

<b>ID</b>	3217
<b>Curricular Unit</b>	Health Promotion
<b>Regent</b>	Analiza Mónica Lopes de Almeida Silva
<b>Learning Outcomes</b>	<p>The objectives of this course include:</p> <ol style="list-style-type: none"> <li>1. To promote and consolidate theoretical knowledge about the health effects of physical inactivity, unhealthy choices and food / nutritional patterns, and of being overweight; and to meet the main recommendations for the adoption of protective behaviors.</li> <li>2. To increase the knowledge of the main health promotion models and theories of behavioral modification and strategies for each identified risk behavior, both at the individual and community levels for the adoption of healthier lifestyles.</li> <li>3. To promote the critical analysis of the evidence of lifestyle intervention changes, at the individual, community and population levels.</li> <li>4. To develop in the student planning and organization-related skills for innovative health promotion projects, supported by the described evidence-based interventions.</li> </ol>
<b>Syllabus</b>	<p>The following topics will be highlighted:</p> <ul style="list-style-type: none"> <li>- The evolution of the health and lifestyle concepts;</li> <li>- Definition and historical background of health promotion;</li> <li>- Main behavior risk factors: physical inactivity, unhealthy food intake and obesity;</li> <li>- Health behavior determinants: ecological perspective;</li> <li>- Biological and psychological determinants;</li> <li>- The physical and social context of the health behaviors;</li> <li>- The different interventional levels: individual, community, and population;</li> <li>- Models, theories and behavior modification techniques;</li> <li>- Development and implementation of health promotion interventions and programs;</li> <li>- New technologies for health promotion and well-being.</li> </ul>

Summative assessment Model:

The option for this model assessment requires:

A) Attendance in the classes over than 2/3;

B) Tasks to develop, as below:

B1) During the class, in about 15 minutes, a Project must be Presented Formally, pretending that the presentation is going to be made to decision makers/program implementers (Recreational centers, Schools, community health centers, other institutions), followed by class discussion. Students can choose the project-related issue among several risk behaviors discussed in the lecture/practical classes. (40% of the final score.)

B2) 1 Test completed during the classes. The structure of these tests involves 2-4 questions for developing/discussing and a few questions of quick answer. (60% of the final score.)

The student is approved in this process if the value obtained from the formula:  $0.4 \times B1 + 0.6 \times B2$  has a score equal or higher than 9,5 and attendance is higher than 2/3 of the classes.

Final exam assessment model:

The student is approved and exempt from an oral exam if a minimum score of 12.0 (score 1 to 20) is obtained in the final exam. The student is not approved if the final exam is lower than 10 (score 1 to 20).

## Evaluation

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Calmeiro L, Matos MG (2004). *Psicologia da saúde e do exercício*. Lisboa: Visão e contextos,

Glanz K et al. (Eds.). *Health Behavior and Health Education: Theory, Research, and Practice, Fourth Edition*. San Francisco: Jossey-Bass, Inc., 2008. [3 chapters co-authored with Editors]

Direcção Geral da Saúde (2001). *Guias de educação e promoção da saúde*. Lisboa: DGS.

Organização Mundial de Saúde (1986). *Carta de Ottawa para a promoção da saúde* (Direcção Geral da saúde, trad.)

Ezzati M & Riboli E. "Behavioral and Dietary Risk Factors for Noncommunicable Diseases" *N Engl J Med* 2013;369:954-64.

WHO "Global Status Report on noncommunicable diseases", 2014.

WHO (2011). *Health Promotion*. Disponível em <http://www.who.int/healthpromotion/en/>

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## Bibliography