# Indiana University School of Liberal Arts Department of Communication Studies Campus of IUPUI

Health Communication Ph.D. Program Proposal

## IUPUI Health Communication Ph.D.

INSTITUTION:	Indiana University, Indianapolis (IUPUI)
SCHOOL:	School of Liberal Arts
DEPARTMENT:	Communication Studies
DEGREE PROGRAM TITLE:	Health Communication
FORM OF RECOGNITION TO BE	
AWARDED/DEGREE CODE:	Doctor of Philosophy/Ph.D.
SUGGESTED CIP CODE:	09.0905
LOCATION OF PROGRAM/	
CAMPUS CODE:	Indianapolis/IUPUI
PROJECTED DATE OF	
IMPLEMENTATION:	Fall 2013

DATE PROPOSAL WAS APPROVED BY INSTITUTIONAL BOARD OF TRUSTEES:

SIGNATURE OF AUTHORIZING INSTITUTIONAL OFFICER

DATE

DATE RECEIVED BY COMMISSIONER FOR HIGHER EDUCATION

COMMISSION ACTION

(DATE)

### A. ABSTRACT

Title of Degree: Ph.D. in Health Communication, Department of Communication

Studies, IU School of Liberal Arts, IUPUI Campus

Indiana University proposes a Ph.D. degree program in Health Communication on the campus of Indiana University Purdue University Indianapolis (IUPUI) and administered by the Department of Communication Studies in the IU School of Liberal Arts.

#### **Objectives:**

The main program objectives for the proposed Ph.D. program in health communication include preparing students: (1) to teach and research in the areas of health interpersonal relationships, intercultural health, and mediated communication in healthcare including campaign development, each with significant discussion around ethical issues in health care delivery; (2) to initiate, participate, and develop competency in research on health and medical issues; (3) to gain skills in understanding clinical problems affected by communication; (4) to develop the capabilities to translate the research on clinical problems impacted by communication into practice; (5) to secure academic jobs and/or healthcare professional positions.

#### **Clientele to be Served:**

The clientele include both professionals currently in the health field, who desire to obtain an advanced degree in health communication, and individuals who have followed an academic track desiring to specialize in health communication research and practice.

#### Curriculum:

Students entering the program must have at least an MA in a related social science or health discipline, with preference given to those students with degrees from communication studies programs. Overall, 60 credit hours beyond the MA are required, which include core courses in theory, research methods, and health communication (15 cr.), seminars in content areas focused on (but not limited to) interpersonal relationship communication, intercultural communication, mediated/campaign communication, and communication ethics in healthcare contexts (15 cr.), minor (9-12 cr.), field work/research (6-9 cr.), and dissertation credits (12 cr.).

Program goals hinge on learning that takes place, not only through traditional means such as seminars from communication faculty and engaging in research projects, but also learning that offers the ability to observe and participate, in tangible ways, to understand the significance of communication issues in health care delivery. Health care delivery is a central concern to health communication scholars and practitioners. Drawing on the rich resources available on the health and life science campus of IUPUI, Senior Affiliate Faculty members who are researchers in health care delivery issues or practicing providers on the campus of IUPUI will contribute to the curriculum of this Ph.D. program. These faculty members will add value to the program through: 1.) invitations to join research teams, interfacing with educational projects, and internship opportunities; 2.) participation in a Seminar once a year in which the Affiliate faculty members have agreed to give lectures, on a rotating schedule, on topics related to their medical expertise on health communication issues, and 3.) serving on dissertation committees as their interest and availability allow.

#### **Employment Possibilities:**

Graduates of this program will be trained as researchers and health communication practitioners. Consequently, both the academic teaching/research field and the health care industry outside of the academy (e.g., government, not-for profit, health organizations) are viable options for employment. The demand for both researchers and health specialists with a Ph.D. in health communication is great.

### **B.** Program Description

According to health communication scholar Gary Kreps (2003) and as written in the *Healthy People 2020* project commissioned by the U.S. Department of Health and Human Services, "health communication is the study and use of communication strategies to inform and influence individual and community decisions that affect health. It links the fields of communication and health and is increasingly recognized as a necessary element of efforts to improve personal and public health." Communication is at the core of a variety of health issues such as an individual's access to and use of health information, the dissemination of public health messages, attitudes toward risk, consumer education on health issues, patient-health professional relationships, and minimizing health disparities domestically and globally, just to name a few. The opportunities for health communication and employment are exciting.

The field of health communication is itself a relatively young area when compared with the history of scholarship in communication studies. The journal *Health Communication* began publishing in 1989 and has witnessed an increase in its size at least three times while maintaining a 15% acceptance rate. More recently the *Journal of Health Communication* began publishing to speak to the increased need to disseminate the quality work in this growing field. A Ph.D. program in health communication in the Department of Communication Studies at IUPUI has the potential to make an impact on and further define this still emerging field.

The demand for healthcare professionals with an expertise in health communication has grown exponentially in the last fifteen years and examples include required competencies in health communication for medical students and medical residency programs, the increasing emphasis on health literacy, and skills-based educational programs in health communication. Articulating with the economic issues of health and life science in central Indiana is the need to make healthcare more communicatively accessible. There are many cases where communication is at the core of breakdowns in healthcare delivery. Patients misunderstand how they are to take their medicine; providers miscommunicate treatment plans, mistakes are made in a host of situations that hinge on the ability to communicate effectively.

These developments speak strongly for health communication programs to train and educate professionals to fill this ever-growing need; the Indiana University School of Liberal Arts Department of Communication Studies on the campus of IUPUI, Indiana University's health sciences campus, is perfectly situated to educate the next generation of health communication specialists.

#### 1. Description of Proposed Program and Objectives

The Ph.D. program in health communication includes the following main program objectives. Students will: (1) obtain competency for teaching and research in areas that include: health interpersonal relationships, intercultural health, and mediated communication in healthcare including health campaign development. Ethical questions regarding each of these health communication contexts will be explored as well. (2) Students will initiate, participate, and develop competency in research on health and medical communication issues; (3) gain skills in understanding clinical problems affected by communication; (4) develop the capabilities necessary to translate research on clinical problems impacted by communication into practice; (5) receive training for academic jobs and healthcare professional positions.

