

Tufts University, Friedman School of Nutrition Science and Policy

NUTC 213 -- Behavior Change Theory and Positive Deviance

Spring 2017

(January 19, 2017 – April 23, 2017)

- Instructor(s):** Kristie Hubbard, PhD, MPH, RD
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WebEx Personal Room: <https://tufts.webex.com/meet/kusher01>
- Office hours:** Office hours online via WebEx, Fridays at 10 AM EST or by appointment. Available daily via email.
- Graduate Credits:** 1.0 credit in the certificate program
- Prerequisites:** None

Course Description:

How do you achieve behavior change in any environment or culture? This course explores that question, first by examining theories of behavior change commonly used in nutrition and public health and then with an in-depth introduction to the Positive Deviance (PD) approach. In the first half, several individual-based, social-based, and organization-based theories will be explored, with an emphasis on understanding of core theory concepts and issues in measurement. Building on this base, the second half will cover the concept, theory, history and application of PD. Students will identify a specific professional behavioral change situation, determine whether behavioral change approaches or the PD approach is the appropriate course of action, and map out the steps required to apply the chosen approach to their identified problem.

Course Objectives:

By the end of this course, students will be able to:

- Describe the fundamental features of several major theories related to health behavior change.
- Identify issues around construct measurement, including reliability and validation.
- Define Positive Deviance (PD) and explain the major concepts behind it.
- Apply health-related behavior theory and the PD approach to the student's own research or evaluation-based program intervention of interest.
- Challenge each theory and the PD approach, describing its utility, strengths, and limitations in relation to particular research and program delivery contexts.
- Compare and contrast behavior change theories with the PD approach; identify where behavior change theories can be integrated with the PD approach.

- Consider the ethical implications of using theory and the PD approach to change human behavior.
- Continually question, in both work and general life, what drives people to do what they do.

Texts or Materials:

Glanz K, Rimer BK & Viswanath K, editors (2015). *Health Behavior: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass.

**Text (available to students as e-book from the Tufts Hirsh Sciences Library, <http://hirshlibrary.tufts.edu/>, search books)

Journal articles will be posted on the course website. Some of these articles describe the original development of theories and others describe the recent application to topics of interest.

Academic Conduct:

Each student is responsible for upholding the highest standards of academic integrity, as specified in the Friedman School’s Policies and Procedures manual (<http://nutrition.tufts.edu/student/documents>) and Tufts University policies ([http://uss.tufts.edu/studentaffairs/judicialaffairs/Academic Integrity.pdf](http://uss.tufts.edu/studentaffairs/judicialaffairs/Academic%20Integrity.pdf)). It is the responsibility of each student to understand and comply with these standards, as violations will be sanctioned by penalties ranging from failure on an assignment and the course to dismissal from the school. Academic misconduct is any intentional act or omission by a student which misrepresents his or her academic achievements, or attempts to misrepresent them. While not an exhaustive list, the following acts constitute academic misconduct:

- Plagiarism - any representation of the work of another as his or her own constitutes plagiarism. This includes the use of any written or oral work from which the student has obtained ideas or data without citing the source, or collaborating with another person in an academic endeavor without acknowledging that person’s contribution.
- Submitting the same work in more than one course without the consent of all the instructors;
- Misrepresentation or falsification of data

Assessment and Grading:

Weekly memos	40%
Participation in discussions – thoughtful comments on other memos, follow up to continue dialogue	45%
Final 2 page paper and presentation	15%

The following guidelines are used to evaluate course performance:

1. Class assignments will be evaluated on the basis of completeness, originality, scientific soundness and relevance to the assigned topic.
2. Written work will be evaluated on the quality of thought, completeness, and adherence to guidelines, scientific integrity, and ability to incorporate and communicate ideas and information effectively.
3. Adherence to instructions and guidelines of the assignments.
4. On-line discussions will be evaluated according to the discussion matrix (see the Discussion assignment Grading Criteria section).

Participation Policy

Time extensions, make-up work, and a grade of Incomplete will only be given under the most extreme circumstances. Requests for these items must be made in advance, in writing, to the Dean for Academic Affairs and must have prior approval, in writing, of the academic adviser and the instructor.

Communication Policy

Students should try to seek out information for themselves before contacting the instructor. The answers to questions may have already been posted by peers or the instructor in the discussion board, which can be found on the course website. Please use the discussion board to post questions to fellow students and the instructor about any course-related issues. If you cannot find the answer, contact the faculty via email as soon as possible. Please do not wait until the last minute. Since students may not all be in the same time zone, you must give us time to respond to your question. Faculty will respond within 48 hours.

