

## Psychosocial Foundations of Health and Medicine Syllabus

Rutgers University

Summer III Semester 2015

01:830:308:H2 and 01:920:308:H2

### **Instructors (in alphabetical order):**

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**All Office Hours:** By appointment.

Course format: ONLINE

### **Prerequisites**

General Psychology, 830:101 OR Introduction to Sociology, 920:101

Ability to make all in-person class sessions

Mandatory in-person sessions:

There are three mandatory in-person meetings for this course, including the midterm and final exams. These in-person sessions are NON-NEGOTIABLE and are a pre-requisite for taking this course. If you cannot make any of these sessions, you should drop the course prior to the end of drop/add period on 7/8/15.

All sessions 10:05-11:55 a.m:

1. Class session: 7/10/15 in Tillett 253
2. Midterm: 7/24/15 in Tillett 253
3. Final: 8/12/15 in Tillett 251

### **Course Materials**

All course materials will can be found in Sakai. Click on Course Content - you will see a tab for each topic, which will link you to all assigned readings, videos, etc.

## Course Description

This course will provide students with the conceptual, methodological, and substantive background in psychosocial perspectives on health that relate to the new MCAT module on the social and behavioral determinants of health. PLEASE NOTE: This is not an MCAT prep course and as such, we will not directly be teaching "to the test." That said, our topics loosely follow many of the foundational concepts covered on the new sections of the exam, and taking this course will augment your studying and help with preparation.

## Course Objectives

1. To understand the basic methods and concepts used in psychological and sociological research.
2. To identify the ways that psychosocial factors affect patients' health and health behaviors.
3. To recognize the ways that social stratification (e.g. race, class, gender, and age) affect access to health-enhancing resources and services.
4. To understand the psychosocial factors that affect diagnosis and treatment.
5. To help students apply above principles to hypothetical doctor-patient relationships.

## Course Policies

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### Prerequisites

General Psychology (830:101) OR Introduction to Sociology (920:101).

Ability to make all three in-person class sessions.

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### Exams and in-person meetings

There are three mandatory in-person meetings for this course, including the midterm and final exams. These in-person sessions are NON-NEGOTIABLE and are a pre-requisite for taking this course. If you cannot make any of these sessions, you should drop the course prior to the end of drop/add period on 7/8/15.

All sessions 10:05-11:55 a.m

Class session: 7/10/15 in Tillett 253

Midterm: 7/24/15 in Tillett 253

Final: 8/12/15 in Tillett 251

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### Dropping the course

In order to withdraw from a course, it is not sufficient to stop posting assignments or contributing to discussions. In accordance with university policy, students wishing to withdraw from a course must do so formally through the Registrar's office. It is the student's responsibility to complete all forms. If this is not done, the instructor must assign a grade of F at the end of the semester.

**Note that drop/add period ends on Wednesday, July 8th.** This is the last day to drop the course without a W. Please read through the syllabus and explore this Sakai site fully to ensure that you understand the workload and demands of this course prior to that date.

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### Technical requirements

Ability to use Sakai.

As the course delivery and communication takes place via screen, students will benefit from a consistent, secure access to a personal computer with up-to-date software (Flash and video player). A high-speed Internet connection is recommended.

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### Technical problems

In an online environment, there is always a possibility of technical issues (e.g., lost connection, hardware or software failure, systemic failure). Many of these can be resolved relatively quickly, but if you wait to the last minute before due dates, the chances of these glitches affecting your success are greatly increased. Please plan appropriately. If a problem occurs, it is essential you take immediate action to resolve the problem. Technical questions should be directed to the Rutgers OIRT (Office of Instructional and Research Technology):

- [sakai@rutgers.edu](mailto:sakai@rutgers.edu)
- 848-445-8721
- 56 Bevier Rd., Piscataway NJ
- <https://oirt.rutgers.edu/>

If there is a systemic failure with Sakai or Rutgers' network, we will communicate by e-mail. Check your e-mail for instructions and relevant information (e.g. extensions on assignments).

