



Health Communications: Changing Social Norms in Theory and Practice
GPH-GU 2405

Class Schedule: Tuesdays and Thursdays 4:55 PM - 6:35 PM
Class Location: Zoom Link available on Classes
Semester: Summer 2021

Professor: Carlos Chirinos Ph.D.
Email: carlos.chirinos@nyu.edu
Office Hours: Click here for availability on Google Calendar

A) COURSE DESCRIPTION

This course provides an introduction to the theory, design, implementation, and evaluation of health communication programs. Several resources are used to allow students to acquire practical knowledge and skills in health communications planning and implementation. Case studies, resources, research tools and examples of different media channels are reviewed and analyzed to explore how to reach different target audiences with the most effective health communication interventions.

B) COURSE LEARNING OBJECTIVES AND COURSE COMPONENTS

Table with 2 columns: Course Learning Objectives, Course Components. It details three learning objectives and their corresponding lesson topics, assignments, and readings.



	<p>Assignments/assessment: Team-building exercise and participation throughout the semester. Read: Additional reading list Podcasts, videos and online data sources will be used to design a collaborative health communication intervention proposal for your final presentation.</p>
<p>Strengthen written and oral presentation skills while harnessing passion to construct and pitch a winning health communications plan.</p>	<p>Lesson topics:</p> <ul style="list-style-type: none"> • Effectiveness of health behavior change campaigns • Health communication project presentations <p>Evaluation/Assessment: project participation and presentation quality: relevance of data, rationale, strategy, formative research, clarity in the application of top-down or bottom-up communication theories, M&E framework, cost analysis, indicators of success, sustainability, and understanding the private, public and non-profit institutions involved in the health communication space.</p>

PRE-REQUISITES: NO PRE-REQUISITES

COURSE REQUIREMENTS

Attendance to this course is required and recommended, but sessions will be recorded and posted for later view for those with timetabling conflicts. Please read articles as suggested in class and to cite in your essays. Participation in class debates, team work, presentations, etc. is part of the learning process and is evaluated throughout the course. Offline work on presentations, readings and media critique will be part of participation.

ASSIGNMENTS

1)Two Media analyses of films (10% each)

Students watch two public health films and write a **forum post** reflecting on:

- a)The public health topic: accuracy of public health data and analysis
- b)Communication goal: target audience
- c)Does it connect with health communication theory?
- d)The value the format adds to the message: is it impactful? Is it informational? Is it creative?

2)Two Short essays (15% each)

Each student writes two short essays based on theory and evidence, addressing one question for each essay. Length: approximately 1200 words each essay

Essay 1: What is the argument for and against top down communication and bottom up communication models in public health? **SEE REFERENCES**

Essay 2: Analyze one specific health communication campaign and reflect how it confirms or rejects theory based on evidence.

3)FINAL GROUP ASSIGNMENT



Proposal narrative + presentation + power point (30%)

Working in teams, students design and develop a health communication intervention to address public health challenges raised in the Sustainable Development Goals. The teams need to compile health/epidemiological data, conduct a needs assessment, conduct a stakeholder analysis, design a “theory of change”, provide an implementation plan with budget, and provide a monitoring and evaluation framework to assess the impact of the proposed intervention.

GRADING COMPONENTS

Media analysis of two films (10% each)	20%
Short essay (Top down and Bottom up health communication)	15%
Short essay 2 (Analysis of a health campaign)	15%
Health Communication Campaign Group Evaluation	30%
Class participation	20%

GRADING SCALE

A:	94-100	C+:	77-79
A-:	90-93	C:	73-76
B+:	87-89	C-:	70-72
B:	83-86	D+:	67-69
B-:	80-82	D:	60-66
		F:	<60

NYU CLASSES

NYU Classes will be used extensively throughout the semester for assignments, announcements, forum posts, and communication. NYU Classes is accessible through at <https://home.nyu.edu/academics>

COURSE OUTLINE

Date	Topics	Readings/Materials Due	Assignments Due
MAY 25	Introductory class Review of the syllabus, course goals, assessment and introductions.	DISCUSSION: role of communication in public health	
MAY 27	The basis of Health Communication Explore the epistemological basis of health communication	Introduction and Chapter One. <i>Health Communication: From Theory to Practice</i> by Renata Schiavo.	



