HLTH671- Public Health Communication

Course Description: Social and behavioral science (SBS) is a core area in public health. A critical SBS skill is the ability to develop and communicate health information effectively to and on behalf of the public that is socially and culturally appropriate for intended audiences, including at risk or disproportionately burdened populations, to increase knowledge AND empower positive change in health-related attitudes, beliefs, and behavior. This is an introductory graduate course in public health communication; as such, we will be examining basic concepts, theoretical foundations, and behavioral and social scientific research and practice in the field of public health communication to gain an understanding of how health messages are received and influence individual- and population-level health behavior. The overall aims of the course are to: (a) survey the field of public health communication using relevant theories, research, and practice; (b) introduce foundational concepts, mechanisms, and strategies of public health communication to understand population- and community-specific health communication campaign/intervention design and evaluation; and (c) practice developing and pretesting public health communication products used to inform, engage, and persuade individuals to promote and sustain positive health behavior change at the community- and population-level.

Each class will consist of theoretical, methodological, or practice-based lectures, presentations, and discussions. Students will be expected to demonstrate their learning through active engagement with course content through verbal and nonverbal communication, as well as by developing and assessing public health communication products.

Mandatory Course Pre- and Co-requisites: None

Preferred Pre- and Co-requisites: Program Planning and Evaluation, Social Science Research Methods

Restrictions: Non-SPH students must obtain permission from the instructor prior to registering. Credit only granted for: HLTH670 or HLTH671 and HLTH672. Formerly: HLTH670.

Course Learning Objectives (LOs):
Upon completing this course, the student will be able to:
LO1. Describe the uses, benefits, and limitations of health communication theory and practice in public health.

LO2. Recognize and critique public health mass media events (historical and current), communicated through different communication channels.

LO3. Use a health communication process and planning approach to design a public health communication product (individually) and campaign (team-based).

LO4. Apply persuasive communication theories and best practices to the design of health communication campaigns and interventions to promote public health and well-being.

LO5. Understand the importance of power differentials, gender, culture, and other population characteristics to the design of public health communication campaigns and interventions.

LO6. Demonstrate the use of formative research in the design of health communication campaigns and interventions to promote health education and behavior change communication efforts in public health.

LO7. Demonstrate the skills related to developing and pretesting targeted public health education materials and communication products.

LO8. Apply program evaluation methods to the design and assessment of health communication campaigns and interventions to promote individual, community, and population health and wellness and to prevent chronic illness and disability across the lifespan.

Program Competencies (PCs) Addressed in this Course:
The following competencies for the MPH in Behavioral and Community Health are addressed in this course:

PC1. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.

PC2. Identify individual, organizational and community concerns, assets, resources and deficits for social and behavioral science interventions.

PC3. Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.

PC4. Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.

PC5. Serve as a behavioral and community health resource person.

PC6. Communicate and advocate for public health.

PC7. Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.

PC8. Identify the causes of social and behavioral factors that affect health of individuals and populations.

PC9. Describe the role of social and community factors in both the onset and solution of public health problems.

PC10. Describe the merits of social and behavioral science interventions and policies.

PC11. Apply ethical principles to public health program planning, implementation and evaluation.

PC12. Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.

PC13. Describe the roles of history, power, privilege, and structural inequality in producing health disparities.

PC14. Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.

Required Texts and Other Readings:

Required

Additional weekly readings and course resources will be posted on ELMS (see Course Outline).

**Recommended Reading Material:**

*Making Health Communication Programs Work: A Planner’s Guide* (NCI/CDC)

Theory at a glance: A guide for health promotion practice.

Clear & simple: developing effective print materials for low literate readers:

CDC’s Clear Communication Index Website, Widget, and Score Sheet:
https://www.cdc.gov/ccindex/

CDC’s Social Media Website, Guidance Tools, and Toolkit:
https://www.cdc.gov/socialmedia/
https://www.cdc.gov/socialmedia/tools/guidelines/

NIH: National Cancer of Institute
Health Information Nationals Trends Survey
https://hints.cancer.gov/

National Resource Center for Health IT’s Accessible Health Information Technology (IT) for Populations with Limited Literacy: A Guide for Developers and Purchasers of Health IT:
https://healthit.ahrq.gov/sites/default/files/docs/page/LiteracyGuide_0.pdf

Informational Websites:
http://www.cdc.gov/brfss/
http://www.cdc.gov/healthyyouth/data/yrbs
http://www.healthypeople.gov/2020/topicsobjectives2020

**Required Technology and Other Materials**: Students are required to access course materials and stay abreast of important course announcements, updates, and materials via the course webpage on ELMS:

**Course Communication**: Important course communications (e.g., regarding class cancellation, room change, or other timely announcements) and course material (e.g., supplemental readings and resources to assist with application exercises) will be disseminated via the webpage on ELMS:
https://umd.instructure.com/courses/1239472. All students are expected to access our course webpage.
at least twice a week (before and after class) on ELMS to keep abreast of important class announcements, to engage with course material, and to communicate with peers and the instructor via email and messaging features on ELMS.

