

MACQUARIE
UNIVERSITY



FACULTY OF
HUMAN SCIENCES

DEPARTMENT OF PSYCHOLOGY

PSY224

**PSYCHOLOGY, HEALTH AND
WELLBEING**

Unit Outline

Semester 1, 2011

Year and Semester: 2011, Semester 1

Unit convenor: Dr Kerry Sherman

**[Prerequisites / Corequisites:] Minimum P in Psy 104 and Psy 105
And Stat 170 or Stat171
OR admission to GradDipPsych**

Students in this unit should read this unit outline carefully at the start of semester. It contains important information about the unit. If anything in it is unclear, please consult one of the teaching staff in the unit.

ABOUT THIS UNIT

- This unit provides an introductory overview to health psychology as a broad discipline.
- Psy224 is a 3 credit point unit.
- From the early days of medicine to now there has been increasing interest and recognition of the role that our thoughts, feelings and behaviours play on our physical health. One of the paradoxes of modern medicine has been the acknowledgement that physiological and biochemical pathways are unable to explain the incidence of all illnesses and disease. It has gradually been accepted that the way in which we think about our health, our emotional reactions to our health status, and the in which we engage, greatly affect our health status. Take the case of two workers who have both been in the same high-pressure job for the past 20 years. The first worker is contented, healthy and undertakes regular exercise. In contrast, the other worker constantly feels under immense pressure, never finds the time to exercise and has recently taken up smoking. Although both of these individuals are in a similar situation with regard to work stress, there are marked variations in the way in which each person manages this stress. It is not surprising that we find that the second worker has recently been diagnosed with blood pressure that is dangerously high, while the first worker has a clean bill of health. What psychological and social factors distinguish between these two individuals?

Another paradox of humans is that we do not consistently respond to health-related information as rational beings. We find that despite being aware of the dangers of certain behaviours to our health, we continue to ignore health messages. Take the case of Meagan, a medical practitioner who specialises in respiratory diseases. Perhaps surprisingly, what we also know about Meagan is that she has been smoking for the past 10 years on a regular basis, and despite a couple of attempts to quit, continues to smoke. We see here that the desire to quit smoking, and the knowledge of the dangers of smoking are not sufficient for Meagan to quit. In this case, there are more complex psychological and social factors that contribute to Meagan's continuing addiction to cigarettes such as her personal beliefs about the stress relief that smoking affords, her belief in her ability to quit, and social reasons for smoking, since all

of her friends are regular smokers. Culture is another factor that impinges on our health. The way in which we construe and interpret certain symptoms, the value that we place on our own health and our beliefs in the efficacy of certain medical practices and illness prevention approaches are all largely dependent on a person's cultural background (e.g., in some cultures the use of cancer screening techniques are looked upon with mistrust and scepticism, while other cultures embrace these approaches), and a person's age and social context (e.g., the diagnosis of a life-threatening disease has a different meaning for younger compared with older individuals).

Clearly, our health status is a reflection of the fascinating mix of physiological factors with our psychological and social environments. The overall objective of this unit, then, is to provide a critical overview of both the psychological and social aspects of human health and wellbeing. In the first part of this unit we will provide some foundations or building-blocks for understanding the role of psychology in the health context by reviewing the most important theoretical approaches to health psychology as well as approaches to prevention of disease. In the second part of the unit we will explore a variety of psychosocial factors and specific mechanisms that have been found to impact our health status, both from the individual perspective and the wider environment and cultural context.

It is University policy that the University issued email account will be used for official University communication. All students are required to access their University account frequently.

TEACHING STAFF

Convenor

- Dr Kerry Sherman C3A409 kerry.sherman@mq.edu.au 9850-6874
 Consultation hours: Monday 9-10, Thursday 10-11

Other Staff

- Ms Sue Ferguson C3A421 sue.ferguson@mq.edu.au 9850-6755
- Mr Adam Bentvelzen C5C483 adam.bentvelzen@mq.edu.au 9850-4433

CLASSES

Lecture

Number of lectures	One lecture per week
Length of lectures	2 hours
Venue	Monday 11- 1pm, E7B T3

Tutorial

Number of tutorials	One tutorial per week commencing Week 2
Length of tutorials	1 hour
Venue	Monday 2-3pm, W5A 202 Monday 3-4pm, W5A 202 Monday 6-7pm, C4A 325 Tuesday 10-11am, W5A 201 Thursday 10-11am, C3A 501

The timetable for classes can be found on the University web site at:

<http://www.timetables.mq.edu.au/>

Managing Classes: Changes to all units can be done on-line via eStudent. After week 2, no further changes will be entertained unless supporting documentation is provided.

