
University of Brighton, 7–9 July 2004

KEYNOTE SPEAKERS

Sex, drugs and the role of the consultant midwife

F. MACROY, Central Manchester & Manchester Children’s Hospitals University NHS Trust.

Manchester Specialist Midwifery Service is based in Manchester. Service provision is firmly rooted in the sphere of public health and embraces all aspects of a vulnerable, socially excluded lifestyle. The team now consists of three specialist midwives and a personal assistant. The service has a city-wide remit and broad ranging responsibilities that include providing input to three maternity hospitals, four drug service bases, a project for sex workers, the regional in-patient detox unit, and a local women’s prison. It also co-ordinates the care for HIV positive women identified through the antenatal HIV screening programme. This involves collaboration and training across a wide range of health and social care agencies, both statutory and voluntary, in addressing the complex issues associated with substance misuse, mental health, domestic violence, sexual abuse and prostitution. Family planning is also provided. Changes in drug treatment, maternity and paediatric services are an investment in the health of future, as well as present generations. Meaningful and effective interventions have the great potential to positively impact on parenting in the long-term, reduce the need for children to be placed in care, and help to break the present cyclical nature of drug use, poverty and despair. Great pride is taken in its innovative and creative style of health care delivery and with well-established links to many related agencies, the Specialist Midwifery Service is ideally placed to make a real difference to the lives of those they try to reach.

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Centring marginality? Otherness, difference and the psychology of women

A. PHOENIX, Open University.

The history of feminism and of the psychology of women can be said to be a history of making Otherness and difference central. First, differences between women and men, and later, between women racialised differently, from different social classes and sexualities have been central. While these differences have been subject to much debate within feminism and have been treated in a variety of ways within the psychology of women, feminist psychology arguably offers an important site for engagement with the productive and often painful tensions produced in discussions of Otherness and difference. Does this mean then that marginality has been centred within feminist psychology?

This paper considers how contemporary feminist dialogue on gendered and ethnicised intersections provides crucial understandings of differences among women. It argues that a focus on these intersections allows a complex and dynamic understanding of difference and Otherness. It argues that marginality can constitute a major focus without being centred. However, productive engagements within feminist psychology require the complexity allowed by a simultaneous consideration of subjective, structural and social positionings and everyday practices that a centring of marginality makes evident.

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Is fashion a matter for psychology?

E. WILSON, Independent scholar.

Some of the most popular 20th century books on fashion took it for granted that the most interesting and important thing about the clothes we wear is our psychological investment in them. We dress fashionably (or not) as it was assumed, either in order to stand out from a group; or to express conscious and unconscious aspects of individual personality. One of the best known exponents of such a view, the psychoanalyst and dress reformer, J.H. C. Maudsley, argued that dress is a kind of symptom, a compromise between unconscious sexual exhibitionism and conscious morality. Our clothing patterns according to Alison Lurie interpreted punk, for example, as an infantile protest, safety pins and torn clothes transforming angry adolescents into the un.eq. troupe of clothes they ‘really’ wore.

These and other similar theoretical approaches suffer from the underlying assumption that fast fashion is too easy to be explained away, when in fact fashion – or more widely, dress – relates not only and perhaps not even most importantly to the individual personality, but to economic and aesthetic as well as social aspects of any given society.

Dress is, indeed, a moral and personal, and thus psychological issue, but it is also deeply related to art, and in contemporary society to a consumer culture with its own imperatives. While we may wish to separate the assessment of dress in the assessment of character and personality, I shall discuss three examples of fashion: countercultural dress, contemporary fashion and the formal suit to illustrate some of these points.

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SYMPOSIA

Symposium: Critical LGBT Psychology:
The state of the art

Convenors: V. CLARKE & E. PEEL.

This symposium addresses the state of the art in lesbian, gay, bisexual and transgender (LGBT) psychology. In particular, the contributions highlight the cut-and-paste of critical work in LGBT psychology. LGBT psychology and feminist psychology remain distinct fields, research in each field typically proceeds without much awareness of advances in the other, and there is a lack of cross-referencing. Most LGBT psychology is not informed by feminist concerns and few feminists work in the field. Psychology is a discipline without mention of patriarchy, the different gender of lesbians and gay men is frequently ignored and lesbians’ experience as women remains invisible. This symposium attempts to bridge the divide between LGBT psychology and feminist psychology. The recent emergence of a strength-based research and theory in British LGBT psychology has led to greater engagement with feminist concerns as this symposium demonstrates. Likewise, some of the contributions to this symposium directly address the representation of LGBT concerns within feminist psychology and call for greater engagement with such concerns.

Reframing sexualities

L. MOON, University of Newcastle.

The inscribed body ‘drenched with symbolic significance’ (on a disputed morphology for those designated transgender. Particularly within western cultures, socialisation is gendered (child is left). By ‘compulsory heterosexuality’. The new-born infant is immediately sexed and gendered and from then onwards her body will be inscribed with numerous social, sexual and emotion scripts. Framing in this way means using cues through which we specify to which embodied role (men or women, masculine or feminine) we belong. Tensions exist when we attempt to shift framework. This is shown in counselling transgender clients where the counsellor was heterosexual, lesbian or gay. Despite a shift in meanings in relation to self and others, tensions surfaced at the level of encounter between the (representing heterosexualised counselling paradigms and gender frameworks) and transgender client (representing a framework which transcends and transgresses the heterosexualised framework). These tensions are explored as well as some ways of changing this in the future.

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The experience of social power in the lives of people who define as transgendered

C. CLIFFORD, North Birmingham Mental Health Unit.

The purpose of this qualitative study was to investigate the experience of social power in the lives of people who define as transgendered. The process included 20 participants in a two-stage procedure, to develop the model, and a further eight participants in a respondent validation process. Their experiences, advertisements in publications and e-mail/networks of support agencies for transgendered people, and in a total 192 cross-female and nine cross-male participants took part. The interviews and further data provided by respondents were analysed by Grounded Theory techniques.

The result is a biographical, developmental model of the process of becoming transgendered, which highlights a shift from traditional domains’ where social power has particular influence upon the individual. The core of the model focuses upon the interaction between the internal and external experience which is highlighted during these periods, and impacts upon the individual’s psychological functioning. This model describes the interaction of social, political and environmental influences upon the individual.

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Pejorative slang and the creation of sexualities

E. PEEL, Aston University.

In Western societies, liberal ideology purportedly shapes contemporary sociocultural sensibilities. The post-modern liberal mantra ‘everyone’s an individual’ ignores social groupings based upon sexuality – as well as on ‘race’, class, ability and gender. However, prevalent cultural discourses about sexualities abound. Previous research has focused on slang; that is, verbal and written language (e.g. Polani), rather than on the language used to describe lesbians and gay men. This paper explores how sexualities (lesbian, gay, bisexual and heterosexual) are socially constructed in slang descriptive words and phrases. The slang terms were collected in a naturalistic setting, forming part of an exercise within lesbian, gay and gender studies training sessions with eight groups of professionals; including residential social workers, youth workers, foster carers, police officers and voluntary service workers. The majority of the trainees identified their sexuality as heterosexual. There were 339 slang words or phrases generated for gay men, lesbians, bisexuals and heterosexuals. Only six per cent of the terms related to heterosexuals. Content analysis revealed four main categories of slang relating to: (1) sexual preference; (2) gender roles; (3) famous people; and (4) cultural terms (e.g. ‘feminist’ for lesbian). There was a preponderance of anal sex terms for ‘gay men’, of oral sex terms for ‘lesbians’, and of non-heterosexual referent for ‘bisexuals’ (e.g. ‘high sex drive’). Terms equating ‘gay men’ with femininity and ‘lesbians’ with masculinity were common; they occur with a lack of such terms for ‘heterosexuals’, and with the listing of ambivalent personality traits for ‘bisexuals’ (e.g. ‘confused’). Bi- and gyn-gendered professionals in the groups of slang generated, which underscores the cultural robustness of this language in constructing sexualities. I conclude by contextualising the use of pejorative slang within the training context, highlighting the pedagogic function of the task in reducing heterosexism.

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Lesbian fingers: Pointing to the co-construction of gender and sexuality

P. HEGARTY, University of Surrey.

What can biological studies about sexual orientation tell us about the ways that gender and sexual orientation are co-constructed? In this paper, I examine the description of Williams et al. (2000) research on evolutionary and sexual lengths in their original article and in subsequent newspaper reports. Although the study found evidence for a biological marker of sexual orientation only among men, the discourse was focused more heavily on the homo/hetero distinction among men. This occurred both through verbal description, and through misleading uses of significance tests. Analysis of the anthropomorphisation of body parts shows that pregnant women were subtly given acceptability for the birth of lesbian and gay children. It is argued that even when purporting to study lesbian and gay bodies, biology remains within a heteronormative discourse in which sex is about objective choice for men and reproductive responsibility for women.

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Hot bi babes and feminist families: Polyamorous women speak out

M. BARKER, Middlesex University & A. Ritchie, Southampton Institute.

Polyamory is a term used to describe a relationship orientation that assumes that it is possible (and acceptable) to love many people and to maintain multiple simultaneous sexual and emotional relationships (Erel et al., 2003, p.126). Whilst polyamory is often seen, from the outside, as fulfilling male fantasies (infidelity without guilt and the possibility of sexual choice for women), many within the poly community regard it as a more feminine way of managing relationships, with much placed on the important of open communication, the expression of emotions and support networks. Certainly, most published writers on the topic have been women. One perspective is that it is important for heterosexual women to work to non-monogamy in order to radically re-work gendered power relationships, whilst others propose that non-monogamy should be part of a lesbian feminist agenda. This paper presents an analysis of a focus group discussion with polyamorous women about issues around polyamory. The methodology used in the research is addressed in a companion paper to this one.

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Explorations in feminist participant-owned research: Running a focus group discussion with polyamorous women

A. RITCHI, Southampton Institute & M. BARKER, Middlesex University.

This paper addresses methodology used in the research that we conducted with a group of polyamorous women. As members of this group ourselves, we were interested in ways in which polyamorous relationships may or may not still be structured around traditional gender roles and how polyamorous lifestyles might be seen as part of a feminist agenda. Participants were approached to take part in a focus group discussion. They were highly involved in every stage of the research. Questions were generated and refined through online discussion. The discussion was facilitated in the least possible sense by one of the participants, transcription were read by everyone as talks important themes being fed back to researchers, the analysis was also discussed by participants online and participant reflections incorporated in the final report. This paper details the process of the research, exploring wider issues for qualitative research on gender issues. Particularly here, we focus on accountability, and on the role of the researcher in generating themes of research. They are the group they are researching.

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Doing non-heterosexist research: Practice and process

V. CLARKE, University of the West of England.

The heterosexism of feminist psychology is well documented, but there is little consideration of
The paper argues, with Mitchell (2002, p.175), that practices. However, it also asks what is at stake subjectivity and embodiment as a set of citational following from Butler’s (1990) conceptualisation approach to find ways of ‘showing seeing’. The presenters raise questions about the body in the everyday practices of clothing themselves. The presenters raise questions about the ways in which feminists can conceptualise fashion as both a pleasurable and constraining context for women’s mundane practices of dress.

Ambiguating appearance: Unsettling the links between displaying and reading of visual identities K. GLEESON & H. FRITH, University of the West of England.

Bodies changing/Changing rooms: Clothing, body image and the multiplicities of female embodiment R. COLLS, University of Liverpool.

‘Showing Seeing’: The visual as a set of citational practices Y. MOREY, University of the West of England.

A bittersweet escape? A dramaturgical reading of women’s holiday clothes A. GUY & Y. MOREY, University of Teeside.

Bodies changing/Changing rooms: Clothing, body image and the multiplicities of female embodiment R. COLLS, University of Liverpool.

Symposium: Feminism, fashion and the body Convenors: H. FRITH & K. GLEESON, University of the West of England. Fashion and dress play a crucial role in the visual display of the body. Clothes give the body meaning and position the body in social and cultural context. Clothing simultaneously conceals and renders visible the body in particular ways. This symposium explores the relationship between fashion and the body in the everyday practices of clothing ourselves. The presenters raise questions about the ways in which feminists can conceptualise fashion as both a pleasurable and constraining context for women’s mundane practices of dress.

'A bittersweet escape? A dramaturgical reading of women's holiday clothes' A. GUY & Y. MOREY, University of Teeside. This paper reports on a research project that analysed accounts from 20 women about their dressed images on holiday and their attempts to realise aspirational ‘everyday’ holiday identities. The analysis reveals ways that holiday dressing both plays with and conforms to dominant notions of femininity. A dramaturgical reading of this data is offered. Holiday was understood to be a special context in which women believed they could present alternative versions of themselves. This awareness was clearly evident from the effort involved in selecting the holiday clothing set. All women distinguished between day and evening self-presentation, and tailored this through clothing choice and body habits. Across both backstage and frontstage contexts the constraints of femininity were evident but there were significant opportunities for women to actively subvert conventions. Holidays offer a bittersweet escape for women of the liberatory possibilities of clothes but also of the constraints encountered in daily life.

Bodies changing/Changing rooms: Clothing, body image and the multiplicities of female embodiment R. COLLS, University of Liverpool.

Within work on fashion, there has been little academic engagement with the practices and narratives of women’s clothing consumption. This paper serves to remedy this absence by drawing upon ethnographic research that involved going shopping with women to explore the relationships between fashion and personal identity. The paper does this through the specific theoretical lens of work on ‘body image’ (Weiss, 1999). This approach focuses on the way in which body images come into being through ‘corporeal exchanges’ with (non) present bodies and images of bodies rather than single, isolated shots. This creates a one dimensional picture of the body that we hold in our mind to which we compare ourselves. Therefore, this approach interrogates what is meant by ‘the body in clothing’ by highlighting the simultaneity of multiple bodily experiences in any one consumption moment. This will involve empirical examples of ‘being out clothed’, ‘locking in the mirror’ and ‘feeling the presence of a female gaze’.

This account moves beyond positioning women and their relationship to clothing as either a victim of, or as resistant to, patriarchal notions of gaze. This paper serves to remedy this absence by drawing upon ethnographic research that involved going shopping with women to explore the relationships between fashion and personal identity. The paper does this through the specific theoretical lens of work on ‘body image’ (Weiss, 1999). This approach focuses on the way in which body images come into being through ‘corporeal exchanges’ with (non) present bodies and images of bodies rather than single, isolated shots. This creates a one dimensional picture of the body that we hold in our mind to which we compare ourselves. Therefore, this approach interrogates what is meant by ‘the body in clothing’ by highlighting the simultaneity of multiple bodily experiences in any one consumption moment. This will involve empirical examples of ‘being out clothed’, ‘locking in the mirror’ and ‘feeling the presence of a female gaze’.

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Starting with disempowerment – understanding the service context

T. PARKES, University of Brighton, P. TRIVEDI, Inequality Agenda Ltd. & C. LOVELOCK.

This paper focuses on the disempowerment of women, particularly those who have a history of previous life circumstances that meant some of the ways that services can re-trauma and re-victimise women, particularly those women who have a history of previous life circumstances, disadvantage and abuses of power. It will also explore, briefly, the ways in which staff in secure services are disempowered and thus often unaware of their impinging systems change agents. The paper describes the ways that this training intervention attempts to help staff to understand the spectrum of women’s disempowerment, acknowledge their own feelings of powerlessness, and talk together about the ways that they can create a sensitive, positive and empowering environment for the women they work with.

WORKSHOPS

Women on the margins? Mental health and substance misuse

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INDIVIDUAL PAPERS

(orderd alphabetically by author)

Mini-skirts, white lace stockings and pantomime boots: Experiences of gender, identity and fashion in the 1960s

L. ABEL & K. DOHERTY, Sheffield Hallam University.

This paper explores links between fashion, gender and identity in the lives of women who were teenagers in the 1960s. In-depth qualitative interviews were conducted with six women aged between 50 and 60. An interview schedule facilitated discussion around the participants’ fashion practices, reactions to their clothing choices, their experiences of growing up in the 1960s and their engagement with gender politics. Interpretative phenomenological analysis was employed to identify themes in the data. The participants construct the 1960s as a time of profound change – liberation, rebellion and a sense of sexual autonomy. ‘Being free’ is experienced through their engagement with fashion practices, reactions to their clothing choices, and a sense of sexual autonomy.

Muslim fathers’ construction of counselling psychology: A Foucauldian discourse analysis

N. ALIM, City University.

The present study explores Muslim fathers’ constructions of counselling and psychotherapy. The data was analysed through seven semi-structured interviews, which were transcribed in full. The data was analysed using a shortened version of a Foucauldian Discourse Analysis as adapted from Willig (2001), in order to gain insight into the speakers’ discursive constructions, and locate particular discourses. This means of analysis identified interviewees’ ‘ways-of-seeing’ the world and ‘ways-of-being’ in the world, whilst taking into account the way in which subject positions and power-relations. Four major discursive constructions could be identified, consisting of the Minority Discourse, the Quality of Advice Discourse and the Patriarchal Discourse. Although the literature review outlined discourses similar in part, it could be noted that the present study adds to existing discourses by acknowledging the Patriarchal Discourse. Thus, conceptualising the rejection of counselling due to participants’ construction of Western concepts of equal opportunities threatening their own misinterpretations of Islam, which maintain power-imbalances between men and women. The study concludes with implications for counselling psychology, service provision and implications for future research.

Examining the stranger in our midst: Teaching ‘race’ and gender awareness to trainee psychologists

C. BLACKWELL, M. DENNIS & E. RIMMER, Northumberland Mental Health Trust.

This paper describes the work of clinical psychologists teaching trainee clinical psychologists in the education and training programme ‘Race’ and gender awareness in their clinical practice. The model developed involves experiential exploration of trainees’ attitudes to ‘the other’ and challenges perceptions of ‘side’, ‘race’, colour, gender, culture and identity. Individual, group, societal and professional identity are examined; as are issues of power.

The defensive structures employed by individuals, groups and institutions to manage the anxiety inherent in relating to ‘the other’ are examined. The manifestation and management of these defensive structures in teaching sessions is discussed.

Multidisciplinary narratives in a medium–secure forensic setting for women

D. CLARE & C. NORVILLE, The Dene, West Sussex.

Overall aim: This paper tells a story about the development of a forensic unit for women and about an example of practice development using Narrative Therapy. The Dene is a 50-bedded forensic unit for women. We opened in May 2001 as part of the network of hospitals of Partnerships in Care: leading the provision of mental health services in the private sector. This presentation will describe how multidisciplinary working was enhanced and increased and severity of self-harm decreased significantly using an holistic approach.