Penalties for late or incomplete assignments

Assignments should be completed according to the instructions provided in the course website and should be completed on time. Assignments turned in past the due date without notifying the instructor in advance will have 10% per day automatically deducted from the grade for the assignment.

Technical Support for Online Courses and Programs @ Friedman

Online course support is provided by Friedman support staff and/or IT Support. Please do not contact faculty for technical support.

- **Telephone:** (617) 627-3376
- **Email:** trunk@tufts.edu
- **Hours:** 24 hours a day, seven days a week.

When reporting a problem, please include:

- The name and number of your online course (e.g. "NUTB 205 Online")
- Your operating system and browser
- A detailed description of the problem

This information will expedite the troubleshooting process. If you are sending a support request via email, please use your Tufts email address.

Weekly Memos

A key objective of this course is for students to apply behavioral theory and the PD approach to their own research or evaluation-based program intervention of interest. Analysis of the potential utility, strengths, and limitations of each theory and the PD approach in relation to a specific research or program context is critical to that understanding. As such, by week the end of the first week, students will be required to choose a specific professional behavior change situation to address throughout the semester.

The best learning occurs through a continuous dialogue, not the one-way transfer of information from an “expert” to a “student.” As a way of beginning dialogue, each week you will be required to write a memo, which will be a short reflection paper in which you explore the ideas covered in the week’s readings and how they influence your thinking about the specific professional behavior change situation that you have chosen to address. The dialogue initiated by the memo will continue with classmates and the instructor through the online discussion.

The memos will make up the bulk of the writing for this course. There will be no long papers, and in keeping with a dialogical approach to teaching, there will be no exam. However, because these weekly memos form the bulk of the writing for the class, they will be very important. They may also eventually serve as a starting point for a grant or project proposal for your own work.

Students are expected to submit memos on time and adhere to a 500-word limit. Please note, writing beyond 500 words will not be read by the instructor. The word limit is in place and enforced to facilitate the development of clear and concise writing skills. Additionally, the online discussion is the opportunity for elaborating on ideas raised in the memos. Memos should be submitted to the instructor by 9 pm EST, each Sunday evening. Please see the “Assignments Page” of the course site for the exact due date of each memo. A shorter summary (bullet points are also acceptable) of the main points from the memo should also be posted to the discussion board each week at the same time that the memo is submitted.

Below is the rubric for the evaluation of the memos:

Components	Expected Level of Competence	Moving Towards Expected Level of Competence	Below Expected Level of Competence
<i>Timely submission of assignment</i>	Complete memo on time each week.	Memo is submitted late.	Memo is not submitted.
<i>Style guidelines</i>	Adheres to word limit. Writing is clear and succinct. Demonstrates care in writing, which may be informal, but thoughtful. The memo has a smooth flow of ideas and is well organized and logical.	Does not adhere to word limit. Writing lacks clarity in some places. Flow of ideas could use some improvement. Memo is too lengthy when the point could have been made with fewer words.	Does not adhere to word limit. Writing lacks clarity throughout. Flow of ideas is rough. Memo is not well organized. Memo is lengthy yet fails to provide a proper application of the theory or of the PD step.
<i>Demonstrates careful reading & inquiry into subject</i>	Demonstrates serious contemplation of the readings. Shows original thought that goes beyond the obvious.	Demonstrates reading was completed, but relies primarily on summary rather than integration of information.	Reading assignment scanned, but not read carefully or gives little indication that readings were completed.
<i>Application to professional behavior change situation</i>	Articulates how to apply the behavioral theory or PD approach to chosen professional situation; articulates strengths and limitations of the theory's application. Elaborates statements with accurate explanations, reasons, or evidence.	Provides general discussion of application but lacks specifics or thoughtful critique. Takes a position with respect to theory application but with little evidence or explanation. Examples to support points are not well integrated or not effective.	Missing or limited application. Little evidence used to support points or evidence is out of context.