	and interrogates the value of behavior change versus participatory approaches to communication. Introduction to top-down approaches in Health Communication.		
JUNE 1	Top-down approaches to health communication We will explore the basic tenets of behavioral theories related to health communication, including social learning, diffusion of innovations, health belief model.	Chapter Two. <i>Health Communication: From Theory to Practice</i> by R. Schiavo. Minimum 3 articles from the Top-down communication reading list.	
JUNE 3	Bottom-up approaches to health communication In this class we will explore the role of culture in understanding and addressing health and disease and explore culture-centered models of communication.	Chapter three. <i>Health Communication: From Theory to Practice</i> by R. Schiavo. Trostle, <i>Epidemiology & Culture</i> Minimum 3 articles from the bottom up communication reading list.	TEAM-BUILDING EXERCISE FOR THE FINAL PROJECT
JUNE 8	Community engagement and Social Mobilization Assessing interpersonal communication and intersectoral efforts to include communities in	Chapters Four, Five and Six. <i>Health Communication: From Theory to Practice</i> by Renata Schiavo.	Essay 1



	public health policy and decision-making. Discussion around the role of faith-based organizations, NGO's, community leaders, development organizations and independent media.		
JUNE 10	Advocacy - Asynchronous Formal communication in advocacy to address the structural determinants of health, and analyze communication strategies implemented by NGO's and health institutions working to reduce the burden of global disease. Analysis of health narratives in the media: HIV AIDS and public attitudes towards the gay community, role of religion and advocacy for access to drugs in the US.	Chapters Seven, Eight and Nine. Health Communication: From Theory to Practice by Renata Schiavo. Read: Ottawa Charter for Health Promotion (1986) WATCH: How to survive a plague Available on Netflix	
JUNE 15	Designing a health communication intervention: Applying health communication theory to design a	Schiavo, R (2013). Health Communication: From Theory to Practice . Chapters 10- 13	POST YOUR COMMENTS ABOUT THE FILM "HOW TO SURVIVE A PLAGUE" ON THE FORUM



	health communication interventions through an assessment of implemented campaigns and their outcomes, looking at indicators of success, cost-benefit analysis and sustainability of the success		
JUNE 17	Crisis communication - Asynchronous Communication interventions during health emergencies, communicating risks and addressing anxiety and miscommunication during a crisis.	Read: Dickmann, P., et al. (2015). Making sense of communication interventions in public health emergencies – an evaluation framework for risk communication. WATCH: 93 Days. A Nigerian film about the Ebola epidemic in West Africa. FREE ON YOUTUBE	SHORT ESSAY 2
JUNE 22	Education-Entertainment: Using the case study of Africa Stop Ebola, we explore the role of music and the arts in community engagement and social mobilization.	Chirinos-Espin (2021) Music and Culture in Entertainment-Education, and Chirinos-Espin (2017) Ebola Songs. Listen I AM GPH PODCAST, EP. 79	POST YOUR COMMENTS ABOUT THE FILM “93 DAYS” ON THE FORUM.
JUNE 24	Monitoring and evaluation of health communication interventions	Based on team projects, we will explore different quantitative and qualitative methodologies to assess the impact of health communication on behavior change and community engagement.	



JUNE 29	Effectiveness of Health Behavior change campaigns A discussion and analysis of mainstream media campaigns for behavior change, and case study on advocacy against tobacco consumption.	Discussion-lead lecture with guest speaker, Professor Julia Cartwright.	
JULY 1	Health communication Project presentations	Live or pre-recorded presentations	In-Class presentation and slides submitted on classes.

REFERENCES

Note: you will be provided with PDF's of the most relevant articles for each class in the RESOURCES section of Classes.

TEXTBOOK

Schiavo, R. (2013). *Health Communication : From Theory to Practice (2nd Edition)*.

Digital Copy available in the NYU Library

TOP DOWN COMMUNICATION LIST

Armstrong Schellenberg, J., Abdulla, S., Nathan, R., Mukasa, O., Marchant, T., Kikumbih, N., Mushi, A., Mponda, H., Minja, H., Mshinda, H., Tanner, M. and Lengeler, C. (2001). Effect of large-scale social marketing of insecticide-treated nets on child survival in rural Tanzania. *The Lancet*, 357(9264), pp.1241–1247.

Bandura, A. (2002). Social cognitive theory of mass communication. In *Media Effects: Advances in Theory and Research*, ed. J Bryant, D Zillmann, pp. 121–53. Hillsdale, NJ: Erlbaum

Basil, M. (1996). Identification as a mediator of celebrity effects. *Journal of Broadcasting & Electronic Media*, 40(4), pp.478–495.

