

Health Behavior and Health Education 726

Adolescent Health Risk Behaviors

Fall 2007

Instructor:

Jessica Duncan Cance, MPH
Department of Health Behavior and Health Education

jcance@unc.edu

Office hours by appointment

Meeting Time & Place:

Tuesday & Thursday, 11:00 AM -12:15 PM
Room 1305, McGavran-Greenberg

Prerequisites:

HBHE 130 or HBHE 131

Course Website:

Accessible through Blackboard at: blackboard.unc.edu

Course Description

Health-related risk behaviors are often initiated in adolescence. This course provides an overview of adolescent health risk behaviors, focusing primarily on substance use (alcohol, tobacco, and other drugs), violence, and sexual behavior. Physical activity, nutrition, and mental health also are considered. We will examine recent trends in adolescent health risk behaviors, study key risk factors from multiple contexts (e.g., family, peer, school), and consider several theories that provide understanding about why adolescents engage in risk behaviors. We also will examine current approaches to preventing and reducing health risk behaviors and their effectiveness. Methodological issues related to research on adolescents will be emphasized, as will current research findings. A theme throughout the course will be consideration of the scientific evidence behind common assumptions about the trends, causes, and prevention of adolescent health risk behaviors.

Course Objectives

At the completion of the course, students will be able to:

- Identify the major causes of morbidity and mortality among adolescents and describe recent trends in selected health risk behaviors;
- Recognize key methodological issues in conducting research on adolescents;
- Apply behavioral and social science theories to the study of the etiology of adolescent health risk behaviors;
- Describe important risk factors for adolescent health risk behaviors identified by empirical studies;

- Critically assess current prevention approaches to adolescent health risk behaviors, with emphasis on universal and primary prevention interventions;
- Conduct a review of the scientific literature on the epidemiology, etiology, and prevention of adolescent health risk behaviors; and
- Bring scientific knowledge to bear on discussion of selected contemporary issues in adolescent health risk behavior.

Course Readings

Course readings are available electronically on the Blackboard website.

Course Requirements and Grading

The course includes lectures, class discussions, and student group presentations, with the overall expectation that students will actively participate in each class. I expect you to read all the assigned readings and come to class prepared to discuss them. Formal graded assignments include two written papers and two group presentations. The grades will be weighted as follows:

Paper 1	20%
Paper 2	30%
Presentation 1	20%
Presentation 2	20%
Class discussion	10%

Assignments

Papers: The two papers are linked by your selection of a health risk behavior. (Note: you cannot select a behavior you covered in your first group presentation.) The purpose is for you to gain in-depth knowledge of the behavior by examining it from epidemiologic, etiologic, theoretical, and prevention perspectives. *All papers are due on the dates indicated, except in cases of emergency. Late papers will be down graded. Papers must be typed and double-spaced with 1-inch margins. In addition, all papers should include a reference list. Use APA style for all citations and references.*

Paper 1: For this paper, you will identify and define an adolescent health risk behavior, provide a summary of the epidemiology of the behavior, and describe the health-related consequences of the behavior. The epidemiology summary should include the prevalence of the behavior among adolescents (in general or in a specific subpopulation that you want to focus on), the age(s) at which the behavior typically begins, demographic differences in the percentages of adolescents who engage in the behavior (e.g., differences by gender, age or grade level, race/ethnicity, socioeconomic groups, urbanicity), and recent trends (i.e., over the past decade). Your description of the health-related consequences should cover both short and long-term consequences, including physical, psychological, and social consequences. The goal of this paper is to establish the public health significance of the behavior in a population of interest to you. The paper should be no more than 3 pages in length, not including references. *Due in class on October 2.*