Discussion Assignment Grading Criteria

Substantive discussion is a critical element contributing to understanding and integration of the concepts and topics covered in this course. Students are expected to contribute to the discussion by responding to the posted brief memos of other students with thoughtful questions, observations, or suggestions for enhancing their application of a theory. They are also expected to engage with other students in ongoing discussion of their own memos. Some weeks include an activity in addition to the memo. Students are expected to contribute at least 4 substantive *responses* (the initial memo post does not count) to the discussion each week. During the weeks with an activity, at least 1 of the 4 *responses* in the discussion forum should be dedicated to the activity (again, the initial post to the activity does not count). The weekly discussion begins at 9 PM EST Sunday and ends at 9 PM EST Thursday. The first post to the discussion forum is due at the same time as the memo. The first *response to another student* should be posted no later than 24 hours after the discussion opens for the week (i.e., by 9PM EST Monday). Timeliness of discussion contributions is a factor in determining students’ discussion grade. Below is a rubric that describes how the discussion performance is evaluated:

Components	Expected Level of Competence	Moving Towards Expected Level of Competence	Below Expected Level of Competence
<i>Quantity and timeliness of contributions</i>	Frequently reads the messages in the discussion area. Contributes with at least 4 constructive responses each week. During weeks with an activity, at least 1 of 4 responses is dedicated to the activity.	Reads messages in the discussion area a few times per week. Contributes less than 4 constructive responses each week.	Reads messages in the discussion area intermittently (e.g. once per week) and contributes to the discussion only sporadically.
<i>Quality and relevance of post</i>	Messages are concise, clear, and thoughtful. Messages contribute something original or build upon what has been said; they are not repetitious.	Posts topics that are related to the discussion content, but messages only address peripheral issues. Messages dominated by opinion rather than analysis. Repetition of questions or points made by others.	Posts topics which do not relate to the discussion. Makes, short, irrelevant remarks or responds with minimum effort (e.g. “I agree with Sally”)

<i>Interaction with others</i>	Questions are raised to stimulate discussion. Encourages a variety of viewpoints. Responds to questions and comments from others. When disagreeing, does so respectfully. Comments are primarily student-to-student with comments and questions to the instructor as necessary.	Participation is evident, but posts do not involve others or encourage others to think critically.	Rarely raises questions to stimulate discussion and rarely responds to the questions and comments raised by others. Comments are predominantly student-to-instructor and are rarely student-to-student. Comments are unconstructive or non-courteous.
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Final Paper and Presentation

During the final week of class, a final memo (2 pages) is due. In week 13, students should determine whether traditional behavioral change theories or the PD approach is most appropriate to address their specific professional behavior change situation. The final memo should describe the overall application of the chosen approach to your professional behavior change situation. This memo should be more formally written and include citations and references to class readings. In addition to submitting the final memo, the student will be expected to post a brief, 5-10-minute presentation summarizing the final memo for the class.

Grading criteria:

- Formulate and describe an appropriate plan for professional behavior change situation, based on the PD approach or specific behavioral theory
- Synthesize what was learned over the semester
- Formally written with appropriate use of references

Accommodation of Disabilities:

Tufts University is committed to providing equal access and support to all students through the provision of reasonable accommodations so that each student may access their curricula and achieve their personal and academic potential. If you have a disability that requires reasonable accommodations, please contact the Friedman School Assistant Dean of Student Affairs at 617-636-6719 to make arrangements for determination of appropriate accommodations. Please be aware that accommodations cannot be enacted retroactively, making timeliness a critical aspect for their provision.

Course Schedule:

* This schedule is subject to modification at the instructor's discretion.

<u>Week #</u>	<u>Topic</u>	<u>Assignments Due</u>
1.	Orientation and Course Introduction	Post introduction
2.	Overview of Behavior Change Theory and Positive Deviance	Description of professional behavior change situation
3.	Health Belief Model	Memo 1, Activity
4.	Self-Efficacy	Memo 2, Activity
5.	Transtheoretical Model (Stages of Change)	Memo 3, Activity
6.	Social Cognitive Theory	Memo 4
7.	Social Support/Diffusion of Innovations	Memo 5
8.	Eco-Social Models	Memo 6, Activity
9.	Introduction to Positive Deviance	Memo 7, Activity
10.	PD Approach: Step 1 & 2	Memo 8, Activity
11.	PD Approach: Step 3 & 4	Memo 9
12.	Ethics	Memo 10
13.	Tying It All Together	Memo 11
14.	Finals Week	Final Paper and Presentation

Week 1: January 19-22, 2017
Orientation and Course Introduction

Learning objective:

- Familiarize yourself with the course site and key features of Trunk including weekly overviews, drop box, resources, and the gradebook

