Seminar in Social Psychology:
Social Psychology and Health (PSY 6710/7710)

Fall 2020   T 1:30-3:50pm   Synchronous Online Course

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Course Goals and Overview

This course will explore many areas at the interface between social psychological theory/research and health-related issues. The readings are mainly basic research and reviews of basic research, with some treatment of applications. The course is organized into three units. The first unit focuses on health enhancing and compromising behaviors, and the factors that influence such behaviors. The second unit is on stress and illness, and the factors that affect how people cope with both. Finally, the third unit is on issues related to illness management and care, specifically issues surrounding decisions to seek care, adherence to the care, patient-provider relationship/communication, and adjustment to chronic illnesses. The material for the course will include a combination of readings and discussion. I will at times give mini-lectures when certain topics are raised and there is a need for historical or conceptual framing that goes beyond the scope of the readings, but the format for the class is mostly based on discussion. Students are responsible for all information presented in class as well as assigned readings, and should come prepared for discussion.

Course Objectives

1. To develop an in-depth understanding of the social psychological factors associated with key health-related concerns and conditions.
2. To enhance students' abilities to critically examine current research in health psychology and to apply social psychological principles and findings to health promotion, prevention, and treatment.
3. Provide an opportunity to develop and strengthen professional skills: Reading and integrating basic empirical and theoretical contributions to an applied field; develop and express knowledge in both written and oral form

Reading Materials

The readings are from various edited books and journal articles (see "Schedule and Readings" on page 6). Each week there are core readings that everyone should read. The readings should be retrieved from the course website or PsycInfo (unless otherwise noted). There is a lot of reading for this course. My goal in class discussion is not to make sure that everyone has read every paper. I have no checklists as we go through discussion. However, I do expect everyone to ask questions and raise issues about the readings.

Structure of the Course

Typically, we will begin seminar meetings for the week with an overview of the topic. This will either be provided by the instructor or will develop through discussion. The majority of the seminar will be discussion-based as we delve into the issues and questions surrounding the topic/articles. Seminar members should bring up questions, ideas, or issues that were raised by the week's readings (either globally or specifically related to studies/aspects of the paper).

Class "meetings" in Blackboard

The course will be run remotely or synchronously online. This means that we will have a "live" meeting during normal class time in Blackboard using Collaborate Ultra. The class meetings will also be recorded so that students who are unable to attend can re-watch the session. Links will be posted on the left-hand side of our Blackboard site under "Collaborate Ultra (live meetings)". You are able to "join" the live meeting/course room 15 minutes before the start of class. I will attempt to start the class meetings right on time, so please make sure to login on time. If you have questions or discussion points to raise during the meeting, please use the chat function to either type your point/question or to indicate that you would like to speak. More information on how to join the live sessions and access recordings of the live sessions can be found here: http://utlv.screenstepslive.com/s/student/m/56924

Thought Questions

Each week students should submit one thought question about an article or set of articles for that week. These questions should be meant to stimulate discussion during class and, ideally, should be raised during the course of discussion if the opportunity arises. Discussion questions should be submitted through Blackboard (see "Thought Question" content module) by 10am on the day of class each week, with exception of "week 1" which can be submitted after class for that week. Each thought question is worth 5 points.

Leading Discussion

Most weeks during the semester (except "Week 1"), a different student will be designated as the "Discussion Leader". The discussion leader is expected to take a more active role that week during class, in terms of bringing up issues, asking questions, etc. Critically, the discussion leader should help pull everyone through the readings. To do this, the discussion leader for that week will type up an overview of each article to send out to the rest of the group via email in advance of the class for that week. Note that this shouldn't involve just cutting and pasting the abstract. Instead, the discussion leader should provide 1) an overview of the main research questions tested or conceptual points raised, 2) an overview of the method for study or studies, or approach for the model/theory/review, 3) an overview of the key results/findings, 4) a discussion of the implications, and 5) any interesting discussion points or lingering questions about the study methods, results, approach, ideas, themes, etc.

Take-home Exams

There will be two take-home exams based on the readings and lecture material. The instructor will provide the exam questions in Blackboard approximately 1 week prior to the due dates. Students are free to use notes/readings, but are not to work on these with other students from the class. Students should write approximately 2 pages (double-spaced) for each question and failure to follow instructions will result in point deductions. Also, exams handed in late will receive 10 points off for each day unless the student has a university-appropriate excuse. Exams should be submitted through Blackboard by the due dates (listed below).

