

 <div>LSPR Institute of Communication & Business <small>The Leading Graduate School of Communication & Business ASEAN Global Campus</small> MASTER PROGRAMME</div>		INSTITUT KOMUNIKASI DAN BISNIS LSPR FAKULTAS PASCASARJANA PROGRAM STUDI MAGISTER ILMU KOMUNIKASI			CODE RPS/PGP/S2/HCM/ODD/CIH
SEMESTER LEARNING PLAN					
SUBJECT	CODE	Cluster	WEIGHT (credits)	SEMESTER	Date of Compilation
Communication Issues in Healthcare	HCCM502		4 credits	2	February 2025
Authority/Approval	RPS Development Lecturer		Subject Coordinator		Head of Study Program
	Dr. Geofakta Razali, MI Kom				
Learning Outcomes	PLO - Study Program charged to the Subject				
	PLO 1 – K3	Understand how to use communication theory to solve problems in society and apply it in professional and individual life.			
	PLO 2 – K6	Solving problems in science, technology, and/or art in the field of communication through an inter or multidisciplinary approach .			
	PLO 3 – GS3	Able to formulate scientific ideas, thoughts and arguments responsibly and based on academic ethics, and communicate them through the media to the academic community and the wider community.			

	PLO 4 – SS3	Solving problems in the field of communication by utilizing other fields of science in an interdisciplinary and multidisciplinary manner, and paying attention to social, cultural, economic, public health & safety factors, as well as environmental sustainability.
	PLO 5 – A4	Working together and having social sensitivity and concern for society and the environment.
	Course Learning Outcomes (CLO)	
	CLO 1	Students are able to explain health communication theories and approaches comprehensively and relate them to the dynamics of health issues in society. Related PLO: P3, P6
	CLO 2	Students are able to analyze strategic issues in public health communication, including unequal access to information, health hoaxes, risk communication, and health literacy. Related PLO: P6, SS3
	CLO 3	Students demonstrate empathy, collaboration, and responsibility in designing ethical and humanitarian-based health communication strategies. Related PLO: S4, GS3
	Final Competencies for Each Learning Stage (Sub-CLO)	
	Meeting 1 Students are able to understand the definition, scope, and urgency of health communication in the context of the health care system. PLO Achieved: K3, GS3 CLO: 1	

Meeting 2

Students are able to explain various theoretical approaches to health communication, including transactional, narrative, and sociocultural models.

PLO Achieved: K3 | CLO: 1

Meeting 3

Students are able to identify the role of media and information technology in the ethical and effective dissemination of health messages.

PLO Achieved: K6, SS3 | CLO: 2

Meeting 4

: Students are able to analyze hoaxes and disinformation issues in health communication and formulate strategies to combat them.

PLO Achieved: K6, GS3 | CLO: 2

Meeting 5

: Students are able to explain the importance of risk and crisis communication in handling public health issues such as pandemics and biological disasters.

PLO Achieved: K6, SS3 | CLO: 2

Meeting 6

Students are able to differentiate communication strategies used for vulnerable audiences such as the elderly, children, and health minority groups.

PLO Achieved: K3, SS3 | CLO: 2

Meeting 7

Students are able to evaluate ethics, cultural sensitivity, and privacy issues in interprofessional and patient-to-patient health communication practices.

PLO Achieved: A4, GS3 | CLO: 3

Meeting 8 – Midterm Exam:

Evaluate students' understanding of theories, approaches, and contemporary issues in health communication.

PLO Achieved: K3, K6, GS3 | CLO: 1, 2

Meeting 9

: Students are able to explain the concept of health literacy and develop data-based educational campaigns.

PLO Achieved: K6, SS3 | CLO: 2

Meeting 10

Students are able to analyze challenges in interprofessional communication in hospital and clinical settings.

PLO Achieved: K3, SS3 | CLO: 1

Meeting 11

: Students are able to design health messages that are responsive to stigma and social inequality.

PLO Achieved: K6, A4 | CLO: 2, 3

Meeting 12

Students are able to understand communication challenges in mental health issues and design supportive and non-discriminatory communication approaches.