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### Grading Policy - Methods of Evaluation

Midterm: 25%

Final: 30%

Discussions: 25% (lowest discussion score dropped)

Assignments: 20% (lowest assignment score dropped)

Grading Scale						
<b>A =</b> 90+	<b>B+ = 85-</b> 89	<b>B = 80-</b> 84	<b>C+ = 75-</b> 79	<b>C = 70-</b> 74	<b>D = 60-</b> 69	<b>F = Below</b> 60

Note: There will be no adjustments to grades unless there is a grading error. FINAL GRADES ARE NOT ROUNDED UP.

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## Exams

Exam content will include all material from the course - articles, book chapters, videos, TED Talks, discussions, etc. Exam questions can come from ANY of the discussion threads for a given topic. Therefore, you should read through all the discussion groups to see the main points covered -- not only the one assigned to you.

We will post a study guide before the midterm and the final.

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## Extra credit

There will be an opportunity to earn extra credit by participating in research experiments. You will be able to sign up at the in-person class session on 7/10.

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## Late Policy

Unless prior arrangements are made with the instructors, no late assignments will be accepted. Exceptions will be in the case of emergencies, and late penalties will be made on a case-by-case basis. Notify the instructors, via email, in case of an emergency.

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## Academic Integrity

The consequences of scholastic dishonesty are very serious. Rutgers' academic integrity policy is at <http://academicintegrity.rutgers.edu/>. Please familiarize yourself with the policy.

Resources for instructors (and students) can be found at

<http://academicintegrity.rutgers.edu/resources>

**Academic integrity means, among other things:**

- Develop and write all of your own assignments.
- Show in detail where the materials you use in your papers come from. Create citations whether you are paraphrasing authors or quoting them directly. Be sure always to show source and page number within the assignment and include a bibliography in the back.
- Do not fabricate information or citations in your work.
- Do not facilitate academic dishonesty for another student by allowing your own work to be submitted by others.

Take a 20 minute interactive-tutorial on Plagiarism and Academic

Integrity: <http://www.scc.rutgers.edu/douglass/sal/plagiarism/intro.html>

If you are in doubt about any issue related to plagiarism or scholastic dishonesty, please contact us.

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**Rutgers Academic Support Services**

Rutgers has a variety of resources for academic support. For more information,

check <http://www.rutgers.edu/academics/academic-support>

Rutgers has Learning Centers on each campus where any student can obtain tutoring and other help. For information, check <http://lrc.rutgers.edu/>

Rutgers also has a Writing Center where students can obtain help with writing skills and assignments. Learn more here: <http://wp.rutgers.edu/tutoring/writingcenters>

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### Rutgers Student Accommodations

The Rutgers Office of Disability Services evaluates students and provides documentation about necessary accommodations. Students who need accommodations in class must do so through the Rutgers Disabilities Services Office. See <https://ods.rutgers.edu/students> for details.

Students with disabilities requesting accommodations can do so here:

<http://disabilityservices.rutgers.edu/request.html>

If you need special accommodations, let me know early in the semester. If you need extra time on exams, you must bring me Letter of Accommodation from the disability office to sign at least one week prior to the first exam.

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### Disability Accommodations

Please refer to the accommodations policy for students with disabilities: <http://disabilityservices.rutgers.edu>

Students with disabilities requesting accommodations can do so here:

<http://disabilityservices.rutgers.edu/request.html>

If you need special accommodations, please bring this during THE FIRST WEEK OF THE COURSE. If you need extra time on exams, you must bring me the form from the disability office to sign at least ONE WEEK prior to the first exam. You will not need to do this for subsequent exams.

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### Counseling

College can be an overwhelming time. If you find yourself having a difficult time coping, please refer to <http://rhscaps.rutgers.edu/> where you can see an overview of support services available at Rutgers.

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### Communication

For general questions about the course, policies, etc., and clarification questions that other students could benefit from, post in the General Discussion Forum. For personal questions and issues, e-mail one of us directly. We will respond to your e-mail within 24-48 hours.