Course Grading Components

Assignment	Weight	Total Points	Date
Discussion Leader	15%	75 points	TBD
Thought Questions	15%	75 points	Weekly
Take-home Exam 1	35%	175 points	Oct. 16 (5pm)
Take-home Exam 2	35%	175 points	Dec. 4 (5pm)
Total		*500 points*	

Brief Overview of Schedule
(Subject to change based on in-class announcements)

Week	Date	Topic
1	Aug. 18	Overview/Introduction; What is a Health Behavior? Health Behavior Models
2	Aug. 25	Health Communication
3	Sept. 1	Conscious and Unconscious Processes
4	Sept. 8	Social Comparison & Influence
5	Sept. 15	Worry & Risk
6	Sept. 22	Affect
7	Sept. 29	Stress
8	Oct. 6	Psychological Adjustment
9	Oct. 13	Personality & Self-regulation
10	Oct. 20	Social Support & Interpersonal Factors
11	Oct. 27	Socio-cultural Factors
12	Nov. 3	Illness Representation
13	Nov. 10	Patient-Provider Relationship & Communication
14	Nov. 17	Control & Expectations
15	Nov. 24	Illness Management & Quality/End of Life

Take Home Exam 1: due on Friday, Oct. 16 by 5:00pm (via Blackboard)
Take Home Exam 2: due on Friday, Dec. 4 by 5:00pm (via Blackboard)

Exploded Schedule & Readings

NOTE: In typical weeks, I will start by providing an overview of the topic to provide information about common themes, structure, or background information for the set of readings. After that, we will delve into the readings in detail. The Discussion Leader for that week (if applicable) will help pull everyone through the specifics of the readings and also assist the faculty instructor in facilitating discussion.

1   Overview/Introduction, Health Enhancing & Compromising Behaviors

Suls, J. & Rothman, A. (2004). Evolution of the biopsychosocial model: Prospects and challenges for health psychology. *Health Psychology, 23*, 119-125.

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

Lewis, M. A. & Rook, K. S. (1999). Social control in personal relationships: Impact on health behaviors and psychological distress. *Health Psychology*, *18*, 63-71.

2   Health Communication

Detweiler, J.B., Bedell, B., Salovey, P., Pronin, E., & Rothman, A. (1999). Message framing and sunscreen use: Gain-framed messages motivate beach-goers. *Health Psychology, 18*, 189-196.

Rothman, A. J., Salovey, P., Turvey, C., & Fishkin, S.A.. (1993). Attributions of Responsibility and Persuasion: Increasing mammography utilization among women over 40 with an internally oriented message. *Health Psychology, 12*, 39-47.

Cooper, D.P., Goldenberg, J.L., & Arndt, J. (2014). Perceived efficacy, conscious fear of death, and intentions to tan: Not all fear appeals are created equal. British Journal of Health Psychology, 19, 1-15.

Rose, J.P., Geers, A.L., France, J., & France, C. (2014). Norm perception and communication for vasovagal symptoms in blood donation. *Transfusion*, 54, 2258-2266.

3   Conscious & Unconscious Processes

Sheeran, P., Gollwitzer, P.M., & Bargh, J.A. (2013). Nonconscious processes and health. *Health Psychology, 32*, 460-473.

Kiviniemi, M. T., Voss-Humke, A. M., , & Seifert, A. L. (2007). How do I feel about the behavior? The interplay of affective associations with behaviors and cognitive beliefs as influences on physical activity behavior. *Health Psychology*, *26*, 152-158.

Rudman, L.A., Phelan, J.E., & Heppen, J.B. (2007). Developmental sources of implicit attitudes. *PSPB, 12*, 1700-1713.

Harris, J.L., Bargh, J.A., & Brownell, K.D. (2009). Priming effects of television food advertising on eating behavior. *Health Psychology, 28*, 404-413.

4   Social Comparison & Influence

Prentice, D. A. & Miller, D. T. (1993) Pluralistic ignorance and alcohol use on campus: Some consequences of misperceiving the social norm. *Journal of Personality & Social Psychology*, *64*, 243-256.

Mahler, H. I. M., Kulik, J. A., Butler, H. A., Gerrard, M., & Gibbons, F. X. (2008). Social norms information enhances the efficacy of an appearance-based sun protection intervention. *Social Science & Medicine*, *67*, 321-329.

Fagerlin A., Zikmund-Fisher B.J., Ubel, P.A. (2007). "If I'm better than average, then I'm ok?": Comparative information influences beliefs about risk and benefits. *Patient Education and Counseling, 69*, 140-144.