Significantly, interpersonal, intercultural, and mediated communication in healthcare contexts are experiencing growth in demand for academic positions according to the National Communication Association analysis of positions advertised 2005-10. Additionally, these areas are among those identified by Kreps (2001) in *Communication Yearbook* as future directions in health communication work outside academia. Work in health interpersonal relationships includes: patient-provider communication, the impact of interpersonal relationships on health and wellness, the role of family systems on health care delivery, and the like. Study in intercultural health, for example, includes not only work in health disparities in different communities in the United States, but the ways that cultural assumptions influence disease and recovery and strategies for addressing health concerns worldwide such as malaria or HIV/AIDS. Mediated communication in healthcare may include study of how media channels and messages affect access to, understanding and reception of healthcare messages. These are only a few examples of the opportunities for study in health communication in each of the primary areas to which this program contributes.

This program will afford access to health and medical sciences, including the potential for learning about clinical experiences. The opportunity to develop an understanding of health communication in clinical settings with practicing providers and health researchers is different from many other programs in health communication. As students learn from

professionals both from an academic perspective and from those involved in medical and health care practice, they will have a large laboratory in which to confront real health communication problems.

The experiences and opportunities on campus guided by the faculty provide the opportunity to offer a distinctive, national program in health communication. Establishing this program promises to enhance the existing complement of health science offerings in the School of Liberal Arts and in allied disciplines on the health and life sciences campus of IUPUI.

## 2. Description of Admission Requirements, Anticipated Student Clientele, and Student Financial Support

<u>Admission requirements</u>: Candidates should have an MA in a related social science or health discipline, with preference given to those students with degrees from communication studies programs with a GPA of 3.5 or higher (4.0 scale). The applicants are required to take the Graduate Record Examination (GRE) General Test (Quantitative, Verbal, and Analytical Writing). While we do not expect to institute a fixed minimum requirement, students will be advised that successful candidates typically have scores within the 650-700 range for verbal and quantitative, and an equivalent score in analytic writing; however, the department will develop guidelines for prospective applicants to be competitive, yet, guarantee success of the students' performance in the program.

The Test of English as a Foreign Language (TOEFL) is required for those applicants whose native language is not English. The expectation for admission is a score of 570 (or an equivalent score on the computer version of the test or 88 on the internet version, TOEFL-int). Applicants for financial support in the form of fellowships or assistantships must have a score of 600 or better. Final decisions on admission will be made by a Graduate Admissions Committee consisting of at least three faculty members in the Department of Communication Studies and include the Director of Graduate Studies. Beyond these measures for admission, the applicants will submit a written statement of purpose for entering into this Ph.D. program, 3 letters of recommendation from individuals in professional positions able to judge success, and a curriculum vitae.

<u>Anticipated student clientele</u>: The demand for Ph.D.s in health communication is great not only for jobs in academia but also in many different kinds of professional positions; hence an advanced degree in Health Communication promises to attract a number of people to the program. The clientele include both professionals currently in the health field who desire to obtain an advanced degree in health communication, and individuals who have followed an academic track desiring to specialize in health communication research and practice. The program will be designed to accommodate both full-time and part-time students who may be concurrently employed professionals, non-traditional students, individuals preparing to re-enter the job market or change jobs. Initially, enrollment may be limited to accepting no more than five students a year to incrementally meet the needs of and develop the Ph.D. program. <u>Student financial support</u>: Opportunities for student support include the following: (1) research or teaching assistantships provided through the School of Liberal Arts with institutional funds, including funding made available to the School of Liberal Arts from the University Graduate School; (2) research assistantships provided from externally-funded grants generated by faculty investigators in the School of Liberal Arts or in other schools at IUPUI; and (3) research or teaching assistantships provided through philanthropic support of the health communication program.

#### 3. Description of Proposed Curriculum

A proposed program of study for the Ph.D. degree will be developed by the student with the direct guidance of the principal advisor and the student's Advisory Committee by the time the student has completed 12 credit hours. The program of study must be signed by the Advisory Committee and the Director of Graduate Studies, and forwarded to the Graduate School for formal approval.

<u>Requirements</u>: A minimum of 60 credits hours beyond the MA are required for the Ph.D. in Health Communication. Students entering the program must have at least an MA (minimum of 30 credit hours) in a related social science or health discipline, with preference given to those students with degrees from communication studies programs. Overall, the 60 credit hours beyond the MA include core courses (15 credit hours), seminars in content areas focused on (but not limited to) interpersonal relationship communication, intercultural communication, mediated/campaign communication (15 credit hours), minor (9-12 credit hours), field work/research (6-9 credit hours), and dissertation credits (12 credit hours).

<u>Curriculum</u>^: (See Appendix A for detailed course descriptions with selected readings and assignments)

#### Core Courses (15 credit hours) required of all students

\*C500 Advanced Communication Theory (3) (currently offered every fall semester) \*C592 Advanced Health Communication (3) (currently offered every spring semester) C6xx Doctoral Qualitative/Rhetorical Methods (3) [new course] C6xx Doctoral Quantitative Methods (3) [new course] C6xx Seminar in Communication and Health (3) [lectures by practicing providers; see Appendix A for course goals and evaluation mechanisms]

#### Seminars in Content Areas (15 credit hours)

\*C510 Health Provider-Consumer Communication (currently offered every year)
\*C521 Family Communication in Health Contexts (currently offered every spring)
\*C526 Effective Media Strategies (currently offered every summer)
\*C528 Group Communication and Organizations (currently offered in summer)
\*C544 Relational Communication (currently offered every other year)
\*C582 Intercultural Communication (currently offered every fall and summer)
\*C593 Advanced Family Communication (currently offered every other year)

C6xx Discourses, Organizing, and Health [new course] C6xx Rhetorical Understanding of Health Narratives [new course] C6xx eHealth Communication [new course] C6xx Ethical Issues in Health Communication [new course] C6xx Health Communication Campaigns [new course]

Other cross-listed seminars from affiliated faculty in departments or programs such as the ICIC, Medical Humanities, Medical Sociology, and other health-related areas may count toward the student's degree progress with approval from the student's advisor.