Paper 2: For this paper, you will examine the etiology of the health risk behavior you identified in paper 1. Choose two domains of risk factors from those covered in class: intrapersonal, family context, peer context, school context, neighborhood context, and cultural context (including the mass media) and from each of these domains select two or three specific risk factors. The paper should include the following parts: 1) a conceptual model of how the selected risk factors interrelate with each other and with the health

risk behavior (including a diagram of the relationships), 2) description of one or more theoretical perspectives that inform the relationships you propose in your conceptual model, 3) a literature review of the empirical support (or lack thereof) for the relationships in your conceptual model, and 4) a discussion of the implications for prevention (i.e., given the relationships described, theoretical underpinnings, and empirical evidence, what kinds of prevention programs might be undertaken and what would they focus on). The paper should be no more than 10 pages in length, not including the conceptual model diagram and references. ***Due in class on November 1.***

Group Presentations: The group presentations will focus on the epidemiology of health risk behaviors and prevention approaches. Both group assignments will be made based on your ranked choices. Use PowerPoint for your presentation (a projector will be available in class) and handouts, as needed, for the class. ***Email your presentation slides (jcance@unc.edu) by 8 AM on the day of the presentation and turn in a single hard copy of your presentation in class.***

Group Presentation 1: Each group will give a presentation on the epidemiology of a set of health risk behaviors: adolescent sexual behavior; alcohol, tobacco, and other drug use; violence and dating violence; or physical activity and nutrition. In addition, one group will focus on mental health issues including adolescent depression and suicide. The presentation should include: relevant national health objectives, identification of national sources of information, description and definition of key behavioral indicators, description of recent prevalence both overall and for demographic subgroups (e.g., subgroups defined by age/grade, gender, race/ethnicity), and trends over time (i.e., at least the past decade). In addition, compare your findings with the health objective targets. As possible, include comparable prevalence and trend information for youth in other countries. One full class period is scheduled for each presentation.

Group Presentation 2: Each group will make a presentation on a prevention intervention approach: school-based; community coalitions; family; media; environmental change; and policy. The presentation should describe the approach; illustrate its application with three real-life examples, selected, if possible to illustrate application to different health risk behaviors; describe the extent to which there is an evidence base for the approach; and describe strengths and limitations of the approach. One-half class period is scheduled for each presentation.

Course Schedule and Readings

August 21 **Course overview**

August 23 **What is adolescence?**
Overview of Healthy People 2010

Zarrett, N., & Eccles, J. (2006) The passage of adulthood: Challenges of late adolescence. *New Directions for Youth Development, 111*, 13-28.

Steinberg, L., & Morris, A.S. (2001). Adolescent Development. *Annual Review of Psychology, 52*, 83-110.

U.S. Department of Health and Human Services. (2000). *Healthy People 2010: Reader's guide*. Washington, DC: U.S. Government Printing Office. Available at:
<http://www.healthypeople.gov/Document/tableofcontents.htm#under>

August 28 **Health Sciences Library Workshop - Mellanye Lackey**

Class will meet in the Health Sciences Library Computer Lab- Room 329

August 30 **Methods: adolescents as human subjects**

Katzman, D.K. (2003). Guidelines for adolescent health research. *Journal of Adolescent Health, 33*, 410-415.

Santelli, J.S., Rogers, A.S., Rosenfeld, W.D., et al. (2003). Guidelines for adolescent health research : A position paper of the Society for Adolescent Medicine, *Journal of Adolescent Health, 33*, 396-409.

September 4 **Methods: validity of adolescent self-reports of health risk behaviors**

Brener, N.D., Billy, J.O.G., and Grady, W.R. (2003). Assessment of factors affecting the validity of self-reported health-risk behavior among adolescents: evidence from the scientific literature. *Journal of Adolescent Health, 33*, 436-457.

Supple, A. J., Aquilino, W. S., & Wright, D. L. (1999). Collecting sensitive self-report data with laptop computers: impact on the response tendencies of adolescents in a home interview. *Journal of Research on Adolescence, 9*(4), 467-488.

Weitzman, B.C., Guttmacher, S., Weinberg, S., & Kapadia (2003). Low response rate schools in surveys of adolescent risk taking behaviours: Possible biases, possible solutions. *Journal of Epidemiology and Community Health, 57*, 63-67.

