

Teaching Behavioral Medicine:
Consensus in the Midst of Diversity

Antonio E. Puente

Department of Psychology

University of North Carolina at Wilmington

Wilmington, North Carolina 28403-3297

Presented at the symposium "The Teaching of Undergraduate
Health Psychology," Divisions 2 and 38, Thomas Dorsel -
Chair, American Psychological Association, Washington, D.C.
1986.

Although this is a symposium on the teaching of health psychology at the undergraduate level, this presentation varies in that I will provide an overview of an undergraduate Behavioral Medicine course developed at the University of North Carolina at Wilmington.

As can be seen in the first slide (table), this is a behavioral medicine course in part because of my interest in (a) associating health and illness to behavioral issues, and (b) on pathological, rather than health perspectives. Nevertheless, it could be considered a health psychology course because of its broad-based approach to the analysis and treatment/rehabilitation of diseases or disordered physical activities.

While the focus of the course is definable, there is a great diversity in the students enrolling for this course. Since this is a junior level course, by definition no freshmen may enroll. We do have a substantial number of sophomores and seniors, as well as juniors. Our students come from a wide variety of majors and backgrounds in psychology. Behavioral Medicine, Psychology 352 does fulfill requirements for a BA degree in psychology at UNC-Wilmington. It is not surprising to note that approximately one-half to two-thirds of enrollees are psychology majors. However, we do have students enrolling from nursing, biology and chemistry (mostly pre-med students), sociology, medical technology, even business, and, of course, a few "undecideds." This diversity also is reflected in their background in psychology. While it is not uncommon for a student to have completed 10 to 15 psychology courses, it is not unusual for a nursing student to have taken an

introduction to psychology course at a small junior college. Thus, their preparation for psychological perspectives is indeed varied. Finally, their expectations of the course vary greatly. Some students enroll to fulfill psychology requirements while others are interested in understanding a personal problem. Some are interested in learning about biofeedback while others in medical compliance.

In order to provide consensus within this diversity, Psychology 352 begins with an introductory section. As the next slide shows, three basic topics are covered. First, analysis of behavioral principles and disease models are discussed. Next, students are presented with a section on the psychological assessment of physical disorders. Such issues as interviewing, observation, and tests (e.g., Jenkins) are presented. Finally, an introduction to psychological change techniques (e.g., systematic desensitization) applicable to behavioral medicine are introduced.

The final two-thirds of the course focuses on a systematic analysis of each of the "major" physical disorders. These include: cardiovascular, nervous system, pain, G-I, musculoskeletal, respiratory, dermatological, sleep, sexual, oncological, and substance abuse. The first four to five topics are covered in greater detail than the others. Systematic analysis involves approaching each topic in a specific manner:

- a) description of disease,
- b) psychological and basic physiological etiology of disease,
- c) psychological assessment, and
- d) psychological change techniques

Whenever possible, an outside speaker or film is used. For example, we have had local psychologists present biofeedback demonstrations and the clinical director of the Wilmington Cardiovascular Rehabilitation Foundation present an overview of cardiac rehabilitation. Whenever feasible demonstrations are included as part of the lectures (e.g., Type A tests, relaxation strategies.)

With regards to texts, until recently, I had used exclusively Pinkerton, Hughes, and Wernich's (1982) Behavioral Medicine. At times this book was a bit overwhelming for the unprepared undergraduate and, furthermore, it is now out of print. As the next slide shows, three other books appear workable into an undergraduate level course (except perhaps, Feuerstein, et al.'s book).

Students, earn a grade in the course by completing two tests, a mid-term covering introductory material and a comprehensive final. Each is worth one-third of their final grade with the remaining third of the grade arising from an outside-of-class project. As the next slide depicts, I am interested in encouraging students to further their knowledge of behavioral medicine in one of four major ways:

- a) mini-internships,
- b) self-oriented behavioral change projects,
- c) survey research, and/or
- d) library research projects.