*^All courses required by this Ph.D. program are located on the IUPUI campus. \* Indicates existing course* 

#### Minor Area of Emphasis (9-12 credit hours)

All students must complete a minor in an area related to their primary health communication focus. For example, a student hoping to work in a non-profit health organization might pursue a minor area of emphasis in public health, health informatics, or philanthropic studies. Students hoping to work in the government sector might pursue law and health, industrial organizational psychology, or public health. Minor areas of Ph.D. study might also include bioethics, nursing, bioinformatics, clinical psychology, medical sociology, marketing, social work, health economics, or any area in the health and life sciences disciplines or the Liberal Arts disciplines connected to the student's area of primary focus. An interdisciplinary minor can be developed in consultation with the student's advisor and advisory committee as well as a minor in research methods/tools. The minor area of emphasis must be approved by the student's advisor and advisory committee and contain a minimum of three graduate level courses (9 credit hours) in accordance with the department or unit in which the minor is housed. Some departments require a 12 credit hour minor.

#### **Comprehensive Examinations**

All students must take written examinations that cover both broad knowledge of the health communication field as well as specialized knowledge of a chosen area of health communication. Comprehensive exams are taken after the student has completed a minimum of 39 credit hours (beyond the MA) including the required core, seminars, and minor coursework. More information about examination procedures, admission to candidacy, and the advisory committee can be found in Appendix B.

#### Fieldwork /Research (6-9 credit hours)

All students are required to initiate or participate in research with the approval of advisor. This field/research work is geared to focus the student's research interest to serve as a spring-board for the dissertation work. Students will register for C6xx.

#### Ph.D. Dissertation (12 credit hours)

Dissertation credits are structured so that the student is unencumbered with completing coursework and can focus completely on conducting research and writing the dissertation for completion of the degree. Students will register for C8xx.

#### Sample Curriculum

The specific sequence of courses will be developed by the student in consultation with the student's primary advisor and advisory committee. Students may be enrolled on a full-time or part-time basis; therefore the specific sequence and length of program of study will vary.

#### Core Courses (15 credit hours)

\*C500 Advanced Communication Theory (3)
\*C592 Advanced Health Communication (3)
C6xx Doctoral Qualitative/Rhetorical Methods (3) [new course]
C6xx Doctoral Quantitative Methods (3) [new course]
C6xx Seminar on Health and Medical Practices (3) [lectures by practicing providers]

#### Example of Selected Seminar Courses:

#### Seminars in Content Areas (15 credit hours)

\*C510 Health Provider-Consumer Communication \*C521 Family Communication in Health Contexts \*C544 Relational Communication C6xx Rhetorical Understanding of Health Narratives [new course] C6xx Ethical Issues in Communication [new course]

#### Example: Medical Sociology

#### Minor Area of Emphasis (9-12 credit hours)

SOC-R 515 Sociology of Health and Illness SOC-S 526 Sociology of Human Sexuality SOC-S 560 Topics: Gender and Health SOC-R 585 Social Aspects of Mental Health and Illness

## **Fieldwork/Research (6-9 credit hours) and Dissertation (12 credit hours)** C6xx

C8xx

#### 4. Describe Form of Recognition

Doctor of Philosophy (Ph.D.) in Health Communication, Indiana University Graduate School, from the School of Liberal Arts at Indiana University Purdue University Indianapolis (IUPUI) CIP Code: 09.0905

#### 5. List Program Faculty and Administrators

The Ph.D. in health communication is administered within and granted from the Department of Communication Studies in the IU School of Liberal Arts on the campus of IUPUI. Currently, the department has 14 tenure-line faculty members, including one who will join the department in fall 2012. Of those 14 faculty members, seven bring expertise working in Ph.D. programs at other research institutions (designated by ^). Each brings a unique dimension of health research expertise to the program, including medical ethics, privacy and confidentiality, provider-patient interactions, health interpersonal communication, health media campaigns, and global health issues, as indicated in their vitae (see Appendix C). We have secured permission to search for an assistant professor in health communication with expertise in quantitative methods who will complement the existing faculty and be in place in fall 2012.

Tenure-stream faculty members with areas of research specialty in brackets:

^Charles Bantz, Ph.D., University of Minnesota, 1971. (may be available to serve on dissertation committees) [Organizational Communication]

<sup>^</sup>Linda Bell, Professor, Ph.D., Social Psychology, Duke University, 1973. Professional Certifications: Licensed Marriage and Family Therapist, American Board of Professional Psychology. [Family Systems in Health Contexts]

<sup>^</sup>Jennifer Bute, Assistant Professor, Ph.D., Speech Communication, University of Illinois at Urbana-Champaign, 2007. Concentration: Health Communication. [Health, Interpersonal Communication]

Catherine Dobris, Associate Professor, Ph.D., Speech Communication, Indiana University, 1989. [Women's Studies, Rhetorical Criticism, Discourses of Motherhood]

Beth Goering, Associate Professor, Ph.D., Communication, Purdue University, 1991. [Culture and Communication, Organizational Communication]

Kristine Karnick, Associate Professor, Ph.D., Communication Arts, University of Wisconsin, Madison, 1991. [Film and Television History, Media Studies]

<sup>^</sup>John Parrish-Sprowl, Professor, Ph.D., Interpersonal and Public Communication, Bowling Green State University, 1983. Cognate Area: Marketing and Management [Social and Behavioral Change]

^Sandra Petronio, Professor, Ph.D., University of Michigan, 1979. [Health Communication, Privacy Management]

^Nancy Rhodes, Associate Professor, Ph.D., Texas A&M University, 1991. [Risk Communication in Health Contexts]

Jonathan Rossing, Assistant Professor, Ph.D., Communication and Culture, Indiana University, 2010. Minor: Critical Pedagogy. [Rhetoric and Constructions of Race/Racism]

Kristina Sheeler, Associate Professor, Ph.D., Speech Communication, Indiana University, 2000. [Gender and Political Communication; Political Identity as Constructed and Contested in Media]

Gail Gráinne Whitchurch, Associate Professor, Ph.D., Family Studies, University of Delaware, 1989. Specialty Area: Communication Studies; Clinical Member, American Association for Marriage and Family Therapy [Interface between applied family communication research and socio-historical research; oral history; qualitative research methods]

Kim White-Mills, Associate Professor, Ph.D., Ohio University, 1987. [Women and Leadership]

<sup>^</sup>Michelle Miller-Day (joining Fall 2012), Professor, Ph.D., Human Communication, Arizona State University, 1995. Concentrations: Family Communication, Health Communication, Qualitative Research Methods. [Health Communication and Media Campaigns; Health Narratives]

Communication Studies Faculty Recent Grant Participation:

Beth Goering, Principle Investigator, "And Justice for All?: A Thematic Analysis of Representations of Legal Discourse on Popular Television Programs in the United States and Germany," \$34,884.80 New Frontiers in the Arts and Humanities Grant, IUPUI, 2007.