September 6 **Methods: conducting research with diverse populations**

Cauce, A.M., Ryan, K.D., & Grove, K. (1998). Children and adolescents of color, where are you? Participation, selection, recruitment, and retention in developmental research. In V.C. McLoyd and L. Steniberg (Eds). *Studying Minority Youth: Conceptual, Methodological, and Theoretical Issues* (pp.147-166). Mahwah, NJ: Lawrence Erlbaum Associates.

Goldstein, M.F., & Noguera, P.A. (2006). Designing for diversity : Incorporating cultural competence in prevention programs for urban youth. *New Directions for Youth Development, 111*, 29-40.

Harper, G. W. and Carver, L.J. (1999). “Out-of-the-mainstream” youth as partners in collaborative research: exploring the benefits and challenges. *Health Education and Behavior, 26* (2), 250-265.

September 11 **Group presentation: epidemiology of adolescent sexual behavior**

September 13 **Group presentation: epidemiology of adolescent tobacco, alcohol, and other drug use**

September 18 **Group presentation: epidemiology of adolescent violence and dating violence**

September 20 **Group presentation: epidemiology of adolescent physical activity and nutrition**

September 25 **Group presentation: epidemiology of adolescent mental health**

**September 27 Developmental trajectories of health risk behaviors
Review of problem behavior theory**

Moffitt, T.E. (1993). Adolescence-limited and life-course persistent antisocial behavior: a developmental taxonomy. *Psychological Review*, 100 (4), 674-701.

Jessor, R., & Jessor, S. L. (1977). *Problem behavior and psychosocial development: A longitudinal study of youth* (pp. 17-42). New York: Academic Press.

October 2 Intrapersonal context: risky decision making

Kuther, T.L. (2002). Rational decision perspectives on alcohol consumption by youth. Revising the theory of planned behavior. *Addictive Behaviors*, 27, 35-47.

Steinberg, L. (2007) Risk taking in adolescence: New perspectives from brain and behavioral science. *Current Directions in Psychological Science*, 16, 55-59.

Paper 1 due.

October 4 Teen driving and graduated licensing programs

Robert Foss, Senior Research Scientist and Director, Highway Safety Research Center

Keating, D.P. (2007) Understanding adolescent development: Implications for driving safety. *Journal of Safety Research*, 38, 147-157.

Lee, J. (2007) Technology and teen drivers. *Journal of Safety Research*, 38, 203-213.

Waller, P.F. (2003). The genesis of GDL. *Journal of Safety Research*, 34, 17-23.

October 9 Intrapersonal context: pubertal development and timing

Archibald, A.B., Graber, J.A., & Brooks-Gunn, J. (2003). Pubertal processes and physiological growth in adolescence. In G.R. Adams & M.D. Berzonsky (Eds.) *Blackwell Handbook of Adolescence*: (pp. 24-47), Malden, MA: Blackwell Publishing.

Waylen, A., & Wolke, D. (2004). Sex 'n' drugs 'n' rock 'n' roll: the meaning and social consequences of pubertal timing. *European Journal of Endocrinology*, 151, U151-U159.

October 11 Family context: social control and parenting style theories

Hirschi, T. (1969). A control theory of delinquency. *Causes of delinquency* (pp. 16-34). Berkeley, CA: University of California Press.

Catalano R.F., & Hawkins, J.D. (1996). The Social Development Model: A theory of antisocial behavior. In J.D. Hawkins (Ed.), *Delinquency & crime: Current theories* (pp149-197). New York: Cambridge University Press.

Hawkins, J.D., Catalano, R.F., & Arthur, M.W. (2002). Promoting science-based prevention in communities. *Addictive Behaviors*, 27, 951-976.

Darling, N. & Steinberg, L. (1993). Parenting style as context: an integrative model. *Psychological Bulletin*, 113, 487-496.

October 16 **Family context: importance of family structure**
Overview of Add Health Study

Kathleen Harris, Gillian T. Cell Distinguished Professor, Department of Sociology

Harris, K.M. (2005). *Design Features of Add Health*. Carolina Population Center, University of North Carolina at Chapel Hill.

