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### COMX 591.01: Special Topics - Interpersonal Health Communication Seminar

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# COMX 591: Interpersonal Health Communication Seminar

Fall 2021

**Professor:** Heather Voorhees, Ph.D.  
**E-mail:** [heather.voorhees@mso.umt.edu](mailto:heather.voorhees@mso.umt.edu)

**Class meetings:** Tuesdays, 4-7 p.m., LA 202

**Office hours:** Tuesdays, 2-4 p.m.  
Eck Hall 356

## **Required texts:**

Duggan, A. (2019). *Health and Illness in Close Relationships*. Cambridge.

Thompson, T. & Schulz, P. (2021). *Health Communication Theory*. Wiley-Blackwell.

## **Course Description & Objectives**

Within the umbrella of “health communication,” there are myriad perspectives and contexts to consider. This graduate-level class goes beyond rote memorization of terms and theories, to more deeply analyze health-related interpersonal communication. Specifically, we will read, engage with, and dissect existing research on patient-provider communication, patient-supporter communication, and provider-provider communication, in various illness contexts (e.g. cancer, Alzheimer’s, infertility, etc.). Throughout the course, we will focus on topics like illness identity, social support, uncertainty management, coping, decision-making, and health disparities. Along the way, we will explore major health communication theories and learn best practices for conducting our own health communication research. Lastly, we will discuss ways to bring research into the “real world,” and how to pragmatically apply course learnings to non-academic situations.

### **By the end of this course, you will be able to:**

- explain several leading communication theories and understand how they relate to health communication.
- explain different research methodologies, describe the various research paradigms, and understand when to use various combinations of each.
- actively engage with and synthesize academic readings and research.
- construct an educational, engaging presentation about a specific research topic and present it to a group of your peers.
- integrate course learnings into your scholarly and professional career, whether or not it is specifically health communication oriented.

## Course Assignments and Grading

Let's get to the good stuff. The final grading breakdown is as follows:

<u>Assignment</u>	<u>Points/Percentage</u>
6 Short Reflection Essays	60 points (10 points each)
Discussion Leadership	40 points
Final Exam	70 points
<u>In-Class Engagement and Participation</u>	<u>30 points</u>
TOTAL	200 points

### **Reflection Essays (6 essays, 10 points each):**

Write a short reflection essay for each of six different weeks of class. Choose which six weeks you would like to complete these assignments (outside of your presentation project week); however, please follow these guidelines (at least one in weeks 3-5; at least one in weeks 6-8; at least one in weeks 9-11; and at least one in weeks 12-14. You can choose when to write the 5<sup>th</sup> and 6<sup>th</sup> reflections.

- a. 500-600 words (yes, you must be *under* 600 words), 1-inch margins, 12-point font (APA style)
- b. Turned in through Moodle by 11:59 pm the night before class.
- c. Reference and synthesize all of that week's readings by answering at least two of the following questions:
  - How do these articles tie together? Be specific, and be critical in your analysis. ("They're all about social support" is not a good answer.)
  - In your opinion, what are the most compelling/unique theoretical and applied contributions from this body of work? Support your explanation with details from the readings.
  - What questions/concerns come to mind when considering these articles as a whole?
  - What is the most interesting thing you learned from these readings (either a theme that ran throughout, or an interesting idea or concept from one)?
  - If you could ask one of these scholars anything, what would you ask them?

### **Discussion Leadership (40 points):**

*"You never really know something until you teach it to someone else." - John C. Maxwell*

To hone your teaching skills and learn how to explain complex topics to a group of peers, one week this semester, you will be in charge of leading an in-class discussion about, and activity related to, that week's articles. (We will create the schedule during Week 1.) This presentation will be roughly 35-45 minutes long, and will involve the student leader:

- Assigning an extra empirical research article for all students to read that week (you must submit your article to me, to share with the class, by end-of-day Thursday the week BEFORE class).
- Sharing at least three discussion prompts with the class, regarding your "extra" article AND the other assigned articles of the week. You may want to ask about a common theme amongst the articles, or specific highlights from one or more articles.
- Presenting a 10-minute overview of that week's assigned theory, specifically how it is used in health communication
- Leading a 15- 20-minute class activity that deepens our understanding of (and memory for) this theory.

Specific grading rubrics will follow, and will guide you toward what you will be graded on. In general, I will look for: a) an interesting and relevant "extra" article, and a solid understanding of it; b) a clear

explanation of the theory's main tenets, in language that your peers can understand; c) an engaging, well-planned activity that explains or enlighten a key part of this theory.

