# Health Psychology – Spring 2024 Tuesdays – 2:00-4:45pm

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#### **Course Objectives**

This course is designed to introduce students to the field of health psychology, including an overview of psychology & health, stress, coping, health promotion, substance use, health disparities, weight management and nutrition, positive psychology/spirituality/meaning, pain, chronic illness and complementary and integrative medicine, health services and adherence, heart disease and stroke, cancer, HIV/AIDS, and the future of health psychology. There is a focus on applications to clinical practice, including individual, group, and community-level interventions, working related clinical systems, and dissemination & implementation science.

### **Textbook and Readings**

Sarafino, E., & Smith, T. (2017). *Health psychology*, 9<sup>th</sup> edition. New York: Wiley. *Additional readings will be assigned each week (see Readings portion of document) to provide a health disparities, diversity, and health equity perspective.* 

#### **Tentative Class Structure**

- 1. Mindfulness and/or relaxation exercise and discussion/skills building (2-2:15pm)
- 3. *Content lectures* (2:15-3:15pm) [15 minute student presentation, 45 minute Brianna lecture])
- 4. *Break* (3:15-3:30pm)
- 5. Case Presentations (3:30-3:45pm)
- 5. *Skills training*: Lecture (3:45-4:10pm), Practice (4:10-4:30pm)
- 6. *Discussion and wrap up* (4:30pm-4:45pm)

### **Course Requirements and Evaluation of Student Performance (Grading)**

### 1. Reading Reflections (15%)

For five classes, you are expected to post at least two thoughtful questions/comments from the readings that occurred to you while reading the assignments. At least one should be a response to another student's comment/question. They should be about 2-4 sentences in length. These postings are designed to stimulate discussion and will help us maintain a seminar format for the class; they must be posted by 10pm on the Monday before class. You may critique particular readings, based on theoretical or methodological grounds; raise new conceptual questions; suggest directions for future research and innovation; relate the readings to outside readings or readings from other weeks; discuss the relevance of the readings to your own research or applied interests. Topics related to health disparities and health equity are encouraged.

2. Class Participation (15%)

Please participate regularly in class discussion by bringing in ideas, comments and observations based on the assigned readings and other materials you encounter. Participate in think, pair shares, as well as weekly skills practice. **Two comments per class** per student, are requested. Attendance policy will be reviewed in class.

# 3. Class Discussion Leadership (15%)

You will be assigned to co-lead the class discussion on one topic for **one 15 minute lecture**. For this discussion, you are encouraged to bring in additional materials (e.g., other readings, demonstrations, video, research, etc.) Topics will be assigned in the first class. To prepare for this co-led class, feel free to talk with me beforehand. The presentations can take various formats. The main goal of the presentation and accompanying discussion is to stimulate thought about the topic, give some evidence of your efforts to grapple with the course material, and facilitate your (and our) understanding of the topic. You may decide to present an overview of the topic area, discuss in depth the current readings, or focus more deeply on a particular area within the topic. One possible format is to identify and critically analyze an empirical article (either from the assigned readings or your own research) that relates to the assigned topic. You can describe how the article relates to the assigned topic and readings and lead a discussion regarding the rationale for the study and its findings and conclusions. Another format is to discuss the relevance of the assigned topic and readings to a theoretical or practical problem that interests you. You may list this lecture on your CV.

### 4. Clinical Application and Case Presentation (15%)

Each student will use a clinical intervention or tool learned in class in clinical work and will present this case to the class, similar to a brief presentation to a medical or healthcare team; an approximately **5 minute presentation** detailing presenting problem, brief history, diagnosis, intervention, and result of treatment/current status/recommendations to the medical team. Dates will be assigned in first class.

# 6. Health Psychology Paper (25%)

You are asked to engage in some sort of systems change/social justice/voting work this semester and write a ~5 page paper about how it aligns with health psychology (i.e., discuss impact on health psychology and/or public health, discuss a health behavior theory, and discuss its implications for health disparities). This can be a few steps removed (e.g., voting impacts healthcare policy which impacts health behaviors and disparities). Note: If you'd still like to write a 7 page review paper and submit for publication, please let me know; a 2 page report about your systems change activity this semester will still be due as part of the assignment. Due: 04/02.