Preparation for class:

- Review the syllabus
- Browse the course site and materials
- Start thinking about a professional behavior change situation to focus on for the duration of the semester

Assignment for this week:

- Post a brief introduction on the discussion forum

Week 2: January 23-29, 2017

Overview of Behavior Change Theory and Positive Deviance

Instructor: Kristie Hubbard

Learning objectives:

- Explain the concept of a behavioral theory and how theory can inform research and practice
- Discuss the basics of theoretical constructs
- Gain a basic understanding of the Positive Deviance approach

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 1: The Scope of Health Behavior & Chapter 2: Theory, Research, and Practice in Health Behavior

Tina Rosenberg. Opinionator; <http://opinionator.blogs.nytimes.com/2013/02/27/when-deviants-do-good/>

Explore the PD website: www.positivedeviance.org.

Preparation for class:

- Complete the readings
- Explore the PD website

Assignments for this week:

- Submit a description of a professional behavior change situation to Assignments

Week 3: January 30 – February 5, 2017

Health Belief Model

Instructor: Kristie Hubbard

Learning objectives:

- Define what a rational actor model is
- Elaborate the concepts of perceived risk, barriers, benefits
- Give examples of cues to action

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 4: Introduction to Health Behavior Theories That Focus on Individuals & Chapter 5: The Health Belief Model

Hambolu D, Freeman J, Taddese HB. Predictors of bovine TB risk behaviour amongst meat handlers in Nigeria: a cross-sectional study guided by the health belief model. *PLoS One*. 2013; 8(2):e56091.

Mulualem D, Henry CJ, Berhanu G, Whiting SJ. The effectiveness of nutrition education: Applying the Health Belief Model in child-feeding practices to use pulses for complementary feeding in Southern Ethiopia. *Ecology of Food and Nutrition*. 2016; 55(3):308-23.

Preparation for class:

- Complete the readings

Assignments for this week:

- Memo #1 due
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post your proposal for measuring happiness, explained on course website (initial post plus at least one response to classmates)

Week 4: February 6-12, 2017

Self-Efficacy

Instructor: Kristie Hubbard

Learning objectives:

- Describe different methods to increase self-efficacy
- Distinguish self-efficacy from self-esteem or self-confidence
- Examine the confluence of outcome expectations and self-efficacy in predicting behavior

Readings for this class:

Bandura A, Adams NE, Beyer J. Cognitive processes mediating behavioral change. *Journal of Personality and Social Psychology*. 1977; 35:125-139.

Bandura A. (1992). Exercise of personal agency through the self-efficacy mechanism. In: Schwarzer R (ed). *Self-Efficacy: Thought Control of Action*. Washington, Hemisphere, pp 3-38.

Jarpe-Ratner E, Folkens S, Sharma S, Daro D, Edens NK. An Experiential Cooking and Nutrition Education Program Increases Cooking Self-Efficacy and Vegetable Consumption in Children in Grades 3–8. *Journal of Nutrition Education and Behavior*. 2016; 48(10):697-705.

Gerçek E, Sarıkaya Karabudak S, Ardiç Çelik N, Saruhan A. The Relationship between Breastfeeding Self-Efficacy and LATCH Scores and Affecting Factors. *Journal of Clinical Nursing*. 2016; 1-11.

Preparation for class:

- Complete the readings

Assignments for this week:

- Memo #2 due
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post your response to paper crane (initial post plus at least one response to classmates)

Week 5: February 13-19, 2017
Transtheoretical Model (Stages of Change)
Instructor: Kristie Hubbard

Learning objectives:

- Describe the different stages of change
- Compare and contrast the processes of change
- Explain the non-linear nature of progression through the stages

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 7: The Transtheoretical Model and Stages of Change.

Prochaska JO, Velicer WF, DiClemente C, Fava J. Measuring processes of change: Applications to the cessation of smoking. *J Consulting Clin Psychol*. 1988; 56(4):520-528.

Luby SP, Kadir MA, Sharker Y, Yeasmin F, Unicomb L, & Sirajul IM. A community - randomized controlled trial promoting waterless hand sanitizer and handwashing with soap, Dhaka, Bangladesh. *Tropical Medicine & International Health*. 2010; 15(12), 1508-1516.