### **Final Exam (70 points):**

Rather than a traditional test or writing a research proposal that you will likely never employ, the final exam will be a take-home essay exam. The exam will consist of three questions, and you will write 3 pages (double-spaced) in response to each. I will announce your questions in class and on Moodle, and you will have one full week to finish your exam and turn it in via Moodle. You may (obviously) use any class notes, articles, or other resources to craft the most compelling arguments to each question. For this exam, I expect:

- 12-point font, 1-inch margins, APA style (duh)
- Full sentences and master's-level writing – no punctuation or grammar mistakes, no misspellings. Copyedit thoroughly before you submit.
- Thoughtful, critical arguments that demonstrate honest reflection about each question.
- At least three research citations per answer, which support your argument.
- A Reference section (does not count toward word limit), properly formatted in APA style.

### **In-Class Engagement and Participation (30 points):**

Look: I don't expect you to be "on" for three hours every single week. I understand that there are weeks when you're just not connecting to the material, or not "feeling it," in general. That's okay. However, because seminar classes are only as good as their participants, **your participation is valuable, desired, and impactful!** I want to hear your opinions and your peers want to learn from you.

To that end, I will take attendance every week; missing one week is understandable, but after that, you will lose 1 point for every class absence. I will also take weekly notes on who participates in class discussions, who asks questions, and who is engaged in activities. I will base your overall engagement grade on your general level of participation. (Note: If you have a specific issue that prevents you from engaging in class, let me know ahead of time. I try to be understanding, and I realize that Life Happens, but I can only help you if you reach out.

### **What I Expect From You**

1. A willingness and dedication to reading the assigned articles and chapters, and being prepared to discuss them in class.
2. Engagement in class conversations and activities, especially when your fellow students are leading discussion or presenting.
3. Consistency in submitting thoughtful, high-quality assignments on time.
4. Respectful and timely communication with me when you have questions, concerns, or need special accommodations or assistance.
5. Courteous and compassionate treatment of your fellow classmates, both during and after class. Health communication encompasses many sensitive topics, such as reproductive and sexual health, mental health issues, death and dying, family struggles, etc. I expect you to listen carefully and respectfully to others' experiences, and reserve judgement or personal opinions about someone else's life.
6. Curiosity, and a willingness to ask questions – even "dumb questions." If you don't understand something, you never will unless you ask for help. It's okay to occasionally say, "Uh, Prof. Voorhees? I have no idea what this article meant!"

7. Assumption of good intent. When we talk about issues such as health disparities or diverse family structures, classmates (and I!) may inadvertently say something offensive, or ask a question that seems hurtful or judgmental. Assume that people are coming from a place of misunderstanding, not cruelty.

As a graduate student, specific +or – grades don't matter as much as your overall comprehension of, and participation with, the subject material. Therefore, grades will be based on the following scale:

- A = **90-100%**, EXCELLENT. Greatly exceeds requirements. Shows outstanding levels of creativity, skill, initiative, and/or effort
- B = **80-89%**, GOOD. Exceeds requirements. Shows substantial creativity, skills, initiative, and/or effort
- C = **70-79%**, AVERAGE. Meets the requirements in every respect, but does not exceed requirements
- D = **60-69%**, BELOW AVERAGE. Meets some requirements, but deficient in others
- F = **Below 60%**, POOR. Deficient in most or all requirement

Final grades will be rounded to the nearest percent: for example, 84.6% will round up to 85%. 84.3% will round down to 84%.

## **Tentative Course Schedule** **Subject to change throughout semester**

\* denotes chapters in required textbooks

### **Week 1 (Aug. 31): Intro to health communication**

\*Duggan Chap. 1: "Defining Health & Illness"

Parrot, R. (2011). Point of Practice: Keeping "Health" in Health Communication Research and Practice, *Journal of Applied Communication Research*, 39:1, 92-102.

### **Week 2 (Sept. 7): Methodologies and Paradigms – What are they, and what is yours?**

\*Thompson & Schultz, Chapter 3: "When Theory and Method Intertwine"

Kramer, M. (2010). It Depends on Your Criteria. *Communication Monographs*, 77(4), 434–436.

Baxter & Babbie (2004). Chapter 3: Paradigms of Knowing in Communication Research. In: *The Basics of Communication Research*. p. 46-67.

### **Week 3 (Sept. 14): Illness and Romantic Partnerships**

\*Duggan, Chapter 3: "Attributes of the Health and Illness Contexts for Relationship Processes"

Goldsmith, D. J., Miller, L. E., & Caughlin, J. P. (2008). Openness and avoidance in couples' communication about cancer. *Communication Yearbook*, 31, 62-115.