Linda G. Bell. Principal Investigator, Family Legacies: An Intergeneration Study of Families, \$25,000 Research Support Funds Grant, IUPUI, 2008 - 2009.

John Parrish-Sprowl, Co-Investigator, UL1RR025761-01, National Institutes of Health, Indiana Clinical and Translational Science Institute, 2008 – 2013, \$25,000,000. PI: Anantha Shekhar, M.D., Ph.D

John Parrish-Sprowl, Principle Investigator, Heartspring Foundation, Developing Communication for Behavioral Impact (COMBI) capacity in Three Countries, 2009 – 2013, \$150,000.

John Parrish-Sprowl, Co-Investigator, Indiana State Department of Health, Evaluation of the Pregnant and Parenting Adolescent Program, June – August, 2011, \$200,000. PI: Neale Chumbler, Ph.D.

Nancy Rhodes, Principal Investigator. IU Collaborative Research Grant. Project title: "Stress and motivation activation as precursors to substance use: A pilot study." With Annie Lang, co-PI. Total Requested: 75,000 from 2011 to 2012. Pending.

Nancy Rhodes, Principal Investigator. NCI. Project title: "Development of Reaction Time Measures for Spontaneous Models of Risk-Taking Behaviors in Adolescents." With David Ewoldsen, PI. Total Requested: \$275,000 from 2011 to 2012. Scored 45 (top 30%) resubmission pending.

John Parrish-Sprowl, Co-Principle Investigator, National Institute of Health, Using Peer Ambassadors to Reduce Infant Sleep Related Deaths in Minorities, 2012-2017, \$2,600,000. Co-PI with Antoinette Laskey, M.D. Pending.

In addition, drawing on the rich resources available on the health and life science campus of IUPUI, Senior Affiliate Faculty members who are researchers in health care issues or practicing providers on the campus of IUPUI (see Appendix D) have agreed to contribute to the educational experience. These faculty members and areas of expertise include:

NAME	CURRENT POSITION	SPECIALITY
~Billings, Diane M., EdD, RN, FAAN	Chan. Professor Emeritus, IU SON	Expertise in Distance Learning in Nursing Education
Bledsoe, Patricia D., Med, MSW, LCSW	Progam Mgr. & Sr. Affiliate Fac., Fairbanks Ctr. Medical Ethics	Ethics education
Connor, Ulla, B.A., M.A.x3, Ph.D.	Prof., Eng; Dir., Indiana Ctr for Intercultural Communication, IUPUI	Expertise in intercultural communication
Dicorcia, Mark J., B.S., M.ed., Ph.D.	Vice Chair-Edu. & Asst. Professor Ob/Gyn, IUSM	Health communication
Fortenberry, J. Dennis, B.S., M.D., M.S.	Prof., Dept of Pediatrics, IUSM	Expertise in adolescent health and drug prevent
Frankel, Richard M., B.A., Ph.D.	Prof. Med., IUSM; Research Scientist, Regenstrief; Research Sociologist, Roudebush	Expertise in patient- provider health communication

Department of Communication Studies IU School of Liberal Arts, IUPUI campus Revision 10-19-2011

#### VA

~Froehlich, Janice C., B.S., M.S., Ph.D.	Chancellor's Professor of Medicine, IUSM	Research in Cellular and Integrative Physiology
~Helft, Paul R., B.A., M.D.	Assoc. ProfMedicine & Director-Fairbanks Ctr. Medical Ethics	Expertise in medical ethics and health communication
Lammers, J. Eugene, B.S., M.D., M.P.H.	Med. Dir. Sr. Health Ctr. & Palliative Care Program, IU Health	Expertise in Clinical care
Learman, Lee, B.S., M.D., Ph.D.	Chair, Ob/Gyn, IUSM; Med. Dir., Women's Health Ser., IU Health	Women's Health
Matthias, Marianne S., B.A., M.S., Ph.D.	Research Scientist, Regenstrief & VA; Adjunct, Comm.Studies	Expertise in health communication campaigns
McDaniel, Anna M., B.S., M.A., Ph.D.	Chan. Professor IU SON & Assoc. Prof. Informatics	Expertise in mediated communication in healthcare
~Rothenberg, Jeffrey M., B.S., M.S., M.D.	Assoc. Prof. Ob/Gyn, IUSM	Expertise in women's health
Salyers, Michelle P., B.S., M.S., Ph.D.	Assoc. Prof Psychology; Research Scientist, Regenstrief & VA	Expertise in mental illness policy
Schneider, William H., B.A., M.A., Ph.D.	Prof. Philanthropic Studies & History; DirMed. Humanities Pro.	Expertise in Medical Humanities
Schwartz, Peter H., B.A., M.A., M.D., Ph.D.	Asst. Prof. IUSM & Liberal Arts; Faculty Investigator, Bioethics	Expertise in Bioethics, Health Risk Communication
~Sevilla-Martir, Javier F., B.S., M.D.	Asst. Dean for Diversity, Assoc. Prof., Dir.Hispanic Health,	Expertise in Diversity Issues & intercultural health concerns

IUSM

Spolnik, Kenneth J., B.S., D.D.S., M.S.D.	Assoc. Prof., Program Dir. & Chair, Dept. of Endodontics, IUSD	Endodonitics and Educational Training in Speciality
Torke, Alexia M., B.A., M.D., M.S.	Asst. Prof. IUSM; Scientist, Ctr. Aging; Investigator, Regenstrief	Experitse in Surrogate Decision Making and Aging Research
Viehweg, Stephan A., B.A., M.S.W.	Training Dir./Assoc. Dir. Admin., Riley Child Dev. Ctr.;Dir. TRIP	Expertise in Pediatric Health and Communication
Westmoreland, Glenda R., B.S., M.D., M.P.H.	Assoc. Prof. Clinical Med., IUSM; ACE Unit, Wishard	Expertise in Clinical Medicine
Wocial, Lucia, D., B.A., B.S., M.S., Ph.D.	Adj. Asst. Prof., IUSON; Nurse Ethicist, Fairbanks Ctr.Med.Ethics	Expertise in Clinical and Medical Ethics

~letter of support included in Appendix F

The Director of Graduate Studies in the IUPUI Department of Communication Studies will administer the Ph.D. program in Health Communication with the possibility of defining separate Directors for the M.A. and Ph.D. programs as the doctoral program grows. Department committees such as Graduate Admissions Committee and Advisory Committees will serve administrative functions in the program as well.