Vogel, E., Rose, J., Aspiras, O., Edmonds, K., & Gallinari, E. (2019). Comparing comparisons: Assimilation and contrast processes and outcomes following social and temporal comparisons. *Self & Identity*.

5   Worry & Risk

Klein, W. M. P., Zajac, L. E., & Monin, M. M. (2009). Worry as a moderator of the association between risk perceptions and quitting intentions in young adult and adult smokers. *Annals of Behavioral Medicine, 38*, 256-261.

Weinstein, N.D., Kwitel, A., McCaul, K.D., Magnan, R. E., Gerrard, M., & Gibbons, F. X. (2007). Risk perceptions: Assessment and relationship to influenza vaccination.   *Health Psychology, 26*, 146-151.

Magnan, R. E., Köblitz, A. R., Zielke, D. J., & McCaul, K. D. (2009). The effects of warning smokers on perceived risk, worry, and motivation to quit. *Annals of Behavioral Medicine*, *37*, 46-57.

Turner, M. M., Rimal, R. N., Morrison, D., & Kim, H. (2006). The role of anxiety in seeking and retaining risk information: Testing the risk perception attitude framework in two studies. *Human Communication Research*, *32*, 130-156.

6   Affect

Van Cappellen, P., Rice, E. L., Catalino, L. I., & Fredrickson, B. L. (2017). Positive affective processes underlie positive health behaviour change. *Psychology & Health, 33*, 1–21.

Geers, A. L., Van Wasshenova, E., Murray, B., Mahas, R., Fahlman, M., & Boardley, D. (2017). Affective association as predictors of health behavior in urban minority youth. *Health Psychology*, *36,* 996-1005.

Howren, M. B., Suls, J. (2011). The symptom perception hypothesis revised: Depression and anxiety play different roles in concurrent and retrospective physical symptom reporting. *Journal of Personality and Social Psycholog*y, *100*, 182–195.

Rhudy, J.L., Dubbert, P.M., Parker, J.D., Burke, R.S., & Williams, A.E. (2006). Affective modulation of pain in substance-dependent veterans. *Pain Medicine*, *7*, 483-500

7   Stress

Serido, Y., Almeida, D.M., & Wethington, E. (2004). Chronic stressors and daily hassles: Unique and interactive relationships with psychological distress. *Journal of Health and Social Behavior, 45*, 17-33.

McEwen, B.S. (1998). Protective and damaging effects of stress mediators. *The New England Journal of Medicine, 338*, 171-179

Cohen, S., Frank, E., Doyle, W. J., Skoner, D. P., Rabin, B. S., Gwaltney, J. M. Jr. (1998). Types of stressors that increase susceptibility to the common cold in healthy adults. *Health Psychology, 17*, 214-223

Ng, D. M. & Jeffrey, R. W. (2003). Relationships between perceived stress and human behaviors in a sample of working adults. *Health Psychology, 22*, 638-642.

8   Psychological Adjustment

Hobfoll, S. E. & Schroder, K. E. E. (2001). Distinguishing between passive and active prosocial coping: Bridging inner-city women's mental health and AIDS risk behavior. *Journal of Social and Personal Relationships, 18*, 201-217.

Creswell, J. D., Welch, W. T., Taylor, S. E., Sherman, D. K., Gruenewald, T. L., & Mann, T.(2005). Affirmation of personal values buffers neuroendocrine and psychological stress responses. *Psychological Science, 16*, 846-851.

Colvin, C. R. (1995). Overly positive self-evaluations and personality: Negative implications for mental health. *Journal of Personality and Social Psychology, 68*, 1152-1162.

McFarland, C., & Alvaro, C. (2000). The impact of motivation on temporal comparisons: Coping with traumatic events by perceiving personal growth. *Journal of Personality and Social Psychology, 79*, 327-343.

9   Personality & Self-regulation

Kivimäki, M., Vahtera, J., Elovainio, M., Helenius, H., Singh-Manoux, A., & Pentti, J. (2005). Optimism and pessimism as predictors of change in health after death or onset of severe illness in family. *Health Psychology, 24*, 413-421.

Hong, J., & Lee, A. Y. (2008). Be fit and be strong: Mastering self-regulation through regulatory fit. *Journal of Consumer Research, 34*, 682-695.

Bolger, N., & Zuckerman, A. (1995). A framework for studying personality in the stress process. *Journal of Personality and Social Psychology, 69*, 890-902.

Raynor, D. A., & Levine, H. (2009). Associations between the five-factor model of personality and health behaviors among college students. *Journal of American College Health, 58*, 73-81.