All things being equal, I encourage students to consider one of the first three options. However, such projects can pose difficulties because of their potential for ethical violations. As much as possible, projects are restricted to feasible, ethical, and, of course, interesting issues. Students are encouraged to draw upon their varied backgrounds in the development of their projects. Projects must be cleared with the instructor by way of a written proposal during the first part of the course. Grades for the project are based on a five to seven page, APA style, typewritten paper submitted at the end of the semester. An oral five to ten minute classroom presentation is required at the end of the semester but is not graded.

Post-facto informal analysis of students (e.g., student reviews) and their advisors suggest that students find the course "interesting and worthwhile." Many, however, do find it hard - in part because of the preparation prior to the course. All in all, we continue attempting to bridge the science/practitioner gap in this emerging area of psychology while striving for "consensus in the midst of diversity."

CATALOG DESCRIPTION
OF
Behavioral Medicine

Psychology 352 (3 hours)

Prerequisite: General Psychology or Psychology
Applied to Life

Integrates psychological and biomedical knowledge relevant to physical health and illness. Describes the interaction of psychological phenomena with the epidemiology, etiology, pathogenesis, treatment, and rehabilitation of physical disorders.

MAJORS ENROLLING
IN
Behavioral Medicine

Psychology

Nursing

Biology

Chemistry

Medical Tech

Business

Sociology

Undecided

COURSE REQUIREMENTS
FOR
Behavioral Medicine

Text: Pinkerton, Hughes, and Weinrich (1982)
Gatchel and Baum (1983)
Taylor (1986)
Feuerstein, Labbe, and Kuczmierczyk (1986)

COURSE REQUIREMENTS
FOR
Behavioral Medicine (Continued)

Grade: 1/3 = Evaluation of Introductory
Material

1/3 = Evaluation of Applied
Material

1/3 = Project

COURSE REQUIREMENT
FOR
Behavioral Medicine (continued)

Project: Topic = Open to any topic in behavioral
medicine

Project = 5-7 page, APA style paper with
oral presentation (5-10 mins.
at end of semester)

Examples = 1) Mini- internship with local
health professional
2) Self- oriented projects
(smoking)
3) Survey research (nutrition)
4) Actual experiment (neuropsych)
5) Library research paper

SYSTEMATIC ANALYSIS
OF TOPICS IN
Behavioral Medicine

Description of Diseases

Psychological and Basic Physical Etiologies

Psychological Assessment Methods

Psychological Change Techniques

TOPICS COVERED
IN
Behavioral Medicine

- I. Introductory Material
 - A. Analysis of Behavior and Disease
 - B. Psychological Assessment Methods
 - C. Psychological Change Techniques

TOPICS COVERED

IN

Behavioral Medicine (continued)

II. Topics

- A. Cardiovascular
- B. Nervous System
- C. Pain
- D. G-I
- E. Musculoskeletal
- F. Respiratory
- G. Dermatological
- H. Sleep
- I. Sexual
- J. Oncological
- K. Substance Abuse

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The teaching of undergraduate health psychology should be based on an understanding of the enrolled students as well as a defined criterion. The diversity of students, from psychology to nursing, enrolled in health psychology courses make it imperative that a common set of principles must be developed during the early segment of the course. This should include an introduction to such issues as disease models and potential roles of applied psychologists in health care. Once this common background is established, the major physiological systems are covered including description of diseases as well as psychological causes and interventions. For each system both scientific evidence and case histories derived from my consulting practice are used to address the major points. Topics such as pain management and medical compliance are also considered at the end of the course. The basic goal is to introduce students to the application of mind/body problems in psychology to the field of health care and maintenance. Interestingly, while public sentiment on such ideas is not widely accepted, students from all disciplines and demographic backgrounds tend to readily accept the alternative views presented in this class. Partially as a function of this reception, it now enjoys the status of being one of the basic required courses for a psychology major and a popular elective for nursing and sociology majors.

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