# APS Interest Group on Psychology Education

# **Resource Material Submission – Front Page**

Title of Material	Health Psychology Tutorial for First Year	
Author(s)	Jacquelyn Cranney & Sue Morris	
Description/Aim	The aim of this tutorial is to introduce students to health psychology and how as a psychological scientist one might approach health behavior issues and problems.  Specifically, the expected specific SLOs are: 1) understand what health psychology is 2) appreciate the factors influencing health and illness in individuals 3) start to think about the factors involved in behaviour modification programs.	
Benefits of Resource	Age-relevant health issues.	
Issues for Consideration	NA	
Approximate Duration	50 minutes	
Primary Content/ Process Topic	Health and Wellbeing	
Other Categories	Applied psychological concepts, application of research methods	
Intended student level (e.g. Secondary, Undergraduate Introductory, Undergraduate 4 <sup>th</sup> Yr/ Honours, Post-graduate)	Undergraduate – Introductory	
Type of Material (e.g. classroom materials, assessment, lectures, teaching tips, articles, syllabi, simulated learning environments.)	Classroom Practical/Tutorial	
Format of Material	Pdf file	
Further Information Contact (email only)	j.cranney@unsw.edu.au	
Review Requested (Nb: A 'Yes' response to this category indicates that you would like feedback/comments on the materials via email.)	Yes	
Evaluative Data Included (E.g. Student evaluation, comments etc.)	No	

## **Description**:

The aim of this first year practical is to introduce students to health psychology, how it might relate to people like themselves, and how as a psychological scientist one might approach health behaviour issues and health behaviour promotion. The two main activities are group activities, where students need to first analyses scenarios, and secondly, play specific roles in order to problem solve a health issue. Specifically, the expected specific SLOs are:

- 1) understand what health psychology is
- 2) appreciate the factors influencing health and illness in individuals
- 3) start to think about the factors involved in behaviour modification programs.

## Scholarship/Evaluation of Student Learning/Continuous Improvement:

This has been running in first year psychology at UNSW since about 2003. We usually do not stray long on the deeper analysis of the case studies with the questionnaire and tickbox, but a brief overview of those alternative methods of analysis at least gives students a taste of the variety of methodological approaches that are possible (GA 2). In terms of the binge-drinking prevention exercise, there could be a broad range of experience with this issue in the class, from those who are at college and intimately aware of prevention issues, to those who have no idea of this issue. This different level of experience could be drawn out in the discussion. These activities tap into the UNSW/ALTC Guideline for Learning, "1. Effective learning is supported when students are actively engaged in the learning process", and "14. Learning cooperatively with peers - rather than in an individualistic or competitive way - may help students to develop interpersonal, professional, and cognitive skills to a higher level" (see http://www.guidelinesonlearning.unsw.edu.au).

## **Health Psychology Tutorial for First Year**

- 1. Health Psych Definition (5 mins)
- 2. Case studies (15 mins)
- 3. Health Promotion video and discussion (25 mins)

## **Student Learning Outcomes**

By the end of this tutorial, students should

- 1) understand what health psychology is
- 2) appreciate the factors influencing health and illness in individuals
- 3) start to think about the factors involved in behaviour modification programs

## **Definition**

Start with asking students what they think health psychology is. Then give this definition:

"Health psychology is the study of the relation between psychological variables and health, which reflects the view that both mind and body are important determinants of health and illness" (Baron, 2000, p. 490).

Now ask students to come up with some psychological variables that impact health. Later, we will be showing them a model from Myers, but for now they should think about a few key variables that help them with the case studies.

<u>Case studies</u>. Divide class into groups of 3 (sitting next to each other). Give them one case study each.

<u>Aim</u>: Introduce students to the main factors influencing health/illness in individuals (like themselves).

## Materials:

OH of instructions, Myers diagram, and each case study, and paper copies of case studies.