The Department of Communication Studies requires two additional faculty members to round out the offerings necessary to implement the program. This number assumes that searches currently underway are completed successfully and two faculty members (mentioned earlier) join the department in fall 2012. New faculty members who are also new Ph.D.s will teach no more than one course per year in the Ph.D. program. Other faculty members needed in areas of health communication specialties include:

- 1. New health communication Ph.D. specializing in intercultural / international health communication issues.
- 2. New health communication Ph.D. specializing in research on health disparities.

#### 6. Describe Needed Learning Resources

For the most part, the proposed Ph.D. program in health communication will be facilitated by the learning and teaching resources that exist on the campus of IUPUI and in the IU School of Liberal Arts at IUPUI. Hence, minimal State investments are necessary for its implementation.

The Department of Communication Studies offers a master's degree in Applied Communication and much of the infrastructure is in place to accommodate initiating the Ph.D. in health communication. The MA program has been successful in guiding students to completion; some students have also continued their education at reputable Ph.D. programs (see Appendix E). However, additional research faculty, staff support, student funding resources, and space will be necessary to implement the doctoral program.

The IUPUI campus administration have made commitments to provide funding to schools to support the implementation of doctoral programs. This support was provided for the implementation of the Ph.D. program in Economics in 2010 and is expected to be provided for the implementation of the Ph.D. program in Health Communication when it begins approximately 12-18 months following approval of the creation of the degree. Other sources of funding are tuition and fees generated by student enrollments, research funds generated by the faculty in health communication and related disciplines in the School of Liberal Arts and other schools at IUPUI, and philanthropic support for the doctoral program in health communication. The combination of these sources will provide a diversified funding base for the implementation of the program and to sustain it over time.

The current state of space assigned to the School of Liberal Arts and the Department of Communication Studies will require additional space for offices for graduate teaching/research assistants. A full-time support staff member to assist the Ph.D. program director with admissions and record-keeping is also a necessity.

#### 7. Description of Program Strengths

This Ph.D. program would be different among those universities offering degrees in Health Communication because it has significant potential to interface with a variety of health related centers, schools, and programs (e.g., IU Schools of Medicine, Nursing, Dentistry, Health and Rehabilitations Science, Social Work and the new School of Public Health). Further, interfacing with enterprises in the Indianapolis community, such as the community-based program in Health Care Advocacy, also has the potential to provide a fertile ground of opportunity to learn. In addition, the School of Liberal Arts has considerable strengths in the areas of Medical Anthropology, the Indiana Center for Intercultural Communication, Economics, and Sociology, as well as strong allied programs in Bioethics, Medical Humanities, and Religious Studies.

All of these areas have the potential to contribute faculty time for research and teaching purposes to the Health Communication Ph.D. program, making it both disciplinary and

multidisciplinary. School of Liberal Arts faculty at IUPUI in general and Communication Studies faculty members in particular have strong research and programmatic ties with IUSM, enabling creative and innovative research collaborations for faculty and graduate students in Health Communication.

In addition, the Indiana Center for Intercultural Communication currently has been successful in grants to support research on health literary. This Center's collaboration with the Ph.D. program offers additional avenues for students to study and learn about intercultural issues in healthcare.

All of the goals for this program hinge on learning that takes place, not only through traditional means of seminars from communication faculty and engaging in research projects, but also learning that offers the ability to observe and participate, in tangible ways, to understand the significance of communication issues in health care delivery. To provide this added dimension of an educational experience for the students in this Ph.D. program, the opportunity exists to work with Senior Affiliate Faculty members from outside of the communication department.

Drawing on the rich resources available on the health and science campus of IUPUI, Senior Affiliate Faculty members who are researchers in health care issues or practicing providers on the campus of IUPUI have agreed to contribute to the educational experience in the following ways:

- 1. Students will have access to Senior Affiliate Faculty members through invitations to join research teams, interfacing with educational projects, and internships learning about communication issues through observation in clinical settings.
- 2. A Seminar will be offered once a year in which the Affiliate faculty members have agreed to give lectures on a rotating schedule on topics related to their medical expertise concerning health communication issues. The Seminar will be the vehicle to organize this rich resource for the students' learning opportunities. The current list of Senior Affiliate Faculty members spans a wide range of expertise and the support from them and others promises to grow in productive ways for the Ph. D. program.
- 3. The Senior Affiliate Faculty members have also agreed to serve on dissertation committees as their interest and availability allow.

## C. Program Rationale

#### **1. Institutional Factors**

a. The campus of IUPUI has been designated as the Health and Life Science destination educational institution in the state of Indiana. As such, the development of programs that enhance the productivity in this health-related mission stand to increase the reputation of the campus and Indiana University as a whole. As a consequence, the campus is rich with resources that can facilitate the best possible educational environment for students seeking a Ph.D. in Health Communication. In addition, the resources are accessible to the students in this program, as evidenced by the willingness of the research and clinical faculty to make contributions to this Ph.D. program. They do so because they see the

value to patient care and training of medical students, residents, nurses, and others in the healthcare industry. Several of these health-related Schools on the IUPUI campus have offered letters of support and will be included in Appendix F when received.

Besides the faculty and program support in nursing, social work, medicine, dentistry, and other Schools on the IUPUI campus, there are also a number of Centers that offer additional educational resources for the Ph.D. student in Health Communication: the Center for Law and Health, Center for Health Policy, Herman B. Wells Center for Pediatric Research, Medical Informatics Center, and the Signature Centers such as the Center for Assessing, Understanding, and Managing Pain; Binational/Cross-Cultural Health Enhancement Center; Center for Cancer, Genetics, and the Environment; Consortium for Health Policy, Law, and Bioethics, to name just a few. In the School of Liberal Arts on the IUPUI campus, there is also the Institute for Research on Social Issues that offers research opportunities and connections with other faculty in health. See Appendix F for letters of support from IU Liberal Arts faculty, medical faculty, Programs, and Centers including Neale Chumbler, Ph.D., Director of the Institute for Research on Social Issues, and Paul Carlin, Ph.D. Chairperson of the Department of Economics.

The backdrop of the institutional opportunities to learn will not only draw prospective students from Indianapolis and the state of Indiana, it will attract high caliber students to the state of Indiana, many of whom are likely to stay as employed members of the community because of the potential job opportunities.