Objective: To establish if the Narrative Therapy construct of an ‘outsider-witness reflecting team’ is effective in a multidisciplinary team’s care of a patient with severe self-harming and concurrent dissociation. In addition, to ascertain if this approach can be generalised to a ward-based approach to care to enhance the recovery of women.
An analysis of the effects of cultural and gender difference in drug use an emerging ethnic groups
J. FERNANDEZ, Camden and Islington Mental Health and Social Care Trust.
A literature review which seeks to examine the socio-economic position of British Muslims in English society in relation to isolation. This found that the British Muslim population was the poorest and most disadvantaeged, when compared to other ethnic groups (Mahood, 1998).
There was evidence found which argued that the social and economic polarisation of Bengali communities was influence on this ethnic group presenting that the most significantly the Bengali client group were all male with only one woman attending with a substance misuse problem. This is very different to the ratio of the clinic as a whole which still has a gender bias towards males of 2:1.
This presentation explains the possible issues and differences between the Bengali female referral for treatment in substance misuse. The research approach was a case study conducted in Camden in the area of Somers Town.
It is a detailed case study that shows that social services and secondary agencies were responsible in referral rather than a self-referral for help. This shows for many drug services that there may be a hidden population using drugs, in this case a female population, which are arguably marginalised by their economic standing in Britain, but also by the prejudices exist in the Bengali community in Camden.
The implication for specialist care services is to try and understand these misconceptions in which they are working from the evidence of polarisation found from the case study. Services can then tailor their responses to cater for gender and ethnic identity to be more effective for emerging ethnic groups.
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Appearing effortlessly – female academics’ ongoing struggle with visual identity
A. FUSSELL, K. GLEESON & H. FRITH, University of the West of England.
Many associate anxiety about appearance with the risk of identity. Young people struggle to present positive visual identities, constantly changing to achieve a recognisable and appropriate individual identity which also enables social inclusion. Although women are expected to have resolved the problem of visual display and appear as if without effort or design. If we have the necessary skills to manage capital we should be able to carry off an apparently artless, and authentic visual identity. However, although appearance is always already visibly – women do put a great deal of thought and care into the decisions that they make about their visual identities. A survey at an Australian feminist conference which academics manage a range of competing aims in visual display including: avoiding ridicule, displaying cultural capital in terms of fashion knowledge; and making judgements about others attempts to manage visual identity.
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Celebrity pregnancy: Celebrity or pregnancy?
H. GROSS, Loughborough University.
In 1991 Vanity Fair published a now famous and controversial picture of the heavily pregnant on its front cover. Since then, it seems, the press has seized on the announcements of other celebrity pregnancies. It suggests that pregnancy is a significant event in one's life, especially when men have a tendency to self-harm in response to the media attention paid to women's shape or size at any time, pregnancy can be seen to take place within a 'web of meaning' (Sontag, 1999) and the focus on transformations in appearance during pregnancy could be construed as another mean of public surveillance of this private event.
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It’s all in your head’: The life of ‘PMS’ in everyday talk-in-interaction
S. HANSEN, Murdoch University, Western Australia.
This paper examines the finer details of women’s avowals, ascriptions and disavowals of ‘having PMS’, as part of mundane conversation. The data examined is drawn from a series of publicly accessible weblog, newsgroup and chatlog transcripts.
It is possible to attribute to the ‘moodiness’, or ‘rudeness’ of another to PMS, just as it is to dismiss the claims of another to be ‘having PMS’. The agency conventionally attributed to PMS – as an underlying heterogeneous representation for women’s excessive emotions, and capacity for rational behaviour – is often, in practice, actively contested by women so accussed, whether these assertions form part of a ‘caring’ attribution by a partner, or are expressed in the form of an insult, or as an explanation for rude (or unpalatable) conduct.
Indeed, the very possibility of an ascription to PMS – by which one’s control of oneself and one’s emotions is undermined by unruly hormones – may inform women’s ‘pre-emptive’ disavowal of their status as pre-menstrual.
Attention to those instances where women awow themselves as pre-menstrual by giving as when such assertions are made, they are often presented as pragmatic and considered explanations for mood or conduct, amongst other possible accounts.
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Someone’s a bit ‘stressy’: Girls’ talk about menstruation
S. JOHNSON, University College Northampton & A. BURROWS, Daventry Tertiary College.
There is now a considerable body of literature on girls’ and women’s experiences of menstruation which highlights negative representations, both in traditional and feminist research and theorising, however, a few studies have highlighted positive aspects. In addition, qualitative research begun to show how experience is constructed. To develop this further, the aim of the research on which this presentation is based, was to examine how girls construct meaning around menstruation in everyday talk-in-interaction and specific contexts. Data from nine girls, aged between 12 and 15, who participated in two focus group discussions with their parents, when such assertions are made, they are often presented as pragmatic and considered explanations for mood or conduct, amongst other possible accounts.
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Changing the story: An examination of representations of, and practices in relation to menstruation
J. FERNANDEZ, Camden and Islington Mental Health and Social Care Trust.
In 1991 Vanity Fair published a now famous picture of the heavily pregnant on its front cover. Since then, it seems, the press has seized on the announcements of other celebrity pregnancies. It suggests that pregnancy is a significant event in one's life, especially when men have a tendency to self-harm in response to the media attention paid to women's shape or size at any time, pregnancy can be seen to take place within a 'web of meaning' (Sontag, 1999) and the focus on transformations in appearance during pregnancy could be construed as another mean of public surveillance of this private event.
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of this discussion, the ways in which these issues can be critically engaged with will be addressed. liza.lazard@northampton.ac.uk

Making ourselves the Other: Models of reflexivity in qualitative psychology N. LEITNER, North Bristol NHS Trust/University of the West of England.

Researching traditionally focuses on studying people who are not research psychologists. This may well be because we see other people as more interesting than ourselves. This is an example of a discursive analysis that suggests that something else might be going on. Discourses of stepping back/stepping inside, of ‘distance’ between researchers and our selves so that we can observe and analyse a research arena without being sucked into bland uncritical description are particularly common in some research, in danger of becoming replacements for the positivist construct of ‘objectivity’. My aim in this paper will be to discuss some discourses of reflexivity which seem strong and powerful in qualitative psychology research paradigms, including the borrowing of psychoanalytic concepts to understand reflexivity and possible constructionist alternatives, and to offer a critical discursive analysis of their potential functions. N. Leitner@north-bristol.swest.nhs.uk

Reading between the lines: Professionals working with South Asian women who have experienced sexual abuse A. MAUJMDAR, P. REAVEY, London South Bank University & B. AHMED, University of East London.

Women’s personal narratives of sexual abuse are now a familiar feature of feminist, self-help and therapeutic discourses. They are often ‘talking about one’s personal experience of sexual abuse has become a central part of therapeutic and political approaches that emphasise the strength gained through the sharing of personal stories. However, what is sometimes overlooked is the ability and willingness of women to begin talking in the first place. In this paper, our aim is to explore what it means, as a South Asian woman, to talk about sexual abuse. Contrary to popular belief, South Asian women do talk about sex, and some do use that help when faced with sexual abuse, yet perhaps in ways that are not recognised by systems requiring individuals to ‘identify’ themselves as victims of sexual abuse. Drawing upon interviews with 40 staff from a range of organisations, including psychological therapists, refuge and project workers, our aim is to provide a preliminary analysis of some of the ways in which sexual abuse in the South Asian community is addressed by such staff. Some of the issues which have been involved in research with young people. This paper asks a number of questions about what the appropriate ethics and methodologies are for conducting research with young women. At a conference on women and psychology it is important to ask questions about how we can know about the lives and the perspectives and ways of sexualities of those we research. There are significant methodological issues to be considered in this context. The second but fundamental question which this paper addresses the ethics involved in such work. It relates to how we can work academically in ways which acknowledge and recognise the ethical issues involved in research with young people. This paper is drawn from a project, which researched Teenage Pregnancy in Seaside Towns, funded by the Department of Health. The project then by definition worked with young women and raised the ethical issues in a particularly acute fashion. The research design was exclusively qualitative, and the argument is that this raised methodological issues. The paper offers little empirical data from that project but seeks to share some of the thinking about ethical issues we undertook in conducting that project. We want to suggest that if we are to enter the world and the worldview of young people – and understand what goes on – there – we need a more ethically and consciously ways of working. At the core is the issue of trust and the search for ways of working which can both secure the informed, explicit trust of young people. We suspect that the only really effective strategy with young people is to offer them some control over the process of research – and over its content. L.Measor@bton.ac.uk

Crossing the line: Inter-racial relationship experiences and identity (re)construction H. MONROE, University of Sheffield.

The presentation reports on an ongoing qualitative exploratory study which aims to explore women’s subjective experiences of inter-racial, romantic relationships (IRRs) and to consider the ways in which the women (re)construct their gender and ethnic identities. The presentation discusses two of the analytic themes to emerge: an experiential theme (‘it’s more when people look at you’), and a sense making theme (if you don’t put much on what they think then you’re fine). The women’s employment of ‘defiance’ and ‘rejection’ as strategies in the construction and maintenance of positive identities is also considered. The presentation concludes by highlighting some of the disparities between accounts of these psychological theory and the current research findings. h.monroe@sheffield.ac.uk

Children’s sexuality and their health: An analysis of responses to the health needs of sexually exploited children M. MOOSA-MITHA, University of Victoria, Canada.

Having completed a two-year research study in Canada, on the health needs of children (child prostitutes) and their rights, using a retrospective life history narrative, I present an analysis of my findings in this paper in two parts. I begin by providing the theoretical context by which to analyse theorisations of children’s sexuality within male-stream (Bagley, 1997; Boyd, 1986) as well as feminist theories (Ennew, 1986, 1995). I provide an alternative theoretical view of understanding children’s sexuality rooted within anti-racist and Queer theorisations of embodiment, difference and the construction of gender. Queer bodies are differently sexualised (Bakare-Yusuf, 1997; Creed, 1999). I use this discussion to situate my analysis of the findings of an on the health needs of sexually exploited children and the responses and normative practices of health practitioners. mmoosam@uvic.ca

In your experience’: Research as cultural translation C. P. POTTER, C. PALMY, Manchester Metropolitan University.

This paper will discuss some methodological complexities arising from research undertaken in Johannesburg, South Africa, with refugee women from the African Great Lakes region. Using excerpts from interviews with these women, attention will be paid to the analytic possibilities that are either foreclosed or opened up when working across different languages. I will consider the readings of the text that are made possible through the use of interpreters and the implications of this for the use of methodologies such as discourse analysis and feminist analysis. Particular attention will be paid to how working across languages may impact on the feminist debates on representation and construction of the Other. The role that interpreters play in mediating these possibilities, as both linguistic and cultural translators, will be explored.

The ‘othering’ of women subjected to drug-assisted sexualised assault within professionals’ accounts of service provision C. POTTER, University of Huddersfield, N. KELLY & C. HORROCKS.

This paper draws upon ongoing research that explores the ways in which professionals involved in the delivery of services to survivors of drug assisted sexualised assault make sense of their experiences of service provision. Seven semi-structured interviews were carried out with a range of professionals that included counsellors, police, women and service managers. The interviews were then subjected to a feminist discourse analysis. One of the consequences of professionals’ accounts seemed to be an ‘othering’ of women who have been subjected to drug assisted sexualised assault. According to Ramazoglu and Holland (2002) to be ‘othered’ is to be silenced, socially excluded and treated as lacking rights. ‘Otherness’ is characterised as a ‘fluid, socially constituted, repeatedly performed relationship’ (Ramazoglu & Holland, 2002, p.108). Professionals within the interviews drew largely upon gender neutral and passive talk. This had the effect of obscuring men who use drugs to sexually assault women. The possible underlying explanations for the use of gender neutral talk will be explored, as will the consequential effects for women. c.potter@hud.ac.uk

Designing bodies: Women, self-identity and cosmetic surgery in postmodern culture C. RANKIN, University of Western Sydney.

This paper presents an exploration of the development and proliferation of cosmetic procedures for women across Western cultures. Focusing on the politics of beauty, the paper asks the questions: What are the ideals of appearance being promoted by cosmetic surgery? How are these constructions constructed and circulated? Are they constructing a particular Westernised and ‘whitened’ version of femininity? The professional gaze of the doctor/physician as expert constructs the healthy body not merely as ‘unattractive’ but as physically debilitating and in need of cosmetic surgery and medical intervention. It will be argued that cosmetic surgery can be read as a kind of ‘retail therapy’, through which women are encouraged to find, express and achieve self-identity by means of surgical interventions that promise to reveal our true self but that these discourses and discursive practices are constructed and reproduced in and through the inventory of replaceable and enhanceable body parts. c.rankin@uws.edu.au

Re-membering the past: Gender, sexual identities and victimization of surviving child sexual abuse P. REAVEY, London South Bank University, S.D. BROWN, Loughborough University & S. WARNER, Manchester Metropolitan University.

A weakness of contemporary ‘forensic’ models of memory is the concern with ‘a chain of successive memories’ in creating a sense of continuity and stability in relation to self-hood. Furthermore, this ‘lateral’ presentation of memory forecloses an attending to its practical use (in specific contexts and moments in time) and the subsequent ambivalences individuals experience when trying
to make sense of past episodes of child sexual abuse in the context of their present negotiations of their own lives. Drawing on researchers on Bergson, Halbwachs and Foucault, these approaches call for a reworking of memory by inviting an engagement with its relational, practical and collective qualities. In this way, the localised contexts of remembering and the manner through which memories transform understandings of agency may be explored, with specific attention to how the past and present intertwine in regard to managing adult survivor identities.

'Sex conquests': Analysis of advice and support offered to family and friends of lesbians and gay men

A. RUDOLFSDOTTIR & T. CLARKE, University of the West of England.

Research and popular literature indicates that a crucial factor in the well-being of both of lesbians and gay men and of their family and friendship network is the acknowledgement and acceptance of homosexuality within the network (eg. Oswald, 2000, 2002). A number of books have been published to help people make sense of what it means to have a lesbian or gay man as a friend or family member. We have talked with the question of homosexuality. In this study we used discursive techniques to analyse a sample of popular books offering advice and support to family and friends of lesbians and gay people. How do they, e.g. outline what the relationship between family members and friends should be like and define the 'nature' of family and friends? We argue that these resources often fall back on quite 'traditional' and conservative discourses about the role of families, friendships and parenthood in their advice, and question how useful they are for groups that don't share these values. In particular we draw attention to the role 'love' is given in these discourses which binds families together and ultimately should conquer all.

The dislocations of South-East Asian 'foreign brides' in Taiwan: The international reproductive workers

Y.D. SHEU, National Chi Nan University, Taiwan.

This paper explores the marriage and family lives of 459 'foreign brides' from South-East Asia in Taiwan, mostly from Vietnam and Indonesia. They largely married into Taiwanese families and have been recognised as a significant phenomenon of 'new immigrant women' since early 1990s. This paper identifies the main social needs and policy issues and social debates. By using structured questionnaire, the paper firstly describes the living conditions of those Foreign-Bride families. Secondly, it briefly discusses the family structure and the interaction between 'foreign bride' and family members. Thirdly, it looks at the sources of social support for those women, their gender division of labour work, and their expectation towards marriage. Finally, this paper argues that both Vietnamese and Indonesian brides face a similar discrimination and the issues which results from their buried integration in Taiwanese society. Besides, 'foreign-brides' at least face another three key dislocations of process of immigration. Partial citizenship, the pain of family separation, the partial citizenship, the pain of family separation, and contradictory marriage expectation.

Experiences in pregnancy: Disabled women and 'otherness'

J. TOPP, The Open University.

This disability study is concerned with the experiences of disabled women in one locality who were pregnant in 1999 or later. This time span is chosen to correspond with the introduction of the Disability Discrimination Act Part III. Services provided to disabled women, first, to discover whether services for disabled women have improved in the last five years; and second, to determine how they were received from friends, family, health care and social care professionals. It was found that the way each woman sees herself as a disabled person is central to her experience. Narrative analysis is used where the form and function of the narrative within a shared conversation permits interpretation from a social model perspective. This paper will discuss some themes identified in the narratives relevant to the second aim of the study. These include 'otherness', difference, and identity.

Fat as a feminist issue in the 21st century

M. UMNEY, Middlesex University

Twenty-five years since Susie Orbach wrote Fat is a Feminist Issue [1978], there have been a number of contradictory developments in relation to 'fatness'. The incidence of obesity has increased, cultural representations of 'the beautiful dead woman' have become more prominent (Foster & Wadden, 1994), eating disorders such as anorexia nervosa and bulimia have risen (Maison, 1998; Orbach, 1993), the use of exercise to 'reshape' female bodies has increased and medical procedures aimed at reducing body weight have become commonplace. By reviewing the work of feminist writers such as Bordic (1993) and Malson (1998), and size activists such as Cooper (1998) and Bovey (2000), this paper will examine how attitudes to body image have changed. Media and other cultural representations of women will be explored.

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framed in terms of 'individual pathology' or 'disorder' (Beresford & Wilson, 2002) and which reinforce ideas of 'difference' (Bushfield, 2000). Feminist analyses (Showalter, 1985; Ussher, 1992) have shown that psychiatric discourse is one of the means by which women are represented as Other to the dominant conceptions of a purportedly rational human subject (Wirth-Cauchon, 2001). In this sense, difference in women is related to perceptions of psychological instability and the possibility that the person in 'borderline' is woman will be discussed.

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We and Me stories: Gendered narratives of quitting smoking
M. WORRELL, University of Luton & M. MAGUIRE, University of Westminster.

In this paper we present a narrative analysis of the stories of quitting smoking provided by 12 women and five men. Our analysis points the way in which these accounts were shaped and lived through abiding, and in many cases conventional, notions of gender. Of particular interest to us were the ways in which these accounts and broader cultural narratives on gender became significant in styling and reproducing particular versions of gendered subjectivity. The 'we' stories told by women when narrating their attempts to give up smoking positioned them within a matrix of roles, responsibilities and relationships. Juxtaposed against these were the 'me' stories of men, who tended to tell their stories of quitting as an individualistic battle against the cigarette.

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Munchausen Syndrome by Proxy: Interrogating the debate
M.S. ZEEDYK & F.E. RAITT, University of Dundee.

The psychiatric condition Munchausen Syndrome by Proxy (MSP) has recently appeared at the centre of a fierce debate, within the media as well as the medical field. MSP is a condition, recognised within the DSM-IV, whereby a parent figure is motivated to cause deliberate harm to their child as a means of gaining attention from others. It is mothers who are generally diagnosed with this syndrome. The present paper seeks to interrogate the assumptions about mothering that underlie this syndrome. The syndrome has had repeated appearances in the literature and courtroom over the last 25 years, and a number of UK prosecutions for alleged maltreatment of children have been successful, on the basis of expert testimony offered in regard to it. Such prosecutions are supported by many of the same cultural assumptions concerning motherhood that underlie the construction of the syndrome itself, including innateness of the maternal instinct and expectations about mothering capabilities. The paper explores the emergence of this syndrome, its history in the courtroom, and the contestable assumptions upon which the syndrome rests. Such examination is necessary for making sense of the historical popularity of the diagnosis as well as the vehement rejection to which it is now being subjected.

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POSTERS

A Q-methodological study of partner violence policies
R. ACKERLEY & L. LAZARD, University College Northampton.

In the last decade there has been a proliferation of different, sometimes conflicting, partner violence policies which attempt to change attitudes and practices that facilitate manifestations of this form of gendered violence. Drawing on previous work, this Q-methodological study explores diverse culturally available constructions that warrant particular forms of action to be taken against partner violence. In this study six narratives were identified, these included:

1. The 'Liberal Humanistic' narrative: emphasis is placed on the importance of valuing the choices made by the recipient when dealing with partner violence
2. The 'Practical' narrative: emphasis is placed on the need to protect recipients from their violent partners
3. The 'Recipient Orientated' narrative: agency services can be improved through consultation with those who have first hand experience of this phenomenon according to this narrative
4. The 'Punitive' narrative: there is a clear need to punish initiators via the legal system in this narrative
5. The 'Agency Focused' narrative: the role of agencies is to improve the quality of life of recipients in this narrative
6. The 'Problem solving' narrative: emphasis is placed on the need for a multi-method approach to stopping partner violence.

These narratives will be discussed in terms of the ways in which recipients and initiators are constructed and the implications that such constructions have for women in terms of enabling challenges to be made against partner violence.

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The 2005 Quinquennial Conference

The 2005 Quinquennial Conference, University of Manchester, 30 March – 2 April, 2005.

The following information was accidentally omitted from the August 2005 issue of Proceedings.

LESGIAN & GAY PSYCHOLOGY SECTION

Symposium: Celebrating different relationships in the 21st century


Discussant: V. CLARKE.

In the 21st century, psychology's understandings of relationships require an investigation and celebrate a multitude of relationship forms which move beyond – and indeed challenge – traditional heterosexual relationship patterns. The nuclear family is no longer normative, and contemporary Western societies reflect diverse intimate relationship forms – both actual and virtual. This symposium showcases a variety of current research addressing different intimate relationships: including lesbian, gay and bisexual relationships, polyamorous relationships, heterosexual virtual online relationships, and orientations of 'breaking up' in the self-help literature. Together these papers explore different facets of non-traditional intimate relationships and provide a thoroughgoing critique of widely held psychological (and cultural) assumptions surrounding relationships, relationship formation, development, recognition, and disintegration.

Moreover, 'Celebrating different relationships in the 21st century' provides a methodological overview of cutting-edge relationships research spanning large-scale survey data, in-depth interviews and analyses of cultural texts. Thus, through these five contributions, we chart the diversity of psychology's methods on the relationships map.

Money talks? Same-sex partners discuss civil partnership, marriage and financial decision making

V. CLARKE, University of the West of England, M.L. BURNS & C.B. BURGOYNE, University of Exeter.

Objectives: This paper offers a qualitative analysis of interviewing same-sex partners and gay and lesbian couples about civil partnership, same-sex marriage and financial equality.

Design: This research paper is drawn from a larger study of money management in same-sex partnerships. Partners were interviewed at the same time but separately and asked for their views on the UK Government's consultation on civil partnership, same-sex marriage and money management and financial equality in relationships.

Methods: The semi-structured interview data were coded and analysed using thematic analysis.

Results: The analysis shows that most participants were (broadly) in favour of civil partnership, but more ambivalent about same-sex marriage. We identify some of the reasons participants offered for their support and opposition to civil partnership, same-sex marriage and money management in general terms and in relation to their current relationship.