Guess N, Vasantharajah L, Gulliford M, Viberti G, Gnudi L, Karalliedde J, Wijesuriya M. Improvements in stage of change correlate to changes in dietary intake and clinical outcomes in a 5-year lifestyle intervention in young high-risk Sri Lankans. *Preventive Medicine*. 2016; 90:193-200.

Preparation for class:

- Complete the readings

Assignments for this week:

- Memo #3 due
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post your response to smoking cessation campaign materials (initial post plus at least one response to classmates)

Week 6: February 20-26, 2017

Social Cognitive Theory

Instructor: Kristie Hubbard

Learning objectives:

- Describe the basics of inter-personal behavioral theory and the influence of the immediate environment on behavior
- Apply the concepts of observational learning *and* reciprocal determinism
- Explain the place of self-efficacy in the SCT

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 8: Introduction to Models of Interpersonal Influences on Health Behavior & Chapter 9: How Individuals, Environments, and Health Behavior Interact: Social Cognitive Theory.

Shet AS, Zwarenstein M, Mascarenhas M, Risbud A, Atkins S, Klar N, & Galanti MR. The Karnataka Anemia Project 2—design and evaluation of a community-based parental intervention to improve childhood anemia cure rates: study protocol for a cluster randomized controlled trial. *Trials*. 2015; 16(1): 599.

Singla DR, Kumbakumba E, Aboud FE. Effects of a parenting intervention to address maternal psychological wellbeing and child development and growth in rural Uganda: a community-based, cluster-randomized trial. *The Lancet Global Health*. 2015; 3(8):e458-69.

Knowlden A, Sharma M. One-Year Efficacy Testing of Enabling Mothers to Prevent Pediatric Obesity through Web-Based Education and Reciprocal Determinism (EMPOWER) Randomized Controlled Trial. *Health Education & Behavior*. 2016; 43(1): 94-106

Preparation for class:

- Complete class readings

Assignments for this week:

- Memo #4 due
- Discussion participation (initial post plus at least 4 *responses* to classmates)

Week 7: February 27 – March 5, 2017
Social Support/Diffusion of Innovations
Instructor: Kristie Hubbard

Learning objectives:

- Enumerate the attributes of an innovation that make it more likely to diffuse and consider the relevance of this in international settings
- Explain the mechanisms through which social support may influence individual behavior
- Introduce the role of social network characteristics in determining social support, diffusion of behaviors and norms, and social capital

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 10: Social Support and Health & Chapter 11: Social Networks and Health Behavior.

Juárez-Ramírez C, Théodore FL, Villalobos A, Jiménez-Corona A, Lerin S, Nigenda G, et al. Social Support of Patients with Type 2 Diabetes in Marginalized Contexts in Mexico and Its Relation to Compliance with Treatment: A Sociocultural Approach. *PLoS ONE*. 2015; 10(11): e0141766. doi:10.1371/journal.pone.0141766

Rogers EM (2003). *Diffusion of Innovations*, 5th ed. New York: The Free Press. Chapter 1.

Glanz K, Rimer BK and Lewis FM, editors (2008). *Health Behavior and Health Education: Theory, Research and Practice (4th edition)*. San Francisco: Jossey-Bass. Chapter 14: Diffusion of Innovations.

Thurber M & Fahey JM. Adoption of Moringa oleifera to Combat Under-Nutrition Viewed Through the Lens of the “Diffusion of Innovations” Theory. *Ecology of Food and Nutrition*. 2009; 48 (3): 212-225

Gladwell, M (2002) *The Tipping Point*. New York: Little, Brown & Company. Chapter 6

Preparation for class:

- Complete class readings

Assignments for this week:

- Memo #5 due
- Discussion participation (initial post plus at least 4 *responses* to classmates)

Week 8: March 6-12, 2017

Eco-Social Models

Instructor: Kristie Hubbard

Learning Objectives:

- Distinguish between different levels of influence on individual behaviors
- Give examples of ways the community, political, social, and built environment can influence individual behavior
- Discuss potential methods of intervening at each of these levels to change health behavior

Readings for this class:

Glanz K, Rimer BK and Viswanath K, editors (2015). *Health Behavior and Health Education: Theory, Research and Practice, 5th edition*. San Francisco: Jossey-Bass. Chapter 3: Ecological Models of Health Behavior.

Levins R and Lewontin R. *The dialectical biologist*. Cambridge MA: Harvard University Press. 1985. Read pages 267-288.

Smith MH. Community-based epidemiology: community involvement in defining social risk. *J Health Soc Policy*. 1998; 9(4):51-65.