## Instructions:

"Given the following (hypothetical) descriptions of <u>first year university students</u>, estimate <u>how many colds</u> they will have this year (average is about two per year; assume no genetic differences in susceptibility, and equal exposure to virus). General assumption: the higher/longer the level of stress experienced, the more compromised the immune system, and the greater the likelihood of catching a cold."

## Vincent

Vincent is a first year student living in college, and he has been having a great time. The college has almost compulsory social activities every night. He does not smoke, but he has been drinking a lot during the college social occasions, and experimenting with other drugs. His study has been sporadic, and his grades have been variable—that is, he is scraping by. He plays squash and football for the college, and thus has been getting regular exercise. He eats mostly healthy food. He does not have to worry too much about money. When faced with a new situation, he either rushes in head first, or adopts a "don't care" attitude. He has made a lot of friends at college, and generally has a very positive outlook on life.

## Andy

Andy lives at home with his parents, and works in their shop on the weekends. His parents have high expectations of him, and he focuses a lot on his studies. He spends most of his time on the computer--working, exploring the internet, or communicating with old high school friends (whom he rarely sees anymore). He hasn't really made any new friends at the university, and he feels relatively isolated. He has a slightly negative outlook on life. He gets no exercise, other than essential walking. He eats enough good food, supplied by his parents. When away from his parents, he smokes a lot (average one pack a day).

## Karen

Karen is a first year university student. Her parents, who do not live in Sydney, have bought her a studio apartment close to the university. She does not exercise, and eats mostly junk food. She is slightly overweight. She has very quickly thrown herself into the club scene, and is drinking and smoking heavily and experimenting with drugs. She only gets about 5 hours of sleep each night. She does not enjoy the challenges of tutorial work, and skips a lot of her classes. So far she is just scraping by in terms of grades. She often wakes up feels very low, but quickly deals with that by hanging out with her club friends.

#### Lee

Lee lives in an apartment with one friend and one other person. Each week-day, she walks 30 minutes to and from university. She is finding the course relatively demanding, but interesting. Her grades so far have been reasonably good. Although initially nervous about going to university, she has adapted well, because she enjoys thinking about different ways to handle new situations. She works as a waitress much of the weekend, in order to pay the rent. Occasionally the work is very stressful, but most of the time it is okay. She feels tired a lot, but often has difficulty going to sleep. She is sometimes a bit lonely, because her other friends are out having fun while she has to work. She tries to catch up with them on her free days. She does not smoke or take illegal drugs, and when she drinks, she rarely gets plastered. She eats reasonably healthy food. She has a relatively positive outlook on life.

<u>Discussion</u>. Put the groups' initial estimates up on the board, for each case study. Then show the Myers overhead and discuss (a) how many of these factors they included in their decisions, and which they omitted (b) where ONE of the case studies fall on these dimensions, and its relevance to health risk as per <u>Myers diagram</u>. If time permits you can critically discuss eg difference between threat/challenge and optimistic/pessimistic (which are probably the factors they failed to consider).

Their estimates can be further refined by using the following questionnaire, which quantifies the impact of each of the variables in the model. It should be possible to calculate a score for their case study, which can be compared to their estimate (NB: we probably won't have time to do the calculation, simply to explain that this can be done).

## Write down your rating of your student case study on the following dimensions:

1. Amount of regular exercise:

None/very little (0)----- a lot (10)

2. Amount of social support:

None/very little (0)----- a lot (10)

3. Amount of smoking/drinking/drug use:

None/very little (0)----- a lot (10)

4. Positive/optimistic vs negative/pessimistic view of life:

Positive/optimistic (0)-----average/realistic (5)----negative/pessimistic (10)

5. Reaction to new situations/tasks/events:

See as challenge (0)-----assess realistically (5)-----see as threat (10)

Reverse your scores on questions 1 and 2. Add to obtain a total for each of the student case studies. How do the ratings compare with your "cold" estimates, particularly in terms of the rank-order of the case studies?

## **Health Promotion**

<u>Aim</u>: Stimulate students thinking re: theoretical and practical factors involved in behaviour change programs.

Materials: video, OHs with table, scenario.