### 6. Health Policy Brief (15%)

You are asked to produce a **one page health policy brief** (10%) and distribute to appropriate leadership or legislators (5%). This can be the same or a different topic than your paper. You can list this on your CV. **Due: 4/23.** 

#### **Classroom Culture**

**Statement on Disabilities:** Rutgers University welcomes students with disabilities into all of the University's educational programs. In order to receive consideration for reasonable accommodations, a student with a disability must contact the appropriate disability services office at the campus where you are officially enrolled, participate in an intake interview, and provide documentation: https://ods.rutgers.edu/students/documentation-

guidelines. If the documentation supports your request for reasonable accommodations, your campus's disability services office will provide you with a Letter of Accommodations. Please share this letter with your instructors and discuss the accommodations with them as early in your courses as possible. To begin this process, please complete the Registration form on the ODS web site at: <a href="https://ods.rutgers.edu/students/registration-form">https://ods.rutgers.edu/students/registration-form</a>.

**Statement on Academic Integrity:** The University's academic integrity policy, to which this class will adhere, can be reviewed at: http://academicintegrity.rutgers.edu/academicintegrity-at-rutgers/

**Names and Pronouns:** Class rosters are provided to the instructor with the student's legal name. I will gladly honor your request to address you by an alternate name as well as your gender pronoun preference. Please advise me of this preference early in the semester so that I may make appropriate changes to my records.

**Virtual Classroom Culture:** This course will primarily take place in-person but may utilize a virtual classroom as needed throughout the semester. In these cases, please turn your camera on for about 50% of each class. With the preference for camera on more often than not to encourage engagement, learning, and discussion, though the allowance for camera off due to unpredictable home environment, caregiving, wellbeing, limit setting, gender disparities in perceived camera readiness, etc. If you are not able to turn on your camera for 50% of each class, please discuss with me.

Respect for Diversity: It is my intent that students from all diverse backgrounds and perspectives be well-served by this course, that students' learning needs be addressed both in and out of class, that the diversity that the students bring to this class be viewed as a resource, strength and benefit, and that all diversity of our clients be discussed and addressed with thoughtfulness and compassion. It is my intent to present materials and activities that are respectful of diversity: gender identity, sexuality, disability, age, socioeconomic status, ethnicity, race, nationality, religion, and culture. I have implicit biases and blind spots, and while it should not be your job to correct these, your feedback and suggestions about how to make this class more compassionate and accessible are encouraged and appreciated, and can be provided during office hours, via email, anonymously via note under my office door. SIRS feedback will also be collected and incorporated at midway and the end of the semester.

**Religious Holiday Policy:** University policy excuses absences due to religious observance or participation in Rutgers-approved activities, and permits students to make up work missed for these circumstances.

This is a living syllabus document subject to change throughout the semester based on pertinent public health topics and student feedback.

# **Schedule of Topics:**

Date Date	Week #	Chapter and Topic, Training
1/16	Class 1	1 Overview of Health Policy and Health Disparities and terms/theory,
1/10		Overview  Overview
1/23	Class 2	3 & 4 Stress, Biopsychosocial Factors and Illness, <i>CBSM training</i> Case: Brianna Example
1/30	Class 3	5 Coping with and Reducing Stress, Stress Management, Mindfulness,  Mindfulness training  Content:  Case:
2/06	Class 4	6 Health Behavior/Health Promotion, <i>Smoking cessation training</i> Content: Case:
2/13	Class 5	7 Substance Use (also, Chapter 2, Module 4), <i>Motivational Interviewing Training</i> Content: Case:
2/20	Class 6	SES/Gender/Diversity/Spanish speaking psychotherapy, <i>Acceptance and commitment therapy training</i> Content: Case:
2/27	Class 7	8 Nutrition, Weight Control, Diet, Exercise, Sleep, <i>CBTi training</i> Content: Case:
3/05	Class 8	Positive Psychology/ Spirituality/Meaning, MCP training Content: Case:
3/19	Class 9	11 & 12 The Nature of Pain, Controlling Pain, <i>Pain psychology training</i> Content: Case:
3/26	Class 10	13 Chronic Illness, Complementary and Integrative Medicine, <i>Yoga</i> Content: Case:
4/02	Class 11	9 & 14 Health Services/Adherence, HIV/AIDS, Superstitious thoughts, Behavioral activation training Content: Case:
4/09	Class 12	14 Cancer, <i>Practice cases/tape</i> Content: Case:
4/16	Class 13	14 (cont.) Heart Disease and Stroke, <i>Practice cases/tape</i> Content: Case:
4/23	Class 14	15 Future of Health Psychology Content: Any rescheduled presentations Case: Any rescheduled cases

### **Readings**

\*Please note that readings may change at the professor's discretion.\*

#### 01/16 Class 1, Introduction: Health Psychology

Sarafino, Chapter 1

Johnson, B. T., & Acabchuk, R. L. (2018). What are the keys to a longer, happier life? Answers from five decades of health psychology research. *Social Science & Medicine*, 196, 218-226.

