

1. BASIC INFORMATION

Course	Health Psychology
Degree program	Bachelor's Degree in Psychology
School	Faculty of Biomedical Sciences and Health
Year	3
ECTS	6
Credit type	Elective
Language(s)	English
Delivery mode	Presential
Semester	Second semester
Academic year	2025-2026
Coordinating professor	Amalie Hylland
Professor	Lidia Budziszewska and Amalie Hylland

2. PRESENTATION

In this course, the student will approach the psychological and social determinants involved in the health-disease process. The student will know the role of behavior and contextual factors in disease prevention, health promotion, and quality of life, coping, treatment and rehabilitation of diseases and health problems. Communication processes involved in the therapeutic situation, understood as a social context, will be analyzed. The contribution of the elements participating in this situation, such as relatives, medical professionals and other agents related to health takes place, will be considered. A biopsychosocial perspective will be adopted. The differences between "disease", "sickness", and "illness" will be studied. The emotional, cognitive, situational and motivational elements that determine the subjective experience of disease, and affect different disease behaviours, adherence to treatment and patients' adaptation to most prevalent chronic diseases and to end-stage disease will be considered. The student will acquire knowledge and skills which are necessary to practice clinical and health psychology.

3. LEARNING OUTCOMES

KNOWLEDGE

KN07: Identify the processes underlying individual behavior in the health-disease process.

- Identify the processes underlying individual behavior in the health-disease process.
- Describe coping strategies for surgical or terminal procedures, chronic illness, and treatment adherence.

SKILLS

SK07: Analyze the contribution of biological, cultural, and psychosocial foundations to the development of psychological differences in both individuals and groups.

- Reflect on the need to individualize interventions.
- Differentiate between the concepts of illness and the experience of illness, illness behavior, and coping with illness.
- Recognize typical psychological reactions, which may not necessarily be pathological, in certain situations.
- Analyze individual behaviors based on the social context in which they occur.

COMPETENCES

CP02: Understand the basic principles of different psychological processes in the field of Health Psychology.

CP04: Understand the biological foundations of human behavior and psychological functions.

CP09: Understand the different fields of application of Psychology and possess the necessary knowledge to impact and promote the quality of life in individuals, groups, communities, and organizations in various contexts: educational, clinical and health, work and organizations, and community.

CP10: Be able to analyze the needs and demands of recipients in different contexts.

CP11: Be capable of establishing the goals of psychological intervention in different contexts, proposing and negotiating goals with recipients and stakeholders.

CP13: Be able to describe and measure variables (personality, intelligence, and other abilities, attitudes, etc.) and cognitive, emotional, psychobiological, and behavioral processes.

CP14: Be able to identify differences, problems, and needs.

CP17: Be able to identify group and intergroup problems and needs.

CP20: Be able to analyze the context in which individual behaviors, group processes, and organizational behaviors occur.

CP22: Be able to design and adapt instruments, products, and services according to requirements and restrictions.

CP24: Be capable of defining objectives and developing an intervention plan based on its purpose (prevention, treatment, rehabilitation, insertion, support, etc.).

CP28: Be able to apply direct intervention strategies and methods to contexts: creating healthy environments, etc.

CP29: Be able to apply indirect intervention strategies and methods through other people: counseling, training trainers, and other agents.

CP34: Be able to provide appropriate and accurate feedback to recipients.

CP35: Be capable of preparing oral and written reports.

CP36: Understand and adhere to the ethical obligations of Psychology.

4. CONTENT

Part 1. Introduction. Behavior and Health.

Unit 1. Introduction to Health Psychology. The biopsychosocial model

Unit 2. Promotion of health and healthy behaviors. Psychological processes and their influence on health.