This degree program fits with the Chancellor's mission to create 21<sup>st</sup> Century degree programs on the campus of IUPUI. A Ph.D. in Health Communication represents a new kind of collaboration among academics and clinical issues in health care delivery. There is a potential for many new kinds of jobs to be on the horizon where a Ph.D. in Health Communication would have the best training to fulfill the need. Clearly, there are a number of ways to determine whether a degree program such as the Ph.D. in Health Communication represents a 21<sup>st</sup> Century degree and one example is the increased interest government agencies have in health communication issues. For example, the National Cancer Institute has established the *Health Communication and Informatics Research Branch* in the Division of Cancer Control and Population Sciences supporting the increasing trend in facilitating effective communication.

b. The development of this program has evolved out of inquiries from individuals in the Indianapolis community and entities in the state, interest by the health and life science research faculty needing graduate students to work on their grants, health-based companies in Indianapolis, healthcare organizations such as hospitals and clinics seeking professionals with expertise in health communication, and because of the successes other universities in the country have had with launching Ph.D. programs that include a track in health communication. Letters of support from several community organizations including Mental Health America of Indiana, the United Way, the Indiana Minority Health Coalition, and the Indiana Public Health Association are included in Appendix G. As these inquires and successes illustrate, there is a high need for trained professionals in health communication to facilitate, for example, patient adherence with medications, patient health literacy, patient-provider communication, a better understanding and resolution of medical ethics issues, help for families dealing with a loved-one's illness, and all the communication issues that occur in the health delivery systems, to name a few. In addition, the new IU School of Public Health promises to be a needed and important resource for the graduate students in the Health Communication Ph.D.

c. Considering the impact on undergraduate and other graduate programs, the M.A. program in Applied Communication is geared toward providing the student with the ability to take communication concepts and apply them to real-world problems. In this way, the existing master's program articulates with the focus of the proposed Ph.D. in health communication. While the master's program is to remain a stand-alone degree, it may also serve as a stepping stone to the Ph.D. program. Likewise, several of the existing courses serve as a beginning level understanding for the Ph.D. student while other courses will be developed and submitted to the Graduate Curriculum Committee for approval to provide more advanced understanding in the main area of health communication. The undergraduate program is also likely to benefit from the opportunity to have exposure to Ph.D. students in the department with active interests in pursuing research, making presentations, and adding to an intellectually rich learning environment.

#### 2. Evidence of Student Demand (See Table 1: Enrollment and Completion Data)

a. The demand for healthcare professionals with an expertise in health communication has grown exponentially in the last fifteen years and examples include required competencies in health communication for medical students and medical residency programs, the increasing emphasis on health literacy, and skills-based educational programs in health communication. Articulating with the economic issues of health and life science in central Indiana is the need to make healthcare more communicatively accessible. There are many cases where communication is at the core of breakdowns in healthcare delivery. Patients misunderstand how they are to take their medicine; providers miscommunicate treatment plans, mistakes are made in a host of situations that hinge on the ability to communicate effectively.

These developments speak strongly for health communication programs to train and educate professionals to fill this ever-growing need; the Indiana University School of Liberal Arts Department of Communication Studies on the campus of IUPUI, Indiana University's health sciences campus, is perfectly situated to educate the next generation of health communication specialists.

To date, there are 79 universities with Ph.D. programs in health communication in the country (see Appendix H). The increase in job openings for health communication teachers suggests that there is a need to produce faculty to teach and the job market indicates that universities are witnessing an increased desire by students to specialize in the area of health communication. Further, there are many individuals seeking a degree

program to retool and enter the health field. This program is also situated in the hub of health and life science activity and offers a unique and marketable degree. The enrollment projections and completion data speak to the expectations based on demand at other universities as well as what is reasonable for a new program to manage.

b. Enrollment projections in Table 1 are based on fall and spring semesters only. Full-time equivalent is based on enrollment in three courses per semester.

Indiana University Purdue University Indianapolis Ph.D. in Health Communication October 5, 2011

	Table 1: PROGRAM					
	Annual Totals	by Fiscal Y Year 1: 2013-14	ear (Use SI Year 2: 2014-15	S Definition Year 3: 2015-16	n) Year 4: 2016-17	Year 5: 2017-18
A. Prog	gram Credit Hours Generat	ted				
	1. Existing Courses	48	84	120	156	156
	2. New Courses	30	66	66	66	102
	Total	78	150	186	222	258
B. Full	-time Equivalents (FTEs)					
	1. Generated by Full- time Students	3	6	9	12	12
	2. Generated by Part- time Students	3	6	9	12	15
	Total	6	12	18	24	24
	3. On-Campus Transfers	0	0	0	0	0
	4. New to Campus	6	6	6	6	6
C. Prog	gram Majors (Headcounts)					
	1. Full-time Students	3	6	9	12	12
	2. Part-time Students	3	6	9	12	15
	Total	6	12	18	24	24

Department of Communication Studies IU School of Liberal Arts, IUPUI campus Revision 10-19-2011

				-		
3	6. On-Campus	0	0	0	0	0
	Transfers					
4	. New to Campus	6	6	6	6	6
5	5. In State	6	5	5	4	4
6	5. Out of State	0	1	1	2	2
D. Program Completions					3	6

## IUPUI Health Communication Ph.D.

#### 3. Transferability

Students entering the Ph.D. program will have earned 30 credits from a master's program. Hence, no transferability issues are expected coming into the program. There is no arrangement with the Department of Communication at Purdue University regarding transfer of credits at this time and may be unlikely since they have their own set of criteria for admission to the general Ph.D. focused program. The Ph.D. program at Indiana University, Bloomington focuses on Communication and Culture with emphasis areas in rhetoric, public culture, performance and ethnography, film and media studies and not on health communication.

#### 4. Access to Graduate and Professional Programs

#### N/A

#### 5. Demand and Employment Factors

The increasing role of the health and life sciences in Indiana, Indianapolis and, in particular, on the IUPUI campus generates a demand for people who are educated in health communication at the Ph.D. level. The demand for health communication professionals is fostered further given the surge in health care costs over the past two decades in the US, and a growing array of critical health issues around the globe. A substantial need exists for health communication specialists who can work in collaboration with physicians and other health researchers and advocates on the design and implementation of more efficient and effective health care systems, whether in government, education, not-for-profit, or health care industries. The establishment of a Ph.D. program in health communication will help to meet these needs.