PLO Achieved: K3, A4 | CLO: 3

Meeting 13

: Students are able to assess the effectiveness of social media-based digital health campaigns.

PLO Achieved: K6, SS3 | CLO: 2

Meeting 14

Students are able to develop participatory and inclusive community-based communication strategies.

PLO Achieved: A4, GS3 | CLO: 3

	<p>personnel, patients, healthcare institutions, and the wider community within the context of changing global healthcare systems. Students are encouraged to critique information inequality, role conflicts, and risk communication within the context of pandemics, public services, and digital technology. Students are expected to design communicative and responsive solutions to the complex dynamics of contemporary healthcare communication, grounded in research and humanitarian values.</p>
<p>Study Material: Learning materials</p>	<p>Study Materials for Learning and References</p> <p>Topic 1: Information and Access Inequality in Health Communication Discussion Points:</p> <ul style="list-style-type: none"> • Health literacy and barriers to patient understanding • Access to medical information in marginalized communities • Digital inequality in the dissemination of health information <p>References:</p> <ul style="list-style-type: none"> • Books: Nutbeam, D., & Harris, E. (2019). <i>Theory in a Nutshell: A Practical Guide to Health Promotion Theories</i> (4th ed.). McGraw-Hill Education. Ch. 1–2, pp. 1–28. https://www.mheducation.com.au/theory-in-a-nutshell-9780070285279 • Journal: Sentell, T., et al. (2020). “Low health literacy and health outcomes in underserved populations.” <i>BMC Public Health</i> , 20(1), 1–8. https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-020-08842-0 <hr/> <p>Topic 2: Global Health Crisis and Risk Communication Discussion Points:</p> <ul style="list-style-type: none"> • Risk communication models in healthcare institutions • The role of media and hoaxes in the health crisis

- Evaluation of government communication strategies during the pandemic

References:

- Books: Reynolds, B., & Seeger, M. W. (2021). *Crisis and Emergency Risk Communication* (2nd ed.). CDC Press. Ch. 3–4, pp. 49–88.
https://emergency.cdc.gov/cerc/resourcecenter/pdf/cerc_2014edition.pdf
- Journal: Malecki, K., et al. (2021). "Crisis Communication and Public Trust during the COVID-19 Pandemic." *Journal of Health Communication* , 26(4), 243–250.
<https://www.tandfonline.com/doi/full/10.1080/10810730.2021.1947800>

Topic 3: Ethical Issues and Trust in Health Communication

Discussion Points:

- Privacy and confidentiality of patient data
- Informed consent and patient rights
- The issue of trust between patients and medical institutions

References:

- Books: Gillett, G., & McLean, S. (2020). *Ethics of Health Care: A Guide for Clinical Practice* (3rd ed.). Routledge. Ch. 6, pp. 111–136.
<https://www.routledge.com/Ethics-of-Health-Care-A-Guide-for-Clinical-Practice/Gillett-McLean/p/book/9780367331912>
- Journal: Mechanic, D. (2020). "Trust in health care: A medical sociologist's perspective." *Health Affairs* , 39(8), 1246–1252.
<https://www.healthaffairs.org/doi/full/10.1377/hlthaff.2020.00202>

Topic 4: Cross-Cultural Communication and Health Equity Issues

Discussion Points:

- Differences in cultural values and expectations in medical communication
- Structural discrimination in the health system