**Course Requirements and Expectations:** Instructional methods include but are not limited to: (a) lectures for general orientation and specific instruction, (b) readings, resources, and practice exercises to facilitate understanding and application of course concepts and material, and (c) assessments (e.g., small group exercises; individual and team assignments; and knowledge checks) to evaluate student learning. In addition to the required text, supplementary readings and resources will be posted on ELMS. The reading list may be supplemented during the course. Students are responsible for all the material presented in the course, including instructor or student led discussions, and assigned readings. **The success of the course will depend heavily upon active class participation.** That said students are strongly encouraged to present their thoughts and ideas; ask critical questions; and listen and respond openly and respectfully to the ideas and inquiries of others. Expectations for our classroom environment include: **open, honest, and respectful dialogue nurtured and sustained by a climate of positive regard for self and others demonstrated by calm, assertive communication.**

**Major Graded Assignments:** See below for a list of all assignments contributing to student learning and performance evaluation in this course, as well as their respective due date and any specific instructions regarding assignment submission to the instructor. **All assignments are due at 11:59 p.m. on the dates provided unless otherwise noted.**

**Assignment and Submission Instructions**

<table>
<thead>
<tr>
<th>Assignment and Submission Instructions</th>
<th>Due Date</th>
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<tbody>
<tr>
<td><strong>Class Engagement and Participation:</strong> 30 points total</td>
<td>Various</td>
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<tr>
<td>6 unannounced opportunities @5 points each</td>
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<td>via ELMS upon instructor announcement</td>
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<tr>
<td><strong>Lead Author (LA) Presentation &amp; Health Communication Campaign/Intervention Review Presentations:</strong> 50 points total</td>
<td>Various</td>
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<tr>
<td>All related materials to facilitate presentation to and discussion with peers/instructor due via assignment link on ELMS prior to assigned presentation date</td>
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<tr>
<td><strong>LA Peer Evaluations:</strong> 5 points</td>
<td>Various</td>
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<tr>
<td>Audience members are expected to submit an LA presentation form for each peer presentation within 24 hours of the presentation online via ELMS</td>
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<tr>
<td><strong>Knowledge Check (Midterm): 100 points</strong></td>
<td>3/13</td>
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<td>online via ELMS</td>
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<td><strong>Final Exam:</strong> 100 points</td>
<td>5/15</td>
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<td>online via ELMS</td>
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<td><strong>Health Communication Campaign/Intervention Course Project</strong></td>
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<td><strong>Individual Health Communication Abstract:</strong> 50 points</td>
<td>5/10</td>
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<td>Due via assignment link on ELMS</td>
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<td><strong>Individual Health Communication Final Product:</strong> 50 points</td>
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<td><strong>Design &amp; Application Exercises (Team Tasks): 4@20 points each; 80 points total</strong></td>
<td>2/22</td>
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<tr>
<td><strong>Team Task 1</strong></td>
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<td>Due via assignment link on ELMS</td>
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Team Task 2
Due via assignment link on ELMS

Team Task 3
Due via assignment link on ELMS at 4:00 p.m.; bring copies to class (electronic or paper)

Team Task 4
Due via assignment link on ELMS

Final Team Project Presentation: 100 points
All related materials to facilitate presentation to and discussion with peers/instructor due via assignment link on ELMS prior to class at 4:00 p.m.