**Video** (5 min): Show drink driving TV ad (we used the "lights out in brain" ad; a copy of this or similar is likely available from the NSW Roads & Traffic Authority). Put up the table overhead. Tell students to make notes as they watch, to answer the questions on the overhead. Ask them to describe the nature/ <u>structure</u> of the program. Ask them to identify who is the <u>target</u> audience? Who are the other <u>stakeholders</u>? What do you think would be the <u>barriers</u> to those individuals "taking on" the message? How might you <u>evaluate</u> the effectiveness of the program? Any other <u>comments</u> (eg how you might improve the ad or the campaign as a whole)? Can do this with another existing program if time permits (e.g. slip, slop, slap; Norm; microsleeps; mental health; smoking; grim reaper (AIDS)).

Component	Drink Driving	
Program/structure (What?)	Late night TV commercial	
Target (Who?)	Drink drivers (especially those only slightly over the limit)	
Stakeholders (Who Else?)	Publicans; Alcohol Companies; Hospitals/Health Care system; Police; Victims	
Barriers (Why Not?)	Social pressure; Culture ("she'll be right mate")	
Evaluation (How Well?)	Change in BAL readings; Police incidents; Self report	
Comments	Effective "everyman" approach (ie a couple of beers will do it) Explicit link to brain function very effective	

**Health Promotion Design** (20 min): Divide into groups of 6. Put up the **binge-drinking scenario** on the OH projector. Ask them to (a) choose a leader, (b) adopt roles of relevant stakeholders (eg have a student resident on the working party), (c) think up a program, keeping in mind the main categories in the overhead. They will have 10 min to discuss it as a group (working party), and 2 min for each group to talk to the class about what they devised and/or two issues about their program. If they ask, tell them they have a budget of \$9,000 for the year (300 students). They should complete the table (above) for their program.

## Scenario: Binge drinking in a university residential college

You are the director of a university residential college. The college has a culture of heavy drinking, particularly as part of the initiation of first year students. You realize that there are certain positive aspects to such behaviour in terms of socialization. The negatives include the mess that is often made, as well as the possible temporary effects on the cognitive functioning of the drinkers, such as compromised problem solving and general lack of organization. Over the past year, however, there have been some serious incidents involving police investigations, such as one incident of alleged gang rape, and the permanent brain injury to one drunken resident who fell down some stairs. You are obliged to implement a strategy that will decrease the probability of such incidents occurring again.

<u>Your task</u>: Put together a working party, come up with a strategy, including a way in which you can evaluate that strategy, and be prepared to give a 2-minute oral presentation to the Board of Governors of the College about your strategy or about at least two issues regarding your proposed program.

Some dimensions to keep in mind when instituting a program to modify people's healthrisk behaviour:

- initial analysis of the short- and long-term positive and negative consequences
  of engaging in healthy behaviours (vs. maintaining unhealthy behaviours)-- focus
  on the <u>barriers</u> to behaviour change (eg financial/physical constraints)
- involvement of respected or popular individuals in program
- training in skills needed
- adequate social support
- the necessity of *program evaluation*
- tailoring the program to meet needs of target population
- manipulations to increase individual commitment/self-determination/self-efficacy
- motivations/constraints/involvement of ALL stakeholders
- effective methods of information/message delivery
- resource constraints

"Health psychology is the study of the relation between psychological variables and health, which reflects the view that both mind and body are important determinants of health and illness" (Baron, p. 490).

## **Case Studies**

<u>Aim</u>: An introduction to some of the main factors influencing health/illness in individuals like ourselves.

Given the following (hypothetical) descriptions of <u>first</u> <u>year university students</u>, estimate <u>how many colds</u> they will have this year

- average is about two per year
- assume no genetic differences in susceptibility
- assume equal exposure to virus

General assumption: the higher/longer the level of stress experienced, the more compromised the immune system, and the greater the likelihood of catching a cold.

