

## Syllabus Module 202

Module # 202	Social and behavioral sciences (Advanced Core module)
<b>Coordinator</b>	Aymery Constant, PhD Senior lecturer in Health Psychology, EHESP, Avenue du Pr Bernard, Rennes Aymery.Constant@ehesp.fr Tel : 0299022938
<b>Dates</b>	03/09/2018 to 01/10/2018
<b>Credits/ECTS</b>	3 (1 ECTS = 25h student's work)
<b>Duration</b>	Number of days: 5 Number of hours (in-class and outside of class): 50
<b>Location</b>	EHESP 20 Avenue George Sand 93210 LA PLAINE ST DENIS
<b>Description</b>	The social and behavioral sciences in public health address the behavioral, social and cultural factors related to individual and population health and health disparities over the life course. Research and practice in this area contribute to the development, administration and evaluation of programs and policies in public health and health services to promote and sustain healthy environments as well as healthy lives for individuals and populations.
<b>Prerequisites</b>	For those of the MPH2 students who were not previously in MPH1, the reading of <i>Social and Behavioral Foundations of Public Health, 2<sup>nd</sup> Edition</i> edited by J. Coreil (Sage Publications) is strongly recommended.
<b>Course learning objectives</b>	At the completion of the module, the students should be able to: <ol style="list-style-type: none"> <li>1. Identify basic concepts, processes and factors from a range of social and behavioral disciplines that are critical for development and improvement of public health interventions.</li> <li>2. Identify the causes and nature of key ecological, social and behavioral factors that affect health of individuals and populations.</li> <li>3. Describe steps and procedures for the design, implementation and evaluation of public health programs, policies and interventions to improve individuals and populations' health.</li> <li>4. Apply evidence-based approach for the design and evaluation of public health programs, policies and interventions to improve health of individuals and populations.</li> <li>5. Demonstrate a working capacity to collaborate respectfully, equitably and regularly with colleagues from other cultures and disciplines to address complex health challenges.</li> </ol>
<b>Structure</b> (details of sessions title/speaker/date /duration )	<p><b>Session 1:</b> Introduction and Innovative approaches to promoting health and preventing disease Instructor: Hugo Pilkington (Paris 8), Aymery Constant &amp; William Sherlaw (EHESP, Rennes), Monday September 3, 9:30-12:00.</p> <p><b>Session 2:</b> Designing an innovative m-health intervention to promote health Instructors: A. Constant &amp; W Sherlaw (EHESP), Monday September 3, 13:00-16:00.</p> <p><b>Session 3:</b> Tobacco control: A social marketing perspective. Instructor: Emmanuelle Béguinot (CNCT), Monday September 10, 9:30-12:00</p> <p><b>Session 4:</b> Designing an innovative m-health intervention to promote health Instructors: A. Constant &amp; W Sherlaw (EHESP), Monday September 10, 13:00-16:00.</p> <p><b>Session 5:</b> Introduction to Health Geography, Hugo Pilkington (Paris 8), Monday September 17, 9:00-12:00</p> <p><b>Session 6:</b> Designing an innovative m-health intervention to promote health Instructors: A. Constant &amp; W Sherlaw (EHESP), Monday September 17, 13:00-16:00.</p> <p><b>Session 7:</b>, Designing an innovative m-health intervention to promote health</p>