Self and Team Member Evaluations: 5 points
Submit self and team member evaluation forms (merged into one document if possible) online via ELMS

Final Team Project Presentation Audience (Peer) Evaluation: 5 points
Submit peer (audience) evaluation forms for all team project presentations (merged into one document if possible) online via ELMS

Description of Major Course Requirements

Class Engagement and Participation (6@ 5 points each; 30 points total): Students are expected to attend and to participate actively in all scheduled class meetings in order to obtain the full value of this course. Attendance will not be taken; however, written opportunities to demonstrate class participation (in addition to verbal) will be given to students who are present for class and who thoughtfully participate on randomly selected dates. Typically, participation credit will be based on “rapid responses” (RRs) or student participation related to class lecture, discussions, and/or activities. Rapid responses are 2-3 minute student responses to an instructor-posed question related to class content. Students are expected to provide well-crafted and thoughtful responses and to submit responses at the end of the class meeting or online via ELMS. Full credit for class engagement will be based on the quality of the response provided or participation displayed.

Lead Author (LA) Presentation (50 points) OR Health Communication Campaign/Intervention Review (50 points):

OPTION 1 - Lead Author (LA) Presentation (50 points): Student will be assigned an article for which s/he will take the role of lead author. In this capacity, the student will lead the class in a review of the assigned article and discussion (interactive Q&A) of content in his/her choice format. All presentations, including Q&A, must be 15-20 minutes in length. Presentations will be graded based on comprehensiveness and quality of content; delivery of content, including format, oral presentation, and class interaction/stimulation of dialogue; and timing. LA presentations are meant to stimulate connections between course material and real-world application. When reading, presenting, and discussing assigned material, think about how you and your team could apply health communication education, research, and practice content to your course project and overall public health communication toolkit in addition to dissecting, presenting, and critiquing article content related to public health communication components, theories, processes, methods, special emphasis areas, and/or health campaign/intervention planning, implementation, and evaluation.
OPTION 2 - Health Communication Campaign/Intervention Review (50 points): Student will be assigned a Health Communication Campaign/Intervention for which s/he will take the role of evaluating the campaign/intervention based on principles discussed in the course. In this capacity, the student will lead the class in a review of the assigned campaign/intervention and discussion (interactive Q&A) of content in his/her choice format. All presentations, including Q&A, must be 15-20 minutes in length. Presentations will be graded based on comprehensiveness and quality of content; delivery of content, including format, oral presentation, and class interaction/stimulation of dialogue; and timing. These review presentations are meant to stimulate connections between course material and real-world application. When reading, presenting, and discussing assigned health communication campaign, think about how you and your team could apply health communication education, research, and practice content to your course project and overall public health communication toolkit in addition to dissecting, presenting, and critiquing article content related to public health communication components, theories, processes, methods, special emphasis areas, and/or health campaign/intervention planning, implementation, and evaluation.

LA Peer Evaluation (5 points): Each student’s LA presentation will be evaluated by audience members, or peers, present at the time of delivery. Audience or peer evaluations will include quantitative (numerical responses to evaluative statements on a 5-point Likert-type scale) as well as qualitative feedback (open-ended written comments from peers). Each student will receive a total quantitative score averaging peer responses to evaluative statements (out of a total of 5 points) as well as qualitative feedback provided by peers. The LA peer evaluation form can be found on the ELMS site for the course and should be submitted via the relevant LA peer evaluation link (named according to the LA name of the article) on ELMS by 11:59 p.m. the day following the presentation.

Knowledge Check (Midterm; 100 points): Students will engage in one knowledge check at midterm to evaluate student learning. Learning assessments will cover assigned readings; instructor or student led PowerPoint or multimedia presentations and discussions; lectures; and content discussed during large and small group discussions covered prior to midterm. The knowledge check may consist of multiple choice questions, matching, short answer, or brief written responses.

Final Exam (100 points): At the end of the semester, students will take a cumulative final exam to demonstrate acquisition of course learning objectives and core competencies. The final exam may consist of multiple choice questions, matching, short answer, or brief written responses.

Health Communication Campaign Course Project: In teams of 3-4, students will be asked to design, develop, and plan an implementation and evaluation for a health communication campaign prioritizing a population and public health concern assigned by the instructor. Health campaigns will be comprised of 3-4 individual health information products (depending on the number of assigned team members) devised by team members. Together, these individual products will comprise the team’s health communication campaign. For each campaign, teams will conduct formal literature
reviews and prepare formative research plans to inform the development of health information messages and products. In addition to conducting formal literature searches to research your chosen health behavior and population of interest, formative research findings may be used to craft public health messages and communications toward intended populations.

Each member of the team is responsible for directing and managing the creation and development of one of the health information products. Based on team decision-making, team members may be expected to contribute to the creation and development of all campaign products per assignments from the product lead. Options for campaign products are described below.