	<ul style="list-style-type: none"> • The impact of stigma on patients and services <p>References:</p> <ul style="list-style-type: none"> • Books: Betancourt, JR, et al. (2020). <i>Cross-Cultural Medicine</i> (2nd ed.). American College of Physicians. Ch. 5, pp. 89–112. https://www.acponline.org/featured-products/cross-cultural-medicine • Journal: Bailey, SR, et al. (2019). “Structural racism and health inequities.” <i>New England Journal of Medicine</i> , 380(10), 986–988. https://www.nejm.org/doi/full/10.1056/NEJMp1805748 <hr/> <p>Topic 5: Technology and Digital Communication Issues in Health</p> <p>Discussion Points:</p> <ul style="list-style-type: none"> • Telemedicine and the challenges of long-distance communication • Health information security in digital systems • Effectiveness of health applications and wearable devices <p>References:</p> <ul style="list-style-type: none"> • Books: Shaw, T., et al. (2021). <i>Health Informatics: Digital Health and the Future of Health Systems</i> (2nd ed.). Elsevier. Ch. 8, pp. 145–172. https://www.elsevier.com/books/health-informatics/shaw/9780729543407 • Journal: Keesara, S., et al. (2020). “COVID-19 and Health Care's Digital Revolution.” <i>New England Journal of Medicine</i> , 382(23), e82. https://www.nejm.org/doi/full/10.1056/NEJMp2005835
Library	<p>Main</p> <hr/> <p>Main Library:</p> <ol style="list-style-type: none"> 1. Du Pre, A. (2020). <i>Communicating About Health: Current Issues and Perspectives</i> (6th ed.). Oxford University Press. Ch. 1–3, pp. 1–48.

	<ol style="list-style-type: none"> 2. Reynolds, B., & Seeger, M. W. (2021). <i>Crisis and Emergency Risk Communication</i> (2nd ed.). CDC Press. Ch. 3–4, pp. 49–88. 3. Gillett, G., & McLean, S. (2020). <i>Ethics of Health Care: A Guide for Clinical Practice</i> (3rd ed.). Routledge. Ch. 6, pp. 111–136. 4. Shaw, T., et al. (2021). <i>Health Informatics: Digital Health and the Future of Health Systems</i> (2nd ed.). Elsevier. Ch. 8, pp. 145–172. 5. Betancourt, J.R., et al. (2020). <i>Cross-Cultural Medicine</i> (2nd ed.). American College of Physicians. Ch. 5, pp. 89–112.
	Supporters
	Supporting Library: <ol style="list-style-type: none"> 1. Sentell, T., et al. (2020). “Low health literacy and health outcomes in underserved populations.” <i>BMC Public Health</i> , 20(1), 1–8. 2. Malecki, K., et al. (2021). “Crisis Communication and Public Trust during the COVID-19 Pandemic.” <i>Journal of Health Communication</i> , 26(4), 243–250. 3. Mechanic, D. (2020). “Trust in health care: A medical sociologist's perspective.” <i>Health Affairs</i> , 39(8), 1246–1252. 4. Bailey, S.R., et al. (2019). “Structural racism and health inequities.” <i>New England Journal of Medicine</i> , 380(10), 986–988. 5. Keesara, S., et al. (2020). “COVID-19 and Health Care's Digital Revolution.” <i>New England Journal of Medicine</i> , 382(23), e82.
Instructional Media	Software: Power Point, Google Form. Hardware: Computer, <i>Infocus</i> , <i>Whiteboard</i> , Marker.
Supporting lecturer	

Course Requirements	
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Week 2	Final Competencies for Each Learning Stage (Sub-CLO)	Evaluation	Learning Forms; Methods; Student Assignments	Learning Materials [Complete Reference]	Weight (%)
1	Students are able to understand the basic concepts of health communication and its contemporary challenges.	Quizzes & discussions	Interactive lecture (120'); discussion (30')	Berry, D. (2019). <i>Health Communication: Theory and Practice</i> (2nd ed.), Open University Press, Ch. 1, pp. 1–22.	5
2	Students are able to explain the social and cultural dimensions in health service communication.	Short assignment	Explanation of material; contextual discussion (120')	Kreps, G.L., & Thornton, B.C. (2020). <i>Health Communication: Theory, Method, and Application</i> , Routledge, Ch. 3, pp. 42–58.	5
3	Students are able to identify issues of inequality and communication access in the health care system.	Reflective essay	Case study analysis & reflection (120')	Notoatmodjo, S. (2018). <i>Health Promotion and Behavioral Science</i> , Rineka Cipta, Ch. 4, pp. 49–67.	5
4	Students are able to explain communication in patient-doctor relationships and the principles of empathy.	Narrative assignment	Role-play simulation and video observation (120')	Levinson, W., & Pizzo, P. A. (2018). “Patient–Physician Communication.” <i>JAMA</i> , 319(21), 2137–2138.	5
5	Students are able to examine communication approaches for vulnerable groups (disabled, elderly, etc.).	Context analysis task	Group presentation (120')	Ahmad, R., & Wulandari, E. (2021). “Health Communication for Vulnerable Groups.” <i>Indonesian Journal of Health Communication</i> , 3(1), 33–45.	5
6	Students are able to evaluate mental health issues and stigma from a communication perspective.	Guided discussion	Lecture and group discussion (120')	Rickwood, D., & Thomas, K. (2019). “Mental Health Communication.” <i>Health Promotion Journal of Australia</i> , 30(3), 265–271.	5

