

Winter 1992
E. Lichtenstein
359 Straub

OFFICE HOURS:
Tu, Th 3:30-5:00
by Appt.: 484-2123

SYLLABUS: HEALTH PSYCHOLOGY (PSY 410/610)

This course aims to provide an overview of the field of Health Psychology with an emphasis on clinical applications. Students are expected to have taken (or take concurrently) Research Methods in Psychology, plus some upper division psychology courses.

Text: Gatchel, R.J., Baum, A., and Krantz, D. An Introduction to Health Psychology. 2nd ed., N.Y. Random House, 1989.

Format: Lecture with discussion

Requirements/Grading:

Undergraduates (410): Midterm exam (40% of grade)
Final exam (60%)

Graduate students (610): Midterm exam (30%)
Final exam (40%)
Term paper (30%)

Exams: Exams will be a mix of objective ($\leq 20\%$), short answer, short essay. Sample questions will be distributed before the exam to help guide your studying and give you an idea of the instructor's exam question style.

Paper: This is for graduate students (610) only. Graduate students should consult with the instructor and choose a topic by February 6.

Lecture Topics and Readings:

All readings besides the text are in the Reserve Book Room. Journal articles can also be found in the original journals elsewhere in the library.

PART I: Basic Processes/Concepts (1/7-1/14)

1/7: Overview, Stress

Text: Chapters 1 & 2

Matarazzo, J.D. Behavioral health's challenge to academic, scientific and professional psychology. American Psychologist, 1982, 37, 1-14.

NOTE: No lecture is planned on the Physiological Bases of Behavior and Health. You should read and study this important chapter on your own.

1/9: Stress, Social Support

Text: Chapter 3, pp. 209-210

Baum, A., Gatchel, R.J. & Schaeffer, M.A. Emotional, behavioral, and physiological effects of chronic stress at Three Mile Island. Journal of Consulting & Clinical Psychology, 1983, 51, 565-572.

1/14: Control, Coping

Text: Chapter 4

PART II: Behavioral Factors in Illness (1/16-1/30)

1/16: Overview and Cardiovascular Disease

Text: Chapter 5, pp. 210-213

1/21: Guest: Neuromuscular Analysis & Biofeedback Control

Text: Chapter 7, pp. 231-239

1/23: Cardiovascular Disease

Text: Chapter 5

Levenkron, J.C. & Moore, L.G. The Type A behavior pattern: Issues for intervention research. Annals of Behavioral Medicine, 1988, 10, 78-83.

1/28: Guest: Personal Models of Illness

Text: pp. 91-93, 192 (Naive Health Theories), 290-300 (Common Sense Models).

Hampson, S.E., Glasgow, R., & Toobert, D.J. Personal Models of Diabetes and Their Relations to Self-Care Activities. Health Psychology, 1990, 9(5), 632-646.

1/30: Cancer, Immune Disorders

Text: Chapter 6

Spiegel, D., et al. Effect of psychosocial treatment on survival of patients with metastatic breast cancer. The Lancet, 1989, 888-891.

PART III: Applications in Medical Settings**2/4: Compliance, Doctor-Patient Communication**

Text: Chapter 8

2/6 Guest: Psychosocial Factors in Diabetes

Text: Chapter 8

Cox, D.J. & Gonder-Frederick, L. Major development in behavioral diabetes research. Journal of Consulting and Clinical Psychology, in press.

Glasgow, R.E., et al. Improving self-care among older patients with Type II diabetes: The sixty something study. Submitted for publication.

2/11 MIDTERM EXAM**2/13 Behavioral Assessment/Intervention**

Text: Chapters 9, 10

Burish, T.G., et al. Preparing patients for cancer chemotherapy: Effect of coping preparation and relaxation interventions. Journal of Consulting and Clinical Psychology, 1991, 59, 518-525.

Gruen, W. Effects of brief psychotherapy during the hospitalization period on the recovery process in heart attacks. Journal of Consulting and Clinical Psychology, 1975, 43, 223-232.

2/18 Guest: Pain & Pain Management

Text: Chapter 11

To be assigned

2/20 Guest: Behavioral Interventions to Prevent STD

Text: Chapter 10

Kelly, J.A., et al. Behavioral intervention to reduce AIDS risk activities. Journal of Consulting and Clinical Psychology, 1989, 57, 60-67.

Kelly, J.A., et al. HIV risk behavior reduction following intervention with key opinion leaders of population: An experimental analysis. American Journal of Public Health, 1991, 81, 168-171.

PART IV: Risk Factors and Their Modification

2/25 Overview, Obesity

Text: Chapters 12, 13

Jeffrey, R.W. Risk behavior and health: Contrasting individual and population perspectives. American Psychologist, 1989, 44, 1194-1202.