Motivation and emotions. Adherence to treatment

Unit 3. Stress and coping. Psychoneuroimmunology. Coping with chronic disease

Part 2. Psychological aspects in specific diseases

Unit 4. Psycho-oncology: psychological aspects of Oncologic Diseases

Unit 5. Psychological Aspects of HIV / AIDS

Unit 6. Psychological Aspects of Cardiovascular Diseases

Unit 7. Psychological Aspects of Diabetes

Unit 8. Psychological Aspects of Chronic Pain. Pain Management

Unit 9. The terminal patient. Palliative care

5. TEACHING-LEARNING METHODOLOGIES

The types of teaching-learning methodologies used are indicated below:

- Lectures
- Case method
- Problem based learning (PBL)
- Oral presentations

6. LEARNING ACTIVITIES

Listed below are the types of learning activities and the number of hours the student will spend on each one:

Learning activity	Number of hours
Lectures	25h
Autonomous work	50h
Formative assessment	5h
Design strategies, procedures and intervention plans	20h
Campus-based Tutorials	5h
Practical exercises	20h
Case analysis	25h
TOTAL	150h

7. ASSESSMENT

Listed below are the assessment systems used and the weight each one carries towards the final course mark:

Assessment system	Weight
Case analysis and problem solving: 5 practical activities: <ul style="list-style-type: none"> - 4 simulation scenarios (10%): attendance and submission of a checklist after each simulation. - 1 practical experiential activity on different technological devices in the context of Health Psychology. Compulsory attendance activity with no weighting in the evaluation. Attendance is mandatory to pass the subject. 	10%
<ul style="list-style-type: none"> - Portfolio - Activity in coordination with Leadership skills and Advanced Psychopathology as part of an integrated curriculum activity(2%). Requires the submission of a written activity. - Individual participation in 4 self-assessments, each consisting of 10 multiple-choice questions (MCQs) corresponding to the four specific topics of the module (Cancer, HIV, Cardiovascular Diseases, Diabetes). Each self-assessment accounts for 2% of the student's final mark and is carried out in person in the classroom at four different points during the course 	10%
<ul style="list-style-type: none"> - Design of strategies and intervention plans (Written work on the promotion of healthy behaviours). Inclusion of the responsible use of technology in the development of programmes for the promotion of healthy behaviours (which is part of the Digital Development Plan of the Degree in Psychology, dimension 1). It is mandatory to submit and pass the assignment to pass the course. 	25%
<ul style="list-style-type: none"> - Oral presentations (Presentation of the project related with the promotion of health behaviors). It is mandatory to conduct the presentation in person. It is necessary to receive a passing mark to pass the subject. 	5%
<ul style="list-style-type: none"> - Test of knowledge. Multiple-choice test consisting of 40 questions with three response options. 	50%

When you access the course on the *Campus Virtual*, you'll find a description of the assessment activities you have to complete, as well as the delivery deadline and assessment procedure for each one.

Attendance

According to Art. 1.4 of the Regulation for the Evaluation of Official Degree Degrees of the European University of Madrid (of the continuous evaluation): "The obligation to justify at least 50% attendance at classes is established as part of necessary for the evaluation process and to comply with the student's right to receive advice, assistance and academic follow-up from the teacher. For these purposes, students must use the technological system that the University puts at their disposal, to accredit their daily attendance to each of their classes. This system will also serve to guarantee objective information on the active role of the student in the classroom.

Those students who have not achieved a 50% attendance rate in the first examination period may be marked as failing and must pass the corresponding objective exams in the second examination period for the subject, where they must obtain a mark equal to or higher than 5.0 out of 10.

7.1. First examination period

To pass the course in the first examination period, you must follow the continuous assessment system and pass both the compulsory active methodologies and the knowledge test (exam). To pass the subject in the first examination period you must obtain a mark higher or equal to 5.0 out of 10.0 in:

- The knowledge test (exam)
- Each of the following active methodologies: Weighted average of the 4 simulation sessions (assessed as part of Case analysis and problem solving), written assignment and oral presentation as part of Design of strategies and intervention plans, and the Integrated Curriculum activity (assessed as part of the Portfolio).
- The final mark (weighted average) of the subject.

If the written work on the design of strategies and intervention plans is not handed in and/or the student is not present on the day of the oral presentation of the work, he/she will fail the subject.

Plagiarism and use of AI

Any student who resorts to or uses illicit means during an evaluation test, or who improperly claims authorship of academic work required for assessment, will receive a failing grade ("0") in all evaluation tests for the exam period in said subject in which the violation occurred, and may also face disciplinary action following the opening of a disciplinary proceeding.