The demand is high for specialists in health communication in general, and for Ph.D. degrees in particular. According to the "Analysis of Faculty Teaching Positions Advertised 2005-2010," conducted by the National Communication Association, the number of faculty teaching positions in communication overall has declined, but *health communication is one of three content areas that has witnessed an increase in the demand for academic jobs*. The need for Ph.D. degree holders has been instigated by the recognition that health communication issues are at the forefront of healthcare and the desire to train academics and professionals in this area.

Non-academic jobs have grown exponentially in the last 5-10 years. According to the <u>Bureau of Labor Statistics</u>, "ten of the 20 fastest growing occupations are healthcare related;" "Healthcare will generate 3.2 million new wage and salary jobs between 2008 and 2018, more than any other industry." For example, for the week of September 12, 2011, the <u>American Public Health Association</u> listed 109 job postings which required an advanced degree. The positions ranged from Health Administration (Sr. Deputy Director, Communication Directors, Advisors, and Specialists just to name a few. The following are just two examples of the kinds of non-academic positions for which health communication Ph.D.s are desired.

Family Planning/Reproductive Health Senior Technical Advisor - USAID - Washington, DC, United States

The Family Planning/Reproductive Health (FP/RH) Senior Technical Advisor will work in the Service Delivery Improvement (SDI) Division, Office of Population and Reproductive Health (PRH), Bureau for Global Health (GH). S/he will provide technical assistance to the "Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls" (E2A) Project. The E2A Project is USAID's global flagship project for strengthening quality FP/RH service delivery (facility- and community-based), through the use and scale-up of evidence-based FP/RH service delivery interventions and best practices. The goal of this award is to meet the family planning needs of women and girls who wish to delay, space or limit future pregnancies. This will be accomplished by assisting developing country public and private organizations to promote gender equitable strategies that enable women and girls to practice informed and healthy FP/RH behaviors. Working with public, private, NGO, and community/civil society sectors, this project will identify, document, adapt and scaleup evidence–based interventions and approaches that effectively strengthen service delivery and expand access to and quality of FP/RH information and services.

Senior Deputy Director: Addiction Prevention and Recovery

The District of Columbia Department of Health (DOH) seeks a Senior Deputy Director for the Addiction Prevention and Recovery Administration (APRA). As a member of the executive staff of the DOH, the Senior Deputy Director serves as the technical authority in the development of Department policy and strategy regarding regulation, prevention, treatment, detoxification, and rehabilitation relating to alcoholism and drug abuse among District residents.

In consultation with the DOH Director and in accordance with established DOH objectives, the Senior Deputy Director is responsible for the implementation of alcohol and other drug (AOD) abuse prevention and care policy, including the delineation and prioritization of services and the allocation of financial and human resources. He or she coordinates programs built to compliment components of the criminal justice system,

including its various probation departments. His or her work extends also to the organization of residential facilities and outpatient services for abusers.

Effectively the District's "drug czar" and chief spokesperson for community-minded initiatives, the APRA Senior Deputy Director provides executive-level leadership in the creation and administration of programs designed to curtail AOD abuse and to combat the host of social ills connected to addiction.

See Appendix I for a listing of representative ads using the search terms "health communication Ph.D." on reputable health communication databases including the <u>Communication Initiative Network</u> and the <u>American Public Health Association</u>.

The information included here is but a sample of the growth experienced in not only academic teaching in advanced degree programs and training for positions in non-academic jobs, but also to produce researchers to investigate critical health communication problems. In this regard, the NIH, NSF, NCI, and other governmental entities fund many research projects that address critical health communication issues. In addition, private funding has grown in support of specific health communication issues such as patient adherence in taking medications. Graduates with this degree stand an excellent chance of obtaining positions both in the state of Indiana and in other areas of the country.

#### 6. Regional, State and National Factors

a. Indiana University, Bloomington offers a Ph.D. in Communication and Culture. This program emphasizes rhetoric, public culture, performance and ethnography, film and media studies. According to the program description, there is no overlap with the proposed Ph.D. program in Health Communication and the department has written a letter of support for the proposed Ph.D. program (see Appendix J).

The School of Journalism offers an MA on the Bloomington campus with an emphasis in science and health journalism among other areas. The Department of Telecommunications in Bloomington offers a PhD in Mass Communication in cooperation with the School of Journalism. Dean Brad Hamm of the School of Journalism has indicated support for the proposed Ph.D. program in Health Communication (his letter will be included in Appendix J when received).

Purdue University, West Lafayette offers a Ph.D. in Communication with a track in health communication among other areas of emphasis. Purdue has also offered a letter of support for our proposed Ph.D. program (will be included in Appendix J when received).

While the Purdue program provides the student with the academic dimension of learning health communication issues, the proposed program at IUPUI has two distinguishing features that set it apart. First, the degree itself offers a concentration in health communication curricula and second, the opportunities that exist on the campus of IUPUI

to interface with researchers, clinicians, and healthcare delivery systems, in addition to having commitments from individuals integrally involved in health care is an added factor enhancing the educational experience for the students in the proposed Ph.D. program.

According to the 2011 compilation of doctoral programs in communication commissioned by the National Communication Association, there are seventy-nine universities in the United States which grant Ph.D. degrees in Communication (see Appendix H). A comprehensive search of the web sites of each of those universities identified twenty-three with a track, specialization, or research focus in Health Communication. Those programs range in quality according to the 2004 <u>Reputational Study of Doctoral Programs in Communication</u>, with reputational scores ranging from 1 (distinguished) to 5 (marginal). University of Pennsylvania (1.71), Pennsylvania State University (1.71), and Michigan State University (1.73) are the top-three health communication programs in the country; only 14 programs have a reputational score of 3.0 or stronger (1.0 - 3.0), some of which are in neighboring states (Michigan, Illinois, Kentucky, and Ohio). No program focuses solely on a Ph.D. in health communication with access to a medical campus in the life sciences hub of the state; doing so sets this program apart and promises to be highly attractive to prospective candidates and increase the marketability of the degree.

b. The work developing in Indianapolis and Indiana has designated health and life sciences as a major focus for economic development, which is an added resource. The creation of Indiana BioCrossroads as a partnership between leading research, academic, and economic development organizations in 2002 with the specific objective of making Indiana a world-class center for health and life sciences has received recognition for its progress from BIO/Battelle, ranking the Indianapolis area as the ninth largest region in the US for bioscience jobs and as one of the top four states in the number and concentration of life sciences-related jobs.