2/27 Obesity

Text: Chapter 12

Brownell, K.D. & Wadden, T.A. The heterogeneity of obesity: Fitting treatments to individuals. Behavior Therapy, 1991 (22), 153-177.

3/3 Smoking/Overview

Text: Chapters 12, 13

Matarazzo, J.D. (See reading for 1/7; sections on smoking).

Lichtenstein, E. & Glasgow R.E. Smoking cessation: What have we learned in the last 10 years. Journal of Consulting Clinical Psychology, in press.

3/5 Smoking Cessation

Hollis, J., et al. Nurse-assisted smoking counseling in medical settings: Minimizing demands on physicians. Preventive Medicine, 1991, 20, 497-507.

3/10 Guest: Smoking Prevention with Adolescents

Lichtenstein, E., Nettekoven, L., & Ockene, J.K. Community intervention trial for smoking cessation (COMMIT): Opportunities for community psychologists in chronic disease prevention. American Journal of Community Psychology, 1991, 19, 17-39.

3/12 Community-Wide Health Promotion

Farquhar, J.W., et al. The Stanford five city project: An overview in Matarazzo, J.D., et al. (Eds.) Behavioral Health: A Handbook of Health Enhancement and Disease Prevention, 1984, pp. 1154-1165.

Rank	Life Event	Mean Value
1.	Death of spouse	100
2.	Divorce	73
3.	Marital separation from mate	65
4.	Detention in jail or other institution	63
5.	Death of a close family member	63
6.	Major personal injury or illness	53
7.	Marriage	50
8.	Being fired at work	47
9.	Marital reconciliation with mate	45
10.	Retirement from work	45
11.	Major change in the health or behavior of a family member	44
12.	Pregnancy	40
13.	Sexual difficulties	39
14.	Gaining a new family member (e.g., through birth, adoption, oldster moving in, etc.)	39
15.	Major business readjustment (e.g., merger, reorganization, bankruptcy, etc.)	39
16.	Major change in financial state (e.g., a lot worse off or a lot better off than usual)	38
17.	Death of a close friend	37
18.	Changing to a different line of work	36

The Measurement of Hassles

Recently, psychologists have examined the role of minor stresses and strains in the development of illness. Some sample items from the "hassles" scale (Kanner et al., 1981) are included below as an early example of how these stresses and strains are measured.

Severity

- 1 somewhat severe
- 2 moderately severe
- 3 extremely severe

Instructions

Hassles are irritants that can range from minor annoyances to fairly major pressures, problems, or difficulties. They can occur few or many times. Listed below are a number of ways in which a person can feel hassled. First, circle the hassles that have happened to you in the past month. Then, look at the numbers on the right of the items you circled. Indicate by circling a 1, 2, or 3 how severe each of the circled hassles has been for you in the past month. If a hassle did not occur in the last month do *not* circle it.

Hassles

- | | | | |
|----------------------------------|---|---|---|
| 1. Misplacing or losing things | 1 | 2 | 3 |
| 2. Troublesome neighbors | 1 | 2 | 3 |
| 3. Social obligations | 1 | 2 | 3 |
| 4. Inconsiderate smokers | 1 | 2 | 3 |
| 5. Thoughts about death | 1 | 2 | 3 |
| 6. Health of a family member | 1 | 2 | 3 |
| 7. Not enough money for clothing | 1 | 2 | 3 |
| 8. Concerns about owing money | 1 | 2 | 3 |

A Measure of Perceived Stress

Because people vary so much in what they consider to be stressful, many researchers feel that perceived stress is a better measure of stress than are instruments that measure whether people have been exposed to particular events. To address this issue, Cohen et al. (1983) developed a measure of perceived stress, some items of which are provided below. Note the differences between this measure of stress and the items on the Social Readjustment Rating Scale in Table 7.1.

For each question, choose from the following alternatives:

- 0 never
- 1 almost never
- 2 sometimes
- 3 fairly often
- 4 very often

Items and Instructions for the Perceived Stress Scale

The questions in this scale ask you about your feelings and thoughts during the last month. In each case, you will be asked to indicate how often you felt or thought a certain way. Although some of the questions are similar, there are differences between them, and you should treat each one as a separate question. The best approach is to answer each question fairly quickly. That is, don't try to count up the number of times you felt a particular way, but, rather, indicate the alternative that seems like a reasonable estimate.

1. In the last month, how often have you been upset because of something that happened unexpectedly?
2. In the last month, how often have you felt nervous and "stressed"?
3. In the last month, how often have you found that you could not cope with all the things that you had to do?
4. In the last month, how often have you been angered because of things that happened that were outside your control?
5. In the last month, how often have you found yourself thinking about things that you had to accomplish?
6. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?