Individual Component (100 points total):

Health Communication Product (50 points) and Written Abstract (50 points): Each student will design and produce one of the following health campaign products for his/her team. Each student will turn in an extended abstract (1500-2000 words, single-spaced, Times New Roman font) describing the: (a) public health concern, (b) rational for priority population (c) SMART health communication campaign aims (e.g., cognitive, attitudinal, behavioral), (d) theoretical framework and persuasive communication strategies and techniques used in his/her individual product development, and (e) campaign product testing and evaluation methods, including sampling methods.

1. Information graphics or infographics: Information architecture to complement your team’s health campaign. In other words, design a graphic or visual representation of information, data, or knowledge pertinent to your team’s overall message or to a particularly dense or complex component of your team’s message to facilitate information processing. Infographics may be disseminated through other media channels.

2. Print media: Brochure, fact sheet, poster, or other signage related to team’s health campaign to be distributed in the community, doctors’ offices, health departments, or other types of health care facilities.

3. Multimedia: Computer-based, interactive digital media and content pertinent to team’s health campaign that uses a combination of more than one of the following content forms or mediums: including audio, computer animation, still images, text, video, and interactive content (e.g., a public service announcement [PSA], video presentation providing an individual narrative or testimony related to public health concern of interest, educational or informational video including audio, text, and/or still images).

3. Social Media: Some type of social media (e.g., social media website [e.g., Facebook, Instagram, social networking site, or blog/microblog [e.g., Twitter]) used to promote your team’s health communication campaign, monitor community interest, and evaluate network reach. NOTE. Your team is encouraged to design the site to disseminate or
Team Components (185 points total):

**Design and Application Exercises (a.k.a., Team Tasks: 80 points; 4 Deliverables @ 20 points each):** Team-based activities and application exercises are designed to facilitate teamwork on team-project related work. All assigned activities are expected to be completed and turned in to the instructor as requested so that she may provide feedback to your team to inform future activity and project design. **The full completion of all activities and tasks will contribute to successful course projects and course participation.** More information regarding graded activities will be described in class and disseminated via ELMS.

**Final Team Project Presentation (100 points):** Persuasive presentation to community members and key stakeholders (e.g., community advisory board) to kick-off group’s health campaign. At a minimum, presentations should include: (a) an overview of your team’s overarching public health campaign message or call to action as well as a description of all of the health communication materials created for health campaign and how they relate to the overall campaign objectives and messages (e.g., print media, PSA, new media); (b) campaign goals, strategies, and SMART objectives, (c) rationale for product development based on persuasive communication theories, principles, design methodologies, and practice; (d) outline and protocol for campaign development and testing; and (e) discussion of how your team would evaluate campaign development (process) and success (impact and outcome). Your team presentation should be **12-15 minutes**, with **3-5 additional minutes for Q&A** after your presentation. You are free to craft any style/mode of presentation you wish. Oral presentations are scheduled for the last week of class. Additional details about final group presentations will be available on ELMS.

**Self and Team Member Evaluations (5 points):** Each student will evaluate his/her (self) contribution to the team project as well as that of each of his/her team members using the self and team member evaluation form provided via the ELMS site for the course. Each student will receive a total quantitative score averaging self and team member responses to five evaluative statements using a 5-point, Likert-type scale (out of a total of 5 possible points) as well as qualitative feedback provided by self and team members. Self and team member evaluations are due online via ELMS by 11:59 p.m. 5/9.

**Health Communication Campaign Team Project Presentation Audience (Peer) Evaluation (5 points):** Each team’s final presentation of their team project will be evaluated by audience members, or peers, using the team project audience evaluation form provided via the ELMS site for the course. Each team will receive a total quantitative score averaging audience responses to five evaluative statements using a 5-point, Likert-type scale (out of a total of 5 possible points) as well as qualitative feedback provided by audience members. Team project audience evaluation forms are due online via ELMS by 11:59 p.m. 5/9.

University Course Related Policies:

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Jackson
All University of Maryland-approved course policies are provided at the following website:
http://www.ugst.umd.edu/courserelatedpolicies.html

Policy descriptions, resources, and links to official policy documents are provided for:

**Academic Integrity:** What is cheating? What is plagiarism? What is the Honor Pledge?

**Code of Student Conduct:** What behavior is prohibited?

**Sexual Misconduct:** What to do in case of sexual harassment or sexual assault.

**Discrimination:** Procedures to prohibit discrimination, complaints about discrimination, harassment, and retaliation.

**Accessibility:** Information about disability support services (DSS) and accommodations.

**Attendance, Absences, or Missed Assignments:** The student must notify the instructor in a timely manner (typically first week of class). Read this prior to Schedule Adjustment date.