The platform of needs include the dozens of hospitals, clinics, and health programs in the state of Indiana that have a need for trained professionals to help improve the communication between and among providers, patients, families, and healthcare administrators. Degree holders from the proposed Ph.D. in Health Communication can also contribute to the ongoing research enterprise of the nearly 900 existing companies. The \$13.6 billion health and life sciences industry of Central Indiana employs more than 80,000 workers in medical, health, biomedical and biotechnology; pharmaceuticals; medical devices and instruments; hospitals and laboratories; food and nutrition; and in related research, testing and development enterprises. Indiana is home to world-class companies such as Eli Lilly & Company, Roche Diagnostics, Dow AgroSciences, IU Health, WellPoint/Anthem, Cook Group, Guidant, Hill-Rom, Zimmer Inc. and Covance, among others as well as major public research universities, including Indiana University at Bloomington, Purdue University at West Lafayette and IUPUI with its medical center and the state's only medical school.

This positioning of the health sciences as the heart of Indiana's economic development efforts is expected to continue. According to the *Biocrossroads 2007 Report*, Indiana expects to add 40,000 new jobs in the health and life sciences industry between 2007 and 2012. Much of this growth will be in the arc formed by West Lafayette, Indianapolis and Bloomington and relies on a vibrant partnership between Purdue University (West Lafayette), Indiana University (Bloomington), and IUPUI (Indianapolis). Part of the engine of growth for this enterprise is the continued ability of the Indiana University School of Medicine and its partners to secure major research grants and that ability depends, increasingly, on the ability to assess the health benefits of alternative treatments and health programs and policies. Clearly, Health Communication Specialists are needed to increase effective transfer of health delivery.

#### D. Program Implementation and Evaluation

The following plan for program assessment draws directly from the standards for evaluating communication programs developed by the National Communication Association, which is the largest professional organization within the discipline of communication. These <u>evaluation standards</u> were adopted in 2004 and revised in 2011 by NCA. Although these standards were developed to address the goals of undergraduate education in communication, they were constructed generally enough that they provide a solid structure for evaluating graduate programs in communication as well.

The Ph.D. program in Health Communication will routinely collect data relevant to these standards and will evaluate the program on these standards on an ongoing basis. Periodic self-study will be conducted at least every five years, and a comprehensive review with external reviewers will be undertaken every seven years.

The standards are listed below, with the plan for evaluating each guideline specified. According to the National Communication Association, program evaluation should follow seven guidelines:

#### **Guideline #1: Mission, Goals and Learning Outcomes**

The program should have a clearly articulated mission and clearly specified goals that are tied to the institution's missions and goals. The program should also have clearly specified learning outcomes for each of the graduate programs. These goals and outcomes should be tied to assessment measures and the results of assessment should be incorporated in ongoing program refinements.

Periodic assessments will include evaluating the mission and goals of the program with respect to the mission and goals of the larger campus. Data related to the jobs students get, their research productivity during their time in the program and in the years after graduation, and the skills they are trained in within the program will be evaluated for their alignment with campus and program goals.

#### **Guideline #2: Administration and Governance**

The communication program should have an organizational structure that supports and facilitates the achievement of its mission, goals, and objectives. There should be evidence of ongoing assessment of unit leadership and faculty participation in decision-making.

Periodic assessments of the department head and the director of graduate study will be conducted. The current plan includes evaluating program leadership every three years.

## **Guideline #3: Resources and Personnel: Administrative support, personnel, facilities, budget and equipment**

The communication program should have sufficient resources to achieve its mission. The resources devoted to the program should be comparable in quantity and quality to similar programs within the institution and communication programs in comparable institutions.

The department head, in consultation with the dean and with input from the faculty, will evaluate the adequacy of the administrative support, facilities, budget and equipment at least every three years.

#### **Guideline #4: Faculty and Professional Staff**

The communication program should have an adequate number of qualified full-time and continuing faculty and staff lines to meets its mission and goals. (Note: In programs which have tenure, "continuing" faculty refers to tenured and tenure track faculty).

The departmental advisory committee is charged with evaluating the need for, and determining the plan for faculty hires. The needs for additional faculty will be evaluated yearly as the program develops so that adequate faculty support for student research training is ensured.

#### **Guideline #5: Hiring and Evaluation of Faculty, Promotion and Tenure**

Continuing full-time faculty should be involved in the recruiting, hiring, and evaluation of new faculty. In accordance with unit and institutional by-laws, the faculty should be involved in tenure and promotion decisions within the communication program. Programs should seek to attract diverse faculty, students, and staff.

Faculty will continue to be involved with the recruitment, hiring, and evaluation of new faculty. The faculty will continue to encourage applications from diverse faculty, students and staff.

#### Guideline #6: Curriculum

The communication program should provide course offerings that enable students to meet the learning outcomes of the program with appropriate, balanced attention to theory, research, and application. In addition, the program should enable students to understand the challenges of and opportunities for effective and ethical communication in a diverse society.

The curriculum for the graduate program will be reviewed at least every three years by

the departmental graduate curriculum committee. New courses in the graduate curriculum are evaluated and approved by the School of Liberal Arts graduate curriculum committee.

#### **Guideline #7: Student Advising and Support Services**

The communication program should provide students with appropriate levels of academic advising, support for classes, and professional development.

Students' progress in the program will be monitored by their primary advisor, and yearly evaluations of student progress will be conducted. Periodic review will be undertaken to ensure that faculty advisors are providing the support necessary for students to succeed in the program.

#### **Appendices:**

- Appendix A: Detailed Course Descriptions, Select Readings and Assignments for Proposed Curriculum
- Appendix B: Examination Procedures, Admission to Candidacy, and Advisory Committee Composition Details
- Appendix C: Communication Studies Faculty CVs
- **Appendix D: Senior Affiliate Faculty CVs**
- **Appendix E: Master Student Information**
- Appendix F: Internal Letters of Program Support for Health Communication Ph.D.
- **Appendix G: External Letters of Support from Community Health Organizations**
- **Appendix H: Ph.D. Programs in Health Communication**
- Appendix I: Select Job Listings for Health Communication Specialists
- Appendix J: Support Letters from Indiana University and Purdue University