Week 2	Final Competencies for Each Learning Stage (Sub-CLO)	Evaluation	Learning Forms; Methods; Student Assignments	Learning Materials [Complete Reference]	Weight (%)
7	Students are able to design health messages based on local social and cultural campaigns.	Mini campaign tasks	Campaign message workshop (120')	Airhihenbuwa, CO (2021). <i>Healing Our Differences</i> , Routledge, Ch. 5, pp. 101–120.	5
8	Midterm Exam – Evaluation of health communication theory and practice	Written exam / case study	Classroom exam (120')	All references weeks 1–7	10
9	Students are able to interpret the dynamics of organizational communication in health care facilities.	Field study assignment	Analysis of hospital internal structure and communication (120')	Thomas, R. K. (2020). <i>Health Services Marketing: A Practitioner's Guide</i> , Springer, Ch. 6, pp. 119–138.	5
10	Students are able to evaluate the role of mass and digital media in public health education.	Media review	Study of media articles and interviews with sources (120')	Nasrullah, R. (2020). “Mass Media and Health Education.” <i>Journal of Communication</i> , 15(2), 89–101.	5
11	Students are able to differentiate effective media literacy-based health communication styles.	Quizzes & discussions	Educational video explanation & playback (120')	Sørensen, K., et al. (2019). “Health Literacy and Public Communication.” <i>International Journal of Public Health</i> , 64(6), 741–745.	5
12	Students are able to examine communication strategies for handling pandemics and health crises.	Crisis analysis	Case discussion and documentary video (120')	Reynolds, B. J. (2020). “Crisis and Emergency Risk Communication.” <i>CDC Manual</i> , pp. 18–35.	5
13	Students are able to apply a community-based approach in health advocacy.	Community project proposal	Project simulation & preparation (120')	Nutbeam, D., & Harris, E. (2019). <i>Theory in a Nutshell: A Guide to Health Promotion Theory</i> , McGraw-Hill, Ch. 8, pp. 105–120.	5
14	Students are able to develop communication strategies based on technology and mobile health.	Interactive visualization assignment	mHealth application and content design workshop (120')	Kruse, C.S., et al. (2020). “Telehealth and Mobile Health Communication.” <i>JMIR</i> , 22(3), e16452.	5

Week 2	Final Competencies for Each Learning Stage (Sub-CLO)	Evaluation	Learning Forms; Methods; Student Assignments	Learning Materials [Complete Reference]	Weight (%)
15	Final Semester Exam – Analysis and presentation of health communication project	Project presentation exam	Final strategy presentation (120')	All references weeks 9–14	10
16	Students are able to reflect on the role of communication in improving health systems and policies.	Final reflection & panel discussion	Collective reflection & input forum (120')	All references	

Approved, Date: Head of the study program	Checked, Date: Course Coordination/Field of Expertise	Made, Date: The lecturer in question
(.....)	(.....)	(.....)
Check : Quality Assurance Unit (.....)		