REQUIRED AND RECOMMENDED TEXTS AND/OR MATERIALS

- Prescribed text
The text for this unit is available from the Co-Op Bookshop:

Morrison, V., Bennett, P., Butow, P., Mullan, B., & White, K. (2008). *Introduction to Health Psychology in Australia*. Frenchs Forest, NSW: Pearson.
- Copies of the slides shown in lectures will be available to be downloaded from the unit web page: <https://learn.mq.edu.au>

RECOMMENDED TEXTS AND BOOKS ON SPECIAL RESERVE

- Use this list of books on SR as a helpful resource for your studies in psychology and health. Any books that have been listed as essential or recommended will be restricted for which the period that these can be borrowed.
- Remember that this reading list is not exhaustive - there are many other books, journals, and research papers which you might find useful for your assignments and exam. Hunt the main shelves under R (~ 700); RA (~ 400 - 800), RC (~ 800 - 990) and HQ (~ 600 - 800).

Baum, A., Revenson, T.A., & Singer, J.E. (Eds.) (2001). *Handbook of Health Psychology*. Mahwah, N.J. : Lawrence Erlbaum Associates.

Bennett, P., & Murphy, S. (1997). *Psychology and Health Promotion*. Buckingham, PA: Open University Press.

- Conner, M. & Norman, P. (Eds.) (1996). *Predicting Health Behaviour : Research and Practice with Social Cognition Models*. Philadelphia: Open University Press.
- Costa, P.T., & VandenBos, G.R. (Eds.) (1990). *Psychosocial Aspects of Serious Illness: Chronic Conditions, Fatal Diseases, and Clinical Care*. Washington, DC: American Psychological Association.
- Croyle, R.T. (Ed.) (1995). *Psychosocial Effects of Screening for Disease Prevention and Detection*. New York: Oxford University Press.
- Hardey, M. *The Social Context of Health*. Buckingham, PA. : Open University Press.
- Kato, P.M., & Mann, T. (Eds.) (1996). *Handbook of Diversity Issues in Health Psychology*. New York: Plenum.
- Kazarian, S.S., & Evans, D.R. (Eds.) (2001). *Handbook of Cultural Health Psychology*. San Diego, CA: Academic Press.
- Lee, C., & Glynn Owens, R. (2002). *The Psychology of Men's Health*. Philadelphia, Pa.: Open University Press.
- Nicassio, P.M., & Smith, T.W. (Eds.). (1995). *Managing Chronic Illness : A Biopsychosocial Perspective*. Washington, DC: American Psychological Association.
- Pitts, M. (1996). *The Psychology of Preventive Health*. London: Routledge.
- Polgar, S., & Thomas, S.A. (2000). *Introduction to Research in the Health Sciences* (4th ed.). London: Harcourt.
- Quick, J.C., & Tetrick, L.E. (Eds.) (2003). *Handbook of Occupational Health Psychology*. Washington, DC: American Psychological Association.
- Rasmussen, L. (2001). *Towards Reconciliation in Aboriginal Health: Initiatives for Teaching Medical Students about Aboriginal Issues*. Parkville, VIC: The VicHealth Koori Health Research and Community Development Unit.
- Schabracq, M.J., Winnubst, J.A.M., & Cooper, C.L. (2003). *Handbook of work and health psychology* (2nd ed.). Hoboken, N.J. : John Wiley.
- Taylor, S.E. (1999). *Health Psychology* (4th ed.), New York: McGraw Hill.

USEFUL JOURNALS

Annals of Behavioural Medicine
 Australian and New Zealand Journal of Public Health
 British Journal of Health Psychology
 Health Psychology
 Journal of Consulting and Clinical Psychology
 JAMA (Journal of the American Medical Association)
 Psychology and Health
 Psychology Health and Medicine
 Social Science and Medicine

UNIT WEB PAGE

- The web page for this unit can be found at: Online learning @ MQ
<https://learn.mq.edu.au/webct/logon>

LEARNING OUTCOMES

The learning outcomes of this unit are to provide a broad survey of major theories, research findings, and contemporary issues in Health Psychology relating to physical, cognitive, and social-emotional aspects of health and wellbeing. Major topics and issues will be presented in lectures. The important principles and theories underlying health behaviours will be covered, particularly in how they are applied to everyday health-related situations. Tutorials will provide more in-depth exposure to current issues in Health Psychology and specific aspects of chronic illness through discussion, exercises and class presentations. As we move through the course, you will develop an understanding of the following topics and issues:

1. Delineating between the biological/medical approaches to health and the biopsychosocial approaches.
2. The type of empirical research that underpins our understanding of health status as well as commonly used research modalities and research challenges in health settings.
3. The major theories that attempt to explain health related behaviour.
4. The function and interrelation of the body's systems in determining health status, with an in depth examination of pain processes.
5. The role of cognitive and affective factors as determinants of health status.
6. Aspects of health communications as determinants of health status.
7. Stress and coping with stress and chronic illness.
8. Common approaches to modifying health beliefs and behaviours.
9. The overarching role of culture as a determinant of health and health-related behaviours.