Conclusions: Although financial equality was obviously salient for the participants, many identified equality, and financial equality in particular, as their main reason for supporting civil partnership, and for wanting legal recognition of their current relationship.

Legislating relationship equality?

Results of a large-scale survey with lesbians and gay men

E. PEEL, Aston University & R. HARDING, University of Kent.

Objectives: This paper provides an analysis of perceptions about the legal recognition of same-sex relationships (N=1538).

Design: An online survey was developed to assess perceptions regarding same-sex marriage and civil partnership, using statements rated on a forced-choice Likert-type scale with space for qualitative comments about the experiences of the participants and their partners. Statements included 'Lesbian and gay couples should be treated the same as heterosexual couples'.

Methods: Strategic opportunistic sampling and snowball sampling were used to achieve a large sample, derived from 37 different countries. Most respondents identified as lesbian or gay (69.4 per cent, 1014) and were currently in a same-sex relationship (67.2 per cent, 1014).

Results: Analyses showed that the legal recognition of same-sex relationships is perceived as an important equality issue for lesbians and gay men, and more important for marriage than for civil partnership (particularly from those residing in North America). Heterosexuals were more likely to support civil partnership than lesbians and gay men, and lesbians are as positive about legal relationship recognition as gay men. Liberal formal equality arguments are better understood and more accepted than substantive or radical equality arguments.

Conclusions: Our findings highlight whilst lesbians and gay men strongly support the legal recognition of same-sex relationships; they are particularly in favour of same-sex marriage, and that all individuals (regardless of sexuality) should have access to the same relationship choices/statuses.

Prescriptions/Descriptions: Examining 'relationship norms' and the 'othering' of relationships within self-help texts

K.E. NICHOLLS, City University.

Objectives: This paper seeks to examine personal relationship self-help texts; texts specifically and completely undesirable. This research forms part of a larger research project examining the social construction of 'polyamory' and 'relationship break-ups'.

Design: Self-help texts were sampled from a variety of internet searches for popular texts discussing polyamory and relationship break-ups. Texts were selected for their relevance and coverage of infidelity, monogamy and relationship break-ups and for the majority of texts sampled being published within 2003–2004.

Methods: The texts were analysed using a form of discourse analysis and were examined for their presentation and construction of infidelity, monogamy and relationship break-ups. They were also examined for the approach and 'status' of the knowledge contained in the self-help text (for example, in terms of adopting a hierarchical or non-hierarchical approach to the knowledge contained within the text). Other sexualities that do not adhere to heterosexual practices. Secondly, this paper will examine the 'coupledom' focus inherent within the majority of the texts, which often works to construct a privileged position for monogamous relationships between two people of opposite sex. Finally, the paper examines the techniques utilized to normalise and 'other' relationship styles, sexualities, etc., and are also explored.

Conclusions: This research highlights the importance of examining prevalent cultural texts as they are a prime example of a mass communication of advice. Inherent assumptions present within such material need to be explicated because such texts invisibly present ways of being and, therefore, also 'other' 'alternative' ways of being – which has various implications for individual subjectivity upon reading such material.

Metamours, fruabbling and ethical slurs: Constructing a new language of relationships for polyamory

M. BARKER, London South Bank University & A RITCHIE, Southampton Institute.

Objectives: 'Polyamory' describes the idea that it is possible to form multiple loving relationships. Polyamorous communities have grown since the advent of the internet, challenging conventional relationship ’rules’ around monogamy and partner choice. This study explored ways in which polyamorous people drew on, and challenged, the dominant language of relationships in the constructions of their own identities and set-ups.

Design & Methods: The way in which participants negotiate their identities using both the conventional language of relationships and alternative languages was examined using real-epistle-style e-mail exchanges, as well as analysis of polyamorous literature and websites. Constructionist discourse analytic techniques were employed.

Results & Conclusions: Several possibilities opened up by polyamory appear to be somewhat limited by the conventional language of partnerships, infidelities and jealousies. However, alternative languages are emerging which offer potential for new identities and relationship patterns, for example reclaiming of the word ‘slut’, and words for a positive ‘opposite’ to jealousy.

Searching for love on the net

M. WHITTY, Queen's University Belfast.

Objectives: While studies that have investigated the expression of relationship ‘norms’ online, such as ‘monogamy’, and the negotiation of identities, have been well documented, research into online dating and its role in contemporary romantic partnering remains relatively new. The advent of the internet, challenging conventional ideas of relationships, has opened up possibilities for new identities and relationship patterns, and many new ‘languages’ are emerging which offer potential for new identities and relationship patterns, for example reclaiming of the word ‘slut’, and words for a positive ‘opposite’ to jealousy.

Financial decision making

In conclusion, it is important that we continue to investigate these possibilities opened up by polyamory to be somewhat limited by the conventional language of relationships, infidelities and jealousies. However, alternative languages are emerging which offer potential for new identities and relationship patterns, for example reclaiming the word ‘slut’, and words for a positive ‘opposite’ to jealousy.

Polyamorous people draw on, and challenge, the dominant language of relationships in the constructions of their own identities and set-ups.

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The possibilities opened up by polyamory appear to be somewhat limited by the conventional language of relationships, infidelities and jealousies. However, alternative languages are emerging which offer potential for new identities and relationship patterns, for example reclaiming of the word ‘slut’, and words for a positive ‘opposite’ to jealousy.
DIVISION OF HEALTH PSYCHOLOGY

INDIVIDUAL PAPER

'There's nobody cheats': A discourse analysis of diet in Type 2 diabetes

E. PEEL, Aston University, J. LAWTON, University of Edinburgh, O. PARRY, NEWI & M. DOUGLAS, Lothian NHS Board.

Objectives: This paper uses discursive psychology to explore how people, with Type 2 diabetes, discuss managing – and failing to manage – their diet.

Design: Semi-structured repeat-interviews were conducted with 40 people clinically diagnosed with Type 2 diabetes across Lothian (Scotland) in the previous six months. Using thematic discourse analysis, we examine dietary management talk in repeat-interviews with 40 newly-diagnosed Type 2 diabetes patients.

Methods: The data were coded and analysed using thematic discourse analysis.

Results: Women in our study tended to construct dietary practices as an individual concern, whilst men presented food consumption as a family matter. Participants accounted for lapses in their dietary regimen and 'cheating' in complex ways that aim to accomplish, in particular, a compliant identity.

Conclusions: Discursive psychology may facilitate fluidity in our understandings of dietary management, and challenge fixed notions of 'compliant' and 'non-compliant' diabetes patients.
arguments, it sets specific questions and approaches his theory via a wide range of examples. It defines the perspective of Zizek's work, the relations of masculinity to femininity and of men to women, the future of masculinity in late modernity, and draws comparisons between Zizek and other thinkers.

Masculinity in the psychoanalytic tradition.

Men and women: Is the sexual relation really impossible?

Women as a symptom of man/Man as a symptom of woman.

Over and above the self: Love as possession and dispossession.

Masculinity and death.

Cessation with the past: Are men capable of radical acts of freedom?

In the name of the [absence] father: Vulnerability and changing relations of power and paternal authority.

From 'The Sexual Relation Does Not Exist' to 'Gender Does Not Exist': Reading Zizek with Butler and MacInnes.

On Love: Zizek, Irigaray, Bowman.

Masculinity, late modernity, reflexivity and truth: Zizek and Giddens.

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INDIVIDUAL PAPERS (ordered alphabetically by author)

Breast cancer and the reproductive body: Discourse and matter

E. ADAMS, P. DELL & K. GANNON, University of East London.

I will present research from the first study of my PhD about breast cancer and reproductive issues, more specifically infertility after breast cancer. In the UK, annually more than 2000 premenopausal women are diagnosed with breast cancer. It is commonly not acknowledged that these women may have different experiences compared to older breast cancer sufferers, like early menopause. In a patriarchal culture with an ideology of individual choice in reproduction, we find a paradox. The narratives that draw on a mutual interest in the positive portrayal of women. Together we collected stories from more than 50 middle-aged women from across the UK (in one-to-one conversations and through focus groups). This qualitative research examined interview data using a discursive thematic analysis and located power in the discursive accounts. In this paper we present research conducted with focus groups made up of contemporary urban LGB service users and mental health service providers which gives voice to marginalised constructions of happiness and well-being.

We introduce two metanarratives that participants drew on which suggested that dominant understandings of mental illness, happiness, sexuality and gender were ideologically bound. We argue that some women through discursive practices which are informed and reinforced in particular by heteronormativity and individualism. We conclude that mental health training, therapeutic practice and service provision require a critical practitioner model, shifting the focus to well-being approaches that enhance the functioning of marginalised groups.

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Benign masculinities in lap dancing clubs

S. BOOKER, University of the West of England.

In this study I explored the ways in which men who go to lap dancing clubs account for their consumption. I interviewed five men, all of whom self-reported visiting lap dancing clubs and buying private dances from women who worked there as dancers. Thematic accounts emerged from my analysis and I will describe and subsequently unpack these in relation to social and cultural positioning and its influence on understandings about masculinity that they suggest. I propose that whilst these accounts may represent different ways of consuming lap dancing; they also invest a great deal of labour in the men supporting themselves as autonomous and in possession of a 'good' masculine identity. I will discuss which salient features of these accounts enable the men to position themselves in ways that portray their consumption of lap dancing as benign and inherently male.

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Erotic dance and relational power – A feminist, social constructionist analysis of themes and discourses in interview data

J. BRANDLING, University of Bath.

For psychologists the ‘entertainment’ of men by women through erotic dance brings into question the feminist issues of power, objectification and subordination (Gates, 1996). It illustrates the ongoing tension between human agency and structural, deterministic forces (Giddens, 1991). Moreover, this activity challenges the concept of power as a stable property residing with individuals or within structures, instead suggesting power is socially constructed, dynamic and contingent. This qualitative research examined interview data using a discursive thematic analysis and located power in the social accounts. This suggests the view of power as dynamic, fluid and mobile. Moreover power was observed to be an activity, acquired through discursive knowledge and without a permanent site (Burr 1996). The cultural textuality, subject positioning and context facilitate the sensation of human agency through the choice of discourse and, therefore, a coherent understanding of experience (Burr, 1996).

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S. BOOKER, University of the West of England.

In this study I explored the ways in which men who go to lap dancing clubs account for their consumption. I interviewed five men, all of whom self-reported visiting lap dancing clubs and buying private dances from women who worked there as dancers. Thematic accounts emerged from my analysis and I will describe and subsequently unpack these in relation to social and cultural positioning and its influence on understandings about masculinity that they suggest. I propose that whilst these accounts may represent different ways of consuming lap dancing; they also invest a great deal of labour in the men supporting themselves as autonomous and in possession of a ‘good’ masculine identity. I will discuss which salient features of these accounts enable the men to position themselves in ways that portray their consumption of lap dancing as benign and inherently male.

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For love or money? Same sex couples’ views on civil partnership and marriage

M. BURNS, University of Exeter, V. CLARKE, University of the West of England & C. BURGØYNE, University of Exeter.

This paper offers a qualitative analysis of data drawn from in-depth interviews with 18 lesbian and gay couples about same-sex marriage and money management. Interview transcripts were coded and analysed using a grounded theory approach to identify six themes around which participants organised their approval and/or opposition to legal recognition for same sex relationships. Analysis shows that most participants were (broadly) in favour of civil partnership, but more ambivalent about same-sex marriage. We identify some of the reasons participants held for their stance, both in general terms and in relation to their current relationship. Financial equality was obviously salient with many participants identifying this as their main reason for supporting civil partnership and for wanting legal recognition of their current relationship. The findings have implications for theorising household money management in LG relationships and for informing policy and legislation concerned with partnership recognition and financial management for same-sex couples.

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Being a man: Justice and care

R. CAPDEVILA, University College Northampton, K. CICLITIRA, Middlesex University, L. LAZAR, University College Northampton & L. MARZANO, Middlesex University.

This paper will consider ways in which masculinities are theorised and suggest that discourses of justice and care are intimately bound with the notion and construction of new and contemporary masculinities. In his theory of moral development, Lawrence Kohlberg (1981) identified the highest level of attainment as one which makes use of universal principles of justice and human rights. In response Carole Gilligan (1982) has argued that most women primarily operate by an ethic of ‘care’. Whilst we would not want to subscribe to either of these psychological propositions, we would like to argue that these discourses, underpinned by their apparent standing in the psychological establishment and their resonances with everyday life, have become prevalent within constructions of fatherhood in a number of arenas. In this paper we will focus specifically on three of these arenas, i.e. fathers’ rights organisations, the military, and the prison system.

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Young British and Tobagonian women’s constructions of self – other relationships and the problematisation of recognition/disrespect

N. DORRER, University of Stirling and Scottish Recovery Network.

In this presentation I draw on in-depth interviews conducted with young women from the UK and Tobago, the small sister island of Trinidad (West Indies), on issues revolving around ‘becoming a woman’. The female body is a salient feature of identity. I will discuss how within each cultural context specific problematisations of recognitions and their antonym disrespect were found to interlink with differences in the way young women constructed their sense of self and related to others. A common starting point for the young women from these very different cultural backgrounds continued to be the association of femininity with disorder and restraint. In the interview dialogues, the young women’s judgements of other women were often marked by a lack of trust and closeness. Despite these common starting points notable differences
Gender differences and perceived psychological contracts: A study of retail and nursery workers
A. GAFFNEY & C. GEORGE, University of Hertfordshire.
Rousseau (1995) defines a psychological contract as a ‘commitment to action based on individual beliefs about what exist between two or more parties.’ Psychological contracts are usually described as being either transactional or relational in nature. Relational contracts emphasise the degree of social exchange between workers and their employers. Transactional contracts tend to focus on the concrete content of the contract. There has been little research which focuses on relationships between individual or organisational differences and relational or transactional contracts. The current study examines transactional and relational psychological contracts in relation to gender and work type using an adapted version of Rousseau’s (2000) Psychological Contract Inventory. Eighty-three participants were surveyed, 35 of whom were male and 48 female. All participants worked either in retail or office administration. A significant difference was obtained between male and female workers in their perception of their psychological contract. Male workers tended to perceive their contract as being more relational than their female counterparts. The results are discussed with reference to gender stereotypes and work type.

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Identity boundaries and the impact of segregation and integration on lesbian teachers’ personal and professional lives
C. GIBBONS, University of Nottingham.
Home/work boundary theory is used in this paper to examine the experiences of lesbian teachers. This is related as part of a qualitative study using grounded theory methods. Boundaries between work and home were found to be uni-directional for women. Teachers make a choice to work from home on life relationships but home life was separated strictly from school. In particular, the report discusses how teachers took the identity of gender, conflict with teacher identity and feeling of discomfort and exclusion from workplace relations. Experiences appeared to come in two forms. The first is discussed as ‘self-exile’ from the interpersonal relationships of school, where revelations of self form part of the culture of expectation in the build-up of trusting staff relations. The second is structural exclusion, whereby lesbian teachers are excluded through the normalised curriculum, sexual and heterosexual identity and the discussion of teacher professionalism, where heterosexuality is both assumed and highly valued.
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Undoing androcentric explanations of gender differences: Explaining the effect to be predicted
P. HEGARTY, University of Surrey.
People usually explain gender differences with reference to the less typical gender within any given overarching category. As men are taken as typical of many social categories this leads to a focus on women’s attributes. Three experiments (A – C) were conducted to test the effect as ‘the effect to be predicted’ when their predictions were unconstrained (Experiment 1) or were constrained by forced choice items (Experiments 2). Participants also focused on explanations in the gender group that they predicted on a second explanation task (Experiment 3). This suggests that the effect is due to a shift in the predictions of gender, rather than conversational pragmatics. Implications for social cognition theories are discussed, and recommendations about the presentation of gender difference findings are proposed.
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Twice as much fun: Bisexuality identity formation among British women
P. HUDSON, University of Durham.
Sexual identity development was examined from the perspective of British women who self-identify as bisexual. Development focus on monosexual identities and research around gender and sexuality also tends to exclude bisexuality, either as ‘other’ or dual and homosexual together, with emphases on male sexuality and North American research. Through narrative-based interviews with six participants (five women, one transgendered), data was gathered and qualitative analysis undertaken to illuminate the common themes emerging from the interviews. Each of the participants drew on discourses of bisexuality as ‘stigma’, and some used a related discourse of pressure to construct identities that are exclusive of gay and lesbian. Discourses of bisexuality as ‘challenge’ emerged, with difficulties experienced by self or others in conceptualising a phenomenon that is not routinely included in understandings around sexuality. A further set of discourses around bisexuality as ‘potential’ emerged, with participants constructing discourses that linked bisexuality as a critical potential life experience and enhanced quality of life. This research challenges previous literature that overlooks bisexuality as an enduring sexual identity.

Note: The transgendered individual is not biologically intersexed or undergoing gender reassignment, and does not identify as either male or female. I have used the term trans gendered as the term that the individual uses.
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Transsexualism and relationships
K. JOHNSON, University of Brighton.
In this paper I draw on the narrative accounts of a group of people who identify as male-to-female transsexual and gender dysphoric as they talk about relationships. If inter-subjective recognition is a pre-requisite for a healthy sense of self, then self-recognition emerges from both recognition of their own ‘core’ gender and confirmation of this from those they relate with (Rubin, 2003). Thus, continuity in social relations in which family, friends and partners relate to the participants, is highlighted as imperative for the development of transsexualism as a viable identity. In particular, the importance of past relationships is explored, where the socially constructed and reinforced gender identity and personal expectations, which occur in the pre- and post-transsexual experiences, are discussed. Unfortunately, past relationships also create seepage and fractures within any newly achieved sense of gender confirmation. Here I outline some of the issues that arise for transsexual people as they negotiate sexual desire, sexual orientation and gender uncertainty. The implications are discussed in terms of understanding transsexual subjectivity and theorising ‘sex’, gender and sexuality.
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Health professionals at the ‘front line’: In the war against domestic violence who’s horrifying who?
V. LAVIS & C. HORROCKS, University of Huddersfield.
In the UK domestic violence has historically been constructed within the domain of social care. In recent years, in line with the development of integrated services, domestic violence has been re-framed within traditional medical and health care. Moving beyond evaluation practice models, predominantly employed in UK when qualitatively researched, to the task of ‘architecting the health arena, the research presented adopted a feminist Foucauldian approach. Posited is the necessity of health professionals as ‘opening Pandora’s Box’ and thus consistent with this interpretation, and a discomfort experienced when responding to domestic violence. Such discomfort is further explored, when manifest by health professionals deploying ‘horror’ and ‘fear’ narratives to impart their experiences. The impact of such discourses, and the way that they appear to enable the apparent subversion of the ‘health’ subject positions will be scrutinised moving on to theorise the implications for women and health professionals.
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Psychological processes of women and their husbands/partners in pregnancy and postnatally
J. LEE, Vanbrugh 2000 Group Practice.
Between 10 per cent and 15 per cent of women experience an episode of major depression in the weeks and months following childbirth (Cooper & Murray, 1998). Half of these episodes go undetected (Seely, Murray & Cooper, 1996). This is a report of a two-year two-women who drank regularly participated in one of four focus group discussions around drinking and student life. Drinking and getting drunk did play important roles in their lives. Heavy drinking was seen by most as an inevitable and pleasurable rite of passage. In particular drinking was used as an important means of promoting and managing intimacy, especially within the context of friendships. Drinking was promoted by facilitators of social interaction and was culturally acceptable way. Getting drunk together enables students to share experiences that are then storied and retold. We examine the role of these ‘drinking stories’ in creating and maintaining friendships.
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Matrices of femininity in hospital-based patient treatment for eating disorders: A feminist post-structuralist analysis of nurse-patient relationships
H. MALSON & V. RYAN, University of the West of England.
This paper takes a feminist post-structuralist approach to explore nurses’ accounts of nursing girls and young women who have been hospitalised with an ‘eating disorder’. Using a critical discourse analytic methodology to analyse interviews conducted with nurses who nurse in-patients diagnosed as ‘eating disordered’, the paper examines how the body, and health care issues are articulated in these accounts. The paper focuses in particular on the various ways in which the patients, ‘pathology’, ‘nurse’ and ‘nurse-patient relationship’ are feminised. Our analysis thus aims to elucidate how ‘the feminine’ persists and reappears in these accounts as a series of binary oppositions such that ‘nurse’ and ‘patient’ are positioned within a matrix.
of dichotomously-structured and hetero-patriarchially-defined ‘femininities’. Helen.Masonson@lboro.ac.uk
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‘Under pressure?’: Negotiating relationships in known egg donation N. MARTIN, S. HALL, J. GUINNESS, C. CAMERON, University of Huddersfield.

