of Health Communication*, 11(1), 21-42.

Solomon, D. S. (1989). A social marketing perspective on communication campaigns. In R. E. Rice & C. Atkin (Eds.), *Public communication campaigns* (2nd ed., pp. 87-104). Newbury Park, CA: Sage.

Week 3 - 9/8

Boslaugh, S. E., Kreuter, M. W., Nicholson, R. A., & Naleid, K. (2005). Comparing demographic, health status and psychosocial strategies of audience segmentation to promote physical activity. *Health Education Research*, 20(4), 430-438.

Slater, M. D. (1995). Choosing audience segmentation strategies and methods for health communication. In E. Maibach & R. L. Parrot (Eds.), *Designing health messages: Approaches from communication theory and public health practice*. (pp. 186-198). Thousand Oaks, CA, US: Sage Publications, Inc.

Slater, M. D., Kelly, K. J., & Thackeray, R. (2006). Segmentation on a shoestring: Health audience segmentation in limited-budget and local social marketing interventions. *Health Promotion Practice*, 7, 170-173.

Hornik, R. C., & Ramirez, A. S. (2006). Racial/ethnic disparities and segmentation in communication campaigns. *American Behavioral Scientist*, 49(6), 868-884.

Week 4 – 9/15

Hawkins, R. P., Kreuter, M., Resnicow, K., Fishbein, M., & Dijkstra, A. (2008). Understanding tailoring in communicating about health. *Health Education Research*, 23(3), 454-466.

Noar, S. M., Harrington, N. G., Van Stee, S. K., & Aldrich, R. S. (2011). Tailored health communication to change lifestyle behaviors. *American Journal of Lifestyle Medicine*, 5(2), 112-122.

Kreps, G. L., & Neuhauser, L. (2010). New directions in eHealth communication:

opportunities and challenges. *Patient Education & Counseling*, 78(3), 329-336.

Strecher, V. J. (2007). Internet methods for delivering behavioral and health-related interventions (eHealth). *Annual Review of Clinical Psychology*, 3, 53-76.

Week 5 – 9/22

HCMD – Introductory chapter (pages xi – xvi)

HCMD Chapter 13 – Designing High Sensation Value Messages for the Sensation Seeking Audience

Harrington, N. G., Lane, D. R., Donohew, L., & Zimmerman, R. S. (2006). An extension of the activation model of information exposure: The addition of a cognitive variable to a model of attention. *Media Psychology*, 8(2), 139-164.

Petty, R. E., Barden, J., & Wheeler, S. C. (2009). The Elaboration Likelihood Model of persuasion: Developing health promotions for sustained behavioral change. In R. J. DiClemente, R. A. Crosby & M. C. Kegler (Eds.), *Emerging theories in health promotion practice and research (2nd ed.)*. (pp. 185-214). San Francisco, CA US: Jossey-Bass.

Week 6 – 9/29

HCMD Chapter 3 – Health Risk Message Design Using the Extended Parallel Process Model

HCMD Chapter 4 – Using Emotional Appeals in Health Messages

Dillard, J. P., & Nabi, R. L. (2006). The persuasive influence of emotion in cancer prevention and detection messages. *Journal of Communication*, 56, S123-S139.

Evans, W. D., & Hastings, G. (2008). Public health branding: Recognition, promise, and delivery of healthy lifestyles. In W. D. Evans & G. Hastings (Eds.), *Public health branding: Applying marketing for social change* (pp. 1-24). Oxford: Oxford University Press.

Week 7 – 10/6

HCMD Chapter 1 – From Psychological Theory to Message Design: Lessons from the Story of Gain-Framed and Loss-Framed Persuasive Messages

HCMD Chapter 2 – The Integrative Model of Behavioral Prediction as a Tool for Designing Health Messages

HCMD Chapter 12 – Designing Messages for Individuals in Different Stages of Change

DeJong, W., & Smith, S. W. (2013). Truth in advertising: Social norms marketing campaigns to reduce college student drinking. In R. E. Rice & C. K. Atkin (Eds.), *Public communication campaigns* (Vol. 4, pp. 177-187). Thousand Oaks, CA: Sage.