Make sure to read your e-mail and all the announcements on Sakai. This is a fluid class and there may be occasionally changes in pacing. There may be important changes in assignments and important clarifications; you are responsible for all changes announced.

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### Netiquette

A Web-based classroom is still a classroom, and comments that would be inappropriate in a regular classroom are likely to be inappropriate in a Web-based course as well. Treat your instructor and your fellow students with respect.

When corresponding with your instructor and classmates through email or on the discussion forums, please take the time to be grammatically correct and use a positive tone. Please also refrain from using all CAPITAL LETTERS, as this is often interpreted as shouting. Treat your instructor and fellow students with respect at all times, and in all communication.

### *Citations and Other Etiquette Sources*

See infographic below for 15 rules of netiquette: <http://blogs.onlineeducation.touro.edu/15-rules-netiquette-online-discussion-boards/>

*The Core Rules of Netiquette*, excerpted from the book *Netiquette*, by Virginia Shea. The Core Rules of Netiquette can be accessed at <http://www.albion.com/netiquette/corerules.html>.

Further information was taken from Arlene H. Rinaldi's *The Net: User Guidelines and Netiquette*, which can be found at <http://courses.cs.vt.edu/~cs3604/lib/Netiquette/Rinaldi/>.

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### Discussion Guidelines and Rubric

A key distinguishing feature of an online course is that communication occurs solely via the written word. Because of this, the body language, voice tone, and instantaneous listener feedback of the traditional classroom are all absent. These facts need to be taken into account both when contributing messages to a discussion and when reading them. Keep in mind the following points:

## Important reminders and guidelines for discussion boards

- Posts should have a conversational tone; they should not sound like essays.
- End every post by signing your name.
- Brevity is best: Be as concise as possible when contributing to a discussion; posts should be on-topic, concise, and to-the-point. Web-based courses require a lot of reading, and your points might be missed if hidden in a flood of text. Break up long sections of text into paragraphs to aid in readability.
- Posts should be original and introduce new information. Do not duplicate someone else's post.
- Post early. Do not wait until the last minute. Posting at the last minute does not give students adequate time to respond to your posts, and will not earn maximum points.
- Tone down your language and keep a straight face: given the absence of face-to-face clues, written text can easily be misinterpreted and come across as harsher since there are no physical gestures or voice inflections to give clues. Avoid sarcasm, strong language, and the excessive use of exclamation points.
- The recorder is on: Think carefully about the content of your message before contributing it. Once sent to the group, there is no taking it back. If you feel particularly strongly about a point, it may be best to write it first as a draft and then to review it, before posting it, in order to remove any strong language.

- Condescending, derogatory, and otherwise "inflammatory" posts will not be tolerated. If you disagree with someone, do so respectfully and without insulting the person.
- Test for clarity: messages may often appear perfectly clear to you as you compose them, but turn out to be perfectly obtuse to your reader. One way to test for clarity is to read your message aloud to see if it flows smoothly. If you can read it to another person before posting it--even better.
- Offer evidence-based support (of own experience and/or cited research) at least once per thread.
- Apply normative English and grammar (you are not texting or on social media).
- Focus on meaningful discussion - adding meaningfully to the thread - rather than number of posts. Otherwise, it becomes clear that you are posting just to try to meet the requirements.
- Change the subject line as necessary to reflect the nature of your post.
- Make sure that your post contains some reference back to the original discussion question - do not go off on tangents. Stay on track by referring back to the original question.
- Be forgiving: if someone states something that you find offensive, mention this directly to the instructors. Remember that the person contributing to the discussion is also new to this form of communication. What you find offensive may quite possibly have been unintended and can best be cleared up by the instructors.

- Here are some suggestions for meaningful contribution: suggest solutions, point out problems, *respectfully* disagree, discuss an issue on which you would like some feedback, offer a different perspective about an idea, share a personal experience related to the subject, discuss how you have applied the concepts to your personal/professional life.

- Netspeak: Although electronic communication is still young, many conventions have already been established. As mentioned above, DO NOT TYPE IN ALL CAPS. This is regarded as shouting and is out of place in a classroom.