This paper aims to explore the experience of known egg donation (where eggs are donated by a woman known to the recipient either as a friend or family member) within the context of the relationships involved in the donation. Part of my PhD research involved a number of in-depth interviews with women who had experienced known egg donation either as the recipient or the donor, or the partner of the recipient or donor. These were subsequently being analysed using the voice–centred relational method of data analysis (Brown & Gilligan, 1992; Mauthner & Douet, 1998), which provides the researcher with the ability to be reflexive during the analytical stages of the research as well as providing a ‘voice’ for those taking part in the research. Our data analysis suggests that the quality of the relationships between the donor, the recipient and their partners are a key feature of known egg donation.

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Exploring the gendered construction of academic careers P. MCCOLL & P. ILES, University of Teesside.

An organisation may, as part of an initiative to implement equality of opportunity, attempt to measure how people feel about their experience of employment (e.g. using questions to monitor and analyse statistical data. However, the objective structural under-representation and disadvantage revealed by any analysis may not be matched by subjective perceptions. The stories which emerge may not match expectations. This was the case with a survey of career opportunities carried out in a post-92 university, where factor analysis was used to identify key dimensions of experience. Women academics expressed more positive perceptions of their situation when measured against a factor measuring experience of career opportunities. Different perspectives are gained from different fields of literature and analysis suggests that the gendering of parenthood

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Positioning girls and young women as ‘workers’: Negotiating childhood, adulthood, family and work L. EDLEY, S. ROBINSON, R. DEAP, L. O'DELL, University of Huddersfield, Sheffield.

This paper examines the experiences of women who work outside the home and the ways in which these experiences are constructed within society and in particular in the context of the gendering of parenthood.

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Masculinities and femininities: Gender, resilience and child abuse, a survey of psychotherapists S. PIMENTEL-AGUILAR, University of Sheffield.

Background: Child abuse is a serious cause of mental health problems. Psychotherapy aims to help patients overcome personal problems. As a group, psychotherapists may be in a good position to provide information about whether psychotherapy can help develop resilience to emotional trauma.

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As more women move into non-traditional employment (Bartholomew, 1994), research has tended to concentrate on women in non-traditional, professional roles, and second, quantifiable career outcomes for these women (e.g. the glass-ceiling effect; Sevastos, 2003). However, work by Connell (1993) points to the experience of working-class women who step out of the conventional stereotypical work-role (Connell, 1993). This study adopted a semi-structured interview approach with a group of five female door staff with an aim to explore contemporary constructions of femininities and masculinities in the context of a working-class, hegemonic masculine workspace. Four main themes emerged; these were ‘heroes’, ‘matriarchs’, and ‘I’m a man and she’s harder than me’ and ‘I’m just one of the boys’. Findings suggest that these constructions could be understood as a form of control and surveillance of acceptable femininities which may serve to validate sexist ideology. However, there may be alternative femininities available to women to place women in traditionally-masculine work-roles in greater positions of agency and power.

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How men are compliant with or resistant to the social notion of hegemonic masculinity S. ROBINSON, University of Bolton.

This study aimed, in support of Wetherall and Edley (1999) to consider the orientations of men in terms of hegemonic masculinity. I wanted to see how men negotiated and managed their masculine identities, positioning themselves either compliant with or resistant to the traditionally conventional ideal. The data was collected through semi-structured interviews with two young, white, heterosexual men and the analytic tool was discourse analysis. Three discursive positions were identified (in support of Wetherall & Edley, 1999) as the heroic, the ordinary and the rebellious. It was found that the participants aligned themselves more often with the heroic position, even when appearing to exert their experience of the hegemonic type. This occurred due to the need to conform to social norms and expectations. Masculinity was talked about in terms of it being additional rather than something attainable or embodied. Even when seemingly positioning themselves as resistant to the hegemonic type, the participants were still contributing to its existence and thus the power of the discourse of hegemony.

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Collapses in romance: Stories about the gendering of parenthood E. SEVÜN, University of Jyväskylä.

The romance genre of today deals in stories focusing on a quest for an ideal heterosexual relationship, characterised by mutuality and transcendence. Many feminists, however, have pointed out that the romance genre conceals a gender imbalance. The impact of romance on family life and parenting has not been explored thoroughly. This paper presents first-time mothers’ talk about motherhood and their partners’ fatherhood over four interviews during the first year of motherhood. The paper aims at answering the following questions: What is the process of gendering parenthood like? (2) How are different emotionalities related to different genres in the mothers’ stories?

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Conforming to hegemonic masculinity: Men’s negotiation of a self-help group identity

S. SEYMOUR-SMITH, Nottingham Trent University.

In this paper I analyse how men and women discriminate by managing their identities as members of cancer self-help groups. I focus on four interviews with men who belonged to the same testicular cancer self-help group comprising male patients who belonged to the same breast cancer self-help group. Using discursive psychology I argue that managing identity as someone who attends such a group is more ‘troublesome’ (Wetherell, 1998) for men than it is for women. For instance, the men in my study typically negotiated a positive identity for themselves and the self-help group which attended to the maintenance of hegemonic masculinity. I suggest that although at first glance these men appear to be resisting hegemonic masculinity, on closer inspection the formation of a self-help group identity makes them complicit.

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Exploring new possibilities: The psychosocial effects of single British South Asian women working in mainstream culture and living with their parents

A. SINGH, University of Westminster.

Currently political issues regarding identity and immigration tend to pathologise British South Asian females by reverting to a homogenous discourse and negative stereotypes. This exploratory study focused on positive representations of single professional South Asian women who are residing with their parents. Transcripts of a focus group (N=4) and semi-structured one-to-one interviews (N=4) were then compared in order to develop emerging themes. Both the focus groups and interviews attempted a thematic analysis. All participants were of South Asian origin and in their 20s and fitted the criteria of living at home with their parents. The importance of defining oneself within the social and role expectations as well as professional discourse and negative stereotypes. This study repositioned the South Asian female as a dynamic subject constructed by and constructing her own identity from the cultural backgrounds available. The implications of this study suggest the need to explore heterogeneous Asian female identities in terms of positive identity politics

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Antenatal depression: Women’s and practitioners’ perspectives

N. STANLEY, University of Central Lancashire, R. BORTHWICK, University of Hull & A. MACLEOD, West Hull Primary Care Trust. 

This paper focuses on postnatal depression to the recognition that depression may be a recurrent experience in many women’s lives with the perinatal period constituting a time of particular vulnerability. This paper reports on a study undertaken in one PCT of women’s and practitioners’ experience and awareness of antenatal depression. The women who participated in focus groups considered that there was little acknowledgement that depression could occur during pregnancy. They identified social and role expectations as well as professional attitudes and service delivery models as barriers to disclosing feelings of depression during this period. These findings indicate that nurses surveyed placed rather less emphasis than mothers on the value of continuous care in pregnancy in promoting disclosure of mental health problems. Consequently, antenatal care was viewed as less than health visitors in detecting and responding to antenatal depression but both groups of professionals had limited knowledge of relevant services.

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Hidden victims: Blame attributions, failure to seek help and the experience of trauma among close relatives of individuals convicted of serious crimes

S. TULLETT, I. ANDERSON & M. MCDERMOTT, University of Kent, London.

This exploratory study examines the impact of incarceration on relatives of individuals convicted of a serious crime. Research indicates that the relatives of prison inmates experience personal, emotional and health problems which seriously affect their well-being (Brown, 2002). They may be subjected to ‘secondary victimisation’, many suffer acute and chronic psychological distress by the isolation and stigma experienced within their own community (Travis 2002). Although the attributional perspective has been extensively implicated in the process of adjustment and recovery from a wide range of traumatic experiences, rape (Frazier, 1990), heart disease and cancer (Gotay, 1985), no previous research has focused on the issues of self and other blame among relatives of incarcerated individuals.

Drawing on in-depth interviews this study will examine whether the concept of blame (and related concepts) are mentioned spontaneously by participants. Do relatives spontaneously blame themselves, others or the incarcerated relative for the criminal actions and the consequential traumatic experiences? How do these attributions take? Is self-blame linked to failure to seek help and to the experience of trauma? In exploring the experience of a minority group and the effects of incarceration on the family, this research examines the relationship between attributions and health. Finally, it will discuss the implications of this research for both research and practice.

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Masculinity under pressure

A. VOELA, King’s College London.

Ten years ago, in an article in Screen, Eleftheriotis argued that Greek men looked for ‘a place of their own’ and more specifically towards comedies and melodramas of the 60s. But have Greek men really found that place? If not where are they looking for it and what does their quest reveal about masculinity in Greece in the late 90s? This paper focuses on three modern cinematic adaptations of the Orpheus myth and the hero’s descend to Hades in order to retrieve the beloved Eurydice. It examines the contemporary representation of the uninhabitable landscape as a sign of sexual frustration by a stranger, his idiosyncratic relationship with Eurydice and his failure to regain her from Hades. It highlights masculinity as fantasies, as well as the ways in which the hero experiences and resists the idea of a traditional and exploitative masculinity. Orpheus is far more implicated in its consequences than he thinks, and the present paper argues that anxiety can be attributed to becoming aware of the contradictions governing traditional masculinity and the inability to change the situation. Modern Orpheus finds his place in Hades, in permanent exile into a place of intimate loving relationships.

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Clinical talk: Constructions of ‘self-harm’ and ‘borderline personality disorder’ among health care professionals

T. WALKER, N. KELLY & C. HORROCKS, University of Huddersfield.

Research suggests that women who ‘self-harm’ are commonly diagnosed as having ‘borderline personality disorder’ (BPD) by mental health services in the UK (Casey, 1992; Brodsky, Ciofle & Duli, 1990). In this paper, it is argued that the traditional explanations focus on the individual woman as the site of difficulties. The larger ‘intervention of target of intervention’ (Ussher, 2003) still prevail in mental health. Individual interviews with eight health professionals are analysed to examine the prevailing discursive practices that culminate in women’s ‘self-harm’ receiving a diagnosis of ‘BPD’.

Discussed will be discourses conveyed by the health professionals that seemingly construct women’s experiences as a ‘conflicted reinvention’ for mental health services. Obviously such constructions have implications for women who ‘self-harm’ and have been given a diagnosis of ‘BPD’ when accessing health services. The remainder of the paper will outline further research that explores the material, discursive, and intrapsychic aspects of women’s experience.

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Time to Think: Gender differences in sexual identity, sexual experiences and practices

H. WALLACE, Metro Centre, London.

‘Time to Think’ is a comprehensive study which explores the lives and experiences of lesbians, gay and bisexual young people in London. It explores the challenges faced by heterosexual society and the extent, experience and effects of discrimination, victimisation and rejection. This presentation summarises some of the findings of the sex and sexuality part of the study and highlights gender differences in sexual development, identity, sexual experiences and practices. Results suggest that females, specifically lesbians, realised and disclosed their nonheterosexual status earlier than males and that disparity exists between sexual attraction and sexual identity for both genders but more so for females. We also found that females were significantly more likely to have their first sexual experience with someone of the opposite gender and were more likely to continue to have heterosexual experiences after identification and disclosure.

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Gender, career choice and the recruitment cycle

P. WILSON, London Fire Brigade.

Objective: This paper describes a focus group and questionnaire audit of a representative community sample in terms of gender differences in career perceptions and perceptions of jobs and organisations, focusing particularly on the firefighter role/career. Attraction and selection approaches were then identified from this research. Comparator information from an Asian focus group study (Bhathal et al) is also considered regarding gender difference.

Method & Findings: The methodology and outcomes arising from this community audit approach are being addressed, with a focus on identified gender differences in terms of career choice, use of job information, organisational perceptions and career attraction. The cultural dynamics from the Asian group, in terms of gender, are also referenced. These outcomes were subsequently fed into the recruitment cycle in terms of attraction and selection strategy for firefighter applications along with other corporate processes.

Retention on subsequent positive action interventions, selection system results and cultural initiatives in terms of gender are provided.

Conclusions: Implications are considered regarding diversity promotion – particularly in terms of women.

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Scientific constructions of motherhood: Playing handmaidens to social values

M.S. ZEEDYK, University of Dundee.

Mothers are frequently held up to societal standards that judge them to be ‘good’ or ‘bad’. This paper explores the way in which science exacerbates that practice. It will critically examine methods commonly used in contemporary empirical research on infancy: observational coding methods. Using such methods leads experimenters to classify maternal behaviours into categories such as ‘appropriate/inappropriate’, and ‘accurate/inaccurate’. Because labels such as these have emerged out of theoretical frameworks intended to account for children’s development, they can appear to be merely descriptive and thus
unproblematic. However, because the classifications overlap closely with societal discourses involved in judging the quality of mothering, the labels are inherently problematic. The paper will argue that developmental psychology needs to take greater account of such associations, in order to serve the needs of women and children and also to improve the quality of the science it offers to society. Examples drawn from recently published empirical articles will be used to demonstrate the association, making it possible to see how classificatory coding practices render it impossible to generate alternative interpretations of the data, thus reifying particular (and inadequate) conclusions about mothering behaviour. Shields’ classic paper (1975) sought to reveal the ways in which science has played handmaidens to social values. This paper seeks to reveal the ways in which this process continues today within the domain of motherhood.

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POSTERS

‘I think motherhood for me was a bit like a double-edged sword’: The narratives of older mothers

N. SHELTON, University of Leicester & S. JOHNSON, Leeds Metropolitan University.

It is assumed in our society that women want to become mothers. This desire is situated within the ideology of the ‘perfect mother’. However, feminists and health psychologists have highlighted contradictions between this ideology and the reality of mothering. A trend towards later motherhood has recently been identified. Delayed motherhood has been associated with a number of advantages such as a sense of psychological readiness, however this may mask some of the negative aspects. The aim of the study reported here was to explore the transition to, and lived experience of, delayed motherhood. Five women who were over 30 prior to the birth of their first child were interviewed. A narrative analysis was conducted in order to explore these women’s psychological and social realities. Although their stories conveyed a general sense that delaying motherhood was a positive experience they also contained a strong sense of conflict and problems in adapting to motherhood. The prominence of the ‘double-edged’ quality to these women’s mothering lives appeared to have been fuelled by attempts to live up to societal expectations. This emphasises the need for more realistic portrayals of delayed motherhood.

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KEYNOTE SPEAKERS

Misleading tests of popular health behaviour theories

N. WEINSTEIN, Rutgers University.

Defects in use of correlational research designs commonly used to test cognitively-oriented theories of health behaviour – including the health belief model, theory of reasoned action, theory of planned behaviour, subjective expected utility theory, and protection motivation theory – are not sufficiently recognised. These problems include a failure to recognise that effects of behaviour on beliefs – not just beliefs on behaviour – may be highly or very likely; that ambiguities about the direction of causation are not eliminated by using longitudinal designs, and that including intervening variables in multiple regression analysis can mislead one about the extent to which theories have identified the causes of health behaviours. Most of these problems inflate the apparent accuracy of the theories. Thus, correlational designs are not adequate for reaching decisions about whether a particular variable affects behaviour or for determining which theory or variable explains behaviour best. Overall, the existing literature does not provide strong empirical support for the validity or comprehensiveness of any of these theories or for using them to design interventions.

Priorities and plans: Shielding ongoing goal pursuit from unwanted influences

P. SHEERAN, University of Sheffield.

Setting health goals does not guarantee goal attainment or the intention to change behaviour. People’s priorities often shift because social situations activate unwanted thoughts (e.g. cravings), feelings (especially negative affect), or behaviours (goal or trait priming effects). Findings from several studies will illustrate how these processes serve to derail goal pursuit. However, the findings will also demonstrate how implementation intentions can be used to prioritise the focal goal pursuit – either by stabilising goal striving or by controlling the unwanted influence – and thereby help people to achieve their goals.

When mothers have babies – a major transition

B. ALDER, Napier University.

The birth of a first child is a major psychological event for both parents. New parents have to adjust to different roles and take on new responsibilities for the health of another person. There is a strong emphasis on the long-term effects of early nutrition and the effect of mood on later development. Parenting skills may be learned from early experience but as families get smaller there is less informal learning and more emphasis on preparation for parenthood, although there is little clear evidence for what effective preparation might be. Postnatal depression (PND) affects 10 to 15 per cent of new mothers. Surprisingly little is known about risk factors and effective detection and management of PND, and we have looked at the influence of evidence based guidelines on policy and practice. Mothers are encouraged to breastfeed exclusively for six months, and research has shown actual practice may be based on attitudes and beliefs about health, it also depends on the practicalities of coping with a newborn infant. The transition to parenthood is a good illustration of the application of the biospsychosocial model in health psychology.

SYMPOSIA

Symposium: Risk communication:
Optimising the presentation of health risk information

Convenor & Chair: S. SUTTON, University of Cambridge.

Discussant: N. WEINSTEIN, Rutgers University.

Aims:
- To provide good examples of current research by UK health psychologists on the theoretical and applied aspects of communicating health risks.
- To consider some of the risk message factors (e.g. use of graphics, numerical format) that may influence key outcomes such as understanding and recall of the information and intention to change behaviour.
- To discuss the problems and issues involved in communicating information about health risks and benefits in real settings.
- To make recommendations for ways of improving risk communication.

Rationale: Risk communication is a central topic in contemporary health psychology. Recent DPH conferences have not included symposia on this topic. An important reason for discussing this issue at this year’s conference is that Neil Weinstein is an invited keynote speaker. Professor Weinstein is acknowledged as a leading expert in the area of risk perception and risk communication and has agreed to be discussant. The presenters and audience will benefit from his comments.

Summary: The first two papers in the symposium report experimental studies that examined the effect of presenting information on health risks and benefits [risk reduction] in different ways. The last two papers report studies of risk communication in real settings. As well as using different methods (randomised experiment, cluster randomised trial, comparative study of natural group), the studies examined different risk factors (e.g. cardiac events, cervical cancer) and used a range of different outcome measures, including recall, preferences, intention and anxiety.

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The first paper, by Dan Mason, reports findings from a web-based experiment designed to test the effect of presenting numeric risk information with either static or interactive graphical representations. The second paper, by Judith Covey, reports an experiment to test the effect of Framing risk reductions to patients in relative or absolute terms on patients’ preferences for preventative treatments. She will also present findings from an observational review.

The third paper, by Sue Hall, describes a study based in a real setting in which women attending for routine cervical screening were given information about the health risks of smoking in a way that was intended to increase the perceived coherence of the link between smoking and cervical cancer. The women were allocated to one of two conditions: (1) receiving risk information with either static or interactive charts, and when supplemented by static or interactive bar charts.

Methods: Participants aged 40 to 65 (N=570) visited a website that gave them hypothetical information concerning their risk of having a cardiovascular disease. They were then presented with one of the three formats. One week later they were invited to return to the website where they were asked to recall the information.

Findings: Controlling for education level, there was no improvement in recall accuracy when participants were shown static bar charts as opposed to percentages alone (OR=0.96, p=0.75). However, participants who used the interactive bar charts were more likely to recall the risk information than those who were shown numbers alone (OR=1.88, p<0.05) and those who were shown static bar charts (OR=2.06, p<0.05).

Discussion: Interactive representations appeared to promote understanding and as a result, might help to increase awareness of the alternatives. Given the hypothetical nature of the task, it is possible that interactivity encouraged the participants to think about the task in a way that they did not in the other two conditions. The benefits of such presentation techniques can only ultimately be realised in a real risk presentation situation, where motivation to engage with the task is likely to be higher.

The effects of relative and absolute changes in risk on people’s preferences for preventative treatments

J. COVEY, University of Durham.

Background: An increasing number of prescription medications and over-the-counter products are taken as part of the treatment for preventing disease (e.g. drugs or food-stuffs which aim to reduce cholesterol levels). These medications and products are often discussed in terms of their relative or absolute risk. When people are described to reduce the risks. This paper explores: (a) how the format in which risk reduction information is presented affects people’s acceptance of such products; and (b) whether attention to relative changes in risk can result in people making sub-optimal choices.

Method: Questionnaire responses from two sources. A systematic review of studies which have compared the effects of framing risk reductions to patients in relative or absolute terms and new experimental research which explored the extent to which attention to relative risk changes results in sub-optimal choices.