AI-generated content tools (AIGC), such as ChatGPT and other language models (LLMs), cannot be used to generate assignments. These tools also cannot be responsible for any written content in the assignment. The use of AI must be authorized by the instructor for each activity. If a student has used these tools to develop any part of their work, this use must be detailed in the assignment. The student is fully responsible for the accuracy of the information provided by the tool and for correctly referencing any supporting work. Tools used for spelling, grammar, and general editing are not included in these guidelines. The final decision on the appropriateness of the reported use of an AI tool rests with the instructor, academic coordination, and program director.

Delayed submission of mandatory activities

Late submissions of mandatory assignments will be penalized with a deduction of 2 points in the grade, up to a maximum of 7 calendar days. After this period, the assignment will not be assessed, will receive a numerical grade of 0 in the first examination period and must be resubmitted during the second examination period.

Uniform Requirement for Simulation Sessions:

Uniform Requirement for Simulation Sessions: Whenever simulation activities are conducted, students are required to wear the appropriate uniform (grey scrub top and trousers) in the simulated hospital. Students who do not attend with the complete uniform will not be allowed to participate in the simulation and will be marked as absent for that session.

The student may miss one simulation, with or without justification. More than one absence from the simulations will result in a fail in the Case Analysis and Problem Solving module, which must be retaken during the second examination period.

7.2. Second examination period

In order to pass the course in the second examination period, the same guidelines will be followed as in the first examination period. It is necessary to hand in the activities that were not passed in the first examination period, after having received the corresponding corrections from the teacher, or those that were not handed in.

In order to pass the course in the second examination period, you must obtain a mark higher or equal to 5.0 out of 10.0 in the:

- The knowledge test (exam)
- Each of the following active methodologies: Weighted average of the 4 simulation sessions (assessed as part of Case analysis and problem solving), written assignment and oral presentation as part of Design of strategies and intervention plans, and the Integrated Curriculum activity (assessed as part of the Portfolio).
- The final mark (weighted average) of the subject.

Activities that, due to their nature, cannot be repeated will be assessed through an objective test (theoretical or practical) during the second examination period.

Retake of the practical experiential activity (technological devices)

If the student fails to attend the practical experiential activity, whether justified or not, they will be required to retake this part of the subject through a written in-person exam with open-ended questions. In this exam, the student must demonstrate their knowledge of the use of technological devices, as well as their application to clinical cases. The assessment will be marked as pass/fail.

Retake of Simulations in the second examination period

The recovery of simulations in the second examination period will be done by completing an exam of clinical cases, in which the student must demonstrate the necessary competences developed in the module for professional psychological practice. The exam will be held in person.

Retake of the MCQs (part of the Portfolio)

The retake of the 4 self-assessments MCQs included in the Portfolio will consist of an in-person exam with 10 multiple-choice questions for each thematic block that needs to be retaken (Cancer, HIV, Cardiovascular Diseases, Diabetes). Each self-assessment represents 2% of the student's final grade.

8. SCHEDULE

This table shows the delivery deadline for each assessable activity in the course:

Assessable activities	Deadline
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Case analysis and problem solving: Simulation 1	March
Case analysis and problem solving: Simulation 2	April
Case analysis and problem solving: Simulation 3	May
Case analysis and problem solving: Simulation 4	May
Case analysis and problem solving :Experiental Mandatory Activity	April
Due date of the project related with strategies and intervention plans	May
Oral presentation	May
Portfolio	February - May
Test of knowledge	May - June

This schedule may be subject to changes for logistical reasons relating to the activities. The student will be notified of any change as and when appropriate.

9. REFERENCES:

The main reference work for this subject is:

- Amigo, I. (2012). *Manual de psicología de la salud*. Madrid: Pirámide
- Abraham, C., Conner, M., Jones, F., & O'Connor, D. (2016). *Health psychology*. Routledge.
- Brannon, L., Feist, J., & Updegraff, J. A. (2017). *Health psychology: An introduction to behavior and health*. 9th Ed. Cengage Learning. (Edición en español: Brannon, L. y Feist, J. (2001). *Psicología de la Salud*. Madrid: Thomson-Paraninfo).
- Gil Roales-Nieto, J. (2003). *Psicología de la salud: aroximación histórica, conceptual y aplicaciones*. Madrid : Pirámide.
- **Morrison, V. & Bennett. P. (2016). *Introduction to Health Psychology*. Pearson.**
- Ragin, D.F. (2017). *Health Psychology: An Interdisciplinary Approach*. Routledge.
- Rodríguez, J. (2001). *Psicología social de la salud*. Madrid : Síntesis.