Here is the rubric we will use for the discussion forums.

Psychosocial Foundations Discussion Board Rubric. Maximum: 12 points per week

Post thoughtful, well-reasoned expressions of your ideas about the topic at hand and respond to your classmates' ideas in the same way.

DISCUSSION GROUP INSTRUCTIONS: You will be split into groups of approximately 5; each group will have a different question. You should a) post an initial response to the question, b) post a response to a peer from another group and c) respond to all your comments (you may receive comments from an instructor or a peer). *Your lowest discussion score will be dropped.*

Below is a grading rubric for class participation based on your responses to class and group discussions. You want to be in the "Good" column for most of your communications each week.

LECTURE TOPICS AND READINGS:

**\*\***(All dates are approximate and changes will be announced on Sakai)**\*\***

Unless noted otherwise, all assignments are due 11:59 p.m. on the date listed

Date	Topic	Assigned Reading	Assignment Due
M 7/6	Introduction	Lilienfeld- Psychology and Scientific Reasoning  Cockerham The Blackwell Companion to Medical Sociology Chapter 1	
T 7/7, W 7/8, Th 7/9	Psychological and Sociological Perspectives on Health and Illness	Druss, B. G. and Walker, E. R. (2011). Mental disorders and medical comorbidity. <i>Robert Wood Johnson Foundation</i> , 1-26.  Sarafino, E. P. (2005). Context and perspectives in health psychology. In S. Sutton, A. Baum, & M. Johnston (Eds.), <i>The Sage handbook of health psychology</i> (pp. 1 -27). London: SAGE Publications.  Conrad. 1992. "Medicalization and Social Control." <i>Annual Review of Sociology</i> 18: 209-232.  Video: Ted Oransky. "Are We Over-Medicalized?" TED Talk 2012	Introductory post in discussion forums due W 7/8

F 7/10	<p>In class mtg</p> <p>Human Development</p>	<p>In class – 10:05-11:55 a.m. – Tillett 253</p> <p>Giddens, Duneier, Appelbaum, and Carr. "Socialization and the Life Cycle." Ch 4 in Introduction to Sociology. (81-96)</p> <p>Mikulincer, M., &amp; Shaver, P. R. (2005). Attachment security, compassion, and altruism. <i>Current Directions in Psychological Science</i>, 14(1), 34-38.</p> <p>Video: Piaget's Stages of Development</p>	<p>Discussion post on Psychological and Sociological Perspectives on Health and Illness</p> <p>due F 7/10</p>
M 7/13, T 7/14	<p>Memory and Learning</p>	<p>Assmann. "Collective Memory and Cultural Identity." <i>New German Critique</i> 65: 125-133.</p> <p>Holguin-Veras. 2012. "Japan's 1000 Year Old Warning." LA Times, 3/11/2012</p> <p>Lustig, C., Shah, P., Seidler, R., &amp; Reuter-Lorenz, P. A. (2009). Aging, training, and the brain: a review and future directions. <i>Neuropsychology review</i>, 19(4), 504-522.</p> <p>Videos: Elizabeth Loftus TED TALK Picking Cotton</p>	<p>Assignment 1 on Human Development</p> <p>due M 7/13</p>