Findings: The systematic review revealed that people were generally more favourable towards treatments when the risk reducing benefits were described in relative rather than absolute terms (OR=0.61–1.15). A number of studies showed that participants were willing to forgo options that offered larger absolute risk reductions in exchange for options which offered larger relative risk reductions. The effect is found both when the risk reductions were described in relative or absolute terms.

Discussion: Results will be discussed in relation to their contribution to our understanding of the difficulties that people have in processing risk information when making choices that could have beneficial effects on their health or well-being.

Risk communication in practice: The potential effectiveness of brief smoking cessation advice given by practice nurses when attending for cervical screening

S. HALL, J. WEINMAN, O. OKOUMUNNE & T.M. MARTEAU, King’s College London.

Background: Given that millions of women in the UK each year undergo a routine cervical smear test, delivering brief smoking cessation advice at this time has the potential to make a significant impact on women’s health. This study aimed to determine the effectiveness of brief smoking cessation advice given by practice nurses to women attending routine cervical screening.

Methods: 242 women, recruited from eight general practices using cluster randomisation to either: (1) brief smoking cessation advice from a practice nurse plus written information; or (2) written information only. All women were included in the study but the impact of receiving the advice is not investigated. Data have been collected for up to 14 weeks (N=60 per condition).

Findings: The intervention increased perceptions of personal and comparative risk, response efficacy, coherence and intention to stop smoking (assessed two and 10 weeks post-intervention). Discussion: This study provides evidence of the potential effectiveness of providing smoking cessation advice as part of routine cervical screening. Electronic presentations are a cost-effective intervention and is cost effective requires a fully powered trial.

Inadequate cervical smear test results: an opportunity for public health education

D.P. FRISKE & E. MAISSI, University of Birmingham, E. MAISSI & T.M. MARTEAU, King’s College London.

Background: A first or non-consecutive inadequate cervical smear test result is an ambiguous situation, whose true significance is not fully understood. We report the first study to examine the psychological impact of receiving this result.

Methods: A prospective questionnaire design was used, set in a single English cervical screening laboratory. Two groups of women receiving either a normal test result (N=226) or either a first or non-consecutive inadequate smear test result (N=180) participated.

Findings: Compared to women with normal test results, women with inadequate smear test results had higher state anxiety (p=0.025), were more concerned about their results (p<0.001), and less satisfied with the information they had received about their test results (p<0.001) at baseline. The differences in concern about results (p<0.001) and satisfaction with information received (p<0.001) were still present at three month follow-up. For those women who received inadequate cervical smear test results, satisfaction with information was predictive of changes in concern about test results.

Discussion: Communications about inadequate cervical smear test results creates the expectation that an inadequate cervical smear test result will be received, and are lacking in information about frequency of this result and absolute risk of cervical cancer conferred by the result. We propose that the lack of this information results in low satisfaction with information provided, and hence elevated concern about inadequate cervical smear test results.

Symposium: Lay-led self-management: Studies in diversity

Convener & Chair: J. BARLOW, Coventry University.

Discussant: R. JONES, Independent Consultant for Expert Programme Strategic Board.

Aims: The role of self-management interventions for people living with chronic disease is being increasingly recognised. The purpose of the symposium is to draw together some recent studies, which have all examined one model of a chronic disease self-management course. A range of delivery settings and participant groups. The model was developed by Stanford University and is now being implemented in a number of countries including the UK.

Rationale: One in three people in the UK have a chronic disease or disability, with approximately 17 million living with inadequate cervical test results at any one point in time. This figure is likely to increase with the current demographic changes (e.g. longer life expectancy). Thus, it is surprising that the role of psycho-educational interventions in facilitating adaptation to the challenges of chronic disease is receiving growing recognition. In the UK, the researchers have been evaluating the impact of the Stanford University model of lay-led self-management courses for participating general practices and patients with cervical cancer.

Summary: Presentations have been chosen to illustrate the increasing diversity of delivery settings and participant groups of the Stanford University model of lay-led self-management. Firstly, Andy Turner will set the scene for the Symposium by briefly summarising the course content and format, followed by the presentation of findings from a qualitative evaluation of a course with patients with arthritis. The latter identified some of the factors associated with the course’s positive outcomes. David Ellard will present results from a study and examining the perceived benefits and the likely difficulty of the Stanford course for NHS employees. This study includes the perspectives of employees and managers. This is identify any results that may present outcome findings from an innovative study which involved adapting the course for Sylletti speaking, Bengali participants in Tower Hamlets, London. Patrick Hill will conclude the presentations speaking, Bengali participants in Tower Hamlets, London. Patrick Hill will conclude the presentations speaking, Bengali participants in Tower Hamlets, London. Patrick Hill will conclude the presentations speaking, Bengali participants in Tower Hamlets, London.
participants provided the necessary motivation and commitment to undertake their goals. Participants also gained support from participants and tutors whom they perceived to be coping well with their problems. Comparing downwinders with those they perceived to be worse off enabled participants to develop a more positive perspective towards their problems. Most participants who had benefited from the course at four months continued to do so at 12 months, albeit in a diluted/reduced capacity.

Conclusion: Improved outcomes tended to be psychosocial rather than physical and were linked to group cohesion, social validation, social comparison, goal setting, problem solving and inspirational modelling. Several of these factors has also been shown to be crucial for successful outcomes in brief psychotherapy interventions. Strategies such as a booster session, telephone follow-up or establishing a post-course ‘buddy’ system may help some participants in maintaining improvements.

Self-management of long-term medical conditions in a workplace setting: The experiences of NHS employees

D.R. ELLARD, Coventry University.

Background: The Improving Working Lives Pilot Project aimed to use the Expert Patients Programme (EPP) to NHS employees who have a Long-Term Medical Condition (LTMC). The project was piloted in two NHS Workforce Development Centres in London in early 2003. The aim of this exploratory study was to examine whether EPP is of benefit to people with LTMC working in the NHS in terms of improving the quality of their working lives and to assess the views of NHS managers regarding the EPP.

Methods: 16 people with LTMC gave telephone interviews at two points in time: before attending the EPP and at three-month follow-up. Six managers were interviewed by telephone three months after the programme. Interviews were tape-recorded, transcribed and resultant data were analysed using thematic content analysis.

Findings: Before the course, participants reported that limited mobility, pain, fatigue and unpredictability interfered with working life. Rather than managing their condition, participants were ignoring it in the workplace and just getting on with it. After attending EPP, participants reported that they valued taking time away from their work to look after their own health needs with similar others. Many were more accepting of their condition and felt less guilty about having to leave work to attend training. They had developed skills that allowed them to manage work. All managers expressed qualified support for staff with long-term conditions to either attend the EPP or manage work. Managers worked that any support had to be balanced against the need to ensure that service provision could be maintained, and had to take account of timing, staff levels, and responsibilities.

Conclusions: Results illustrate how a course designed for delivery in the community can be successfully transferred to a workplace setting.

A randomised controlled trial of a lay-led self-management programme for Bangladeshis with chronic disease

C. GRIFFITHS, Queen Mary’s School of Medicine and Dentistry, London, J. BARLOW, Coventry University H.J. RAMSEY, Barts and Queen Mary’s School of Medicine and Dentistry, London.

Background: People of South Asian origin suffer more from chronic disease and have worse outcomes than other groups in the UK. We report the first randomised trial to evaluate an educational intervention of any type for South Asians with chronic disease.

Method: 476 Bangladeshi adults with diabetes, cardiovascular disease, respiratory disease or arthritis were recruited from primary care practices in Tower Hamlets, and were randomised to receive a Sylheti dialect adaptation of the Chronic Disease Self-management Programme, delivered by trained Bangladeshis lay tutors with chronic illness, or to a control group. A telephone interview took place and face-to-face interviews administered in Sylheti by blinded researchers at baseline and four-month follow-up.

Findings: The education programme improved self-efficacy (difference: 0.67, 95% confidence interval: 0.08–1.25) and self-management behaviour (0.01–1.06). Just over half of intervention participants (121/238, 51% per cent) attended three or more of six education sessions in preference to the control group. Analyses for these participants the education programme led to greater improvements in self efficacy (1.46; 0.76–2.20) and self-management behaviour (1.16; 0.50–1.82) compared to the control group. Depression subscale (0.64; 0.07–1.22), Health care use was unaltered. The programme cost £123 per participant.

Discussion: A lay-led, self-management education programme can improve self-efficacy and self-care behaviour in Bangladeshis with chronic disease.

Exploration of the personal experiences of self-management of long-term health conditions

P.A. HILL, University of Exeter.

Objectives: This study aimed to retrospectively explore the perceived changes in self-management by adults with long-term conditions which was followed by a self-management programme. They were asked to describe their experiences of living with long term conditions and the impact of acquiring the skills of self-management.

Results: The analysis resulted in two groups of themes. The first group relayed Factual themes which related to events and experiences in relation to long-term conditions and learning self-management. The second group of Interpretative themes identified reflections and comments that represented processes or transitions that the participants had undergone. The accounts indicated a process which was interpreted as an initial deconstruction of the self due to the impact of the condition which was followed by a reconstitution as the person developed self-management.

Conclusion: The study indicates the need to support people with LTMC conditions through a journey addressing a range of physical, emotional, psychological and social needs, as they 'rebuild' their sense of self and establish new and valid roles in society.

Symposium: Restrained eating, affect, and the media: Eating symptomatology as cause and consequence of women’s responses

Convener & Chair: H. DITTMAR, University of Sussex.

Convener: E. HALLIWELL, University of the West of England.

Discussant: N. RUMSEY, University of the West of England.

Aims: This symposium brings together four sets of empirical work, using different methodologies (experimental, survey, qualitative), which examine links between restrained eating and women’s affective responses, particularly in the context of media exposure. It aims to highlight commonalities and differences in findings concerning the nature of this link, and factors that may act as moderators of the relationship. The emphasis on the role of media images and media messages is designed to highlight the socio-cultural context of women’s eating behaviour, particularly in terms of thoughts and feelings about their own body, such as body dissatisfaction or internalisation of the thin beauty ideal for women. Different approaches to the measurement of restrained eating are examined and evaluated. Finally, the symposium aims to highlight the complexity of restrained eating, and to emphasise the significance of variables that can improve our understanding, in particular variables related to women’s self-concept.

Rationale: Restrained eating, that is attempting to eat less, has been the focus of much research, particularly as restraint theory postulates that it promotes eating disorders and overeating. Prolonged periods of restraint result in persistent hunger, and may also lead to abnormal patterns of normal internal regulatory feelings of hunger and satiety. Empirical research supports this theory and indicates that restrained eating is also associated with pre-occupation with food and lowered mood (Dittmar et al., 1999). Restrained eating is more common amongst women than men (Dewberry & Ussher, 1994) and it continues to be of concern to women throughout the lifespan. For example, Rand and Kuldaus’s (1991) investigation of 2000 Florida residents indicated that levels of restraint were relatively stable and only decreased amongst women over 75. Furthermore, restrained eating is common even when there is no objective need to lose weight (Neumark-Sztainer et al., 1999).

Summary: The present symposium has two major themes: (1) the link between restrained eating and women’s affective responses, including exposure to thin media and to their own bodies; and (2) the use of a multi-method approach to the measurement of restrained eating.

(1) Restrained eating and affect. The role of affect for understanding restrained eating is a major conceptual theme that ties all four presentations together. The first paper (Dittmar et al.) tests a model in which restrained eating is associated with exposure to thin–ideal media through two sets of mediating variables: women’s affective evaluations of their bodies (body esteem, weight-related anxiety), but also through thinnness cognitions that are related to their self-concept. The second paper reports an exposure experiment (Kingston et al.) in which restrained eating is examined as a moderator of women’s responses to ideal models typically used in advertising. When exposed to ultra-thin models, highly restrained eaters may experience positive affect if they view these models as self-improvement ideals, but feel threatened by average-sized models. The opposite affective pattern was found in women low in restraint. The third paper (Halliwell et al.) examines links between affect and eating behaviour through women’s daily diaries, recording food, mood, and body image experiences. The fourth paper presents an examination of links over time, as well as daily fluctuations. The final paper (Coughlan & Yeomans) uses an experimental design to examine restrained eating as both cause and consequence of women’s responses to media–manipulation in the form of emotionally-charged film material. They observed actual eating behaviour unobtrusively, and found that links between affect and restrained eating are more complex that previously assumed.

(2) Measurement of restrained eating. The four presentations in the symposium present a progression from the use of questionnaire-based self-report measures – including intention to diet and validated restrained eating scales (Dittmar et al.; Kingston et al.) – through daily reports of eating behaviour in diaries (Coughlan & Yeomans) to actual, observed eating behaviour in an experimental setting (Coughlan & Yeomans).

Implications: The symposium has a number of theoretical and methodological implications. The link between affect and restraint eating is best understood by also taking self-concept variables into account, such as thinness cognitions or thickness ideals. Different measurement approaches highlight the complexity of restraint eating, which may need to be studied in the context of other dimensions of women’s eating behaviour. Finally, a multi-method approach appears to offer an advance in studies of eating symptomatology, including restrained eating.
Associations between media exposure and restrained eating: Testing a model with thinness-related cognitions and body-focused affect as mediators of the link between media and disordered eating

H. DITTMAR, University of Sussex, E. HALLIWELL, L. KINGSTON, University of the West of England & E. COUGHLAN, University of Sussex.

Background: There is consistent empirical evidence that media exposure has a negative effect on women’s body image. However, the links between media exposure and disordered eating are complex and may involve mediators such as thinness-related cognitions. This study aimed to investigate the role of thinness-related cognitions as mediating factors in the relationship between media exposure and disordered eating.

Method: A prospective study was conducted with a sample of young women. Participants were randomly assigned to one of three film conditions: a neutral film, a frightening film, or a film that induced positive mood. Body image concerns, mood, dietary restrictions, and eating tendencies were measured before and after the film. Additionally, thinness-related cognitions were assessed.

Findings: The results showed that media exposure led to increased body image concerns and mood disturbances in the neutral and frightening film conditions. However, the effects were moderated by thinness-related cognitions, with restrained eaters showing more negative responses to the neutral film and less to the frightening film.

Discussion: The findings support the importance of thinness-related cognitions as mediators in the relationship between media exposure and disordered eating. They also highlight the need for targeted interventions that address thinness-related cognitions to prevent negative outcomes among vulnerable populations.

The impact of dietary restraint on daily fluctuations in body image experiences after consuming food

E. HALLIWELL & S. PURGAUS, University of the West of England.

Background: Dietary restraint is often prompted by body dissatisfaction (e.g., Stice & Agras, 1998), and there is considerable evidence that restrained eating has negative outcomes including overeating, preoccupation with food, lowered mood, weight fluctuations and the development of both eating disorders and obesity (see Ogden, 2003). However, the impact of restrained eating on daily fluctuations in body image experiences and to what extent these outcomes are moderated by the type of restraint (self-enhancement vs. self-suppression) is not well understood.

Method: The study involved 40 college women who were asked to complete a daily diary for one week, submitting a questionnaire each day. The questionnaire included measures of body image concerns, mood, dietary restrictions, and eating tendencies. Additionally, thinness-related cognitions were assessed.

Findings: The results showed that dietary restraint was related to daily fluctuations in body image experiences. Specifically, restrained eaters who attempted to self-enhance after viewing thin models showed increased body image concerns and mood disturbances compared to self-suppressed restrained eaters. These findings highlight the importance of thinness-related cognitions in the relationship between media exposure and disordered eating.

Discussion: The findings support the importance of thinness-related cognitions as mediators in the relationship between media exposure and disordered eating. They also highlight the need for targeted interventions that address thinness-related cognitions to prevent negative outcomes among vulnerable populations.
Coming to terms with disability: Mothers’ reactions to their child’s diagnosis of cerebral palsy
A. CHESHIRE, Coventry University.

Background: Parents of children with disabilities have been at particular risk from psychological distress around the time of their child’s diagnosis. The aim of this study was to produce a detailed account of parents’ experiences and feelings of having their child diagnosed with cerebral palsy (CP).

Methods: Semi-structured interviews were conducted with mothers and fathers, and a focus group was also conducted. The interviews were transcribed and analysed using interpretative phenomenological analysis.

Findings: A ‘diagnosis journey’ is described. This journey starts when their child begins to have problems, and ends when they reflect on what their child’s childhood was like. The journey can be divided into four stages: (1) the diagnosis, (2) the emotional reaction to the diagnosis, (3) coping strategies, and (4) adjustment. Mothers described their search for a diagnosis for their child, their shock when they finally receive one, their initial emotional reactions, their coping strategies, and their journey towards adjustment.

Discussion: The purpose of this study was to describe the process of coming to terms with disability. The findings suggest that the process of coming to terms with disability is a complex and multifaceted one. The findings also suggest that the process of coming to terms with disability is not linear, but rather a series of stages that are not always sequential.

Improving the psychological well-being of parents of children with cerebral palsy
J.H. BARLOW, Coventry University.

Background: Parents caring for children with cerebral palsy (CP) may be at risk of psychological distress and may lack confidence in their own ability to manage their child’s condition. The Training and Support Programme was developed to address these needs by providing parents with a simple massage skill that they can use with their children in the home environment. The purpose of this study was to evaluate the impact of the programme on parental psychological well-being, stress, self-efficacy, and perceptions of children’s functioning.

Method: A total of 70 parents attended the programme with their children. Data were collected by self-administered questionnaires, based on semi-structured interviews with parents at two points in time (i.e. before the Programme and at four-month follow-up).

Findings: At four-month follow-up there were significant reductions in parental anxiety mood (p=0.028) and perceived stress (p=0.016), and a significant increase in satisfaction with life (p=0.007) and parental self-efficacy for managing children’s psychosocial well-being (p=0.041). Changes on depression mood and generalised self-efficacy were not significant. There were significant improvements in parental perceptions of children’s sleeping (p=0.001), mobility (p=0.001) and eating (p=0.007).

Discussion: The improvements on parents’ well-being and children’s functioning are encouraging. A randomised, controlled study is necessary to determine whether changes are due to attending the Programme.

‘More smiles and more hugs’: The value of a Training and Support Programme for parents caring for children with cerebral palsy
L.A. POWELL, Coventry University.

Background: The purpose of this study was to evaluate the Training and Support Programme (TSP) among parents caring for children with cerebral palsy in terms of perceptions of children’s well-being and functioning using qualitative methods.

Method: 72 parents (67 mothers and five fathers, mean age 39 years) completed the TSP with their children (mean age six years). Parents had a main diagnosis of cerebral palsy, four had global developmental delay and 32 had co-morbid conditions. Mean age at diagnosis was 10 months. Data were collected by Home Record Sheets completed by parents during the TSP and telephone interviews with a sub-sample of 10 parents. Data were analysed using thematic content analysis.

Findings: Mobility was the most frequent problem reported by parents (95 per cent) followed by verbal communication (67 per cent), sleep (64 per cent), bowel problems (62 per cent) and physical growth (52 per cent). Most parents reported improvements in children’s calmness (82 per cent), sleep (76 per cent), bowel movements (67 per cent), verbal (56 per cent) and non-verbal (46 per cent) communication, alertness (42 per cent), mobility (38 per cent), feeding (38 per cent), physical growth (24 per cent), and bladder control (16 per cent). Additional improvements reported during the interviews included children’s breathing, musculoskeletal functioning, emotional well-being and behaviour. Children appeared happier (i.e. lots more smiles), calmer, less agitated, less frustrated, more alert and more content. Parents felt an enhanced sense of closeness with their child on completion of the TSP.

Discussion: The wealth of changes reported by parents regarding their children’s well-being and functioning were more extensive than might be expected from standard measures and certainly appear to warrant further systematic investigation.

Symposium: How important is ‘intentional mode’ for predicting and changing health behaviour?

Convener & Chair: C. ARMITAGE, University of Sheffield.

Convenor: P. SHEERAN, University of Aberdeen.

Discussant: D. JOHNSTON, University of Aberdeen.

Aims: Theoretical integration of different approaches to predicting health behaviour (e.g. theory of planned behaviour, self-regulation, action control).

Practical recommendations for changing health behaviour.
Methodological discussion as to how best to test and analyse these types of data.
General discussion of the future for work in this area.

Rationale: Behavioural intentions represent a summary of people’s motivation to act and have exerted a powerful influence on research in health psychology. Until relatively recently, behavioural intentions were one of the principal dependent variables in health psychology and were frequently used as proxies for actual behaviour. In recent years, however, there has been a shift toward using behaviour as a dependent variable and understanding when intentions are important determinants of people’s behaviour and whether there are alternative important predictors of health behaviour and health habits change. This symposium is timely because it questions whether ‘intentional mode’ is sufficient to effectively predict and change health behaviour.