The recommended Bibliography is:

Health Psychology main applications specific references

- Morrison, V. & Bennett. P. (2016). *Introduction to Health Psychology*. Pearson.
Chapter 2 Health Inequalities.
Chapter 3 Health- risk behavior.
Chapter 4 Health- protective behavior.
Chapter 5 Explaining health behavior.
Chapter 6 Changing behavior: mechanisms and approaches.
Chapter 13 Managing Stress.
Chapter 16 Pain.

Chapter 17 Improving health and quality of life.

- Amigo, I. (2014). *Manual de Psicología de la salud*. Ed. Pirámide.
- Chapter 7. Estrés (pp. 134-138)
- Chapter 11. Enfermedades cardiovasculares (pp. 179-190)
- Buceta, J.M. y Bueno, A.M. (1996). *Tratamiento psicológico de hábitos y enfermedades*. Madrid: Pirámide.
- Chapter 11. Tratamiento psicológico después del infarto de miocardio (pp. 455-493)
- Gil, J. y Calero, M.D. (1994). *Tratamiento del tabaquismo*. Interamericana McGraw-Hill
- Diabetes
- Brannon, L. y Feist, F. (2001). *Psicología de la salud*. Ed Paraninfo. Cap 11 (pp. 369-373)
- Gil, J. y Víchez (1993). *Diabetes. Intervención psicológica*. Madrid: Eudema
- Chronic pain
- Amigo, I. (2014). *Manual de psicología de la salud*. Madrid: Pirámide. Cap. 8 (pp. 143-157)
- Cancer
- Cruzado, J.A. y Olivares, M.E. (1996). Intervención psicológica en pacientes con cáncer. En JM Buceta y AM Bueno, *Tratamiento psicológico de hábitos y enfermedades*. Madrid: Ed. Pirámide
- Cruzado, J.A. (2014). *Manual de psicooncología*. Ediciones Pirámide.
- Gil, F.L. (2015). *Counselling y psicoterapia en cáncer*. Barcelona: Elsevier
- Montesinos, F. (2009). Soporte psicooncológico en cáncer de mama: actualización y tratamientos eficaces. *Revisiones en cáncer (Madrid)*, 23, 3, 118-124.
- Montesinos F. (2011). *Significados del cáncer y aceptación psicológica. Aprendiendo a convivir con el miedo*. Saarbrücken: Editorial Académica Española.
- Montesinos F. y Páez M. (2014). Cáncer y aceptación psicológica: la Terapia de Aceptación y Compromiso. En Gil F. (coord.) "Counselling y Psicoterapia en Cáncer". Ed. Elsevier. (cap. 21, pp. 181-190)
- Holland, J. C. (2015). *Psycho-oncology*. 3rd ed. Oxford University Press.
- HIV
- Bayés, R. (1995). *Sida y psicología*. Barcelona: Ed. Martínez Roca
- Pérez, P. (2016). *Sida, Repensar La Prevención*. Sekotia.
- Palliative care
- Secpal. Guía de cuidados paliativos [http://cmvinalo.webs.ull.es/docencia/Posgrado/8 -CANCER%20Y%20CUIDADOS-PALIATIVOS/guiacp.pdf](http://cmvinalo.webs.ull.es/docencia/Posgrado/8-CANCER%20Y%20CUIDADOS-PALIATIVOS/guiacp.pdf)
- Bayés, R. (2001). *Psicología del sufrimiento y de la muerte*. Barcelona: Martínez Roca
- Barreto, M. P. y Bayés, R. (1990). El psicólogo ante el enfermo en situación terminal. *Anales de psicología*, 6(2), 169-180.
- Prevention and promotion of health
- Alvira, R. (2001). *Guía para la elaboración de planes locales de prevención de las drogodependencias*. Madrid : Agencia Antidroga de la Comunidad de Madrid
- Biglan, A. (2015). *The nurture effect: How the science of human behavior can improve our lives and our world*. New Harbinger Publications.
- Castillo, L. y Orea, A. (2016). *Nutrición y prevención cardiovascular: cómo lograr comer bien para vivir sano*. México: McGraw-Hill.
- Egger, G., Binns, A., Rössner, S., & Sagner, M. (2017). *Medicina del estilo de vida: Hábitos, entorno, prevención y promoción de la salud*. Elsevier Health Sciences.
- Espada, J.P. y Méndez, F.X. (2003). *Prevención del abuso del alcohol y del consumo de drogas de síntesis (Programa Saluda)*. Pirámide.
- García del Castillo, J.A. y López-Sánchez, C. (2012). *Estrategias de intervención en la prevención de drogodependencias*. Síntesis.