Graduate Capabilities Developed

In addition to the discipline-based learning objectives, this unit seeks to develop graduate capabilities, cognitive skills or abilities that are learned and explicitly acquired in one context that can be transferred to, and used, in other contexts. As a result of attendance at scheduled lectures and tutorials, active participation in planned activities, the timely and successful completion of the assigned assessment tasks, students in this unit will develop capabilities including:

- *Foundation skills of Literacy, Numeracy and Information Technology:* The essay, class presentation and health advertisement will develop these capabilities through the use of word processing and presentation software.

- *Development of research skills:* (i.e., knowing what questions to ask when researching a topic; judging the relevance and accuracy of information). The health-advertisement, class presentation and essay will require competence to use the library electronic databases and other information sources; and to seek solutions to problems that may be encountered during the course of these assessments.
- *Attention to detail:* The essay will require this skill both in the interpretation and reporting of empirical findings to formulate your argument, and in the citation of all references using APA format.
- *Self awareness and Interpersonal skills:* working as a team to produce class tutorial presentations; identifying and setting targets, time management. Students will also be given the opportunity to self-assess their submitted essay after submission for marking, and before return of marked assignments.
- *Written and Oral Communication skills:* taking part in class discussions and class presentations; written assignments.
- *Critical Analysis skills:* formulating arguments; judging the relevance and accuracy of information; comparing different points of view in the essay, class presentation and final exam.
- *Problem solving skills:* (i.e., comparing alternative solutions to the same problem; thinking creatively to solve a problem). The development of a unique health-based advertisement for application in a real-life setting will help develop these skills.
- *Creative thinking skills:* developing class presentations; developing a health-advertisement.
- *Teamwork skills:* Will be developed through the class presentations in which individual group members will work together to prepare a class presentation. This task will also require collaboration between group members to ensure that the separate, individual components of the presentations are well integrated.

GENERIC SKILLS: Students in PSY 224 should acquire the following generic skills:

- Information technology skills (word processing; email)
- Task and time management skills (meeting deadlines; prioritizing tasks)
- Oral communication and teamwork skills (group work in tutorials and oral presentations)
- Library research skills (accessing resources for written assignment)
- Written communication skills (written assignments)
- Critical thinking skills (written assignments and exam)
- Interpersonal skills (giving constructive feedback to others in tutorials and working with others in groups in class)

TEACHING AND LEARNING STRATEGY

- PSY 224 is taught through a combination of lectures and smaller, class-based tutorials.
- It is expected that students attend all lectures and tutorials. Important information regarding assessment tasks will be provided in these classes as well as feedback on your progress with these tasks.
- For each lecture there is a set reading, usually from the textbook, as well as supplementary readings for more detailed information about specific aspects of this unit. See below for a listing of the set readings and recommended additional readings for each lecture.
- In tutorials it is expected that all students contribute to discussions in a constructive manner. The more that you participate in classes, the more you will derive benefits.
- For each tutorial topic there will be a number of set readings. It is expected that all students read at least one of the set readings for each tutorial topic. Students running the class presentation for that topic will be expected to have read most of the set readings for that week.

It is helpful if you keep up to date with current affairs in Australia during the semester, particularly as it relates to health issues.