Resnick, M.D., Bearman, P.S., Blum, R.W., et al. (1997). Protecting Adolescents From Harm: Findings from the National Longitudinal Study on Adolescent Health. *Journal of the American Medical Association*, 278, 823-832.

Harris, K.M., & Ryan, S. Family Context, Family Processes, and Adolescent Behavior. Under review.

October 18 **No class: Fall Break**

October 23 **Peer context: social learning theory**

Miller, P. (1993). Chapter 3: Social learning theory. In *Theories of developmental psychology*. New York: W.H. Freeman & Co.

Borsari, B., & Carey, K.B. (2006). How the quality of peer relationships influences college alcohol use. *Drug and Alcohol Review*, 25, 361-370.

October 25 **School and neighborhood contexts**

Phillip Graham, Senior Public Health Researcher, RTI International

Graham, P.W., Hardison, J., Kline, T.L., Stone-Wiggins, B. (2007). *A review to identify measures of social capital as it relates to the perpetration of violence against women and adolescent girls: Integrated final report* (Prepared for Centers for Disease Control and Prevention). Research Triangle Park, NC: RTI International.

Liberman, A. (2007). *Adolescents, neighborhoods, and violence: Recent findings from the Project on Human Development in Chicago Neighborhoods, NCJ 217397*. Retrieved October 18, 2007, from <http://www.ojp.usdoj.gov/nij/pubs-sum/217397.htm>

Paschall, M.J., & Hubbard, M.L. (1998). Effects of neighborhood and family stressors on African American male adolescent' self-worth and propensity for violent behavior. *Journal of Consulting and Clinical Psychology*, 66, 825-831.

October 30 **Peer context: peer networks**

Susan Ennett, Associate Professor, HBHE Department

Ennett, S.T., Bauman, K.E., Hussong, A.; Faris, R., Foshee, V.A., et al. (2006). The peer context of adolescent substance use: Findings from social network analysis. *Journal of Research on Adolescence*, 16, 159-186.

November 1 Gene by environment interactions

Kaufman, J., Yang, B., Douglas-Palumberi, H., et al. (2007). Genetic and environmental predictors of early alcohol use. *Biological Psychiatry*, *61*, 1228-1234.

Caspi, A., McClay, J., Moffitt, T.E., et al. (2002). Role of genotype in the cycle of violence in maltreated children. *Science*, *297*, 851-854.

Paper 2 due in class.

November 6 No class: APHA meeting

November 8 Cultural context: mass media

Jane Brown, James L. Knight Professor, School of Journalism and Mass Communication

Brown, J. D., & Witherspoon, E.M. (2002). The mass media and American adolescents' health. *Journal of Adolescent Health*, *31*(supplement), 153-170.

November 13 Prevention: planning health risk behavior interventions for adolescents

Offord, D.R. (2000). Selection of levels of intervention. *Addictive Behaviors*, *25*, 833-842.

Perry, C. L. (1999). Introduction. *Creating Health Behavior Change: How to Develop Community-Wide Programs for Youth* (pp.1-15). Thousand Oaks, CA: Sage Publications.

Perry, C. (1999). Preparing for program development. *Creating Health Behavior Change: How to Develop Community-Wide Programs for Youth* (pp. 17-41). Thousand Oaks, CA: Sage Publications.

November 15 Group presentations: school-based approaches and community coalitions

November 20 Evaluation of adolescent substance use prevention programs

Amy Vincus, Associate Research Scientist, Pacific Institute for Research and Evaluation (PIRE)

Society for Prevention Research. (2005). *Standards of evidence: Criteria for efficacy, effectiveness, and dissemination*. Retrieved November 1, 2007, from <http://www.preventionresearch.org/StandardsOfEvidencebook.pdf>

November 22 No class: Thanksgiving

November 27 Group presentations: family-based approaches and mass media

November 29 Group presentations: environmental change strategies and policy

December 4 Reflection and wrap up