<p>W 7/15 Th 7/16</p>	<p>Language and Cognition</p>	<p>Pawlikowska, T., Zhang, W., Griffiths, F., Van Dalen, J., &amp; van der Vleuten, C. (2012). Verbal and non-verbal behavior of doctors and patients in primary care consultations—How this relates to patient enablement. <i>Patient education and counseling, 86</i>(1), 70-76.</p> <p>Bjorklund, D. F. (Ed.). (2013). Children's strategies: Contemporary views of cognitive development. Chapter 4 Pages 93-112. Psychology Press.</p>	<p>Discussion post Learning and Memory due W 7/15</p>
<p>F 7/17, M 7/20</p>	<p>Emotion</p>	<p>Gross, J. J., &amp; Barrett, L. F. (2011). Emotion generation and emotion regulation: One or two depends on your point of view. <i>Emotion review, 3</i>(1), 8-16.</p> <p>Roter, D. L., Frankel, R. M., Hall, J. A., &amp; Sluyter, D. (2006). The expression of emotion through nonverbal behavior in medical visits. <i>Journal of general internal medicine, 21</i>(S1), S28-S34.</p> <p>Video: Simulated Interview Demonstration of Patient and Her Husband</p>	<p>Assignment 2 on language and cognition due M 7/20</p>
<p>T 7/21, W 7/22, Th 7/23</p>	<p>Illnesses and Psychiatric Disorders</p>	<p>Kleinman, Arthur. 1988. "What Is Psychiatric Diagnosis?" Pp. 5-17 in Rethinking Psychiatry: From Cultural Category to Personal Experience. New York: Free Press.</p> <p>Horwitz &amp; Wakefield. 2007. The Loss of Sadness: How Psychiatry Transformed Normal Sorrow into Depressive Disorder. (27-52).</p>	<p>Discussion Post on Emotion due T 7/21</p>

		<p>Ng, C. G., Dijkstra, E., Smeets, H., Boks, M. P., &amp; de Wit, N. J. (2013). Psychiatric comorbidity among terminally ill patients in general practice in the Netherlands: a comparison between patients with cancer and heart failure. <i>British Journal of General Practice</i>, 63(606), e63-e68.</p> <p>Video: Hikikomori in Japan</p>	
F 7/24	Midterm	IN CLASS 10:05-11:55 a.m. – Tillet 253	
M 7/27, T 7/28	Stigma and Discrimination	<p>Williams &amp; Sternthal. 2010. "Understanding Racial-Ethnic Disparities in Health: Sociological Contributions." <i>Journal of Health &amp; Social Behavior</i> 51:15-27.</p> <p>Saguy and Gruys. "Morality and Health: New Media Constructions of Overweight and Eating Disorders." (pages 127-145)</p> <p>Video: Weight Bias in Healthcare</p>	Assignment 3 on Illness and Psychiatric disorders
W 7/29, Th 7/30	Personality, Identity, and Status	<p>Kaiser, Karen. 2008. "The meaning of the survivor identity for women with breast cancer." <i>Social Science &amp; Medicine</i> 67(1): 79-87.</p> <p>Chapman, B. P., Roberts, B., &amp; Duberstein, P. (2011). Personality and longevity: knowns, unknowns, and implications for public health and personalized medicine. <i>Journal of aging research</i>, 2011.</p>	Discussion Post on Stigma and Discrimination due W 7/29

		Personality differences between doctors and their patients: implications for the teaching of communication skills. <i>Medical Education</i> 2004; 38: 177–186	
F 7/31, M 8/3	Social Psychology	<p>Stone, J., &amp; Moskowitz, G. B. (2011). Non-conscious bias in medical decision making: what can be done to reduce it?. <i>Medical education</i>, 45(8), 768-776.</p> <p>Haslam, S. A., Jetten, J., Postmes, T., &amp; Haslam, C. (2009). Social identity, health and well-being: an emerging agenda for applied psychology. <i>Applied Psychology</i>, 58(1), 1-23.</p> <p>Donovan, J. and Blake (1992), Patient non-compliance: Deviance or reasoned decision-making? <i>Social Science and Medicine</i>.</p> <p>Video: Zimbaro TED TALK: The Psychology of Evil</p>	Assignment 4 on Personality, Identity and Status due M 8/3
T 8/4, W 8/5	Power, Authority, and Institutions	<p>Horwitz. "Pharmaceuticals and the Medicalization of Social Life." Ch 4 in <i>The Risks of Prescription Drugs</i> by Donald Light. (95-115)</p> <p>Scultz, Kathryn, 2004. "Did Antidepressants Depress Japan?" <i>NY Times</i></p> <p>Hartley. "The Pinkening of Viagra Culture: Drug Industry Efforts to Create and Repackage Sex Drugs for Women."</p>	Discussion Post on Social Psychology due T 8/4