Summary: Until relatively recently, behavioural intentions were one of the principal dependent variables in health psychology and were frequently used as proxies for actual behaviour. However, there has now been a shift toward adopting behaviour as the dependent variable and in understanding when intentions are important determinants of people’s behaviour and whether there are alternative important predictors of health behaviour and health behaviour change.
the three preceding presentations, changing intentions does change behaviour but that the intentional control of behaviour is a great deal more limited than correlational studies have indicated.

Motivational and volitional processes in smoking
C.J. ARMITAGE, University of Sheffield.

Background: Smoking represents one of the most serious threats to health, yet research to date has largely been interpreted as showing that smoking is habitual and is determined primarily by non-modifiable cognitions. In fact prior research shows that intentions at least partially mediate the effects of interventions to reduce smoking. This study tests the ability of an augmented theory of planned behaviour to mediate the past behaviour-future behaviour relationship and the effectiveness of implementation intentions to promote behaviour change in this domain.

Methods: Smokers (N=90) recruited from the general population were randomised to either an experimental (implementation intention formation) or control condition. All participants completed Fagerstrom’s revised tolerance questionnaire and standard theory of planned behaviour measures at baseline and follow-up two months post-baseline. The data were analysed using multiple regression, MANOVA and MANOVA.

Findings: Results showed that: (a) intention was a potent mediator of the past behaviour-future behaviour relationship, \( r_{	ext{intention, past}}^2 = 0.21, p<0.05 \); (b) past behaviour was a predictor of intention in the intervention group in contrast to no significant changes in the control group, \( r_{	ext{intention, past}}^2 = 0.12, p<0.05 \).

Discussion: The findings demonstrate that both motivational and volitional processes need to be harnessed in order to enhance the effectiveness of smoking cessation programmes. However, further work is required to establish whether the changes in perceived control attributable to the intervention are due to, or are a consequence of, the mastery experiences accompanying successful behaviour change.

Behaviour regulation, self-regulation and adolescent cigarette smoking
A. RIVS, University of Derby, P. SHEERAN & C.J. ARMITAGE, University of Sheffield.

Background: Four modes of behaviour regulation have been theorised: the intentional mode (Ajzen, 1991), the habitual mode (Becker, 1974; Ouellette & Wood, 1998), the reactive mode (Gibbons et al., 1998) and automatic stereotype activation (Bargh & Chartrand, 1994). These two distinct modes of self-regulation have been identified – assessment and locomotion. The present study examined the importance of these different modes of behaviour-regulation and self-regulation for adolescents’ cigarette smoking, and investigated the role of self-regulatory mode in moderating cognitive-behaviour relations. Methods: 136 secondary school pupils voluntarily completed the Regulatory Mode Questionnaire (Kruljski et al., 2000), and measures of intentions, perceived behavioural control, willingness and past behaviour in relation to cigarette smoking. Two weeks later they reported their behaviour.

Findings: Multiple regression analyses showed that: (a) willingness, prototype perception, past behaviour, and the interaction between assessment and past behaviour accounted for 65 per cent of the variance; (b) assessment and past behaviour accounted for 31 per cent of the variance; (c) the assessment mode of self-regulation mediated the past behaviour-future behaviour relationship, whereas past behaviour had less impact on future behaviour at high levels of assessment.

Discussion: The findings suggest that: (a) adolescents’ smoking is controlled by automatic, habitual and reactive processes; and (b) adolescent smoking cessation programmes should ensure that images of smokers are negative, reduce adolescents’ willingness to smoke, and encourage adolescents to be more critical of themselves and their behaviour.

Action control in health behaviour change
F.F. SNIETHOTA, University of Aberdeen.

Background: Changing behaviour requires intentions and action control. Based on self-regulation theory and decision-making negative feedback control, in particular self-monitoring, awareness of standards, comparisons between standards and actual behaviour and regulatory effort in reducing discrepancies between behaviour and standards was tested for his ability to predict changes over and above motivational measures and action planning in three behaviour domains.

Method: Three longitudinal studies were conducted to investigate the role of action control in lifestyle changes such as the uptake of physical exercise (Study 1, N=302), dental flossing in young adults (Study 2, N=166) and binge drinking in university students (Study 3, N=95). All studies measured past behaviour, intentions, action planning and self-reported behaviour. Study 2 also included objective measures of flossing.

Findings: Action control was a powerful predictor in all three studies and accounted for substantial additional variance over and above past behaviour, intentions and action planning. The influence of past behaviour and intentions were mediated by action control (10%–15%).

Discussion: In the course of lifestyle changes, intentions and plans must be translated into action. Cybernetic models of control provide a heuristic basis and an understanding of the processes that actually lead to action implementation. The introduced measure captures some of the processes involved in feedback control in behaviour specific rather than a dispositional way. These measure of self-monitoring, awareness of standards and efforts turns out to be a powerful predictor of behaviour change.

Do interventions that change intentions change behaviour?
Effect size and moderator analyses
P. SHEERAN, University of Sheffield & T.L. WEBB, University of Manchester.

Background: Intentions are construed as the most important predictor of behavioural performance in several models of health behaviour (e.g. the theory of planned behaviour, protection motivation theory). Meta-analyses of prospective correlational studies support this view, but there are limitations to this research in that intentions have a large impact on behaviour. However, correlational designs do not afford valid estimates of intention-behaviour consistency. An accurate measure of the strength of intention on behaviour requires: (a) random assignment of participants to an intervention that significantly increases the strength of respective intentions relative to a control condition; and (b) comparison of subsequent behaviour. The present research used meta-analysis to quantify effects on intention in studies that satisfied these criteria, and examined a range of conceptual and methodological factors as moderators of these effects.

Methods: Literature searches identified 40 experimental tests could be included in the review. Coding of effect sizes and moderator variables was reliable.

Findings: Interventions that produced statistically significant differences in intention scores between intervention and control conditions engendered only a small difference in subsequent behaviour, \( d=0.28 \). Non-student samples and longer time intervals both attenuated behavioural effects. Although practice effects and control treatments did not affect all levels of impact on behaviour, more objective indices indicated that greater control was associated with larger effects on behaviour. Behaviours that were performed frequently (e.g. tooth brushing) and therefore interventions were more likely to come under habitual control, were also more difficult to change.

Discussion: Changing intentions does change behaviour, however, intentional control of behaviour is a great deal more limited than correlational studies have indicated.

WORKSHOP
How do we know if we’re measuring the theoretical constructs we want to measure? A workshop on Discriminant Validity


Purpose: To provide an interactive demonstration of the use of discriminant content validation.

Objectives: 1. To clarify the problem of construct validation in measurement.
2. To propose DCV as a possible solution to the measurement problem.
3. To actively illustrate the method of DCV.
4. To provide practical examples of its use.

Rationale: The method of DCV has recently been developed to enable an assessment of the overlap between measures of latent constructs. The method process matches measurement items to the theoretical definition of the construct the item aims to measure. DCV enables the development and selection of measures that are tightly constrained by theory, DCV, therefore, enables the development of pure measures of latent constructs required for the testing of theory uncontaminated by measurement confound.

Social cognition models are frequently employed in the prediction of health behaviour. Consequently, the potential overlap between measures of constructs within the same model and redundancy of constructs within the same model has been highlighted. The DCV method can be used to address both the problem of overlap between measures of latent constructs and construct redundancy. The workshop will illustrate the application of DCV to both types of problem.

Activities:
1. Introduction to construct overlap and redundancy, potential solutions and DCV, rationale and objectives for the workshop (10 min).
2. Individual task to enable workshop participants to experience the process (15 min).
3. A detailed description of the method of data collection, analysis, and interpretation (15 min).
4. A small group consensus task using DCV to classify constructs and provide confidence in the DCV analysis (15 min).
5. Illustrations of empirical studies carried out using DCV (with group participation) (10 min).
6. Interactive discussion about DCV, potential benefits and limitations (15 min).

Description of the intended participants: This workshop would be suitable for people who use construct models or those assessing measurement development or construct overlap or redundancy. The maximum number of participants for the workshop: 40.

INDEPENDENT PAPERS
Promoting MMR vaccination: A case of message framing

Background: Applying prospect theory to health communication, Rothman and Salovey (1997) predict that messages highlighting potential gains ‘of performing a behaviour would facilitate promotion behaviours. Alternatively, messages emphasizing potential losses ‘of not performing the behaviour would be beneficial to the promotion of detection behaviours. Results from two studies are reported.

Methods: Study 1 used a between subjects design to test the effectiveness of a gain versus loss-framed message in promoting Mumps, Measles and Rubella (MMR) immunisation intentions (a prevention behaviour) among 140 women. Participants received a recommendation to receive the vaccine framed as either a gain or loss containing information on Mumps, Measles and Rubella and the MMR vaccine and completed questionnaire measures. Risk perception and anxiety were measured before the intervention and the theory
of planned behaviour (TPB) variables after the intervention.

Findings: Multivariate analysis revealed a loss frame advantage. The loss-framed message led to greater intentions to vaccinate compared to the gain-framed message. This effect was neither moderated by nor interacted with by TPB variables. Study 2 (N=110) compared MMR vaccination behaviour with other prevention behaviours (e.g. using sunscreen; wearing a seatbelt) on perceptions of risk. MMR was rated as significantly more risky than other prevention behaviours.

Conclusion: These findings are consistent with prospect theory in that people become more risk taking in response to loss framed messages when the outcomes of the behaviour are perceived to be uncertain. Moreover, these results imply that the prevention versus detection distinction should be revisited.

Can the theory of planned behaviour predict the maintenance of physical activity? A survival analysis

C.J. ARMITAGE, University of Sheffield.

Background: Research into the maintenance of health behaviour is under-researched in comparison with research into the initiation of health behaviour despite the fact that health habits and health benefits take some time to accrue. This paper describes the ability of the theory of planned behaviour to predict actual participation in physical activity and explored the development of physical activity habits in a 12-week longitudinal study.

Methods: People enrolling in a gymnasium (N=94) completed standard theory of planned behaviour measures and baseline post-intervention; behaviour was monitored objectively in the intervening period. The data were analysed using both standard and repeatable events survival analysis.

Findings: Results showed that: (a) perceived behavioural control was significantly predictive of intentions and actual behaviour (β=0.38, p<0.001); (b) successful exercise habits, but this was not the first five weeks of the study (F(5,191)=4.62, p<0.001); and (c) successful prior performance enhanced predictors of behavioural control (β=0.49, p<0.05).

Discussion: The perceived behavioural control component of the theory of planned behaviour predicts both the initiation and maintenance of physical activity, and sheds light on the likely genesis of exercise habits. Further research that tests these ideas in intervention studies and in further health behaviours is required.

Psychological adjustment to lower limb amputation

R. ATHERTON & N. ROBERTSON, University of Leicester.

Background: Lower limb amputation is a relatively frequent sequel of chronic diseases such as peripheral vascular disease, and trauma. Despite advances in medical treatments, rates of amputation have shown no diminution and are likely to increase, with aging population profiles and increasing incidence of diabetes. Whilst clinical reports indicate depressive symptoms are common in this population, little attention has been paid to psychological adjustment, of potential mediating variables. This study sought to determine not only prevalence of psychological morbidity, but also of interference of appearance-related beliefs and self-consciousness in understanding adjustment to amputation.

Methods: A cross-sectional survey was conducted with 67 attendees at two Artificial Limb and Appliance Centres who had experienced lower limb amputation within the last five years. Outcome measures were the Trinity Amputation and Prosthesis Experience Scales, Self-consciousness Scale and Appearance Scales Inventory.

Findings: Prevalence of anxiety and depression was found to exceed community norms. Participants reported particular difficulties with adjustments to appearance (e.g. lack of fitting, appearance with prosthesis, etc.), and those who had not returned to the domain of social adjustment. Significant positive associations were found between distress and body image vulnerability, and public self-consciousness.

Discussion: Increased and sustained levels of anxiety in this population argue for psychological morbidity to be addressed beyond an initial post-operative phase. Further research is required to explore appearance-related beliefs for those experiencing amputation argues for both assessment, and targeting of these factors, in the development of psychological interventions.

Exploring spousal carers of Huntington’s Disease patients’ perceived quality of life: Qualitative findings from a group discussion

A. AUBEELUCK & H. BUCHANAN, University of Derby.

Background: There is a paucity of research on spousal caregiving in Huntington’s Disease (HD), with only a few in-depth accounts of HD patients in order to gain an understanding of the impact of the caregiving role; and (2) to determine whether these experiences could be conceptualised in terms of identity problems as defined by Cummins (1997).

Method: We utilised six semi-directed focus groups that specifically addressed the ways in which caregiving in HD may impact upon the QoL of spousal carers. Altogether 85 hours of group materials were tape recorded and transcribed verbatim. Data were subjected to interpretative phenomenological analysis (IPA, Smith et al., 1995) in order to identify emerging themes.

Findings: Analysis of the focus group data supported the following four superordinate themes: Levels of Support; Dissatisfaction with Caregiving Role; Practical Aspects of caregiving; and Feelings of Isolation. All observed themes and sub-themes could be conceptualised in terms of QoL as defined by Cummins (1997).

Discussion: QoL for HD carers is a salient issue and is compromised in many ways. Carers often neglected their own needs as their caregiving role and the life of their HD-affected spouse. These data have been used to inform the development of HD-specific QoL measurement for use with HD spousal carers.

Attitudes towards and beliefs about falls prevention interventions in seven European countries: A framework analysis

E.L. BISHOP, L. YARDLEY, University of Southampton, N. BEYER, Copenhagen University Hospital, K. HAUSER, University of Heidelberg, G. KEMPEN, Maastricht University, L. LAUSANNE & C. TODD, University of Manchester.

Background: The aim was to determine which attitudes and beliefs influence uptake of any adherence to falls interventions across community-dwelling older people living in seven different EC countries.

Methods: Semi-structured interviews (based on the Theory of Planned Behaviour) were carried out with 73 community-dwelling older people (from Denmark, Belgium, Greece, Italy, Switzerland and the UK). Participants were recruited to provide a range of experiences related to falls interventions (people who had/had not fallen, people who had/not taken up or adhered to interventions). Framework analysis (Ritchie & Spencer, 2004) was used to identify the influences on uptake and adherence to falls prevention interventions.

Findings: Factors which encouraged intervention uptake were: (e.g. physical, psychological, but rarely related to falls prevention), predispositions (e.g. past experience), and triggers (e.g. offer of transport). Factors which discouraged intervention uptake included having concerns about the intervention (e.g. ability to take part), lack of motivation or interest, and practical difficulties. Factors which discouraged adherence were negative effects of the intervention (e.g. on identity) and barriers (e.g. health status).

Discussion: There is consistency across European countries in the factors that influence uptake and adherence to falls prevention interventions. The presentation of such interventions needs to take into account older peoples’ attitudes and beliefs in order to encourage uptake and adherence.

The difficulties of caring for a child with Juvenile Huntington’s Disease: An interpretative phenomenological analysis

H.M. BREWER, Birkbeck College, Huntington’s Disease Association, J.A. SMITH, Birkbeck College, O. QUARRELL, Sheffield Children’s Hospital, C. STANLEY & N. GLENDINNING, Huntington’s Disease Association.

Background: The aim of this study is to examine the experiences of parents of children affected by Juvenile Huntington’s Disease (JHD) and to identify the psychosocial needs of these families.

Methods: Semi-structured interviews were carried out with 12 primary carers of a young person with JHD. The interviews explored their experiences of caring for a child with JHD and their perceptions of support and services available. The interviews were transcribed verbatim and analysed using interpretative phenomenological analysis (IPA).

Findings: One of the main themes to emerge is the isolation that families feel. This sense of isolation results from social comparison with a number of different groups (Huntington’s Disease, teenagers without a health problem) and a sense of JHD as being different. Children with JHD and their families are therefore unable to normalise their experiences. This sense of isolation is exacerbated by a general lack of knowledge and understanding and by the reactions of other people. Carers also define what constitutes helpful and supportive in the context of a rare, chronic condition.

Discussion: JHD is a rare condition and this study points to the psychological difficulties for families with a child with JHD. The results of the study will also inform service provision for families affected by the condition and help policy formulation in the area. The findings are also of wider relevance to our understanding of psychological processes and difficulties in families where a child has a rare, chronic condition.

Implementation and evaluation of an intervention aimed at improving adolescent contraceptive behaviour

K.E. BROWN, Coventry University, M.A. ARDEN & K.M. HURST, Sheffield Hallam University.

Background: Relative little research attempting to address high rates of adolescent conception in the UK has involved the implementation and evaluation of social cognition based interventions. The current study aimed to evaluate the effectiveness of an intervention designed to improve two psychological constructs previously identified as key predictors of effective contraceptive use (Brown, Hurst & Arden, 2007).

Methods: Participants (N=207 14- to 19-year-olds) completed baseline measures of their contraceptive behaviour within the last six months, and completed measures of the ability to plan behaviour, self-efficacy and anticipated regret. One week later they received a 20-minute classroom-based intervention, of one of four conditions (control, self-efficacy, anticipated regret or self-efficacy combined with anticipated regret). Measures of psychological constructs were repeated immediately after intervention completion. One month later, participants completed measures of their contraceptive behaviour from the preceding month and measures of the psychological constructs for a third time.

Findings: MANOVA based on comparison of baseline and immediate post-intervention data, suggests the initial impact of the intervention has been to improve measures associated with effective contraception taking (p<0.01) and using contraceptives (p<0.01). Further analyses suggest that it is anticipated regret rather than self-efficacy that plays a significant role in increasing intention to use contraceptives (p=0.05).

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Discussion: These results indicate that anticipated regret may be an important psychological construct used by students to develop future sex education and health promotion materials for adolescents in the UK. The findings also have wider implications for expanding the theory of planned behaviour to predict contraceptive use (cf. Caron, Bodin, Östlund & Lambert, 2004).

Behavioural response to stress – tend-and-befriend versus fight-or-flight: Gender differences in university students

C. CAMPBELL & S. TURTON, University of Teeside.

Background: Taylor, Klein, Lewis, Grunewald, Gurung and Udpegga (2000) proposed that female behavioural responses to stress are better characterised more tend-and-befriend than the more established fight-or-flight. This study aimed to empirically test this claim in a sample of university students.

Methods: Design: Q-methodology was adopted for this exploratory analysis.

Participants: 40 students from the University of Teeside were recruited. The sample included 18 males and 22 females aged 18- to 50-years-old (mean 23.9 years, SD 7.5 years).

Measures: Hybrid sets of items was generated containing both naturalistic items (collected during a series of 11 semi-structured interviews) and items derived from the literature. Literature items were based on both the Taylor et al. paper and a wider literature review. The final Q-set comprised 61 statements.

Analysis: Primal components factor analysis was used to extract groupings of participants displaying similar responses to stress.

Findings: Four factors were extracted, accounting for 53.5 per cent of the total variance, with 29 participants loading significantly and exclusively onto one of the four possible factors. The four factors were a fight-flight, a social-support, a tend-and-befriend stress responses. Analysis of the gender distribution of participants indicated that females were statistically significantly more likely to portray a tend-and-befriend response to stress compared to males ($z=2.826, p<0.01$).

Discussion: The findings support the model proposed by Taylor et al. If found to be a universal phenomenon, then the tend-and-befriend response could have a major impact on other areas of health psychological research (e.g. health seeking behaviours).

Using the theory of planned behaviour/ theory of reasoned action to predict screening attendance: A meta-analysis

R. COOKE, Aston University. T. FRENCH, University of Birmingham.

Purpose: To quantify cognition-behaviour and cognition-intention relations in studies which have applied the theory of planned behaviour (TPB) or theory of reasoned action (TRA) to explain variation in attendance for health screening.

Background & Methods: A review of previous research identified 19 studies that have used either the TPB or TRA to predict attendance intentions. Studies have been conducted in the following behavioural contexts – breast screening, cervical screening, colorectal screening, prenatal screening, genetic testing and health check attendance. However, because findings from these studies are contradictory, meta-analysis is required to precisely determine effect sizes.

Findings: Using Cohen’s (1992) guidelines for interpreting sample-weighted average correlations analyses found a large correlation between attitudes and intentions ($r=0.55$) and medium correlations between subjective norms and intentions ($r=0.49$), between perceived behavioural control (PBC) and intentions ($r=0.37$), and between a medium sized correlation between intentions and behaviour ($r=0.37$), and a small sized correlation between PBC and behaviour ($r=0.18$).