10   Social Support & Interpersonal Factors

Cohen, S., Doyle, W. J., Turner, R., Alper, C. M., , & Skoner, D. P. (2003). Sociability and susceptibility to the common cold. *Psychological Science*, *14*, 389-395

Brady, S.S., Dolcini, M.M., Harper, G.W., & Pollack, L.M. (2009). Supportive friendships moderate the association between stressful life events and sexual risk taking among African American adolescents. *Health Psychology, 28,* 238-248.

Kulik, J. A., Mahler, H. I. M., & Moore, P. J. (1996). Social comparison and affiliation under threat: Effects on recovery from major surgery. *Journal of Personality and Social Psychology, 71*, 967-979.

Taylor, S. E. (2006). Tend and befriend: Biobehavioral bases of affiliation under stress. *Current Directions in Psychological Science*, *15*, 273-277.

11   Socio-cultural Factors

Guyll, M., Matthews, K. A., Bromberger, J. T. (2001). Discrimination and unfair treatment: Relationship to cardiovascular reactivity among African American and European American women, *Health Psychology, 20,* 315-325

Cooper, M. L., Peirce, R. S., & Huselid, R. F. (1994). Substance Use and Sexual Risk Taking Among Black Adolescents and White Adolescents. *Health Psychology*, *13*, 251-262.

Haught, H.**,** Rose, J.P., & Brown, J. (2016). Social class indicators differentially   predict engagement in prevention and detection behaviors. *Psychology & Health, 31*, 21-39.

Kershaw, K., Mezuk, B., Abdou, C.M., Rafferty, J.A., & Jackson, J.S. (2010). Socioeconomic Position, Health Behaviors, and C-Reactive Protein:A Moderated-Mediation Analysis. *Health Psychology, 29*, 307-316.

12   Illness Representation

Croyle, R.T., & Uretsky, M.B. (1987). Effects of mood on self-appraisal of health status. *Health Psychology*, *6*, 239-253.

Ditto, P. H., Jemmott, J. B., & Darley, J. M. (1988). Appraising the threat of illness: A mental representational approach. *Health Psychology*, *7*, 183-201.

Henderson, C.J., Orbell, S., & Hagger, M.S. (2009). Illness schema activation and attentional bias to coping procedures. *Health Psychology, 28*, 101-107.

Martin, R., Gordon, E. E. I., , & Lounsbury, P. (1998). Gender disparities in the attribution of cardiac-related symptoms. *Health Psychology*, *17*, 346-357.

13   Patient-Provider Relationship & Communication

Cegala, D. J., Gade, C., Broz, S. L., & McClure, L. (2004). Physicians' and patients' perceptions of patients' communication competence in a primary care medical interview. *Health Communication, 16*, 289-304.

Hawley, S.T., Zikmund-Fisher, B., Ubel, P., Jancovic, A., Lucas, T., & Fagerlin, A. (2008). The impact of the format of graphical presentation on health-related knowledge and treatment choice. *Patient Education and Counseling, 73*, 448-455.

Thompson, S.C., Nanni, C., & Schwankovsky, L. (1990). Patient-oriented interventions to improve communication in a medical office visit. *Health Psychology, 9*, 390-404.

Zikmund-Fisher et al. (2006). A matter of perspective: Choosing for others differs from choosing for yourself in making treatment decisions. *Journal of General Internal Medicine, 21,* 618-622.

14   Control & Expectations

Thompson, S. C., Sobolew-Shubin, A., Galbraith, M. E., Schwankovsky, L., & Cruzen, D. (1993). Maintaining perceptions of control: Finding perceived control in low-control circumstances. *Journal of Personality and Social Psychology, 64*, 293-304.

Brownell, K. D. (1991). Personal responsibility and control over our bodies: When expectation exceeds reality. *Health Psychology, 10*, 303-310.

Oettingen, G., & Mayer, D. (2002). The motivating function of thinking about the future: Expectations versus fantasies. *Journal of Personality and Social Psychology, 83,* 1198-1212.

Rose, J.P., Geers, A.L., Fowler, S. L., & Rasinski, H.M. (2014). Choice-making, expectations, and treatment positivity: How and when choosing shapes aversive experiences *Journal of Behavioral Decision Making, 27, 1-10.*

15   Illness Management & Quality of Life

Bogart, L. M., Gray-Bernhardt, M. L., Catz, S. L., Hartmann, B. R., & Otto-Salaj, L. L. (2002). Social and temporal comparisons made by individuals living with HIV disease: Relationships to adherence behavior. *Journal of Applied Social Psychology*, *32*(8), 1551-1576.