## Vincent

Vincent is a first year student living in college, and he has been having a great time. The college has almost compulsory social activities every night. He does not smoke, but he has been drinking a lot during the college social occasions, and experimenting with other drugs. His study has been sporadic, and his grades have been variable—that is, he is scraping by. He plays squash and football for the college, and thus has been getting regular exercise. He eats mostly healthy food. He does not have to worry too much about money. When faced with a new situation, he either rushes in head first, or adopts a "don't care" attitude. He has made a lot of friends at college, and generally has a very positive outlook on life.

## **Andy**

Andy lives at home with his parents, and works in their shop on the weekends. His parents have high expectations of him, and he focuses a lot on his studies. He spends most of his time on the computer--working, exploring the internet, or communicating with old high school friends (whom he rarely sees anymore). He hasn't really made any new friends at the university, and he feels relatively isolated. He has a slightly negative outlook on life. He gets no exercise, other than essential walking. He eats enough good food, supplied by his parents. When away from his parents, he smokes a lot (average one pack a day).

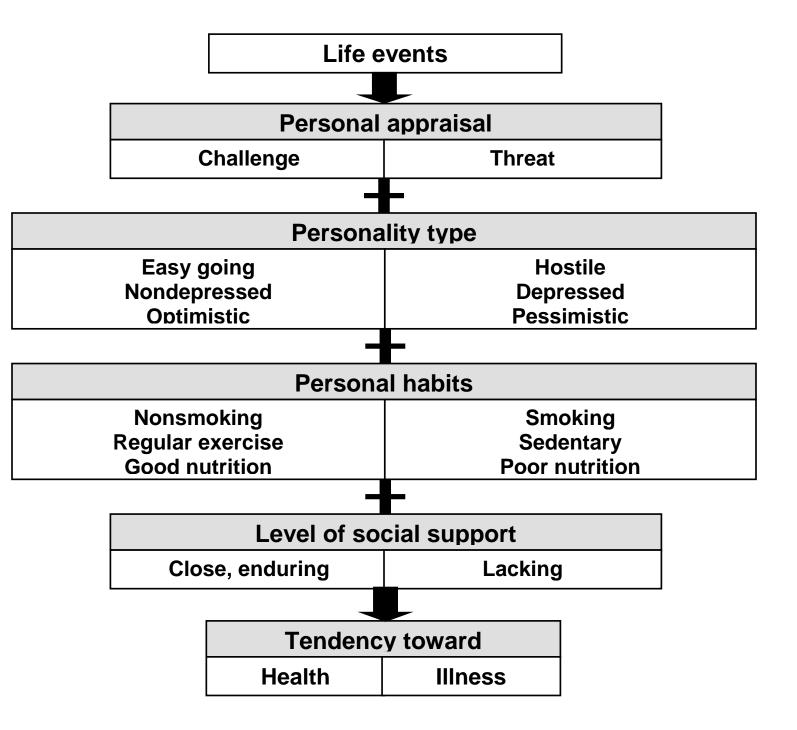
## Karen

Karen is a first year university student. Her parents, who do not live in Sydney, have bought her a studio apartment close to the university. She does not exercise, and eats mostly junk food. She is slightly overweight. She has very quickly thrown herself into the club scene, and is drinking and smoking heavily and experimenting with drugs. She only gets about 5 hours of sleep each night. She does not enjoy the challenges of tutorial work, and skips a lot of her classes. So far she is just scraping by in terms of grades. She often wakes up feels very low, but quickly deals with that by hanging out with her club friends.

#### Lee

Lee lives in an apartment with one friend and one other person. Each week-day, she walks 30 minutes to and from university. She is finding the course relatively demanding, but interesting. Her grades so far have been reasonably good. Although initially nervous about going to university, she has adapted well, because she enjoys thinking about different ways to handle new situations. She works as a waitress much of the weekend, in order to pay the rent. Occasionally the work is very stressful, but most of the time it is okay. She feels tired a lot, but often has difficulty going to sleep. She is sometimes a bit lonely, because her other friends are out having fun while she has to work. She tries to catch up with them on her free days. She does not smoke or take illegal drugs, and when she drinks, she rarely gets plastered. She eats reasonably healthy food. She has a relatively positive outlook on life.