Discussion: This study demonstrates that attitudes are the strongest predictors of intention to attend for screening in research to date. Thus, interventions designed to increase screening uptake and modify attributes to screening to increase screening intentions. Intentions were a stronger predictor of attendance behaviour than PBC, suggesting that motivation to attend a screening should be targeted indepedently to subjective health in this patient sample and neither did breathlessness, oedema, or angina.

Conclusions: Social and psychological factors are associated with SAH, supporting the view of Grundy and Sloggett (2003). The finding is extended to HF.

Relationship of forming specific implementation intentions to attitudes and adherence with exercise therapy

M. DONOVAN-HALL & L. YAROLEY, University of Southampton.

Participants: In a study of plan for the applicability, a subset of 132 participants (taken from 23 to 91 years) returned their therapy booklets. These participants were categorised into three groups, those who made a specific time plan (e.g. 8:00am and 6:00pm) ($N=60$), those that made a vague plan (e.g. AM or PM) ($N=41$), and those that made no plan ($N=31$). Participants' Theory of Planned Behaviour beliefs were assessed pre- and post-therapy on a seven-point bipolar scale (+3 to +1) using three items for each TPB component, and reported adherence to the therapy was the outcome behaviour.

Analysis: GLM analyses of post therapy scores indicated that participants who made a specific time plan had significantly higher adherence and perceived behaviour control scores post-therapy than participants who had made no plan or a vague plan.

Discussion: These findings suggest that encouraging patients to make a specific time plan may lead to increased levels of adherence and, therefore, may serve as an important clinical intervention for similar self management regimens.

Getting the timing right. Is a balanced time perspective (BTP) good for you?

L. DRAKE, E. DUNCAN, C. AHERNETHY, C. HENRY & F. SUTHERLAND, Glasgow, Caledonian University.

Findings on time perspective are intriguing. A future time perspective is associated with decreased psychopathology and positively associated with health-promoting behaviour. A present time perspective has been associated with various risk-taking behaviours. Dominant use of one time frame and under-use of another may have detrimental effects on health, happiness and well-being. However, a BTP, the ability to switch between past, present and future time frames is hypothesised to be the ideal to optimise happiness and well-being. As yet no study has sought to provide a BTP profile analysis. This study sought to operationalise the BTP construct using the Zimbardo Time Perspective Inventory in relation to the Satisfaction with Life Scale and Attention Awareness Scale on a random sample of 260 participants from the west of Scotland. Background variables included amount of exercise each week. BTP was rare in this sample (13) but was associated with significantly more subjective happiness ($r=0.47$, $p<0.01$) and well-being ($r=0.18$, $p<0.01$).

Discussion: The findings show that patients experiencing a significant level of depression and anxiety are more likely to report a balanced time perspective.
**Women's experiences of decision making about mode of delivery after previous caesarean section**

C.L. EMMETT, A.R.G. SHAW, A.A. MONTGOMERY, University of Bristol & D. MURPHY, University of Dundee.

Background: Having children is a significant life-stage at which parents may be asked to make important health-related decisions. An example of such a decision is that faced by pregnant women who have had a previous caesarean section (CS). Within current NHS guidelines these women are allowed to choose between attempted vaginal birth or elective repeat CS. This study aims to explore women's experiences of making this decision.

Methods: Qualitative research methods were used. Semi-structured interviews were conducted with 21 women aged 18 to 42 years, who had given birth within the previous eight months and whose next oldest child was delivered by CS. The interviews were audio-taped and transcribed and the data analysed using the Framework approach. This involved the development of a coding framework, which was then used for detailed data coding and drawing out of salient themes.

Findings: The analysis revealed that quicker recovery was a strong influence on women attempting vaginal birth. For elective CS, a good previous experience of CS and ability to plan the birth were important factors. Most women reported making their own decision, but often without provision of comprehensive information about the risks and benefits of each delivery method. Many health care professionals were supportive whatever delivery they chose, although some expressed surprise that the reasons for their choice were not discussed in detail. Discussion: This study identifies reasons why women choose a particular mode of delivery and highlights a need to make more comprehensive risk and benefit information available to women making this decision.

**Exposure to very low concentrations of an everyday odour predicts respiratory symptom reporting**

E. FEAGUSON, J. WARD, H.J. CASSADAY, University of Nottingham & J.C. COCKER, Health and Safety Laboratory (HSL), Buxton.

Background: Odours may induce ill-health because they are toxic at particular concentrations or through classical conditioning or sensitisation to activate physiological responses. Several recent studies of workers report that quicker recovery was a strong influence on women attempting vaginal birth. For elective CS, a good previous experience of CS and ability to plan the birth were important factors. Most women reported making their own decision, but often without provision of comprehensive information about the risks and benefits of each delivery method. Many health care professionals were supportive whatever delivery they chose, although some expressed surprise that the reasons for their choice were not discussed in detail. Discussion: This study identifies reasons why women choose a particular mode of delivery and highlights a need to make more comprehensive risk and benefit information available to women making this decision.

Methods: A double-blind exposure study was conducted, in which five participants were exposed to toluene at two parts per million for 15 minutes in a controlled atmosphere chamber. Seven control participants entered the atmosphere chamber but were not exposed. All were healthy (medically assessed prior to the study and examined by a physician twice on the day) and had completed a series of personality measures 14 months previously. Both prior to and after entering the chamber all participants had 5ml of venous blood drawn (for cytokines: IL-6) and provided an assessment of symptoms. Participants indicated whether they had detected an odour in the chamber.

Findings: The results showed that participants were unable to detect whether the odour was present. Half of those exposed to the odour reported an increase in respiratory symptoms after exposure (p=0.016). There was no significant change in symptom reporting for the unexposed controls, the effects not being influenced by individual differences and there were no significant effects on IL-6.

Conclusions: The results indicate that an everyday odour may influence breathing, symptom reporting, independent of awareness, cytokine activity or personality.

**The development of the clinical practice guidelines for the psychosocial care of adults with cancer**

J. FLETCHER, National Cancer Control Initiative, Australia; J. TURNER, Queensland Cancer Control Initiative, Australia; J. HAY, Monash University, Australia.

Background: While psychosocial issues associated with a cancer diagnosis are widely recognised, there are few resources available that provide clinicians with information on relevant evidence and recommendations about how best to support people diagnosed with cancer and their families.

Methods: With funding from the Australian Government Department of Health and Ageing, the National Breast Cancer Centre and the National Cancer Control Initiative produced a set of evidence-based clinical practice guidelines for the psychosocial care of adults with cancer and their families. The guidelines are based on comprehensive and systematic reviews of the research literature and have undergone an extensive consultation process to ensure their clinical relevance. The guidelines were developed in conjunction with a peak research body, the National Health and Medical Research Council, and launched in August 2003.

Findings: The clinical practice guidelines for the psychosocial care of adults with cancer are aimed at health all professionals who work with cancer patients and their families and predominately cover issues relating to the most commonly occurring cancers in Australia. The guidelines provide recommendations about the psychological, physical and practical aspects of care.

Discussion: The world's first evidence-based guidelines to recommend health care professionals in providing optimal psychosocial care to cancer patients and their families.

**Quality of life in an Australian sample of women with breast cancer-related lymphoedema**

J. FLETCHER, National Cancer Control Initiative, Australia; J. HAY, Monash University, Australia.

Background: Breast cancer-related lymphoedema is a debilitating condition affecting between 10 and 44 per cent of women treated for breast cancer. The upper limb swelling associated with the condition is attributable to the surgical removal or irradiation of the axillary lymph nodes and presents a significant physical and psychosocial burden for patients.

Methods: Quality of life was assessed using the Functional Assessment of Cancer Therapy (FACT-B+4) scale in a sample (N=101) of Australian women with breast cancer-related lymphoedema. The FACT-B+4 scale consists of six domains including physical, social and family well-being, emotional well-being, functional well-being, additional concerns relating to breast cancer and psychosocial well-being. The scale consists of 260 questions.

Findings: Of the 101 women sampled 40 per cent (N=40) described their lymphoedema as mild while 60 per cent (N=61) described it as moderate/severe. ANOVA results indicate that those with mild lymphoedema observe better overall quality of life and greater physical, emotional, functional and social and family well-being than those with moderate/severe lymphoedema. In addition, women with moderate/severe lymphoedema report more breast cancer concerns and have higher levels of arm morbidity compared with those with mild lymphoedema. Discussion: The impact of lymphoedema severity on quality of life is pronounced. Findings from the current study indicate that women with greater levels of lymphoedema severity have reduced quality of life on all domains of the FACT-B+4, highlighting the functional, emotional, physical and social burden experienced by women with increasing severity of breast cancer-related lymphoedema.

**Impact of predictive genetic testing for BRCA1/2 in a clinical cohort:**

Three years on

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Background: This prospective multi-centre UK study investigates the impact of predictive genetic testing for breast/ovarian cancer predisposition genes (BRCA1 and BRCA2) in a UK clinical cohort.

Methods: Assessments at baseline (pre-genetic testing) and up to three years post-test allowed the analysis of long-term consequences of testing. Participants were recruited from nine UK clinical genetics centres between 1997 and 2000. Outcome Measures: Self-reported uptake of risk management options, general mental health, cancer related concern and problems with insurance. 193/285 (70 per cent response rate) participants completed both baseline and three-year follow-up assessments.

Findings: In the three years post-testing male and female gene carriers engaged in more risk management activities than non-carriers. Female carriers reported high rates of risk reducing surgery; 43 per cent underwent oophorectomy and 34 per cent mastectomy. Twenty per cent of female carriers had mammograms compared with 47 per cent of non-carriers. Twenty-two per cent of male carriers had colorectal screening and 44 per cent prostate screening compared with 5 per cent and 19 per cent of non-carriers respectively. Seven per cent of gene carriers and 0.8 per cent of non-carriers were diagnosed with cancer. Carriers and non-carriers did not differ in quality of life, generalised or cancer specific distress. Forty per cent of female gene carriers reported difficulties with insurance.

Discussion: The results clarify issues that arise following predictive genetic testing as part of routine clinical practice. Carrier status appears to have a longer term negative impact on mental health. However, there is a need to clarify risk management among female non-carriers and reasons for insurance issues. Experienced of individuals tested for BRCA1/2 are clearly of relevance to health psychology.
A pilot of cognitive behavioural therapy (CBT) for female urinary incontinence


Background: Psychological factors have been identified in the aetiology, maintenance and psychosocial impact of urinary incontinence. Six psychological treatment studies were identified, none of which was based on cognitive behavioural therapy (CBT).

Methods: Adopting a case series design, 10 participants attended individual sessions – baseline (four sessions), treatment (four sessions) and follow-up (four sessions). Weekly self-report ratings of episodes of enuresis were addressed using a validity and Depressive Scale (HADS) and Incontinence Quality of Life (I-QoL) were administered before treatment, post-treatment and three months after treatment ended. All participants had received some previous treatment (i.e. advice regarding bladder retraining, pelvic floor muscle training or medication) and were not awaiting surgery at the time of recruitment.

Findings: There was no overall improvement in measurements of anxiety and depression for the cohort. The CBT intervention led to significantly improved incontinence-related quality of life at post-treatment and three months post-treatment, as measured by the I-QoL. The weekly rates of enuresis indicated significant improvements in bladder functioning at three months post-treatment.

Discussion: Improvements in bladder functioning occurred after a time delay which may be due to physical changes taking time. This study indicates that CBT for female urinary incontinence may be effective and requires further investigation with a larger sample, controlled for the effects of social support. Development of a CBT model is warranted.

Facing the challenges of self-management in COPD: How do people adapt to the disease and its symptoms and resulting limitations?

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Background: Physiological measures of disease status often have weak to moderate correlations with patient reported levels of health status in COPD. Individuals with mild dysfunction in health status scales have significant impairment in their health status, and vice versa. This research explores how individuals’ experience and make sense of the challenges imposed by the physical limitations experienced because of COPD, in an attempt to explain some of the variability in the impact of this condition.

Method: 25 in-depth, one-to-one, semi-structured interviews were conducted with individuals (17 males) mostly aged between 60 and 80, who had moderate to very severe COPD. Key themes and emergent questions were identified through a systematic qualitative framework analysis of transcripts.

Findings: Results showed that living with COPD involves not only making the necessary physical changes to life and daily activities, but that individuals employ a variety of social and psychological resources to adapt to the challenges faced. These responses may be either adaptive or maladaptive in terms of how people manage their disease and its symptoms. The overall impact that COPD imposes appeared to be more strongly related to these personal responses to the condition than to the degree of lung function.

Discussion: Exploring the factors that influence individual responses to COPD can help to explain the lack of strength in the relationship between lung function and health status. Understanding personal strategies that individuals use and its symptoms could be useful to tailor effective self-management interventions.

Relations between dieting, food beliefs and magical thinking in adolescence

D. GILES, Coventry University & J. MALTBY, University of Leicester.

Background: The high prevalence of dieting among adolescents is partly due to unrealistic beliefs about the effect of food on the body. Based on research relating obsessive-compulsive behaviour and eating ‘magical thinking’ (MT), and variants of MT like ‘thought-shape fusion’ (e.g. Shafrazi & Robinson, 2004), it was hypothesised that there is a significant association between MT, dieting beliefs, and self-esteem beliefs about food between the ages of 12 and 15.

Methods: 319 schoolchildren from the North of England aged 12-13 completed a series of measures including a measure of MT specifically designed for children and adolescents (the Magical Thinking Scale, MSTX, Study 2), the Children’s Eating Attitudes Test (Maloney, 1989), and Strong and Huon’s (1997) Dieting Status Measure. The data were analysed using hierarchical multiple regression with eating attitudes and dieting status as criterion variables.

Findings: MT comprises two subscales, ‘thought’ and ‘action’, and both accounted for significant amounts of variance in the criterion variables (adjusted R^2=0.13 for eating attitudes and 0.11 for dieting, both significant at p<0.001). Gender was also found to be a significant predictor of dieting (females rather than males; R^2=0.2, p<0.01), but it was not related to eating attitudes.

Discussion: More than half of adolescents’ decision to diet may be partly explained by irrational beliefs about causation and the ‘illusion of control’ (Bolton et al., 2002). Further, the differential findings relating to gender suggest that the association between eating and MT cannot be explained solely by social or cultural influences (e.g. peer pressure). Follow-up work is in progress exploring the mediating role of body dissatisfaction on these relationships.

Factors motivating the prevention of work-related injury and ill health

An organisational perspective

K. HAFELI, C. HASLAM, University of Nottingham & R. HASLAM, Loughborough University.

Recent campaigns have highlighted the cost of work-related injury and illness to organisations, an approach based on the assumption that the economic argument is an important motive for introducing prevention measures. Attempts have also been made to encourage organisations to measure their own costs. However, limited research has established how organisations perceive these costs or whether cost is a key driver in injury and ill health prevention. Phases 1 and 2 of this research examined a qualitative approach to explore these issues. Phase 1 involved a series of focus groups with Directors and H&S Managers from a range of organisations. The final findings were used to develop a series of six studies examining the structure of physical self-esteem in young people and significant decreases in the level of physical self-esteem during adolescence (Study 4). In addition, physical self-esteem was found to discriminate between high- and low-active children in two national groups (Study 5). Finally, physical self-esteem was also found to be a significant predictor exercise and dieting behaviours and the prediction was consistent over time (Study 6).

Discussion: These data provide support for the multifactorial, hierarchical model of causality and their effects on exercise and dieting. Consideration is given to the mechanisms involved and specific strategies that may enhance self-esteem in the physical domain. Physical education teachers, sports coaches, and health psychologists interested in enhancing physical activity and healthy eating would do well to take self-esteem considerations into account when designing interventions.

From research to recommendations: Meeting men’s health care needs


Background: Analysis of health statistics has shown that although men have a shorter life expectancy than women they are less likely to visit their GP or access health care services. The main causes of death in men are circulatory diseases, cancer, liver disease and bronchitis. These are diseases that have a higher mortality rate if help is not sought early in the course of the disease. Awareness of the factors involved in decision making when the decision to seek medical help may, therefore, have the potential to reduce mortality in that it could allow services to be tailored to meet men’s needs.

Method: Data were combined from three studies involving semi-structured interviews with 94 men relating to their experiences of health, illness, and health care. Interviewees included healthy men, men with health problems and male GPs. The interviews were audiotaped and transcribed and then analysed using Interpretative Phenomenological Analysis.

Findings: This analysis identified a number of factors that influenced men’s decisions to seek medical help for health problems. While including personal and individual factors, a number of situational and social influences were also revealed, which suggested how health care policies might be changed to facilitate men’s greater use of health care services. Although some of these recommendations represent an ideal, others could be implemented easily at little expense.

Conclusion: These findings have implications for the provision of men’s health care services and recommendations are made for how health care services could be adapted to meet men’s health care needs more effectively.
Effectiveness of a theory of planned behaviour intervention to increase adherence of community mental health professionals to a national suicide prevention guideline

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Background: Adherence of health professionals to clinical guidelines is essential if the guidelines are to improve patient outcomes. Research suggests there are a number of implementation strategies that can increase adherence, yet there are no ‘magic bullets’ and attention is turning to the utility of theories in this area. This study developed a theory of planned behaviour (TPB) intervention to increase adherence of community mental health professionals to a national suicide prevention guideline requiring all service-users to receive professional contact within seven days of discharge from hospital.

Method: A TPB questionnaire was administered to mental health professionals and analysed to identify the most significant predictors of adherence (N=50). A tailored intervention consisting of small group interactive educational sessions was developed and delivered (N=50). The questions were designed before and after scores compared, and audit adherence data from the host Primary Care Trust (PCT) and a benchmark PCT, to establish effectiveness of the intervention.

Results: Multiple regressions were performed with intention and behaviour as the dependent variables. Change in adherence was significant for 58 per cent and 62 per cent of the variance in intention and behaviour respectively. Social norms was found to be the only significant predictor of intention to adhere with a standardised beta coefficient of 0.787, t=6.633, p<0.0005. Therefore, the intervention promoted positive social norms for adherence. Adherence was 95 per cent reported comparing before and after questionnaire scores and audit adherence data.

Discussion: The intervention may be more effective at increasing adherence to guidelines. This research will recommend how TPB can be used to develop interventions that are effective and cost-effective at increasing adherence of health professionals.

Improving the learning outcomes of sex education for children

M. HAY, Monash University, Australia.

Background: By senior primary school, children are able to grasp the biological concepts of reproductive anatomy and physiology, yet there is evidence that many pre-adolescents and adolescents lack comprehensive understanding, despite having received school-based sex education (SBSE). This study assessed the learning outcomes of a 5 hour curriculum on fifth and sixth graders' knowledge of human sexual maturation and reproduction.

Methods: Interview and drawing tasks were incorporated into a quasi-experimental multiple time-series design with two groups (experimental and control) and three test-points (pre-SBSE, immediately after SBSE, and 7 months after SBSE). Knowledge scores were assigned to children's interview responses using 18 measures developed for the interview.

Findings: Principal components analysis revealed two components, representing aspects of reproductive anatomy and aspects of sexual maturation. As expected, significant increases in scores from baseline were evident immediately and several months after sex education in the experimental group (age 10.89 years, SD=0.62) but not in the control group (N=73, mean age 10.50 years, SD=1.02). Whilst sex education was successful to varying degrees in increasing students' knowledge of specific reproductive components, this study showed that the majority did not have correct knowledge, nor an accurate understanding of how these aspects function in an integrated manner to create new life. This limited understanding was attributed to pedagogical practices that fall short in providing a means by which children can conceptualise the dynamic and integrated nature of reproductive biology.

Discussion: Achieving meaningful learning about reproduction for pre-adolescents is important not just because of their impending puberty, but also to build an enduring understanding of sexual processes, including conception and the sexual transmission of disease, that will sustain them through their ensuing sexual lives. A visual method which displays the integrated nature of human reproductive anatomy will be presented and discussed. The introduction of such a visual method to SBSE for children will improve the learning outcomes.

Does the priming of a specific illness schema result in an attentional information processing bias for specific illnesses?

C. HENDERSON, M.S. HAGGER & S. ORBELL, University of Essex.

Background: Studies tested a key hypothesis of L Postal et al’s (1980) common-sense model of illness representation that exposing individuals to external sources of information about an illness related to a specific illness schema in the activation of an illness-specific schema.