**Student Rights Regarding Undergraduate Courses:** What should I find in the course syllabus? Am I allowed to see my exams after they are graded?

**Official UMD Communication:** Use of email, communication with faculty, communication about cancelled class meetings, and weather-related or other urgent notifications.

**Mid-Term Grades:** Provided for 100 and 200 level courses, and all student athletes.

**Complaints About Course Final Grades:** Questions about course grades should first be addressed to the course instructor.

**Copyright and Intellectual Property:** Who owns the work that I produce in class?

**Final Exams:** Final exams are scheduled by the University.

**Course Evaluations:** The School of Public Health is committed to the use of student course evaluations for improving the student experience, course and curriculum delivery, and faculty instruction.

**Campus Resources:** ELMS, counseling, learning workshops, tutoring, writing help, questions about graduation, adding or dropping classes, withdrawing from the semester, etc.

**Course Procedures and Policies:**

**Policy Related to Class Attendance:** Students are expected to complete all reading assignments and to come to class prepared for discussion and debate. Although attendance is not mandatory in accordance with University policy, regular attendance and engaged participation with course material is critical to learning and successful attainment of the course objectives and curriculum competencies. As such, attendance will not be taken; however, written opportunities to demonstrate class participation (in addition to verbal) will be given to students who are present for class and who thoughtfully participate on randomly selected dates. Typically, participation credit will be based on “rapid responses” or student participation and engagement in class lecture, discussions, and/or activities. Rapid responses are 2-3-minute student responses to (an) instructor-posed question(s) related to course content. Students are expected to provide well-crafted and thoughtful responses and to submit responses at the end of the class session or online via ELMS. Full credit for class participation will be based on: (a) student attendance to the class session in which participation is evaluated, and (b) the quality of the response provided or participation displayed.
Students who anticipate they will miss a class must contact the instructor before class; students who have an emergency absence must contact the instructor as soon as possible.

**Policy Related to Late Assignments:**
- Assignments turned in up to 24 hours late will be accepted but the grade for the assignment will be reduced by 15% of the grade you would have otherwise received.
- Assignments turned in more than 24 hours late will not be graded and will contribute zero points toward your final grade.
- Exceptions to this policy will be made only for reasons that are beyond your control, and discussed in advance of the due date when possible. Examples of these circumstances include: serious illness impacting a significant portion of the time you had to do the assignment, or death in your immediate family (you may be asked for documentation). Examples of circumstances that are generally NOT exceptions include coming down ill the night before an assignment was due or conflicts with work.
- It is the responsibility of the student to verify not only that an assignment was submitted, but that an attachment was made, and it was the correct attachment, and in the correct file format.

**Grievances Policy and Procedure:** If you feel you have lost points unfairly on a knowledge check question, in-class or team-project related assignment, you may submit a typed statement to the instructor via ELMS mail. The statement must include a logically-deduced argument advocating your position. In addition, please detail why the response you provided or answer you choose for the question is better than the response suggested or answer identified as correct. **NOTE.** Questions regarding in-class or project-related assignments/exam grades/scoring will only be discussed for one week after the assignment/exam has been returned. After this period, grades will not be changed. However, general discussion and/or review of questions and/or past material are welcome.

**Meetings and Conferences Procedures:** If you would like assistance with or to further discuss course material(s), please contact the instructor as soon as the need arises to schedule a meeting. **Do not wait until the night before an assignment or knowledge check due date, or until the end of the course.** When scheduling the appointment, please identify the topic(s) of concern so as to optimize our meeting time. Moreover, be prepared for the meeting by compiling specific questions you have about the course material and/or challenges you are experiencing.

**Inclement Weather / University Closings / Emergency Procedures:** In the event that the University has a delayed opening or is closed for an emergency or extended period of time, the instructor will communicate to students regarding schedule adjustments, including rescheduling of examinations and assignments due to inclement weather and campus emergencies.