Lecture and Tutorial Timetable

Week	Topic	Lecturer	Tutorial
1.	21 Feb Introduction Development of Health Psychology Research Methods	KS	No tutorial
2.	28 Feb Representations of Health in the Media	KS	Introduction – Assign students to group presentations
3.	7 Mar The Body’s Physical Systems	KS	Health-related advertisement preparation
4.	14 Mar Models of Health Behaviour	SF	Exercise - Media transmission of health messages
5.	21 Mar Keeping the Healthy, Healthy – Prevention and Health Promotion	KS	Exercise - Health promotion
6.	28 Mar Stress and coping	SF	Group Presentation 1 – Parkinson’s disease
7.	4 Apr Coping with Chronic Illness	SF	Group presentation 2 - Chronic Fatigue Syndrome
MID SEMESTER BREAK			
8.	25 April	ANZAC DAY PUBLIC HOLIDAY (No Lecture or Tutorials)	
9.	2 May Pain	SF	Group presentation 3 – Rheumatoid Arthritis
10.	9 May Psycho-Oncology	KS	Group presentation 4 – Childhood cancer
11.	16 May Culture, Health & Indigenous Issues	KS	Exercise – Indigenous Health
12.	23 May Communications in the Health Context	KS	Group presentation 5 - Diabetes
13.	30 May Future perspectives in Health Psychology	KS	Exercise - Communication with Health Professionals

Lecturers: KS - Kerry Sherman; SF – Sue Ferguson

Stroebe, W. (2000). *Social Psychology and Health* (2nd ed.). Buckingham, PA: Open University Press. Chapters 2 and 3.

Wk 5: 21 March Keeping the Healthy, Healthy – Prevention and Health Promotion

Reading:

Chapter 4 (pp.92-103) Morrison et al. (2008).
Chapter 6 (pp. 135-140)
Chapter 7 (pp. 174-187)

Supplementary reading:

Chesney, M.A., Chambers, D.B., Taylor, J.M., Johnson, L.M., Folkman S. (2003). Coping effectiveness training for men living with HIV: results from a randomized clinical trial testing a group-based intervention. *Psychosomatic Medicine*, 65(6), 1038 - 1046.
Kirsch, S.E., & Pullen, N. (2003). Evaluation of a school-based education program to promote bicycle safety. *Health Promotion and Practice*, 4(2), 138-45.
O'Connor, M.L. & Parker, E. (1995). *Health Promotion : Principles and Practice in the Australian context*. St. Leonards, N.S.W.: Allen & Unwin

Wk 6: 28 March Stress and Coping

Reading:

Chapter 11 (pp 277-286; 293-298) Morrison et al. (2008).
Chapter 12 (pp. 307-313; 323-332)

Supplementary reading:

Chapter 13 Morrison et al. (2008).

Wk 7: 4 April Coping with Chronic Illness

Reading:

Chapter 13 Caltabiano, M.L., Sarafino, E.P. & Byrne, D. (2008). *Health Psychology: Biopsychosocial interactions* (2nd Australasian edition).

Supplementary reading:

Drageset, S., Lindstrom, T.C., & Underlid, K. (2010). Coping with breast cancer: between diagnosis and surgery. *Journal of Advanced Nursing*, 66(1), 149 - 158.

MID SEMESTER BREAK

Wk 8: **25 April** **ANZAC DAY PUBLIC HOLIDAY**
No Lecture or Tutorials

Wk 9: **2 May** **Pain**

Reading:

Chapter 16

Morrison et al. (2008).

Supplementary reading:

Keefe, F.J., Abernethy, A.P., & Campbell, L.C. (2005). Psychological approaches to understanding and treating disease-related pain. *Annual Review of Psychology*, 56, 601-630.

Wk 10: **9 May** **Psycho-Oncology**

Reading:

Chapter 8, pages 207-208

Morrison et al. (2008)

Chapter 14, pages 555-566

Caltabiano & Sarafino (2002).

Supplementary readings:

Persson, L., Rasmusson, M., & Hallberg, I.R. (1998). Spouses' view during their partners' illness and treatment. *Cancer Nursing*, 2, 97-105.

Wk 11: **16 May** **Culture, Health & Indigenous Issues**

Readings:

Chapter 2

Morrison et al. (2008).

Supplementary readings:

Mann, T., & Kato, P.M. (1996). Diversity issues in health psychology. In P.M. Kato and T. Mann, (Eds.), *Handbook of Diversity Issues in Health Psychology*. New York: Plenum. (Chapter 1).

Mulatu, M.S., & Berry, J.W. (2001). In S.S. Kazarian and D.R. Evans(Eds.), *Handbook of Cultural Health Psychology*. San Diego, CA: Academic Press. (Chapter 2)

Morris, P.S. (1999). Randomised controlled trials addressing Australian aboriginal health needs: A systematic review of the literature. *Journal of Paediatrics & Child Health*. 35(2), 130-135.

RELATIONSHIP BETWEEN ASSESSMENT AND LEARNING OUTCOMES

The assessments for this unit evaluate a number of the discipline-based and generic learning outcomes of this unit. In particular, the final examination broadly assesses all aspects of the lecture curriculum and associated readings. The ability to demonstrate skills of literacy and information technology is assessed through production of the major assignment, and the health-related advertisement. Critical analysis skills are assessed in all aspects of the assessment for PSY 224. The ability to work together as a team to produce a common output is assessed specifically in the class-based tutorial presentations.