Hosseinpoor AR, Bergen N, Kunst A, Harper S, Guthold R, Rekve D, d'Espaignet ET, Naidoo N, Chatterji S. Socioeconomic inequalities in risk factors for non communicable diseases in low-income and middle-income countries: results from the World Health Survey. *BMC Public Health*. 2012; 12(1):1.

Tovar A, Vikre EK, Gute DM, Kamins CL, Pirie A, Boulos R, Metayer N, Economos CD. Development of the live well curriculum for recent immigrants: a community-based participatory approach. *Progress in Community Health Partnerships: Research, Education, and Action*. 2012; 6(2):195.

Preparation for class:

- Complete class readings

Assignments for this week:

- Memo #6 due
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post your reaction to viewing of PBS series Unnatural Causes (initial post plus at least one response to classmates)

Week 9: March 13-19, 2017

Positive Deviance: Concept, History, Applications

Instructor: Kristie Hubbard

Learning objectives:

- Describe the pedagogical framework of PD – learning by doing
- Tell the history of the PD Approach
- Explain the PD concept to peers and lay people

Readings for this class:

Pascale R, Sternin J, Sternin M. *The Power of Positive Deviance*. 2010. Read pages ix-52 (Forward, Introduction (Chapter 1), and Chapter 2.

Marsh DR, Schroeder, DG, Dearden KA, Sternin J, Sternin M. The power of positive deviance. *British Medical Journal*. 2004; 329; 1177-1179.

Wishik SM, Vynckt S. The use of nutritional 'positive deviants' to identify approaches for modification of dietary practices. *American Journal of Public Health*. 1976; 66(1):38-42.

Mackintosh UA, Marsh DR, Schroeder DG. Sustained positive deviant child care practices and their effects on child growth in Viet Nam. *Food and Nutrition Bulletin*. 2002; 23(4 suppl2):16-25.

Sharifi M, Marshall G, Goldman RE, Cunningham C, Marshall R, Taveras EM. Engaging children in the development of obesity interventions: Exploring outcomes that matter most among obesity positive outliers. *Patient Education and Counseling*. 2015; 98(11):1393-401.

Preparation for this class:

- Complete class readings
- Explore the positivedeviance.org website on your specific professional behavior change sector

Assignments for this week:

- Memo #7 due (describe your behavior change situation and adjustments needed to incorporate principles of PD)
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post your PD elevator speech, explain to three people and share their response with the class (initial post plus at least one response to classmates)

Week 10: March 20-26, 2017

Step 1 & 2: Defining the problem and determining common practices

Instructor: Kristie Hubbard

Learning objectives:

- Explain step one of the PD Approach and give examples of defining the problem and the desired outcomes
- Discuss the UNICEF Conceptual Framework for Nutrition and where the PD approach fits
- Discuss methods for determining common practices
- Identify strategies and criteria for identifying and selecting potential community stakeholders

Reading for this class:

Lapping K, Schroeder D, Marsh D, Albalak R, Jabarkhil MZ. Comparison of a positive deviant inquiry with a case-control study to identify factors associated with nutrition status among Afghan refugee children in Pakistan. *Food Nutr Bull.* 2002; 23(4):26-33.

Nutrition Working Group, Child Survival Collaborations and Resources Group (CORE), *Positive Deviance / Hearth: A Resource Guide for Sustainably Rehabilitating Malnourished Children*, Washington, D.C: December 2002. Introduction and Chapter 1& 2.

A Positive Deviance Nutrition Guide for Peace Corps Volunteers: A Community-based Approach to Nutritional Rehabilitation and Behavior Change. Peace Corps Information and Exchange, 2012. Read pages 1-25 and Appendix H: Conceptual Framework

Preparation for class:

- Complete reading assignments

Assignments for this week:

- Memo #8 due
- Discussion participation
 - Memo Discussion (initial post plus at least three responses to classmates)
 - Activity Discussion: Post a hypothetical conceptual framework of your professional behavior change issue (initial post plus at least one response to classmates)

Week 11: March 27-April 2, 2017

Step 3 & 4: PD Inquiry, Identification, and Designing Behavior Change Activities

Instructor: Kristie Hubbard

Learning objectives:

- Explain the different methods by which the community can identify PD individuals or groups
- Prepare an interview and observation guide for community work
- Explore possible activities that reflect PD Inquiry findings

Reading for this class:

A Positive Deviance Nutrition Guide for Peace Corps Volunteers: A Community-based Approach to Nutritional Rehabilitation and Behavior Change. Peace Corps Information and Exchange. 2012. Read pages 25-39.