	<p>Instructors: A., 9:00-12:00, Monday September 24  <b>Session 8:</b> Preventing obesity: a review of strategies. Instructor: Jocelyn Raude (EHESP), Monday September 24  Constant &amp; W Sherlaw (EHESP) Monday September 25, 13:00-16:00.  <b>Session 9:</b> From mice to communities: Complex interventions in public health , Eric Breton (EHESP), Monday October 1, 9:00-12:00.  <b>Session 10:</b> Group presentations. Examiners: A. Constant &amp; W Sherlaw (EHESP), Monday October 1, 13:00-16:00.</p>
<p><b>Resource</b></p>	<p>The required readings for the course include a text by Rose and several articles. The text will be available at the EHESP Office in Reid Hall. The articles are available on the Real Platform. Supplemental readings (available on the Real Platform) can be read if you have time and interest.</p> <p><b>Textbook:</b></p> <p>Geoffrey Rose, Kay-Tee Khaw et Michael Marmot (2008). Rose's Strategy of Preventive Medicine, 2nd Revised edition. New York: Oxford University Press.</p> <p><b>Articles and reports (on electronic reserve):</b></p> <p>Hill JO. (2009) Can a small-changes approach help address the obesity epidemic? A report of the Joint Task Force of the American Society for Nutrition, Institute of Food Technologists, and International Food Information Council. Am J Clin Nutr. 89(2):477-84. (Available from: <a href="http://ajcn.nutrition.org/content/89/2/477.long">http://ajcn.nutrition.org/content/89/2/477.long</a>)</p> <p>Constant A, Messiah A, Felonneau M-L, Lagarde E (2012) Investigating Helmet Promotion for Cyclists: Results from a Randomised Study with Observation of Behaviour, Using a Semi-Automatic Video System. PLoS ONE 7(2): e31651. (Available from: <a href="http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0031651">http://www.plosone.org/article/info%3Adoi%2F10.1371%2Fjournal.pone.0031651</a>)</p> <p>Karine Gallopel-Morvan, Crawford Moodie, David Hammond, Figen Eker, Emmanuelle Beguinot, Yves Martinet (2012) Consumer perceptions of cigarette pack design in France: a comparison of regular, limited edition and plain packaging. Tobacco Control. 21:502-506.</p> <p>Michelle Campbell, Ray Fitzpatrick, Andrew Haines, Ann Louise Kinmonth, Peter Sandercock, David Spiegelhalter, Peter Tyrer (2000) Framework for design and evaluation of complex interventions to improve health. BMJ; 321:694–6.</p> <p>Christie J, O'Halloran P, CaanW, Cardwell CR, Young T, Rao M. (2010) Workplace-based organisational interventions to prevent and control obesity by improving dietary intake and/or increasing physical activity. Cochrane Database of Systematic Reviews, Issue 6. Art. No.: CD008546.</p> <p>Heath, G.W., et al. (2012) Evidence-based intervention in physical activity: lessons from around the world. Lancet., 380(9838): p. 272-81.</p> <p>Atkins, L. and S. Michie (2013) Changing eating behaviour: What can we learn from behavioural science? Nutrition Bulletin. 38(1): p. 30-35.</p> <p><b>Website:</b></p> <p>To access the course website, go to <a href="http://real.ehesp.fr/">http://real.ehesp.fr/</a> and click on Login. Enter your user name and password provided by EHESP to access to your account. The homepage lists of all the courses in which you are enrolled. Click on "Social and behavioural sciences in public health" to reach the course website.</p>
<p><b>Course requirement</b></p>	<p>Students are expected to attend all lectures and group works. Beyond 5:00 pm, attendance to group works is not required but permitted for preparing the final presentation.</p>
	<p><b><u>Innovation project:</u></b></p>

	<p>This exercise represents an essential part of the course since it provides students the opportunity to discuss and to use concepts and methods covered in the readings and lectures related to social and behavioral sciences. A group project has to be developed and conducted in groups of 6-7 students.</p> <p>We have chosen this approach as research suggests that it optimizes learning and should best prepare you for the professional life. Most of the group work has to be performed during class.</p> <p>The exercise will be devoted to the development and presentation of a project consisting in the design and evaluation of an evidence-based intervention in response to the following call for project:</p> <p><b>Designing an innovative m-health intervention to promote health.</b></p> <p>With the growth of mobile technologies and the Internet, health interventions are increasingly delivered online or with the use of technology. Several advantages of web-based interventions have been cited, including ability to reach many people with a single posting; easy storage of large amounts of information; ease of updating information; ability to provide personalized feedback; cost effectiveness and convenience for users; ability to reach people suffering from isolation or conditions that cause them to feel embarrassed or stigmatized; timeliness of access; user control of the intervention; supplier control of the intervention; and ease of adapting information for specific populations. Interventions using mobile technologies could be implemented to reach one or several of the following objectives</p> <p><i>Teaching &amp; Learning Methodology</i></p> <p><i>Students will work on projects defined through the aid of a set of cards stipulating different dimensions of the project such as setting , population, issue to be tackled etc. Each student group will draw a card which broadly defines a dimension of their future project . This will set the stage for discussions around the opportunities and constraints to be taken into account within the project. The project will also introduce time constraints within the different phases of innovation. For each card selected students will have a limited time for discussion. Having defined the key dimensions of their project such as target population to be addressed they will be asked to design a project with SMART objectives to address the issue that emerges. They are encouraged to draw on their experience and motivations.</i></p> <p><i>Note that M-health interventions have the potential to complement face to face interventions, not to replace them. The projects should include a brief analysis of the added value of health as compared to current situations and/or approaches. Existing infrastructures, resources and/or programs should be used in the interventions as much as possible. The project must include plans to involve different stakeholders.</i></p> <p><i>The program budget for the period 2017-2020 is € 100,000/year/project. 2 Projects will be pre-selected.</i></p>
<p><b>Grading and assessment</b></p>	<p>There are two cumulative exams. The first exam will evaluate the quality (relevance, feasibility and adequacy) of the projects developed by the groups of students in class, as well as the quality of the collaboration (40% of the final mark). These projects are assigned to be presented in class during 15 mn (+5 mn devoted to discussion) by each group of students on Monday, the 3<sup>rd</sup> of October. A prize will be also given to the two best projects.</p> <p>The second exam – designed to verify the attendance to lectures and the reading of the text – will evaluate students' responses to a series of questions related to 1) the social, ecological and psychological factors affecting health behaviors, and 2) the merits and limitations of a range of public health programs, policies and interventions designed to improve health of individuals and populations (60% of the final mark). More information on the second exam will be given later.</p> <p>Note also that students will complete a questionnaire that assesses their own and their teammates' contributions to group work. All team members will receive the same grade except if it is clear that a student has not participated effectively (attended and contributed to meetings; made timely, helpful contributions; been constructive, etc.). In that case, the</p>