Kindt, S., Vansteenkiste, M., Cano, A., & Goubert, L. (2017). When is your partner willing to help you? The role of daily goal conflict and perceived gratitude. *Motivation and Emotion*, 41(6), 671-682.

Pettigrew, J., & Pettigrew, B. (2011). In Sickness and in Health: Coping with Chronic Illness While Transitioning into Marriage. In Miller-Day, M. *Family Communication, connections, and health transitions*. pp. 245-266.

## **Week 4 (Sept. 21): How Illness Changes Families**

### **Theory: Communication Privacy Management**

\*Thompson & Schulz, Chapter 5: "Families Interacting in the Healthcare Context"

Segal, J. (2017). Parents. In *The Trouble With Illness*. Jessica Kingsley Publishers.

Cipolletta, Sabrina, & Amicucci, Linda. (2015). The family experience of living with a person with amyotrophic lateral sclerosis: A qualitative study. *International Journal of Psychology*, 50(4), 288-294.

Ngwenya, N., Farquhar, M., & Ewing, G. (2016). Sharing bad news of a lung cancer diagnosis: Understanding through Communication Privacy Management Theory. *Psycho-Oncology*, 25, 913-918.

## **Week 5 (Sept. 28): Social Support and Coping**

### **Theory/Approach: Communal Coping (Kam)**

Goldsmith, D. (2004) Puzzles in the Study of Enacted Social Support. In *Communicating Social Support*. pp 10-24. Cambridge.

Affi, T. D., Basinger, E. D., & Kam, J. A. (2020). The extended theoretical model of communal coping: Understanding the properties and functionality of communal coping. *Journal of Communication*, 70(3), 424-446.

Williams, K. M. (2018). My sister's keeper: Sibling social support and chronic illness. *Journal of Medical Humanities*, 39(2), 135-143.

## **Week 6 (Oct. 5): Cultural Approaches to Health and Wellness**

### **Theory/Approach: Culture-Centered Approach (CCA) and Cultural Grounding**

\*Thompson & Schulz, Chapter 14: "Cultural Theories of Health Communication."

Airhihenbuwa, C. O. (1995). Health, healing, and medicine as cultural constructs. In *Health and Culture: Beyond the Western Paradigm* (pp. 47-62). Thousand Oaks, CA: Sage Publications.

Dutta, M. J., Collins, W., Sastry, S., Dillard, S., Anaele, A., Kumar, R., ... & Bonu, T. (2018). A culture-centered community-grounded approach to disseminating health information among African Americans. *Health Communication, 34* (10). 1075-1084.

Satterfield, D., Burd, C., Valdez, L., Hosey, G., & Shield, J. E. (2002). The “In-Between People”: Participation of Community Health Representatives in Diabetes Prevention and Care in American Indian and Alaska Native Communities. *Health Promotion Practice, 3*(2), 166–175.

## **Week 7 (Oct. 12): Illness Identity**

### **Theory: Communication Theory of Identity**

Martin, S. C. (2016). The experience and communicative management of identity threats among people with Parkinson's disease: Implications for health communication theory and practice. *Communication Monographs, 83*(3), 303-325.

Miller, L. E., & Caughlin, J. P. (2013). “We’re going to be survivors”: Couples’ identity challenges during and after cancer treatment. *Communication Monographs, 80*(1), 63–82.

Palmer-Wackerly, A. L., Voorhees, H., D’Souza, S., & Weeks, E. (2019). Infertility patient-provider communication and (dis)continuity of care: An exploration of illness identity transitions. *Patient Education and Counseling, 102*(4), 804-809.

## **Week 8 (Oct. 19): Illness, Stigma and Communication**

### **Theory: Social Identity Theory**

Haslam, S. A., Jetten, J., Postmes, T., & Haslam, C. (2009). Social Identity, Health and Well-Being: An Emerging Agenda for Applied Psychology. *Applied Psychology: An International Review, 58*(1), 1–23.

Smith, R. A. (2011). Stigma, communication and health. In T. L. Thompson, R. Parrott, & J. F. Nussbaum (Eds.). *The Routledge handbook of health communication*. New York: Routledge, pp. 455-468.

Villagran, M. M., & Sparks, L. (2010). Social identity and health contexts. *The Dynamics of Intergroup Communication, 8*, 235-247.

## **Week 9 (Oct. 26): Disclosure**

### **Theory: Disclosure Decision-Making Model**

**Special Guest: Dr. Maria Venetis, Rutgers University**

\* Duggan, Chapter 6: “Relationship Theories Applied to Illness Transitions”

Barned, C., Stinzi, A., Mack, D., & O'Doherty, K. C. (2016). To tell or not to tell: A qualitative interview study on disclosure decisions among children with inflammatory bowel disease. *Social Science & Medicine*, 162, 115-123.