- Isorna, M. y Saavedra, D. (2012). *Prevención de drogodependencias y otras conductas adictivas*. Pirámide.
- Pantoja L. (2006). *Prevención selectiva del consumo de drogas en menores vulnerables: planteamientos teóricos y experiencias internacionales*. Bilbao: Universidad de Deusto.
- Quiles, Y. y Quiles, M.J. (2015). *Promoción de la salud: Experiencias prácticas*. Editorial electrónica de la universidad Miguel Hernández de Elche.
- Salmerón, P., Giménez, C., Nieto, R. (2016). *La promoción de la salud. Claves para su práctica*. Editorial UOC.
- Sánchez, P. S. (2016). *La promoción de la salud: claves para su práctica*. Editorial UOC.
- Sanjuán, P. (2014). *Promoción y prevención de la salud desde la psicología*. Síntesis.
- Ybarra, J.L., Orozco, L.A. y Valencia, I. (2014). *Intervenciones con apoyo empírico. Herramienta fundamental para el psicólogo clínico y de la salud*. Editorial El Manual Moderno.

Links of interest

- Estilos de vida saludable. Web del Ministerio de Sanidad sobre prevención <http://www.estilosdevidasaludable.msssi.gob.es/>
- Coordinadora estatal de VIH y sida <http://www.cesida.org/>
- Grupo de Estudio del sida <http://www.gesida-seimc.org/>
- Sociedad Española de Hipertensión <http://www.seh-lelha.org/>
- Fundación Española del Corazón <http://www.fundaciondelcorazon.com/>
- American Diabetes Association <http://www.diabetes.org/>
- Sociedad Española de Diabetes <http://www.sediabetes.org/>
- Asociación Española Contra el Cáncer <https://www.aecc.es/>
- Sociedad Española de Oncología Médica <http://www.seom.org/>
- Sociedad Española de Cuidados paliativos <http://www.secpal.com/>
- Sociedad Española del Dolor <http://portal.sedolor.es/>

10. EDUCATIONAL GUIDANCE AND DIVERSITY UNIT

From the Educational Guidance and Diversity Unit we offer support to our students throughout their university life to help them reach their academic achievements. Other main actions are the students inclusions with specific educational needs, universal accessibility on the different campuses of the university and equal opportunities.

From this unit we offer to our students:

1. Accompaniment and follow-up by means of counselling and personalized plans for students who need to improve their academic performance.
2. In terms of attention to diversity, non-significant curricular adjustments are made in terms of methodology and assessment for those students with specific educational needs, pursuing an equal opportunities for all students.
3. We offer students different extracurricular resources to develop different competences that will encourage their personal and professional development.
4. Vocational guidance through the provision of tools and counselling to students with vocational doubts or who believe they have made a mistake in their choice of degree.

Students in need of educational support can write to us at:

orientacioneducativa@universidadeuropea.es

11. ONLINE SURVEYS

Your opinion matters!

The Universidad Europea encourages you to participate in several surveys which help identify the strengths and areas we need to improve regarding professors, degree programs and the teaching-learning process.

The surveys will be made available in the “surveys” section in virtual campus or via e-mail.

Your assessment is necessary for us to improve.

Thank you very much for your participation.