A. Specific Written Assessment Tasks for PSY 224:

1) Essay:

1500 words maximum.

35%

Details provided in Tutorial 1

Due date: Wednesday, 27 April (Hand in at latest by 10:00am).

(electronic copy via Turnitin* and hard copy via PSY224 assignment box in C3A)

Essay Question:

Tailored health messages can facilitate behavior change by providing information and behavior change strategies that are customized for the unique needs, interests, and concerns of the individual. Critically evaluate the extent to which tailored message interventions can improve physical exercise behaviours? Is there any evidence that specific components of these interventions are more effective than any other?

Starter references:

Fjeldsoe, B.S., Miller, Y.D., & Marshall, A.L. (2010). MobileMums: a randomized controlled trial of an SMS-based physical activity intervention. *Annals of Behavioral Medicine*, 39, 101-111.

Kreuter, M.W. & Wray, R.J. (2003). Tailored and targeted health communication: strategies for enhancing information relevance. *American Journal of Health Behavior*, 27(Suppl 3), S227-232.

Latimer, A.E., Brawley, L.R., & Bassett, R.L. (2010). A systematic review of three approaches for constructing physical activity messages: What messages work and what improvements are needed? *International Journal of Behavioral Nutrition and Physical Activity*, 7, 36 - 53.

It is department policy that assignments are set out in terms of a specified page limit and format as follows:

Double-spacing

12-point font

Margin of 2.54 centimetres

1,500 words

The word count does not include references, tables and figures, or title page.

2) Tutorial presentation (and summary) 10%

Maximum 2 pages for summary

Details will be provided in Tutorial 1

Due date as specified by choice of presentation topic

3) Health-related advertisement and rationale 10%

2 pages

Details will be provided in Tutorial 1

Due Date: Tuesday, 22 March (submit by 10am)

Feedback on the *progress* of the essay can be given at any time prior to the due date of this assessment, by consultation either with the unit chair or your class tutor. Feedback on the *outcome* of the Health Advertisements is due to be returned to students by the end of Week 7. *Marked Essay* work is due to be returned to students by the end of Week 12. Written feedback will be provided on the assignment by markers for the health advertisements, essays and summaries of class presentations. Along with comments relating to the strengths and weaknesses of the written assessment, a grade will be provided. Grades will be in the range of HD, D, Cr, P, and F. On the day of the class presentation, each group will be given written feedback from the class tutor and comments from peers in the class. Final grades for tutorial presentations and summaries will be made available on the online teaching website listed by SID at the conclusion of Week 13, following the submission of the last presentations and advertisements.

Assignments (health advertisements, class presentation summaries and essays) will be returned to students during tutorials or lectures. The remaining assignments will then be available for collection from the Psychology Office. During Semester time, the Psychology Office opening hours are 10AM to 5PM. Tutors of evening tutorials will return ALL assignments during the late classes.

Assignments can ONLY be submitted via the LABELLED locked boxes in the foyer of building C3A or in the single Psychology Essay Box located outside the entrance of C3A after hours.

The assignment boxes are cleared at 10 am on Mondays to Fridays and again at 4 pm ONLY ON FRIDAYS (Assignments received at 4pm on Fridays are counted as 1 day late).

All assignments submitted must be accompanied by a completed and signed Psychology Department coversheet which is available from outside Room C3A 301 or downloadable from <http://www.psy.mq.edu.au/pdf/coversheet.pdf>

Assignments will not be accepted unless a correct coversheet is completed and signed.

A copy of the assignment must be kept as proof that the assignment was completed and submitted.

Electronic copies of assignments are not accepted.

Assignments submitted by post will not be accepted.

AFTER AN ASSIGNMENT IS SUBMITTED:

It is the responsibility of the student to check the Psychology Webpage (<http://www.psy.mq.edu.au/assrec/>) after submitting the assignment to ensure that his/her assignment has been received. The webpage will be updated by 5pm on the due date of the assignment. If an assignment is not noted as being received, it is the student's responsibility to immediately contact the staff in the Psychology Office in writing to inform them. The student will then be required to submit a fresh copy of the assignment and the date of receipt will be the date the Psychology Office was informed of the non-receipt in writing. Lateness penalty will be applied until the date the Psychology Office is informed of the non receipt of assignment.