		Video: Big Bucks, Big Pharma Part 1	
Th 8/6, F 8/7	Stress/Positive Psychology	<p>Coyne, J. C., &amp; Tennen, H. (2010). Positive psychology in cancer care: Bad science, exaggerated claims, and unproven medicine. <i>Annals of Behavioral Medicine, 39</i>(1), 16-26.</p> <p>Aspinwall, L. G., &amp; Tedeschi, R. G. (2010). The value of positive psychology for health psychology: Progress and pitfalls in examining the relation of positive phenomena to health. <i>Annals of Behavioral Medicine, 39</i>(1), 4-15.</p> <p>Patients' preference for involvement in medical decision making: A narrative review. <i>Patient Education and Counseling 60</i> (2006) 102–114</p> <p>Video: The Paradox of Choice by Barry Schwartz</p>	Assignment 5 on Power, Authority, and Institutions due Th 8/6
M 8/10/ T 8/11	Health and Healthcare Spatial Disparities	<p>Link and Phelan. 1995. "Social Conditions as Fundamental Causes of Disease." <i>Journal of Health &amp; Social Behavior</i> 35(s1): 80-94.</p> <p>Evans and Kantrowitz. 2002. "Socioeconomic Status and Health: The Potential Role of Environmental Risk Exposure." <i>Annual Rev. Public Health. 23</i>: 303-331.</p> <p>Videos: Unnatural Causes</p>	Discussion post on Stress/Positive Psychology due M 8/10

W 8/12	Final	IN CLASS – 10:05-11:55 a.m. Tillett 251	
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**Psychosocial Foundations Discussion Board Rubric: Maximum: 12 points per week**

Post thoughtful, well-reasoned expressions of your ideas about the topic at hand and respond to your classmates' ideas in the same way.

Discussion Group Instructions: You will be split into groups of approximately 5; each group will have a different question. You should a) post an initial response to the question, b) post a response to a peer from another group and c) respond to all your comments (you may receive comments from an instructor or a peer). *Your lowest discussion grade will be dropped.* Make sure to read all discussions – not only yours – since content from any discussion forum can appear on exams.

On the following page is a grading rubric for class participation based on your responses to class and group discussions. You want to be in the "Good" column for most of your communications each week.

CATEGORY	Good (3 points)	Mediocre (2 points)	Poor (1 point)	No credit
Initial Topic Response	Responding to the instructor's topic by the due date.	Responding to the instructor's topic within a day of due date.	Responding to the instructor's topic within 2 days of due date	Not responding to the instructor's topic.
Responding to a Peer's post in a different topic.	Responding to a peer's post in a different topic by due date & including original material (not just an agreement or question)	Responding to a peer's post in a different topic within a day of due date.	Responding to a peer's post in a different topic within 2 days of due date	Not responding to a peer's post in a different topic
Responding to the instructor or	Responding to the instructor/peer follow up	Responding to the instructor/peer follow	Responding to the instructor/peer follow up	Not responding to the instructor/peer follow

peer follow-up questions/comments	question/comment by due date	up question/comment with a day of due date.	questions/comment within 2 days of due date.	up question/comment
Quality Threads	Posts are original, thoughtful, and relevant. They add significantly to the discussion by suggesting solutions, pointing out problems, or even respectfully disagreeing. Student substantiates any comments made with reasoning or source citation.	Posts are somewhat original, thoughtful, and relevant. Add moderately to discussion by suggesting solutions, pointing out problems, or respectfully disagreeing. Student does not substantiate comments made with reasoning or source citation.	Posts are minimally original, thoughtful, and relevant. They do not add to the discussion. Student does not substantiate any comments made with reasoning or even source citation. Posting is simple: "I agree" or "Yes" or "No"	Student does not participate at all in the threaded discussion.
Style	Virtually no spelling or grammar errors.	Minor spelling or grammar errors.	Spelling or grammar errors that affect readability/comprehension.	Many grammar or spelling errors.