DiMatteo, M. R., Donald Sherbourne, C., Hays, R. D., Ordway, L., Kravitz, R. L., McGlynn, E. A., Kaplan, S., & Rogers, W. H. (1993). Physicians' characteristics influence patients' adherence to medical treatment: Results from the medical outcomes study. *Health Psychology, 12*, 93-102.

Smith, D.M., Lowenstein, G., Jankovic, A., & Ubel, P. (2009). Happily hopeless: Adaptation to permanent, but not to a temporary, disability. *Health Psychology, 28*, 787-791.

Heckman, T. G. (2003). The chronic illness quality of life (CIQOL) model: Explaining life satisfaction in people living with HIV disease. *Health Psychology, 22*, 140-147.

<center>**Collegiate Policies**</center>

Policy Statement on Non-Discrimination on the Basis of Disability (ADA)

The University is an equal opportunity educational institution. Please read The University's Policy Statement on Nondiscrimination on the Basis of Disability Americans with Disability Act Compliance.
Students can find this policy along with other university policies listed by audience on the University Policy webpage (http://www.utoledo.edu/policies/audience.html/#students).

Academic Accommodations

The University of Toledo embraces the inclusion of students with disabilities. We are committed to ensuring equal opportunity and seamless access for full participation in all courses. For students who have an accommodations memo from Student Disability Services, I invite you to correspond with me as soon as possible so that we can communicate confidentially about implementing accommodations in this course. For students who have not established affiliation with Student Disability Services and are experiencing disability access barriers or are interested in a referral to healthcare resources for a potential disability or would like information regarding eligibility for academic accommodations, please contact the Student Disability Services Office (http://www.utoledo.edu/offices/student-disability-services/) by calling 419.530.4981 or sending an email to StudentDisability@utoledo.edu.

University of Toledo Policy Pertaining to Academic Integrity

Academic dishonesty is not tolerated. Among the aims of education are the acquisition of knowledge and the development of skills necessary for success in any profession. Activities inconsistent with these aims are not permitted. Students are responsible for knowing what constitutes academic dishonesty. If students are uncertain about what constitutes plagiarism or cheating they should seek the instructor's advice. Examples of academic dishonesty include, but are not limited to:

- Plagiarizing or representing the words, ideas or information of another person as one's own and not offering proper credit or documentation to the other person;
- Giving or receiving, prior to an examination, any unauthorized information concerning the content of that examination;
- Referring to or displaying any unauthorized materials inside or outside of the examination room during the course of an examination;
- Communicating during an examination in any manner with any unauthorized person concerning the examination or any part of it;
- Giving or receiving substantive aid during the course of an examination;
- Starting an examination before the stipulated time or continuing to work on an examination after the announced conclusion of the examination period;
- Taking, converting, concealing, defacing, damaging or destroying any property related to the preparation or completion of assignments, research, or exams;
- Submitting the same written work to fulfill the requirements for more than one course.

Other Policies

Your safely and well-being as a University of Toledo student is important to the faculty, staff, and administration; as such please take time outside of class to review the code of conduct and non-discrimination policies that apply to you as a student: https://www.utoledo.edu/title-ix/policies.html. You can use this URL to view a more comprehensive list of student policies: https://www.utoledo.edu/policies/audience.html/#students.

Academic and Support Services

Please follow this link (http://www.utoledo.edu/studentaffairs/departments.html) to view a comprehensive list of Student Academic and Support Services available to you. UT also provides a variety of academic and support services on campus to help you succeed and reach your fullest potential. Whether you need to ask a question, get help with an assignment, seek advice from a counselor, find a job or join a club, UToledo offers some help:

> Tutoring: http://www.utoledo.edu/success/lec/
> Library: http://www.utoledo.edu/library/
> Success Coaching: https://www.utoledo.edu/successcoach/
> Student Affairs: http://www.utoledo.edu/studentaffairs/
> Career Services: http://www.utoledo.edu/success/career/

Safety and Health Services for UT Students

Please use the following link to view a comprehensive list Campus Health and Safety Services available to you as a student. It covers services related health, mental health, emergencies, and discrimination, among other things. In addition, UT provides assistance via a Food Pantry: http://www.utoledo.edu/studentaffairs/food-pantry/.

Special Course Expectations During COVID-19

It's important to note that based on the unpredictability of the COVID-19 virus things can change at any time so please be patience and understanding as we move through the semester. I also ask that you keep me informed of concerns you may have about class, completing course work/assignments timely, and/or health concerns related to COVID.