Notes:

1. Study Program Graduate Learning Outcomes (PLO-PRODI) are the abilities possessed by each PRODI graduate which are the internalization of attitudes, mastery of knowledge and skills according to the study program level obtained through the learning process.
2. The PLO charged to a course is a number of learning outcomes of study program graduates (PLO-PRODI) which are used to form/develop a course consisting of aspects of attitude, general skills , specific skills and knowledge.
3. Course CP (CLO) is a capability that is specifically described from the PLO that is assigned to the course, and is specific to the study material or learning material of the course.
4. Sub-CP Course (Sub-CLO) is a capability that is specifically described from SPMK that can be measured or observed and is the final capability planned at each stage of learning, and is specific to the learning material of the course.
5. The assessment indicators for students' learning process and outcomes are specific and measurable statements that identify students' learning outcomes or abilities, accompanied by evidence.
6. Assessment criteria are benchmarks used to measure or quantify learning achievement in assessments based on established indicators. Assessment criteria serve as guidelines for assessors to ensure consistent and unbiased assessments . Criteria can be quantitative or qualitative.
7. Assessment techniques: tests and non-tests
8. Forms of learning: Lectures, Responses, Tutorials, Seminars or equivalent, and/or other equivalent forms of learning.
9. Learning Methods : *Small Group Discussion, Role-Play & Simulation, Discovery Learning, Self-Directed Learning, Cooperative Learning, Collaborative Learning, Contextual Learning, Project Based Learning, and* other equivalent methods.
10. Learning materials are details or descriptions of study materials that can be presented in the form of several main and sub-main topics.
11. The assessment weight is the assessment percentage for each sub-CLO achievement, the amount of which is proportional to the level of difficulty of achieving the sub-CLO, and the total is 100%.
12. **TM**= Face to Face, **PT**= Structured Assignment , **BM**= Independent Learning.

No	<i>Forms of Learning Blended Learning (On-Line/E-Learning)</i>	EL
1	<i>E-Learning Videos</i>	EL-1
2	<i>Discussion at Forum</i>	EL-2

3	<i>Video Conference or Webinar (Web Seminar)</i>	EL-3
4	<i>E-simulation using software</i>	EL-4
5	<i>Vlog Presentation</i>	EL-5
6	<i>Writing Paper Online</i>	EL-6

Assessment Components:

The assessment process in this course is divided into 4 components, including the following :

a. Presence.

This component has a point value of **10%** of the total face-to-face meetings in class.

b. Task.

During each semester, students are required to complete a minimum of four assignments, consisting of two independent assignments and two group assignments. These assignments are given twice before the midterm exam and twice after the midterm exam, or before the final exam. The total assignments are worth **40% of the points** .

c. Midtest (Mid Semester Exam).

The mid-term exam (Midtest) is conducted in the eighth week of the semester. It assesses students' final abilities based on the learning material/topics from the first to seventh semesters. The Midtest can take the form of a written exam, presentation, independent or group assignment, or other tasks, depending on the learning method. The Midtest grade is weighted at **20%**.

d. Final Exam (End of Semester Exam).

The final exam (Final Exam) is conducted in the 16th week of the total number of meetings. The Final Exam assesses students' final abilities based on the learning material/topics planned from meetings 9 to 15. The Final Exam can take the form of a written exam, presentation, independent or group assignment, or other forms, depending on the learning method. The Final Exam grade is weighted at **30%**.

Assessment Rubric

Level/Grade	Numbers/Scores	Job Description/Indicators
A	90.00 – 100	This is the achievement of superior students , namely those who follow lectures very well, understand the material very well and are even challenged to understand it further, have a high level of proactivity and creativity in seeking information related to the material, are able to solve problems with perfect accuracy and are even able to recognize real problems in society/industry and are able to propose solution concepts.
A-	85.00 – 89.99	This is the achievement of students who follow lectures very well, understand the material very well, have a high level of proactivity and creativity in seeking information related to the material, and are able to solve problems/assignments with very good accuracy.
B+	80.00 – 84.99	This is the achievement of students who follow lectures well, are able to understand the material and are able to solve problems/assignments with very good accuracy.
E	≤79,99	This is the achievement of students who do not carry out assignments and do not understand the material at all.