Choi, S. Y., Venetis, M. K., Greene, K., Magsamen-Conrad, K., Checton, M. G., & Banerjee, S. C. (2016). Planning a stigmatized nonvisible illness disclosure: Applying the disclosure decision-making model. *The Journal of Psychology*, 150(8), 1004-1025.

Checton, M. G., & Greene, K. (2012). Beyond initial disclosure: The role of prognosis and symptom uncertainty in patterns of disclosure in relationships. *Health Communication*, 27(2), 145-157.

## **Week 10 (Nov. 2): Uncertainty and Information Seeking**

**Theory: Communication and Uncertainty Management Theory**  
**Special Guest: Dr. Erin Donovan, University of Texas at Austin**

\*Thompson-Schulz, Chap. 13: Theories of Uncertainty

Donovan-Kicken, E., & Bute, J. J. (2008). Uncertainty of social network members in the case of communication-debilitating illness or injury. *Qualitative Health Research*, 18(1), 5-18.

Walker, K. K., Head, K. J., Bute, J., Owens, H., & Zimet, G. D. (2021). Mothers' Sources and Strategies for Managing COVID-19 Uncertainties during the Early Pandemic Months. *Journal of Family Communication*, 1-18.

## **Week 11 (Nov. 9): Health Decision-Making**

**Theory: Theory of Planned Behavior**

Johnson-Young, E. A. (2019). Predicting intentions to breastfeed for three months, six months, and one year using the theory of planned behavior and body satisfaction. *Health Communication*, 34(7), 789-800.

Epstein, R. M. (2013). Whole mind and shared mind in clinical decision-making. *Patient Education and Counseling*, 90, 200-206.

Fontana, J., Cranmer, G. A., Ash, E., Mazer, J. P., & Denham, B. E. (2021). Parent-child communication regarding sport-related concussion: An application of the theory of planned behavior. *Health communication*, 1-12.

Krieger, J. L. (2014). Family communication about cancer treatment decision making. *Communication Yearbook*, 38, 279-305.

## **Week 12 (Nov. 16): Clinician-Patient-Family Communication**



## **Theory: Communication Accommodation Theory**

\*Thompson & Schulz, Chapter 6: “Theoretical Frameworks of Provider-Patient Interaction”

Cegala, D. J., & Post, D. M. (2009). The impact of patients’ participation on physicians’ patient-centered communication. *Patient Education and Counseling*, 77, 202-208.

Nanton, V., Munday, D., Dale, J., Mason, B., Kendall, M., & Murray, S. (2016). The threatened self: considerations of time, place, and uncertainty in advanced illness. *British Journal of Health psychology*, 21(2), 351-373.

Farzadnia, S., & Giles, H. (2015). Patient-provider interaction: a communication accommodation theory perspective. *International Journal of Society, Culture & Language*, 3(2), 17-34.

## **Week 13 (Nov. 23): OUT-OF-CLASS WORK DAY/HAPPY THANKSGIVING!**

## **Week 14 (Nov. 30): Inter-professional Health Communication**

### **Theory: Multiple Goals Framework**

**Special Guest: Dr. Beth Thomas, D.O., Chief Medical Officer at Fairview Health Services (Minneapolis-St. Paul)**

Adams, E. T., Cohen, E. L., Bernard, A., Darnell, W., & Helme, D. W. (2018). Trauma trainees’ multiple competing goals in opioid prescription communication. *Qualitative Health Research*, 28(13), 1983-1996.

DiazGranados, D., Dow, A. W., Appelbaum, N., Mazmanian, P. E., & Retchin, S. M. (2018). Interprofessional practice in different patient care settings: A qualitative exploration. *Journal of Interprofessional Care*, 32(2), 151-159.

Solet, D. J., Norvell, J. M., Rutan, G. H., & Frankel, R. M. (2005). Lost in translation: challenges and opportunities in physician-to-physician communication during patient handoffs. *Academic Medicine*, 80(12), 1094-1099.

Watson, B. M., Hewett, D. G., & Gallois, C. (2012). Intergroup communication and health care. In H. Giles & C. Gallois (Eds.), *The handbook of Intergroup Communication* (pp. 293–305). New York: Routledge.