Assignments will be returned to students during tutorials. The remaining assignments will then be available for collection from the Psychology Office. During Semester time, the Psychology Office opening hours are 10AM to 5PM. Tutors of evening tutorials will return ALL assignments during the late classes.

Assignments will not be accepted after the return of marked assignments

Assignments submitted after the 4 pm clearing on Fridays will be cleared on Monday at 10 am and will incur a weekend (counted as two days) penalty.

Penalties will be levied for late submission of assignment and for exceeding the word limit:

There is a department uniform penalty of 5% per 100 words over the specified length. For example, if the assignment is worth 35% of the overall assessment for the Unit and the student has exceeded the word length by 100 words, then $5\% \times 35 = 1.75$ (2). Two marks are subtracted from whatever the student would have received for the assignment.

A penalty of 5% will also apply for every day late (including weekends).

Reports must be all your own work and fully referenced. Plagiarism will not be tolerated.

Request for Extensions for Assignments are granted by the Psychology Office for this unit

Ordinarily, no extensions of time for submission of written work will be granted since ample time for its preparation will have been given. If an extension is required for medical or other extenuating circumstances, students may request this in writing by completing a Request for Extension on Written Work form, available outside the Psychology Office, with supporting documentary evidence (such as medical certificate, counsellor note, or similar). The form and the supporting documentary evidence must be submitted to the Psychology Office (C3A 334). The staff in the Psychology Office will make all decisions regarding extensions. Neither individual tutors nor the course convenor will grant extensions.

All requests for extensions must be made prior to the due date for the assignment. If an extension is granted the authorisation section of the form must be collected and attached to the assignment. Failure to do so will result in a late penalty being applied as the marker will not know that an extension has been granted.

B. Final Exam – Multiple Choice Test: 45% of final grade

The material covered in both the lectures and the tutorial exercises (not group presentations) will be assessed in one test in the final exam period consisting of multiple choice questions. The two-hour exam will consist of 80 Multiple Choice questions. You will need at least two 2B pencils for these tests as the answers will be given on computer-readable sheets.

All students must attend the final exam at the same time. There is no separate arrangement available for evening students to sit this exam.

Instructions on applying for sitting of a supplementary exam are available from the website, www.psy.mq.edu.au/speccond. It is the student's responsibility to follow the steps outlined in this website. When a supplementary exam has been granted an email will be sent to the student. It is the student's responsibility to check the Department of Psychology Special Consideration website for information relating to the date and location of the supplementary exam. Students who are granted to sit for a supplementary exam must make themselves available to sit for the supplementary exam on the specified dates. There will be only one alternative time. It is the student's responsibility to email the Psychology Office, psy_off@mq.edu.au to confirm attendance to the supplementary exams.

Students who are unable to sit the final exam at the specified time must submit an Application for Special Consideration form as per the instructions on the form.

The University Examination period in *First Half Year 2010* is from June 6 to June 24, 2010.

You are expected to present yourself for examination at the time and place designated in the University Examination Timetable. The timetable will be available in Draft form approximately eight weeks before the commencement of the examinations and in Final form approximately four weeks before the commencement of the examinations.

<http://www.timetables.mq.edu.au/exam>

The only exception to not sitting an examination at the designated time is because of documented illness or unavoidable disruption. In these circumstances you may wish to consider applying for Special Consideration. Information about unavoidable disruption and the special consideration process is available at

<http://www.reg.mq.edu.au/Forms/APSCon.pdf>

If a Supplementary Examination is granted as a result of the Special Consideration process, the examination will be scheduled after the conclusion of the official examination period.

Supplementary Examination in the Department of Psychology will be held on the: 7th and 8th of July, for Semester One 2010.

Supplementary Exams are only offered to students who have satisfactorily completed all other assessments for the unit and were unable to sit the final exam.

Instructions on applying for sitting of a supplementary exam are available from the website, www.psy.mq.edu.au/speccond. It is the student's responsibility to follow the steps outlined in this website. When a supplementary exam has been granted an email will be sent to the student. It is the student's responsibility to check the Department of Psychology Special Consideration website for information relating to the date and location of the supplementary exam. Students who are granted to sit for a supplementary exam must make themselves available to sit for the supplementary exam on the specified dates. There will be only one alternative time. It is the student's responsibility to email the Psychology Office, psy_off@mq.edu.au to confirm attendance to the supplementary exams.

You are advised that it is Macquarie University policy not to set early examinations for individuals or groups of students. All students are expected to ensure that they are available until the end of the teaching semester, which is the final day of the official examination period.