**Grading Procedures:**

<table>
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<tr>
<th>Component</th>
<th>Total Possible Points</th>
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<tbody>
<tr>
<td>Class Engagement and Participation:</td>
<td></td>
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<tr>
<td>6 unannounced opportunities @5 points each</td>
<td>30 points</td>
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<tr>
<td>Lead Author (LA) OR Health Communication Campaign Review:</td>
<td>50 points</td>
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<tr>
<td>LA Presentation Audience Evaluation</td>
<td></td>
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<tr>
<td>(Average of Quantitative Evaluations Received from Peers)*</td>
<td>5 points</td>
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<tr>
<td>Knowledge Check (Midterm):</td>
<td>100 points</td>
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<tr>
<td>Final Exam:</td>
<td>100 points</td>
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Health Communication Campaign Course Project

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Jackson
Individual Points

Individual Health Communication Abstract: 50 points
Individual Health Communication Final Product: 50 points

Team Points

Design and Application Exercises (Team Tasks): 4@20 points each 80 points
Final Team Presentation: 100 points
Self and Team Member Evaluations (Average of Quantitative Evaluations Received from Peers)* 5 points

Team Project Audience Evaluation
(Average of Quantitative Evaluation Received from Peers)* 5 points

*Peer Qualitative Comments will also be provided.

TOTAL Possible: 575 Points

Marking System at the University of Maryland, College Park:
The University’s marking system defining the standards for letter grades is as follows:

- A+, A, A- denotes excellent mastery of the subject and outstanding scholarship
- B+, B, B- denotes good mastery of the subject and good scholarship
- C+, C, C- denotes acceptable mastery of the subject
- D+, D, D- denotes borderline understanding of the subject, marginal performance, and it does not represent satisfactory progress toward a degree
- F denotes failure to understand the subject and unsatisfactory performance

The marking system defines the standards associated with letter grades under the previous, as well as the present, grading policy.

Course Outline / Course Calendar:

<table>
<thead>
<tr>
<th>Session</th>
<th>Date</th>
<th>Topic</th>
<th>Readings (To Be Completed by Session Date) &amp; Assignments (See Specific Due Date)</th>
</tr>
</thead>
</table>
| # 1     | 1/30 | Course Introduction and Discussion of Course Project, Team Assignments, & Team Contract, Introduction to Health Communication & Social Marketing, Overview of the Health Communication Process Model (listen to audio lecture on ELMS) | **Readings:** Parvanta, Nelson, & Harner Text: Chapters 1-3
**Assignments:**
(1) Turn in “About You” online via ELMS on related discussion board by 11:59 p.m. 2/9
(2) Signed Syllabus Statement Due by 11:59 p.m. 2/9 via ELMS
(3) Sign-Up for LA Presentations or Health Communication Campaign/Intervention Reviews by 2/5 11:59PM. |
| # 2 | 2/6 | **Stage 1 of the Health Communication Process Model: Planning & Strategy Development**  
(1) Situation and Audience Analysis: The Role of Formative Research in Health Communication Campaigns and Interventions  
(2) Identifying Health Communication Objectives and Strategies  
(3) Communicating The Evidence-Based Plan: *The Creative Brief* | **Readings:**  
Parvanta, Nelson, & Harner Text: Chapter 9, Chapter 11 pages 315-330  
**Supplemental Readings:**  
*Making Health Communications Programs Work* (NCI’s PinkBook):  
(1) Stage 1 (pp. 15 - 51)  
(2) Communication Research Methods (pp. 126-167)  
Review the following websites:  
[www.cdc.gov/healthyyouth/data/yrbs](http://www.cdc.gov/healthyyouth/data/yrbs)  
**Assignments:**  
(1) Team Activity: Review and Complete Team Contract - Due by 11:59 p.m. 2/9  
(2) Team Activity: Review Team Task 1 & 2: Assignment of teammate responsibilities |
| LO3, LO6 | PC1, PC2, PC3, PC8, PC9, PC12, PC14 |