## **Week 15 (Dec. 7): Health Disparities and How Communication Can Address Them**

### **Theory/ Framework: The Social-Ecological Model**

\*Duggan, Chapter 4: “Relationships as Buffering or Exacerbating Health and Illness Outcomes”

Van Ryn, M., & Fu, S. S. (2003). Paved with good intentions: do public health and human service providers contribute to racial/ethnic disparities in health?. *American Journal of Public Health*, 93(2), 248-255.

Kaiser, J. L., Fong, R. M., Hamer, D. H., Biemba, G., Ngoma, T., Tusing, B., & Scott, N. A. (2019). How a woman's interpersonal relationships can delay care-seeking and access during the maternity period in rural Zambia: an intersection of the social ecological model with the three delays framework. *Social Science & Medicine*, 220, 312-321.

Ndiaye, K., Krieger, J. L., Warren, J. R., & Hecht, M. L. (2011). Communication and health disparities. In T. L. Thompson, R. L. Parrott, & J. F. Nussbaum (Eds.), *Handbook of Health Communication* (2nd ed., pp. 469-481). New York, NY: Routledge.

## **Week 16 (FINALS WEEK): NO CLASS—WORK ON TAKE-HOME TEST** **Expectations for Assignments**

### **Late Work Policy**

Weekly quizzes and activities, and Application Activities will be accepted up to 24 hours after the deadline, for a penalty of 20% of total points.

### **Writing Quality**

All papers are expected to reflect university-level writing quality: spelling, organizational, and grammatical errors will greatly reduce your final grade. The University's Writing and Public Speaking Center offers one-on-one assistance with written assignments and oral presentations, available on a drop-in or by-appointment basis. They can provide feedback on written assignments, as well as help develop strategies for re-writes. Information on these services can be found at [www.umt.edu/writingcenter/](http://www.umt.edu/writingcenter/).

### **Academic Integrity**

As a student of the University of Montana, you must practice academic honesty and are bound by the following Code of Academic Conduct: <http://www.umt.edu/student-affairs/community-standards/student-code-of-conduct-2020-pdf>. Academic misconduct includes:

- Plagiarism (see below)
- Misconduct during an examination or academic exercise
- Unauthorized possession of examination or other course materials
- Tampering with course materials
- Submitting false information
- Submitting work previously presented in another course
- Improperly influencing conduct, such as influencing an instructor to unfairly change your grade
- Substituting for another student during an examination
- Facilitating academic dishonesty, or knowingly helping another person commit academic dishonesty

### **What is plagiarism?**

All course work should be original and unique for this class (i.e., do not use work from other courses even if it is your own). Plagiarism is defined as quoting or paraphrasing from other sources without acknowledging/citing the source of your information, or presenting quoted material as your own words.

Examples of plagiarism include:

- Cutting-and-pasting material, or paraphrasing ideas, from an academic source without **properly** citing it.
- Using portions of something you wrote in a previous class in an assignment in this course (yep, you can plagiarize yourself!)
- Reviewing a friend's assignment, then using a couple sentences of hers in your own assignment
- Purchasing essays from an online service (if someone else wrote it, but your name is on it, it's plagiarism, PLAIN AND SIMPLE).

Plagiarism results in, at minimum, failure on the assignment, but can result in failure of the course and reporting to academic authorities at the university.

You must be very clear about attribution of sources and you must know how to cite sources in a paper. Students who are unfamiliar with how to cite sources should consult a style manual guide, such as [https://owl.purdue.edu/owl/research\\_and\\_citation/resources.html](https://owl.purdue.edu/owl/research_and_citation/resources.html). If you have questions concerning what constitutes plagiarism, please discuss this with me. Not knowing the definition of plagiarism does not excuse you from the consequences.

### **Breaking the Code of Academic Conduct Integrity**

If I suspect you of breaking the Code of Academic Conduct in any way, I will first request a private conversation with you to discuss the issue. If, after that meeting, I still have suspicions and/or proof of inappropriate behavior, I will report the matter to the department chair and/or the college dean. You are entitled to dispute the claim, and appeal any decision made in your case. Please review the Code of Academic Conduct for more details.

Consequences for breaking the Code of Academic Conduct can include, but is not limited to: failing the assignment; failing the course; suspension or expulsion from the University; or the University's refusal to grant a degree.

### **Accommodations for Students with Disabilities**

Students with disabilities are encouraged to contact the instructor for a confidential discussion of their individual needs for academic accommodation. It is the policy of the University of Montana to provide flexible and individualized accommodation to students with documented disabilities that may affect their ability to fully participate in course activities or to meet course requirements. To receive accommodation services, students must be registered with Disability Services for Students, at [dss@umontana.edu](mailto:dss@umontana.edu) or (406) 243-2243.