APA (2020). Health Disparities. <a href="https://www.apa.org/topics/health-disparities">https://www.apa.org/topics/health-disparities</a>

APA (2020). Fighting inequities in the face of COVID-19 <a href="https://www.apa.org/monitor/2020/06/covid-fighting-inequity">https://www.apa.org/monitor/2020/06/covid-fighting-inequity</a>

### 01/23 Class 2, Stress and Illness

Sarafino, Chapter 3 & 4

Thoits, P. A. (2010). Stress and health: Major findings and policy implications. *Journal of health and social behavior*, 51(1\_suppl), S41-S53.

Boullier, M., & Blair, M. (2018). Adverse childhood experiences. *Pediatrics and Child Health*, 28(3), 132-137.

### 01/30 Class 3, Coping

Sarafino Chapter 5

Park, C. L., Riley, K. E., & Snyder, L. B. (2012). Meaning making coping, making sense, and post-traumatic growth following the 9/11 terrorist attacks. *The Journal of Positive Psychology*, 7(3), 198-207.

Shechter, A., Diaz, F., Moise, N., Anstey, D. E., Ye, S., Agarwal, S., ... & Claassen, J. (2020). Psychological distress, coping behaviors, and preferences for support among New York healthcare workers during the COVID-19 pandemic. *General hospital psychiatry*, 66, 1-8.

Riley, K. E., & Park, C. L. (2014). Problem-focused vs. meaning-focused coping as mediators of the appraisal-adjustment relationship in chronic stressors. *Journal of Social and Clinical Psychology*, 33(7), 587-611.

Christophe, N. K., Stein, G. L., Romero, M. Y. M., Chan, M., Jensen, M., Gonzalez, L. M., & Kiang, L. (2019). Coping and culture: The protective effects of shift-&-persist and ethnic-racial identity on depressive symptoms in Latinx youth. *Journal of youth and adolescence*, 48(8), 1592-1604.

## 02/06 Class 4, Health-Related Behavior/Health Promotion

Sarafino, Chapter 6

Kaslow, N. J., Friis-Healy, E. A., Cattie, J. E., Cook, S. C., Crowell, A. L., Cullum, K. A., ... & Ward, M. C. (2020). Flattening the emotional distress curve: A behavioral health pandemic response strategy for COVID-19. *American Psychologist*, 75(7), 875-886.

Dror, A. A., Eisenbach, N., Taiber, S., Morozov, N. G., Mizrachi, M., Zigron, A., ... & Sela, E. (2020). Vaccine hesitancy: The next challenge in the fight against COVID-19. *European Journal of Epidemiology*, 1-5.

Quinn, S. C., Jamison, A., Freimuth, V. S., An, J., Hancock, G. R., & Musa, D. (2017). Exploring racial influences on flu vaccine attitudes and behavior: Results of a national survey of White and African American adults. *Vaccine*, *35*(8), 1167-1174.

Santos, S. L. Z., Tagai, E. K., Scheirer, M. A., Bowie, J., Haider, M., Slade, J., ... & Holt, C. L. (2017). Adoption, reach, and implementation of a cancer education intervention in African American churches. *Implementation Science*, 12(1), 36.

### 02/13 Class 5, Substance Use

Sarafino Chapter 7

Bravo, A. J., Pearson, M. R., Baumgardner, S. F., & Protective Strategies Study Team. (2020). The relationship between negative affect and alcohol and marijuana use outcomes among dual users. *Substance use & misuse*, 55(4), 658-665.

Fallin-Bennett, A., Aleshire, M., Scott, T., & Lee, Y.O. (2019). Marketing of e-cigarettes to vulnerable populations: An emerging social justice issue. *Perspectives in Psychiatry Care*, 55(4), 584-591.

Ruglass, L. M., Espinosa, A., Sykes, K. M., Shevorykin, A., Nicholson, R., & Dambreville, N. (2018). Direct and indirect effects of cumulative trauma, PTSD, and substance use disorder on probability of arrest among lower income African American and Latina Women. *Race and Justice*, 8(2), 126-153.

Riley, K. E., Tree, J. N. J., Giles, M., El-Sharkawy, K., Hall, E., & Valera, P. (2023). Smoking cessation interventions for LGBT Populations: A scoping review and recommendations for public health. *Annals of LGBTQ Public and Population Health*.

### 02/20 Class 6, SES/Gender/Diversity/Stigma

Novacek, D. M., Hampton-Anderson, J. N., Ebor, M. T., Loeb, T. B., & Wyatt, G. E. (2020). Mental health ramifications of the COVID-19 pandemic for Black Americans: Clinical and research recommendations. *Psychological Trauma: Theory, Research, Practice, and Policy*.