Week 8 – 10/13

HCMD Chapter 6 – Using Narratives to Promote Health: A Culture-Centric Approach

Murphy, S. T., Frank, L. B., Chatterjee, J. S., Moran, M. B., Zhao, N., Amezola de Herrera, P., & Baezconde-Garbanati, L. A. (2015). Comparing the Relative Efficacy of Narrative vs Nonnarrative Health Messages in Reducing Health Disparities Using a Randomized Trial. *American Journal of Public Health, 105*, 2117-2123.

Moyer-Guse, E. (2008). Toward a theory of entertainment persuasion: Explaining the persuasive effects of entertainment-education messages. *Communication Theory, 18*, 407-425.

Singhal, A., Wang, H., & Rogers, E. M. (2013). The rising tide of entertainment-education in communication campaigns. In R. E. Rice & C. K. Atkin (Eds.), *Public communication campaigns* (Vol. 4, pp. 321-333). Thousand Oaks, CA: Sage.

Week 9 – 10/20

No class – fall break

Week 10 – 10/27

HCMD Chapter 7 – The Cultural Variance Framework for Tailoring Health Messages

HCMD Chapter 9 – Religiosity, Spirituality, and the Design of Health Communication Messages and Interventions

HCMD Chapter 10 – Addressing Health Literacy in the Design of Health Messages

Kreuter, M. W., Lukwago, S. N., Bucholtz, D. C., Clark, E. M., & Sanders-Thompson, V. (2003). Achieving cultural appropriateness in health promotion programs: Targeted and tailored approaches. *Health Education & Behavior, 30*(2), 133-146.

Week 11 – 11/3

Making Health Communication Programs Work (The Pink Book). www.cancer.gov/pinkbook (Stage 1 - section on channels; Stage 3 - Implementing the Program)

Schooler, C., Chaffee, S. H., Flora, J. A., & Roser, C. (1998). Health campaign channels: Tradeoffs among reach, specificity, and impact. *Human Communication Research, 24*(3), 410-432.

Southwell, B. G., & Yzer, M. C. (2009). When (and why) interpersonal talk matters for campaigns. *Communication Theory, 19*(1), 1-8.

Thackeray, R., Neiger, B. L., Hanson, C. L., & McKenzie, J. F. (2008). Enhancing promotional strategies within social marketing programs: Use of web 2.0 social media. *Health Promotion Practice, 9*(4), 338-343.

Week 12 – 11/10

Making Health Communication Programs Work (The Pink Book). www.cancer.gov/pinkbook (Stage 2 - Developing and Pretesting)

Brown, K. M., Lindenberger, J. H., & Bryant, C. A. (2008). Using pretesting to ensure your messages and materials are on strategy. *Health Promotion Practice*, 9(2), 116-122.

Atkin, C. K., & Freimuth, V. (2013). Guidelines for formative evaluation research in campaign design. In R. E. Rice & C. K. Atkin (Eds.), *Public communication campaigns* (Vol. 4, pp. 53-68). Thousand Oaks, CA: Sage.

Shafer, A., Cates, J. R., Diehl, S. J., & Hartmann, M. (2011). Asking mom: Formative research for an HPV vaccine campaign targeting mothers of adolescent girls. *Journal of Health Communication*, 1-18.

Yzer, M., LoRusso, S., & Nagler, R. H. (2015). On the conceptual ambiguity surrounding perceived message effectiveness. *Health Communication*, 30, 125-134.

Week 13 – 11/17

Making Health Communication Programs Work (The Pink Book). www.cancer.gov/pinkbook (Stage 4 - Assessing Effectiveness)

Niederdeppe, J. (2014). Conceptual, Empirical, and Practical Issues in Developing Valid Measures of Public Communication Campaign Exposure. *Communication Methods & Measures*, 8, 138-161.

Valente, T. W., & Patchareeya, P. K. (2013). Evaluating communication campaigns. In R. E. Rice & C. K. Atkin (Eds.), *Public communication campaigns* (Vol. 4, pp. 83-97). Thousand Oaks, CA: Sage.

Hornik, R. C. (2002). Epilogue: Evaluation design for public health communication programs. In R. C. Hornik (Ed.), *Public health communication: Evidence for behavior change* (pp. 385-406). Mahwah, N.J.: L. Erlbaum Associates.

Week 14 – 11/24

No readings – Thanksgiving break

Week 15 – 12/1

No readings – Presentations