Bertrand, J. T. (2004). Diffusion of innovations and HIV/AIDS. *Journal of Health Communication*, 9 Suppl 1, 113–21. <http://doi.org/10.1080/10810730490271575>

Borah, P. (2015). Media Effects Theory. In G. Mazzoleni (Ed.), *The International Encyclopedia of Political Communication*. John Wiley & Sons, Inc. <http://doi.org/10.1002/9781118541555.wbiepc156>



Brown, W. J. & Basil, M. D. (1995). Media Celebrities and Public Health: Responses to “Magic” Johnson’s HIV Disclosure and Its Impact on AIDS Risk and High-Risk Behaviors. *Health Communication*, 7(4), 283–299. <http://doi.org/10.1207/s15327027hc0704>

Brown, W. J., & Basil, M. D. (2010). Parasocial interaction and identification: social change processes for effective health interventions. *Health Communication*, 25(6–7), 601–2. <http://doi.org/10.1080/10410236.2010.496830>

Freimuth, V., Linnan, H. W., & Potter, P. (2000). Communicating the threat of emerging infections to the public. *Emerging Infectious Diseases*, 6(4), 337–47. <http://doi.org/10.3201/eid0604.000403>

Hale, J., & Price Dillard, J. (1995). Fear Appeals in Health Promotion Campaigns: Too Much, Too Little, or Just Right? In E. Maibach & R. L. Parrott (Eds.), *Designing Health Messages: Approaches from Communication Theory and Public Health Practice*.

Goldstein, S., Usdin, S., Scheepers, E., & Japhet, G. (2005). Communicating HIV and AIDS, what works? A report on the impact evaluation of Soul City’s fourth series. *Journal of Health Communication*, 10(5), 465–483. <https://doi.org/10.1080/10810730591009853>

Obregón, R., & Waisbord, S. (2010). The Complexity of Social Mobilization in Health Communication: Top-Down and Bottom-Up Experiences in Polio Eradication. *Journal of Health Communication*, 15: Sup. 1. 25-47.

Reynolds, B., & Seeger, M. (2005). Crisis and Emergency Risk Communication as an Integrative Model. *Journal of Health Communication*, 10 (1): 43–55. [doi:10.1080/10810730590904571](https://doi.org/10.1080/10810730590904571).

BOTTOM UP COMMUNICATION LIST

Bekalu, M. A., & Eggermont, S. (2015). Aligning HIV/AIDS Communication With the Oral Tradition of Africans: A Theory-Based Content Analysis of Songs’ Potential in Prevention Efforts. *Health Communication*, 30(5), 441–450.

Chirinos Espin, C. (2017). Ebola songs: Exploring the Role of Music in Public Health Education. In *The Oxford Handbook of Technology and Music Education*, Edited by Ruthmann, S. A. and Mantie, R. Oxford University Press.

Cline, R. J. W., Johnson, S. J., & Freeman, K. E. (1992). Talk Among Sexual Partners About AIDS: Interpersonal Communication for Risk Reduction or Risk Enhancement? *Health Communication*, 4(1), 39–56.

Cohn, S. & Kutalek, R. (2016). Historical parallels, Ebola virus disease and cholera: Understanding community distrust and social violence with epidemics. *PLoS Currents*, January 26th, 8.

Dutta, M. J. (2015). Decolonizing Communication for Social Change: A Culture-Centered Approach. *Communication Theory*, 25(2), 123–143. <http://doi.org/10.1111/comt.12067>

Farmer, P. (2004). An Anthropology of Structural Violence. *Current Anthropology*, 45(3), 305–325. <http://doi.org/10.1086/382250>



Freire, P. (2000). *Pedagogy of the oppressed*. 30th Anniversary Edition. New York: Continuum.

Larkey, L. K., Lopez, A. M., Minnal, A., & Gonzalez, J. (2009). *Storytelling for Promoting Colorectal Cancer Screening Among Underserved Latina Women: A Randomized Pilot Study*. *Cancer Control* (Vol. 16).

Larkey, L. K., & Hecht, M. (2010). A model of effects of narrative as culture-centric health promotion. *Journal of Health Communication*, 15 (2), 114–135.

McConnell, B.B. (2016). Music and health communication in The Gambia: A social capital approach. *Social Science & Medicine*, 169.132–140.

Panter-Brick, C., Clarke, S. E., Lomas, H., Pinder, M., & Lindsay, S.W. (2006). Culturally compelling strategies for behaviour change: a social ecology model and case study in malaria prevention. *Social Science & Medicine*, 62(11). 2810–2825.

Singhal, A., Cody, M. J., Rogers, E. M., & Sabido, M. (2003). *Entertainment- education and social change: History, research, and practice*. LEA.

Trostle, J. (2005). *Epidemiology and Culture*. Cambridge: Cambridge University Press.