Nandi, A., Glymour, M. M., & Subramanian, S. V. (2014). Association among socioeconomic status, health behaviors, and all-cause mortality in the United States. *Epidemiology*, 25, 170-177.

Riley, K. E., Ulrich, M. R., Hamann, H. A., Ostroff, J. S. (2017). Decreasing Smoking but Increasing Stigma?: Anti-tobacco Campaigns, Cancer Patients, and Public Health. *AMA Journal of Ethics*, 19, 475-485.

Williamson, T., Riley, K. E., Carter-Harris, L., & Ostroff, J. O. (2020). Changing the language of how we measure and report smoking status: Implications for reducing stigma, restoring dignity, and improving the precision of scientific communication. *Nicotine & Tobacco Research*.

### 02/27 Class 7, Nutrition, Diet, Exercise

Sarafino, Chapter 8

Rundle, A. G., Park, Y., Herbstman, J. B., Kinsey, E. W., & Wang, Y. C. (2020). COVID-19–Related School Closings and Risk of Weight Gain Among Children. *Obesity*.

Cloutier-Bergeron, A., Provencher, V., Mongeau, L., Paquette, M. C., Carbonneau, É., Turcotte, M., & Bégin, C. (2019). Does Health At Every Size® fit all? A group-based trajectory modeling of a non-diet intervention. *Appetite*, *143*, 104403.

Stuckler, D., & Nestle, M. (2012). Big food, food systems, and global health. *PLoS Med*, 9(6), e1001242.

Cohen, R., Newton-John, T., & Slater, A. (2021). The case for body positivity on social media: Perspectives on current advances and future directions. *Journal of health psychology*, 26(13), 2365-2373.

Brown, A. G., Shi, S., Adas, S., Boyington, J. E., Cotton, P. A., Jirles, B., ... & Agurs-Collins, T. (2022). A decade of nutrition and health disparities research at NIH, 2010–2019. *American Journal of Preventive Medicine*, 63(2), e49-e57.

### 03/05 Class 8, Positive Psychology/Spirituality/Meaning

Hooker, S. A., Masters, K. S., & Park, C. L. (2017). A meaningful life is a healthy life: A conceptual model linking meaning and meaning salience to health. *Review of General Psychology*, 22, 11-34.

Aldwin, C. M., Park, C. L., Jeong, Y.-J., & Nath, R. (2014). Differing pathways between religiousness, spirituality, and health: A self-regulation perspective. *Psychology of Religion and Spirituality*, 6, 9-21.

Casellas-Grau, A., Font, A., & Vives, J. (2014). Positive psychology interventions in breast cancer. A systematic review. *Psycho-Oncology*, *1*(23), 9-19.

Amonoo, H. L., El-Jawahri, A., Deary, E. C., Traeger, L. N., Cutler, C. S., Antin, J. A., Huffman, J.C., & Lee, S. J. (2022). Yin and yang of psychological health in the cancer experience: does positive psychology have a role?. *Journal of Clinical Oncology*, 40(22), 2402.

Park, C. L., Holt, C. L., Le, D., Christie, J., & Williams, B. R. (2018). Positive and negative religious coping styles as prospective predictors of well-being in African Americans. *Psychology of Religion and Spirituality*, 10(4), 318–326. https://doi.org/10.1037/rel0000124

### 03/19 Class 9, Pain

Sarafino, Chapters 11 and 12

Jensen, M. P., & Turk, D. C. (2014). Contributions of psychology to the understanding and treatment of people with chronic pain: Why it matters to ALL psychologists. *American Psychologist*, 69(2), 105-118.

Higgins, K. S., Birnie, K. A., Chambers, C. T., Wilson, A. C., Caes, L., Clark, A. J., ... & Campbell-Yeo, M. (2015). Offspring of parents with chronic pain: a systematic review and meta-analysis of pain, health, psychological, and family outcomes. *Pain*, *156*(11), 2256.

John, W. S., & Wu, L. T. (2020). Chronic non-cancer pain among adults with substance use disorders: prevalence, characteristics, and association with opioid overdose and healthcare utilization. *Drug and Alcohol Dependence*, 209, 107902.

### 03/26 Class 10, Chronic Illness/Complementary and Integrative Medicine

Sarafino, Chapter 13

Park, C. L. (2013). Mind-body CAM interventions: Current status and considerations for integration into behavioral medicine. *Journal of Clinical Psychology*, 69, 45–63.