(from Myers, D.G. (2003). Psychology (7<sup>th</sup> ed.). Michigan: Worth Publishers, p553)



Now, for each of the questions below, write down your rating of each of the student case studies on the following dimensions:

Amount of regular exercise:
 None/very little (0)----- a lot (10)

2. Amount of social support:

None/very little (0)----- a lot (10)

3. Amount of smoking/drinking/drug use:

None/very little (0)----- a lot (10)

4. Positive/optimistic vs negative/pessimistic view of life:

Positive/optimistic (0)-----average/realistic (5)----negative/ pessimistic (10)

5. Reaction to new situations/tasks/events:

See as challenge (0)-----assess realistically (5)-----see as threat (10)

Reverse your scores on questions 1 and 2. Add to obtain a total for each of the student case studies. How do the ratings compare with your "cold" estimates, particularly in terms of the rank-order of the case studies?

	Vincent	Andy	Karen	Lee
Easygoing				
Optimistic				
Depressed				
Smoking				
Drinking				
Drugs				
Tired				
Exercise				
Nutrition				
Open to Challenge				
Social Support				
Study/Work Stress				
Other Lifestyle				
Other				
TOTAL IMPACT		·		

	Vincent	Andy	Karen	Lee
Easygoing				
Optimistic	+	-		+
Depressed				
Smoking		-	-	
Drinking	-		-	
Drugs	-		-	
Tired			-	-
Exercise	+	-	-	+
Nutrition	+	+	-	+
Open to Challenge	+		-	+
Social Support	+	-		+
Study/Work Stress		-	-	-
Other Lifestyle	-	<u> </u>		
Other				
TOTAL IMPACT	+	-	-	+

	Drink Driving	
Program/ structure (What?)		
Target (Who?)		
Stakeholders (Who else?)		
Barriers to Adoption (Why Not?)		
Evaluation (How Well?)		
Comments		

## **HEATH RISK INTERVENTION PROGRAM**

<u>Aim</u>: Consideration of theoretical and practical factors involved in behaviour change programs.

## Procedure:

- Divide into groups of 6.
- Randomly choose one person in each group to be the leader.
   Give them the scenario.
- The others will take on roles advised by the leader (and/or agreed to by the group).
- At the end, one group will be chosen to discuss their program

Scenario: Binge drinking in a university residential college

You are the director of a university residential college. The college has a culture of heavy drinking, particularly as part of the initiation of first year students. You realise that there are certain positive aspects to such behaviour in terms of socialisation. The negatives include the mess that is often made, as well as the possible temporary effects on the cognitive functioning of the drinkers, such as compromised problem solving and general lack of organisation. Over the past year, however, there have been some serious incidents involving police investigations, such as one incident of alleged gang rape, and the permanent brain injury to one drunken resident who fell down some stairs. You are obliged to implement a strategy that will decrease the probability of such incidents occurring again.

<u>Your task</u>: Put together a working party, come up with a <u>strategy</u>, including a way in which you can <u>evaluate that strategy</u>, and be prepared to give an oral presentation to the Board of Governors of the College. Be prepared to talk about at least two issues regarding your proposed program.

	Binge Drinking
Program/ structure (What?)	
Target (Who?)	
Stakeholders (Who else?)	
Barriers to Adoption (Why Not?)	
Evaluation (How Well?)	
Comments	

Some dimensions to keep in mind when instituting a program to modify people's health-risk behaviour:

- initial analysis of the short- and long-term positive and negative consequences of engaging in healthy behaviours (vs. maintaining unhealthy behaviours)-- focus on the <u>barriers</u> to behaviour change (eg financial/physical constraints)
- involvement of respected or popular individuals in program
- training in skills needed
- adequate social support
- the necessity of program evaluation
- tailoring the program to meet needs of target population
- manipulations to increase individual commitment/self-determination/self-efficacy
- motivations/constraints/involvement of ALL stakeholders
- effective methods of information/message delivery
- resource constraints