	student's grade will be lowered accordingly.
<b>Course policy</b>	<p><b>Attendance &amp; punctuality</b>  <b>Regular and punctual class attendance is a prerequisite for receiving credit in a course.</b> Students are expected to attend each class. Attendance will be taken at each class. The obligations of attendance and punctuality cover every aspect of the course: - lectures, conferences, group projects, assessments, examinations, as described in EHESP Academic Regulations <a href="http://mph.ehesp.fr">http://mph.ehesp.fr</a> EHESP Academic Regulation Article. 3).  If students are not able to make it to class, they are required to send an email to the instructor and to the MPH program coordinating team explaining their absence prior to the scheduled class date. All supporting documents are provided to the end-of-year panel.</p> <p>Students who miss class are responsible for content. Any student who misses a class has the responsibility for obtaining copies of notes, handouts and assignments. If additional assistance is still necessary, an appointment should be scheduled with the instructor. Class time is not to be used to go over material with students who have missed class.</p> <p><b>Lateness:</b> Students who are more than 10 minutes late may be denied access to a class. Repeated late arrivals may be counted as absences (See <a href="http://mph.ehesp.fr">http://mph.ehesp.fr</a> EHESP Academic Regulation Article. 3 Attendance &amp; Punctuality)</p> <p><b>Maximum absences authorized &amp; penalty otherwise</b>  Above 20% of absences will be designated a fail for a given class. The students will be entitled to be reassessed in any failed component(s). If they undertake a reassessment or they retake a module this means that they cannot normally obtain more than the minimum pass mark (i.e. 10 out of 20)</p> <p><b>Exceptional circumstances</b>  Absence from any examination or test, or late submission of assignments due to illness, psychological problems, or exceptional personal reasons must be justified; otherwise, students will be penalized, as above mentioned. Students must directly notify their professor or the MPH academic secretariat before the exam or before the assignment deadline. Before accepting the student's justification, the professor or the MPH academic secretariat has the right to request either a certificate from the attending physician or from a psychologist, or from any other relevant person (See <a href="http://mph.ehesp.fr">http://mph.ehesp.fr</a> EHESP Academic Regulation Article 4 Examinations).</p> <p><b>Courtesy:</b> <u>All cell phones/pages MUST be turned off during class time.</u>  Students are required to conduct themselves according to professional standards, eating during class time is not permitted during class time, such as course or group work.</p>
<b>Valuing diversity</b>	<p>Diversity enriches learning. It requires an atmosphere of inclusion and tolerance, which oftentimes challenges our own closely-held ideas, as well as our personal comfort zones. The results, however, create a sense of community and promote excellence in the learning environment. This class will follow principles of inclusion, respect, tolerance, and acceptance that support the values of diversity. Diversity includes consideration of: (1) life experiences, including type, variety, uniqueness, duration, personal values, political viewpoints, and intensity; and (2) factors related to "diversity of presence," including, among others, age, economic circumstances, ethnic identification, family educational attainment, disability, gender, geographic origin, maturity, race, religion, sexual orientation and social position.</p>
<b>Course evaluation</b>	<p>EHESP requests that you complete a course evaluation at the end of the school year. Your responses will be anonymous, with feedback provided in the aggregate. Open-ended comments will be shared with instructors, but not identified with individual students. Your participation in course evaluation is an expectation, since providing constructive feedback is a professional obligation. Feedback is critical, moreover, to improving the quality of our courses, as well as for instructor assessment.</p>