ADDITIONAL READINGS

Chirinos-Espin C. (2021). Music and Culture in Entertainment-Education. In: Frank L.B., Falzone P. (eds) *Entertainment-Education Behind the Scenes*. Palgrave Macmillan, Cham. https://doi.org/10.1007/978-3-030-63614-2_8

Chirinos-Espin C. (2017). [The Oxford Handbook of Technology and Music Education](https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780199372133.001.0001/oxfordhb-9780199372133-e-31) Edited by S. Alex Ruthmann and Roger Mantie. Oxford University Press. <https://www.oxfordhandbooks.com/view/10.1093/oxfordhb/9780199372133.001.0001/oxfordhb-9780199372133-e-31>

Dickmann, P., McClelland, A., Gamhewage, G. M., Portela de Souza, P., & Apfel, F. (2015). Making sense of communication interventions in public health emergencies – an evaluation framework for risk communication. *Journal of Communication in Healthcare*, 8(3), 233–240. <https://doi.org/10.1080/17538068.2015.1101962>

Goldstein, S., Usdin, S., Scheepers, E., & Japhet, G. (2005). Communicating HIV and AIDS, what works? A report on the impact evaluation of Soul City's fourth series. *Journal of Health Communication*, 10(5), 465–483. <https://doi.org/10.1080/10810730591009853>

Kasteng, F., Murray, J., Cousens, S., Sarrassat, S., Steel, J., Meda, N., ... Borghi, J. (2018). Cost-effectiveness and economies of scale of a mass radio campaign to promote household life-saving practices in Burkina Faso. *BMJ Global Health*, 3(4), e000809. <https://doi.org/10.1136/bmjgh-2018-000809>

Sarrassat, S., Meda, N., Badolo, H., Ouedraogo, M., Some, H., Bambara, R., ... Head, R. (2018). Effect of a mass radio campaign on family behaviours and child survival in Burkina Faso: a repeated cross-sectional, cluster-randomised trial. *The Lancet Global Health*, 6(3), e330–e341. [https://doi.org/10.1016/S2214-109X\(18\)30004-4](https://doi.org/10.1016/S2214-109X(18)30004-4)



STATEMENT OF ACADEMIC INTEGRITY

The NYU School of Global Public Health values both open inquiry and academic integrity. Students in the program are expected to follow standards of excellence set forth by New York University. Such standards include respect, honesty and responsibility. The SGPH does not tolerate violations to academic integrity including:

- Plagiarism
- Cheating on an exam
- Submitting your own work toward requirements in more than one course without prior approval from the instructor
- Collaborating with other students for work expected to be completed individually
- Giving your work to another student to submit as his/her own
- Purchasing or using papers or work online or from a commercial firm and presenting it as your own work

Students are expected to familiarize themselves with the SGPH and University's policy on academic integrity as they will be expected to adhere to such policies at all times – as a student and an alumni of New York University.

Plagiarism

Plagiarism, whether intended or not, is not tolerated in the SGPH. Plagiarism involves presenting ideas and/or words without acknowledging the source and includes any of the following acts:

- Using a phrase, sentence, or passage from another writer's work without using quotation marks
- Paraphrasing a passage from another writer's work without attribution
- Presenting facts, ideas, or written text gathered or downloaded from the Internet as your own
- Submitting another student's work with your name on it
- Submitting your own work toward requirements in more than one course without prior approval from the instructor
- Purchasing a paper or "research" from a term paper mill.

Students in the SGPH and SGPH courses are responsible for understanding what constitutes plagiarism. Students are encouraged to discuss specific questions with faculty instructors and to utilize the many resources available at New York University.

Disciplinary Sanctions

When a professor suspects cheating, plagiarism, and/or other forms of academic dishonesty, appropriate disciplinary action is as follows:

- The Professor will meet with the student to discuss, and present evidence for the particular violation, giving the student opportunity to refute or deny the charge(s).
- If the Professor confirms that violation(s), he/she, in consultation with the Chairperson or Program Director may take any of the following actions:
 - Allow the student to redo the assignment
 - Lower the grade for the work in question
 - Assign a grade of F for the work in question
 - Assign a grade of F for the course



NYU

**SCHOOL OF GLOBAL
PUBLIC HEALTH**

- Recommend dismissal

Once an action(s) is taken, the Professor will inform the Chairperson or Program Director and inform the student in writing, instructing the student to schedule an appointment with the Senior Associate Dean for Academic Affairs, as a final step. The student has the right to appeal the action taken in accordance with the GPH Student Complaint Procedure.

STUDENTS WITH DISABILITIES:

Students with disabilities should contact the Moses Center for Students with Disabilities regarding the resources available to them, and to determine what classroom accommodations should be made available. More information about the Moses Center can be found here: <https://www.nyu.edu/life/safety-health-wellness/students-with-disabilities.html>. Students requesting accommodation must obtain a letter from the Moses Center to provide to me as early in the semester as possible.