ACADEMIC HONESTY

Academic honesty is an integral part of the core values and principles contained in the Macquarie University Ethics Statement. The Policy covering Academic Honesty is available on the web at:

http://www.mq.edu.au/policy/docs/academic_honesty/policy.html

Plagiarism is an example of dishonest academic behaviour and is defined by the Policy on Academic honesty as: “Using the work or ideas of another person and presenting this as your own without clear acknowledgement of the source of the work or ideas”.

Plagiarism is a serious breach of the University's rules and carries significant penalties. The Academic honesty Procedure is available at

http://www.mq.edu.au/policy/docs/academic_honesty/procedure.html

This procedure notes the following responsibilities for students:

- Act in accordance with the principles of the Academic Honesty Policy.
- Become familiar with what academic dishonesty is, what are appropriate referencing techniques and the consequences of poor practice.
- Seek assistance from the unit convenor (or their nominee) to remedy any deficits or if you are unsure of discipline specific practice.
- Submit only work of which you are the author or that properly acknowledges others.
- Do not lend your original work to any other person for any reason.
- Keep drafts of your own authored work and notes showing the authorship or source of ideas that are not your own.

The penalties which can be applied for academic dishonesty are outlined in the Academic Dishonesty – Schedule of Penalties which can be found at:

http://www.mq.edu.au/policy/docs/academic_honesty/schedule_penalties.html

The penalties range from applying a fail grade for the assessment task or requiring the student to re-submit the assessment task for a mark no greater than 50 to applying a fail grade to the unit of study and referral to the University Discipline committee.

You must read the University's Policy and Procedure on Academic Honesty.

UNIVERSITY POLICY ON GRADING

Academic Senate has a set of guidelines for the achievement of grades across the range from fail to high distinction. Your final result will include one of these grades plus a standardised numerical grade (SNG).

On occasion your raw mark for a unit (i.e., the total of your marks for each assessment item) may not be the same as the SNG which you receive.

For more information please refer to the Macquarie University Handbook.

TUTORIAL OUTLINE AND READINGS

The tutorial component of PSY224 consists of a mixture of activities, class discussions and small group presentations for which you will be individually assessed. Your assessment for this component will be based on a group-based seminar presentation

(individual assessment) (10%) and an individually-designed health-related advertisement (10%).

Week 2 28 February

Introduction

Discussion of tutorial component; allocation of presentation topics.

Week 3 7 March

Health-related advertisement preparation

Exercises and discussion relating to the health-related advertisement assignment

Week 4 14 March

Exercise - Media transmission of health messages.

See lecture references

Week 5 21 March

Exercise – Health promotion

Week 6 28 March

Group Presentation 1 - Parkinson's Disease

Bhatia, S. (2003). Impairments in activities of daily living in Parkinson's disease: Implications for management. *Neurorehabilitation*, 18(3), 209-214.

Posen, J., Moore, O., Tassa, D.S., Ginzburg, K., Drory, M., & Giladi, N. (2001). Young women with PD: A group work experience. *Social Work in Health Care*, 32(1), 77-91.

Sanders-Dewey, N.E.J., Mullins, L.L., & Chaney, J.M. (2001). Coping style, perceived uncertainty in illness, and distress in individuals with Parkinson's disease and their caregivers. *Rehabilitation Psychology*, 46(4), 363-381.

Schreurs, K.M.G., De Ridder, D.T., & Bensing, J.M. (2000). A one year study of coping, social support and quality of life in Parkinson's disease. *Psychology and Health*, 15(1), 109-121.

Adler, C.H. & Thorpy, M.J. (2005). Sleep issues in Parkinson's disease. *Neurology*, 64 (Suppl 3), S12-S20.

Week 7 4 April

Group Presentation 2 - Chronic Fatigue Syndrome

- Ax, S., Vernon, G., & Jones, D. (2001). Coping and illness cognitions: Chronic fatigue syndrome. *Clinical Psychology Review, 21*(2), 161-182.
- Friedberg, F., Dechene, L., McKenzie, M.J., & Fontanetta, R. (2000). Symptom patterns in long-duration chronic fatigue syndrome. *Journal of Psychosomatic Research, 48*(1), 59-68.
- Green, J., Romei, J., & Natelson, B.H. (2000). Stigma and chronic fatigue syndrome. *Journal of the Chronic Fatigue Syndrome, 5*(2), 63-95.
- Jason, L.A., & Taylor, R.R. (2003). Chronic Fatigue Syndrome. In A.M. Nezu, C. Maguth et al. (Eds.), *Handbook of psychology: Health Psychology, Vol 9* (pp.365-391). NY: John Wiley & Sons.
- Lowry, T.J. & Pakenham, K.I. (2008). Health-related quality of life in chronic fatigue syndrome: Predictors of physical functioning and psychological distress. *Psychology, Health & Medicine, 13*, 222-238.