Nutrition Working Group, Child Survival Collaborations and Resources Group (CORE), *Positive Deviance / Hearth: A Resource Guide for Sustainably Rehabilitating Malnourished Children*, Washington, D.C: December 2002. Chapters 3-6.

Ahrari M, Kuttub A, Khamis S, Farahat AA, Darmstadt GL, Marsh DR *et al.* Socio-economic and behavioral factors associated with successful pregnancy outcomes in Upper Egypt: a positive deviance inquiry. *Food Nutr Bull.* 2002; 23: 83-8.

Ahrari M, Houser RF, Yassin S, Mogheez M, Hussaini Y, Crump P, Darmstadt GL, Marsh D, Levinson J. A positive deviance-based antenatal nutrition project improves birth-weight in Upper Egypt. *Journal of Health, Population, and Nutrition.* 2006; 24(4): 498 - 507.

Bullen PA. The positive deviance/hearth approach to reducing child malnutrition: systematic review. *Tropical Medicine and International Health.* 2011; 16(11):1354-66.

Preparation for class:

- Complete reading assignments

Assignments for this week:

- Memo #9 due
- Discussion participation (initial post plus at least 4 *responses* to classmates)

Week 12: April 3-9, 2017

Ethics

Instructor: Kristie Hubbard

Learning objectives:

- Consider the ethical implications of behavior change in a wide range of settings

Reading for this class:

Buchanan DR. *An Ethic for Health Promotion: Rethinking the Sources of Human Well-Being*. New York: Oxford University Press. 2000. Chapters 1, 4, 6 and 8.

ten Have M, van der Heide A, Mackenback JP, de Beaufort ID. An ethical framework for the prevention of overweight and obesity: A tool for thinking through a programme's ethical aspects. *Eur J Publ Health*. 2013; 23(2):299-305.

Kraak VI, Swinburn B, Lawrence M, and Harrison P. The accountability of public-private partnerships with food, beverage and quick-serve restaurant companies to address global hunger and the double burden of malnutrition. United Nations System Standing Committee on Nutrition. 2011; 39: 11-24.

Holm S. Obesity interventions and ethics. *Obesity Reviews*. 2007; 8(Suppl 1):207-210.

Preparation for class:

- Complete reading assignments

Assignments for this week:

- Memo #11 due
- Discussion participation (initial post plus at least 4 *responses* to classmates)

Week 13: April 10-16, 2017

Tying it All Together - The PD Approach and Other Behavior Change Approaches

Instructor: Kristie Hubbard

Learning Objectives:

- Discuss the similarities and differences between the PD approach and other behavioral change approaches (i.e., HBM, self-efficacy, transtheoretical model, SCT, social support, and eco-social models)
- Synthesize what has been learned and choose the most applicable behavioral theory/ies and/or Positive Deviance for a particular public health intervention or research question, and describe how the concepts might be applied

Reading for this class:

Seidel R. Behavior Change Perspectives and Communication Guidelines on Six Child Survival Interventions: Washington D.C.: Academy for Educational Development (in cooperation with Johns Hopkins Bloomberg School of Public Health/CCP with support from UNICEF). 2005.

****Read Introduction and Chapter 1, and then any three out of the remaining six chapters (Chapters 2 through 7) to see how behavior change strategies are applied in different child survival contexts.**

Briscoe C, Aboud F. Behaviour change communication targeting four health behaviours in developing countries: a review of change techniques. *Social Science & Medicine*. 2012;75(4):612-21.

Singhal A. Communicating What Works! Applying the Positive Deviance Approach in Health Communication. *Health Communication*. 2010; 25(6): 605-606.

Heri S, Mosler HJ. Factors Affecting the Diffusion of Solar Water Disinfection: A Field Study in Bolivia. *Health Education & Behavior*. 2008; 35(4): 541-560.

Preparation for class:

- Complete reading assignments

Assignments for this week:

- Memo #10 due
- Discussion participation (initial post plus at least 4 *responses* to classmates)

V1, January 1, 2017

Week 14: April 17-23, 2017

Finals Week

Instructor: Kristie Hubbard

Assignments for this week:

- Final project paper and presentation, see course website for evaluation rubrics