| # 3 | 2/13 | (1) Foundations of Health Behavior Change Communication  
(2) Communication for Change: Identifying Key Theories, Frameworks, and Mechanisms for Behavior Change Communication – (Theory Part I)  
(2) Team Project-Related Lecture: Dr. Horowitz | **Readings:**  
Parvanta, Nelson, & Harner Text: Chapters 8, 14, & Appendix 2 pp. 33-37  
**Watch the following video:**  
Surgeon General and Elmo team up to talk vaccinations –  
[https://www.youtube.com/watch?v=ZpOHlzLP-g](https://www.youtube.com/watch?v=ZpOHlzLP-g) |
<table>
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<tr>
<th>Week</th>
<th>Due Date</th>
<th>Assignments</th>
<th>Review the following</th>
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<th>Readings</th>
<th>Supplemental Reading</th>
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<td>7</td>
<td>3/13</td>
<td>Knowledge Check</td>
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<td>8</td>
<td>3/20</td>
<td>Spring Break</td>
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<td>LO3, LO8</td>
<td>PC3, PC10, PC11</td>
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<td>Parvanta, Nelson, &amp; Harner Text: Chapter 12</td>
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<td><strong>Supplemental Reading:</strong></td>
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<td><em>Making Health Communication Programs Work</em> (NCI’s PinkBook): Stage 4 (pp. 107-123)</td>
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<td><strong>Assignment:</strong></td>
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<td>Review Team Task 4; Discuss teammate responsibilities</td>
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<td><strong>LO3, LO8, LO6</strong></td>
<td>PC3, PC4, PC7, PC12</td>
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| 10 | 4/3   | (1) Communication for Change: Identifying Key Theories and Mechanisms for Behavior Change Communication – (Theory Part II)  
(2) Team Project-Related Q&A                                                                 | Review Parvanta, Nelson, & Harner Text: Chapter 8  
Review the following:  
*Theory at a glance: A guide for health promotion practice.*  
|    |       | LO1, LO4                                                                                                          | PC4, PC7                                                                                      |                                                                                                       |
| 11 | 4/10  | Applying Learner Verification and the CDC Clear Communication Index to Pretest Materials  
Peer Critiques of Team Task 3: Mock Focus Groups  
Review the following:  
CDC’s Clear Communication Index Website, Widget, User Guide, and Score Sheet:  
[https://www.cdc.gov/ccindex/](https://www.cdc.gov/ccindex/)  
[https://www.pdfiller.com/jsfiller-desk7/?projectId=175399603&expId=3267&expBranch=2-956240f660cb47348f6fe0ad1e76a13b](https://www.pdfiller.com/jsfiller-desk7/?projectId=175399603&expId=3267&expBranch=2-956240f660cb47348f6fe0ad1e76a13b) | Team Task 3 Due beginning of class 4/10 via ELMS and bring copies to class (paper or electronic) |
|    |       | LO5, LO6, LO7                                                                                                    | PC3, PC4, PC11, PC13                                                                          |                                                                                                       |
| 12 | 4/17  | Revisiting Social Marketing  
LA Presentation: Social Marketing  
Q&A regarding Team Task 4 and Final Team Presentations                                                                 | Parvanta, Nelson, & Harner Text: Chapters  
Source Effects on Persuasion and Behavior Change

(1) Key Source Characteristics and Effects on Persuasion

(2) LA Presentations:
News Media and Risk Communication

Readings:
Parvanta, Nelson, & Harner Text: Chapter 13 & 15


Supplemental Reading:


Assignment:
Team Task 4 Due by 11:59 p.m. 4/24
| # 14 | 5/1 | **Health Communication in Resource-Poor Countries**-  
1) HCCR Presentation:  
   - Entertainment Education  
(2) Course Wrap-Up | **Readings:**  
Parvanta, Nelson, & Harner Text: Chapter 16  
; CAMPAIGN MATERIALS  
http://www.thebiggerpictureproject.org/  
**Assignment:**  
Finish team health campaign presentations |
| LO1, LO2, LO5 | PC2, PC4, PC7, PC8, PC9, PC11, PC12, PC13, PC14 |

| # 15 | 5/8 | **Team Health Campaign Presentations** | **Assignment:**  
Submit (1) peer (audience) evaluations for all team presentations (merged into one document if possible), and (2) self and team member evaluations (merged into one document if possible) online via ELMS by 11:59 p.m. 5/9 |
| LO1, LO3, LO4, LO5, LO6, LO7, LO8 | PC1, PC2, PC3, PC4, PC5, PC6, PC7, PC8, PC9, PC11, PC12, PC14 |

| #16 | 5/15 | **NO CLASS MEETING – Final Exam:**  
Sessions 1-15 | Online via ELMS by 11:59 p.m. 5/15 |

*Individual Final Abstracts and Health Communication Products Due 5/10 at 11:59 p.m. via assignment links on ELMS.*

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**Statement of Understanding**

18 HLTH671, Spring 2019  
Jackson
I have read, reviewed and understand the content (expectations, due dates and policies) of this syllabus.

________________________________________  _________
(Signature)  (Date)