MID SEMESTER BREAK

Week 8 25 April

ANZAC DAY PUBLIC HOLIDAY – No Lecture or Tutorials

Week 9 2 May

Group Presentation 3 - Rheumatoid Arthritis

- Griffin, K.W., Friend, R., Kaell, A.T., & Bennett, R.S. (2001). Distress and disease status among patients with rheumatoid arthritis: Roles of coping styles and perceived responses from support providers. *Annals of Behavioral Medicine, 23*(2), 133-138.
- Nagyova, I., Stewart, R.E., Macejova, Z., van Dijk, J.P., & van den Heuvel, W.J.A. (2005). The impact of pain on psychological well-being in rheumatoid arthritis: the mediating effects of self-esteem and adjustment to disease. *Patient Education and Counseling, 58*, 55-62.
- McQuade, D. (2002). Negative social perception of hypothetical workers with rheumatoid arthritis. *Journal of Behavioral Medicine, 25*(3), 205-217.
- Groarke, A., Curtis, R., Coughlan, R., & Gsel, A. (2004). The role of perceived and actual disease status in adjustment to rheumatoid arthritis. *Rheumatology, 43*, 1142-1149.

Week 10 9 May

Group Presentation 4 – Childhood Cancer

- Barrera, M., Shaw, A.K., Speechley K.N., Maunsell, E., & Pogany, L. (2005). Educational and social late effects of childhood cancer and related clinical, personal, and familial characteristics. *Cancer, 104*(8), 1751-1760.
- Clarke, J. (2005). Portrayal of childhood cancer in English language magazines in North America: 1970-2001. *Journal of Health Communication, 10*, 593-607.
- Labay, L.E., Mayans, S., & Harris, M.B. (2004). Integrating the child into home and community following the completion of cancer treatment. *Journal of Paediatric Oncology Nursing, 21*(3), 165-169.
- Lahteenmaki, P.M., Sjoblom, J., Korhonen, T., & Salmi, T.T. (2004). The siblings of childhood cancer patients need early support: A follow up study over the first year. *Archives of Disease in Childhood, 89*(11), 1008-1013.
- Lee, Y-L.L. & Santacroce, S.D. (2007). Posttraumatic stress in long-term young adult survivors of childhood cancer: A questionnaire survey. *International Journal of Nursing Studies, 44*, 1406-1417.

Week 11 16 May

Exercise – Indigenous Health

Week 12 23 May

Group Presentation 5 - Diabetes

- Pollans, C.H., Turkat, I.D. (1984). Effects of an insulin infusion pump and the label "diabetes" on observers' judgments of an individual's personality and social characteristics. *Journal of Social Psychology, 122*(1), 93-99.
- Peterson, K.A. & Hughes, M. (2002). Readiness to change and clinical success in a diabetes educational program. *Journal of the American Board of Family Practitioners, 15*(4), 266-271.
- Enzlin, P., Mathieu, C., & Demyttenaere, K. (2002). Gender differences in the psychological adjustment to type 1 diabetes mellitus: an explorative study. *Patient Education and Counseling, 48*(2), 139-145.
- Gallant, M.P. (2003). The influence of social support on chronic illness self-management: a review and directions for research. *Health Education and Behaviour, 30*(2), 170-195.

Sarkadi, A. & Rosenqvist, U. (2003). Intimacy and women with type 2 diabetes: an exploratory study using focus group interviews. *Diabetes Education*, 29(4), 641-652.

Week 13 **30 May**

Exercise - Communication with Health Professionals

STUDENT SUPPORT SERVICES

Macquarie University provides a range of Academic Student Support Services. Details of these services can be accessed at <http://www.student.mq.edu.au>.

On matters pertaining to the regulations, the Registrar's Office should be consulted or, within the Department of Psychology, Dr Julia Irwin, Director of Undergraduate Studies. Students with disabilities who have problems within the Department should consult Ms Radha Pathy, the Disability Liaison Officer. If your difficulties cannot be resolved by these members of staff you should consult the Head of Department.

If you have a major difficulty associated with writing skills, you could enrol in a short course on writing skills. For details go to:

http://www.ling.mq.edu.au/support/writing_skills/index.htm

APPEALS AGAINST GRADES

Please refer to the Macquarie University Handbook.