Ambrosio, L., Senosiain García, J. M., Riverol Fernández, M., Anaut Bravo, S., Díaz De Cerio Ayesa, S., Ursúa Sesma, M. E., ... & Portillo, M. C. (2015). Living with chronic illness in adults: a concept analysis. Journal of Clinical Nursing, 24(17-18), 2357-2367.

Samios, C., Pakenham, K. I., & O'Brien, J. (2014). A Dyadic and longitudinal investigation of adjustment in couples coping with multiple sclerosis. *Annals of Behavioral Medicine*, 49, 74-83.

Riley, K. E., & Park, C. L. (2015). How does yoga reduce stress? A systematic review of mechanisms of change and guide to future inquiry. *Health psychology review*, 9(3), 379-396.

# 04/02 Class 11, Health Services, Health Provider Communication, Adherence, HIV/AIDS

Sarafino, Chapter 9

Foley, L., Larkin, J., Lombard-Vance, R., Murphy, A. W., Hynes, L., Galvin, E., & Molloy, G. J. (2021). Prevalence and predictors of medication non-adherence among people living with multimorbidity: a systematic review and meta-analysis. *BMJ Open*, *11*(9), e044987.

McGrail, K., Lavergne, R., & Lewis, S. (2016). The chronic disease explosion: Artificial bang or empirical whimper?. *BMJ: British Medical Journal (Online)*, 352.

Dunbar-Jacob, J., & Rohay, J. M. (2016). Predictors of medication adherence: Fact or artifact. *Journal of Behavioral Medicine*, 1-12.

Spaan, P., van Luenen, S., Garnefski, N., & Kraaij, V. (2020). Psychosocial interventions enhance HIV medication adherence: A systematic review and meta-analysis. *Journal of Health Psychology*, 25(10-11), 1326-1340.

### 04/09 Class 12, Cancer

Sarafino, chapter 14 (second half)

Yanez, B., McGinty, H. L., Buitrago, D., Ramirez, A. G., & Penedo, F. J. (2016). Cancer outcomes in Hispanics/Latinos in the United States: An integrative review and conceptual model of determinants of health. *Journal of Latina/o psychology*, 4(2), 114.

Košir, U., Loades, M., Wild, J., Wiedemann, M., Krajnc, A., Roškar, S., & Bowes, L. (2020). The impact of COVID-19 on the cancer care of adolescents and young adults and their well-being: Results from an online survey conducted in the early stages of the pandemic. *Cancer*, *126*(19), 4414-4422.

Gall, A., Leske, S., Adams, J., Matthews, V., Anderson, K., Lawler, S., & Garvey, G. (2018). Traditional and complementary medicine use among indigenous cancer patients in Australia, Canada, New Zealand, and the United States: A systematic review. *Integrative Cancer Therapies*, 17(3), 568-581.

#### 04/16 Class 13, Heart Disease and Stroke

Sarafino, chapter 14 (first half)

Betensky, J. D., Contrada, R. J., & Glass, D. C. (2011). Psychosocial Factors in Cardiovascular Disease: Emotional States, Conditions, and Attributes. In A. Baum, T. A. Revenson, & J. E. Singer (Eds.), *Handbook of health psychology*, 2<sup>nd</sup> Edition (pp. 635-661).

Farris, S. G., & Kibbey, M. M. (2022). Be brave, BE-FIT! A pilot investigation of an ACT-informed exposure intervention to reduce exercise fear-avoidance in older adults. *Cognitive Behaviour Therapy*, 51(4), 273-294.

Sumner, J. A., Kubzansky, L. D., Elkind, M. S., Roberts, A. L., Agnew-Blais, J., Chen, Q., ... & Koenen, K. C. (2015). Trauma exposure and posttraumatic stress disorder symptoms predict onset of cardiovascular events in women. *Circulation*, 132, 251-259.

Ferdinand, K. C., & Nasser, S. A. (2020). African-American COVID-19 mortality: A sentinel event.

### 04/23 Class 14, Future of Health Psychology

Sarafino, Chapter 15

Taylor, S. (2022). The psychology of pandemics: Lessons learned for the future. *Canadian Psychology / Psychologie canadienne*, 63(2), 233–246. <a href="https://doi.org/10.1037/cap0000303">https://doi.org/10.1037/cap0000303</a>

Penedo, F. J., Oswald, L. B., Kronenfeld, J. P., Garcia, S. F., Cella, D., & Yanez, B. (2020). The increasing value of eHealth in the delivery of patient-centred cancer care. *The Lancet Oncology*, 21(5), e240-e251.

Kazak, A. E., Nash, J. M., Hiroto, K., & Kaslow, N. J. (2017). Psychologists in patient-centered medical homes (PCMHs): Roles, evidence, opportunities, and challenges. *American Psychologist*, 72(1), 1