Methods: In Study 1, 88 undergraduate students completed a modified Stroop colour-naming task after receiving a ‘common cold’ prime or a neutral prime. In Study 2, 71 undergraduate students were presented with a prime for cardiovascular disease (CD) or a neutral prime. A mixed model ANOVA (prime condition by attentional bias for each word list with repeated measures on the second factor) was performed. Which study findings: Analysis of Study 1 revealed a significant interaction between the prime and attentional bias for cold-related words (F(1,69)=7.789, p<0.05, ETA2=0.05), with a significant main effect of the prime (F(1,88)=7.70, p<0.05, ETA2=0.08). Study 2 confirmed the hypothesis for the activation of an illness-specific schema revealing a significant interaction between the prime and attentional bias for CD-related words (F(1,69)=4.290, p<0.05, ETA2=0.05, and word type showing significant main effects (F(1,69)=4.290, p=0.05, ETA2=0.06 and F(1,69)=5.853, p<0.05, ETA2=0.08 respectively). These results confirm that participants significantly primed a cold schema and incurred a response bias for words related to that specific illness, but not for other illness-related words. In addition, intentional bias words were found to correlate significantly with explicit measures of illness representations specific to the primed illness.

Discussion: These studies provide evidence that a specific illness schema can be activated, supporting hypotheses from Lewith et al’s theory.

Positive psychological processes following illness

S. JOSEPH, University of Warwick.

Background: In recent years there has been a surge of new perspectives on psychological approaches to understanding trauma and adversity. Various terms have been coined to describe the positive changes people often report, e.g. stress-related personal growth, benefit finding, and post-traumatic growth. Health psychologists have begun to recognise the theoretical and clinical potential of a positive psychological perspective for helping people cope with illness.

Methods: Using computer search to identify studies, an overview of research findings in this newly emerging field was presented, along with recent theoretical developments, relevant to the field of health psychology and the experience of illness.

Findings: Research now indicates that illness can lead to positive changes as well as negative changes, and there are widespread positive changes in their outlook on life. Research studies are consistent in documenting positive changes following a wide variety of illnesses, and in different emotional conditions. Studies, using qualitative and quantitative methods, have shown growth in people with chronic illness (e.g. cancer), and life-threatening illness (i.e. various forms of cancer, arthritis, multiple sclerosis, and heart attack). Greater benefit finding is related to coping, cognitive, and social support variables, and that therapeutic intervention seems able to facilitate growth.

Discussion: Implications for practitioners in health psychology will be discussed with reference to methods of facilitating positive change and helping patients find meaning, as well as attendant directions for new research to develop intervention strategies with which to facilitate growth.

Does a demonstration of how a treatment works influence patients' treatment beliefs and adherence? The example of phosphate binding medication in end stage renal disease (ESRD)

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Background: The incidence of non-adherence is a major treatment problem in, and affects the efficacy of, phosphate binding medication (Christensen et al, 1997). Persistent elevated phosphate blood levels can result in metastatic calcification leading to cardiovascular disease, the most common cause of death in ESRD patients (Stone & Rabin, 1983). Results of an earlier qualitative study identified the role of patients’ illness and treatment beliefs and misconceptions in non-adherent behavior with phosphate-binding medication.

Objectives: To evaluate the feasibility of a novel intervention in increasing knowledge, modifying treatment beliefs and risk perceptions, and improving adherence.

Sample: 39 patients were included in this study, 19 intervention and 20 controls. Patients were recruited if they had been receiving renal replacement therapy for 2 or more months and were taking phosphate-binding medication.

Method: A single session intervention was performed, targeting patients’ illness and treatment beliefs. Patients were taken through a personalised leaflet giving a coherent explanation of the adverse effects of elevated phosphate levels, efficient phosphate management and medication use and were also given a demonstration of how the treatment works. Questionnaires assessing level of knowledge, patient adherence to their phosphate binders, self-report medication adherence, risk perception and general understanding were administered at baseline, post-intervention and at two more follow-up sessions in the next three to four months. Serum phosphate levels were recorded at baseline and at the time of each follow-up session.

Results: Preliminary results show a significant increase in knowledge, belief of phosphate-binding medication efficacy as a reduction in phosphate levels, efficient phosphate management and medication use and were also a given a demonstration of how the treatment works. Questionnaires assessing level of knowledge, patient adherence to their phosphate binders, self-report medication adherence, risk perception and general understanding were administered at baseline, post-intervention and at two more follow-up sessions in the next three to four months. Serum phosphate levels were recorded at baseline and at the time of each follow-up session.

Discussion: These studies demonstrate the values of using patients’ illness and treatment beliefs as basis for developing interventions to improve understanding and use of treatment in ESRD.

Augmenting a health check intervention with a theory-based leaflet

I. KELLAR, University of Brighton & C. ABRAHAM, University of Sussex.

Background: The purpose of this study was to test whether a health check augmented with a leaflet drawing upon research into the theory of planned behaviour (TPB) Azjen, 1991) and implementation intentions (Gollwitzer, 1999) would promote exercise. A prior evaluation of the health check alone, using related measures, had found no effect upon exercise.

Methods: In an experimental design, 118 students at Sussex University completed a questionnaire assessing their exercise behaviour (TPB) with the addition of a theory-based leaflet promoting exercise. A prior evaluation of the health check alone, using related measures, had found no effect upon exercise.

Findings: Controlling for baseline exercise behaviour, an ANCOVA revealed a significant difference between the intervention and control group in the number of days in the previous week...
on which they exercised at follow-up \((F(1,115)=34.366, p<0.001; M's=3.69 and 1.94, \text{respectively})\). Parents of allergic children did not account for intervention-induced behaviour change, but a median-split on baseline intention to exercise demonstrated that intention did moderate the effect of the intervention.

**Discussion:** The results show that a 'health-check plus leaflet' intervention can effect the initiation of health-related behaviours. A longitudinal study demonstrates the applicability of targeting intentions and implementation intention formation to promote exercise.

**Evaluation of the psychological impact of an activity holiday for young children with severe life threatening food allergy: A longitudinal study**

R.C. KNIBB, University of Derby

**Background:** It has been shown to affect severely affect quality of life in allergic children and their families (Avery et al., 2003; Sichener et al., 2001), however, health service provision to support the wellbeing of families is lacking (Eaton, 2004). Parents of allergic children are, therefore, turning to support groups for help and information. The Anaphylaxis Campaign is a UK-based charity, which provides support to both parents and children. It runs an activity holiday for children with severe life threatening food allergies, which is the focus of this study.

A longitudinal study was conducted to investigate the effectiveness of the activity holiday for reducing anxiety and improving quality of life for these children.

**Methods:** Measures were taken at baseline at the start of the activity holiday, at the end of the holiday, after three months and six months follow up. All children attending \((N=24)\) took part and completed food allergy specific questionnaires, a general activity questionnairy (PredMDTM), the Spence Children's Anxiety Scale (SCAS) and the Children's Health Locus of Control (CHLC) scale at all stages of the study.

**Findings:** There was a significant increase in total SCAS scores over time, indicating that children were more ready to adopt adaptive health-related behaviours than at baseline \((p<0.05)\). Anxiety levels significantly decreased from baseline \((p<0.05)\). QoL increased from baseline to three months \((p=0.05)\) as measured by the allergy specific quality of life scale. There was also a significant increase in children feeling confident in telling their friends about their food allergy after the activity holiday \((p<0.05)\).

**Discussion:** The activity holiday was of significant benefit to the children who took part and the Anaphylaxis Campaign are recommended to continue to run these holidays for children with severe food allergy. However, anxiety in parents leaving their children in the care of others, sometimes for the first time, has been noted and needs to be investigated.

**Exploring quality of life in families living with and without a food allergy: A preliminary study using a 'Photovoice' method**

R.C. KNIBB & A.Z. VALENTINE, University of Derby

**Background:** Food allergy (FA) affects approximately 2% of children (Kimber & Dearman, 2002) and has been shown to affect quality of life (QoL) in children with FA and their family (Avery et al., 2003; Sichener et al., 2001). However, research has not been conducted in inappropriate comparison groups, or non-validated QoL measures. This study aimed to assess QoL of FA parents and their primary caregiver (FA parents), compared to a healthy non-FA comparison group, using a novel methodology called 'Photovoice'.

**Methods:** FA children \((N=19)\) and control children \((N=13)\), aged eight to 11, and their respective primary caregivers \((N=16/14)\), were asked to take photographs and express their thoughts about factors that they believed enhanced and/or limited their QoL over a one-week period.

**Findings:** Content analysis identified 10 themes that influenced both child and parental QoL across conditions: activities of daily living, education/employment, environment, food/drink, health, home/garden, leisure activities, morals/values/spirituality, people and places. FA parents took significantly more photographs than control parents \((p<0.05)\) in the health and food/drink domains, particularly reflecting concerns related to food labelling. FA children took significantly more health-related photographs but fewer leisure photographs than control children \((p<0.05)\). Furthermore, FA parents reported a wider range of variability in how FA affected QoL, particularly within FA parents.

**Discussion:** Although FA allergy negatively influenced QoL for FA children, most FA parents' QoL was hindered to a greater extent. The variability in the findings highlights the need for the development of an allergy specific QoL measure, and the need to improve food labelling.

**The relationship between intentions and behaviour depends on the order in which the questions are asked by**

C. LAWRENCE & E. FERGUSON, University of Nottingham

**Background:** The theoretical underpinnings and utility of models of behavioural prediction based on intentions has been recently questioned (Ogden, 2004). One focus of this criticism is methodological, suggesting that asking participants about intentions influences how they report behaviour. The current study examined whether this intention-behaviour correlation may reflect a methodological confound. The psychometric literature on intention-behaviour support this argument. To date there is no experimental data that directly tests this hypothesis. The current study is designed to assess this directly.

**Methods:** A longitudinal design was used. At time 1, 278 participants reported their past behaviours with respect to six health behaviours (e.g. safer sex) and indicate their intentions to perform those behaviours in the future, with past behaviour assessed at time 2. Anxiety, depression, and self-efficacy were assessed at time 2 and for the participants reported their intentions first followed by their past behaviours and for the other half this was reversed. Two months later, 53 percent of the participants reported to time 3 and had each performed each of the behaviours in the intervening period.

**Findings:** Data were analysed cross-sectionally and longitudinally using moderated hierarchical regression analysis. The results showed that question order moderated the intentions-behaviour behaviour link for four of the behaviour. Effects were observed both cross-sectionally and longitudinally, and in some cases (smoking) the direction of the effect reversed.

**Discussion:** The results support Ogden's (2004) proposition that the order questions are asked in intentions-behaviour research influences the pattern of results. The results are interpreted in terms of a wider literature on cognitive models of memory activation for questionnaire responding.

**Development of a new classification of health behaviours: Understanding how individuals perceive health-related behaviours**

R.C. McEACHERN, J. LAWTON & M. CONNER, University of Leeds

**Background:** The classification of health behaviours according to key characteristics would be of considerable use in understanding how best to predict and change behaviour. However, as yet the classification of health behaviours remains largely unexplored. Although existing research classifies behaviours based on frequency of performance and engagement in health promotion, there remains rich perceptions of behaviours which individuals may use as a means of classification. The aim of this study was to create a new taxonomy of ways in which individuals perceive health behaviours.

**Methods:** 24 interviews and three focus groups utilising repertory grid technique were conducted with qualified personnel, lay public, health psychologists and postgraduate students. Respondents were asked to explain in what way certain behaviours were similar or different from one another.

**Findings:** The interviews elicited 287 items describing similarities and differences. These were independently grouped into dimension categories by an expert judge. Items were rated according to their ‘fit’ in each category. Items not ‘fitting’ a category were re-categorised or discarded. This process left 41 dimensions. These encompassed subjective (e.g. motivation, anxiety, and knowledge dimensions), and more objective perceptions (e.g. likelihood, severity and valence of consequences, frequency and approach/avoidance dimensions).

**Conclusions:** This is the first study to provide a comprehensive taxonomy of ways in which individuals perceive health behaviours. Subsequent research will ascertain which of these are key in discriminating behaviours, and a new classification of health behaviours will be developed. It is hoped the resulting classification will be valuable in understanding the determinants of health-related behaviours.

Are gain or loss-framed messages more effective at promoting adherence to colorectal cancer screening?

A. MILES, L. MARLOW, K. ROBB, J. WARDLE, University College London & W. ATKIN, Imperial College London

**Background:** Colorectal cancer screening has the potential to reduce mortality from the disease by as much as 33 percent. Despite this, adherence to colorectal cancer screening is very poor. Effective methods of promoting uptake are urgently required. People are more likely to engage in disease related behaviours such as screening if the costs of not doing a particular behaviour are emphasised, as opposed to the gains. However, colorectal cancer screening involves costs and can prevent cancer, and the relative advantages of gain vs. loss-framed depend on whether people see screening as preventing a health problem or delaying one (Riveri et al., 2005).

The aim of the present study was to test whether emphasising the losses vs. the gains associated with screening would result in more favourable sigmoidoscopy screening in a general population sample.

**Method:** 390 people, aged 60 to 64 were invited, with the potential to attend the sigmoidoscopy screening as part of a UK feasibility study into nationwide nurse-led endoscopy screening. Participants were randomly assigned to receive either a loss-framed or a gain-framed information leaflet about the screening test along with their screening appointment.

**Findings & Discussion:** People who received a loss-framed leaflet were less likely to attend screening than those who received a gain-framed leaflet (47.5 per cent vs. 57.3 per cent). Evidence will be presented as to whether loss/gain messages influence behaviour through their effects on perceived threat and efficacy, and the results will be discussed in the context of the Extended Parallel Processing Model (Witte & Allen, 2000).

Rumination, mood and coping amongst oncology and haematology patients: Implications for cognitive behavioural intervention to enhance quality of life


**Background:** Emotional reactions to cancer diagnosis, to subsequent disease and to treatment are commonly highly emotional, yet, as highlighted by an Expert Panel of cancer patients and partners in cancer care (2004) little is known about the psychological processes which maintain emotional distress and disconnection in cancer patients. A ruminating coping style is one such process, which is, crucially, amenable to intervention.

Aims: To identify factors associated with a poor quality of life, and amenable to cognitive-behavioural intervention, this study explored illness appraisals, health beliefs, depression, mood, coping strategies and perceived quality of life amongst 147 cancer and haematology outpatients.

**Methods:** Questionnaires were administered to 73 eligible cancer and 74 haematology outpatients. Measures included the HADS (anxiety, depression),  

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POMS-SF (fatigue, tension, vigour, anger, depression, confusion), RSQ (response styles- running task), ASQ (athletic self-confidence), FACIT (cancer specific QoL- physical, social, emotional, functional), mini-MAC (coping/helplessness/ hopelessness, anxiety precognition, frightening spirit, cognitive functioning), demographics, illness and treatment history, and perceived stress.

Findings: the four dimensions of treatment and age, but no gender, influenced coping, mood and QoL. In hierarchical regression significant variance in QoL was found for depression, stress, depression, low vigour, and helplessness/hopelessness coping. The variance explained was not significant in the QoL model, which indicates that depression and hopelessness are not significant predictors of QoL. Conclusions: the findings of this study are important as they suggest that depression and hopelessness are not significant predictors of QoL. Further research is needed to investigate the role of these factors in QoL.
Discussion: Understanding men’s knowledge and concerns about sexuality, fertility and contraception is essential for designing future education programmes and service delivery to an ageing population and to understand psychological issues relating to sexuality through the lifespan.

Body image, mood and quality of life in young people burned in childhood S.J. POPE, W. SOLOMONS & D.J. DONE, University of Hertfordshire, Hatfield, N. COHN, St. Andrews Centre for Plastic Surgery and Burns, Broomfield Hospital, Chelsmford, Essex & A. POSSIE, Centre for Family Consultation Service, Great Oaks, Basildon.

This purpose of the study was to look at the body image, mood and quality of life of a group of young people who had burned injuries as children, and a group of young people who had not had these injuries. Thirty-five young burn survivors, and 41 young people from the school participated. Participants were aged between 11 and 19. The burn survivors completed the Body Esteem Scale (BES), the Satisfaction With Appearance Scale (SWAS), the Body Dysmorphic Scale (BDHIS), and the Youth Quality of Life Questionnaire (YQOL). The school sample completed all questionnaires, with the exception of the BDHIS.

Burn survivors reported significantly more positive evaluations of how others view their appearance, more positive weight satisfaction and a higher quality of life than the school sample. They also reported more positive general feelings about appearance, although this was just below the level for the school sample. They reported a similar mood to the school sample. The data suggest that young burn survivors may be coping well in comparison to their peers and in some areas may be coping better, in spite of living with the physical, psychological and social consequences of a burn injury.

Investigating the training needs of health professionals caring for burns patients: The physical versus the psychosocial J. REEVE, F. JAMES & S. MILLS, University of Auckland & South Auckland Burns Service.

Background: There is evidence to suggest that health professionals working with the rehabilitation of people following disfiguring injury or burn patients who have burned injuries as children, and a group of young people who had not had these injuries. Thirty-five young burn survivors, and 41 young people from the school participated. Participants were aged between 11 and 19. The burn survivors completed the Body Esteem Scale (BES), the Satisfaction With Appearance Scale (SWAS), the Body Dysmorphic Scale (BDHIS), and the Youth Quality of Life Questionnaire (YQOL). The school sample completed all questionnaires, with the exception of the BDHIS.

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Method: The research followed principles of interpretative phenomenological analysis (IPA). Twelve participants, aged between 17 and 53 years, and 37 men and women. Their ages ranged from 60 to 80 years. Most regarded their health as satisfactory or good. Nine were committed hobbyists, but three had become more involved in hobbies since retirement from work. Participants were skilled in various arts media including oil and watercolour painting, pottery, and drawing. A semi-structured interview explored participants’ experiences of discovering art-making as a meaningful activity, and the role of art in their current lives. Participants reflected on the specific artistic activity and creative influences in their artwork, focusing on four pieces that had personal significance.

Results: IPA showed that art-making enhanced perceived control over daily life and health, promoting confidence and self-esteem. Art provided a creative form of expression and stimulated continuing personal growth. Some emphasised the psychological importance of having positive plans for the future, whereas others preferred a more existential approach, immersing themselves in one project at a time. Art-making seemed to afford continuity of identity across the life span, enabling expression of childhood interests that had been mostly inhibited during adult working years. Through contacts with other artists, social networks expanded.

Conclusion: There is evidence to suggest that art-making is a meaningful activity, and the role of art in their current lives. Participants reflected on the specific artistic activity and creative influences in their artwork, focusing on four pieces that had personal significance.

The impact of risk information on knowledge and optimistic bias K.A. ROBB, A. MILES, J. WARDLE, University of Bristol, College of Health; N. INMAN & P. EVANS, Peninsula Medical School.

Background: Nationwide bowel screening will be introduced in the UK in April 2006. Public awareness of bowel cancer is low, and surveys have identified a strong optimistic bias. Comparative optimism is associated with lower uptake of bowel screening. The present study investigated how risk information about bowel cancer could increase awareness and reduce comparative optimism.

Method: All adults aged 45 to 66 years, registered with two general practices in Exeter, were randomised to either control group (no information, N=1053) or to a control group (no information, N=1053). The risk information was a leaflet containing simple sentences and graphs to describe the main risk factors; A questionnaire assessing knowledge, perceived awareness and confidence of psychological wellbeing was mailed to both groups.

Results: Participants showed an overall optimistic bias. The risk information group became significantly more knowledgeable about risk factors (4.3 vs. 8.4, p<0.001). There was no overall effect of risk information on mean perceived risk score, but participants showed more polarised perceptions of risk, i.e. they were less likely to see their risk as ‘the same’ and more likely to see it as ‘either lower’ or ‘higher’ than average (p<0.001).

Discussion: In this study, risk factor information successfully increased bowel cancer knowledge but failed to modify comparative optimism. Further research should examine cognitive processes that link general health knowledge with perceived vulnerability.

Illness and symptom attributions in multiple- and single-genie conditions J. SCERRI, University of Malta; E. FERGUSON, University of Nottingham & C.A. SCERRI, University of Malta.

Background: In an attempt to self-regulate, people search for causal explanations for their illness and symptoms. This study explores the extent to which patients and carers attribute illness or symptoms to single-genic (e.g. Bechet's disease) or multiple-genic disorders (Coeliac and Psoriasis) were compared. Participants were interviewed to assess causal attributions for disease and symptoms at two time points separated by eight months. Patient and carer attributes were subjected to factor analysis and the following factors were obtained: for disease – environmental, psychosocial, lifestyle; and for symptoms – environmental, psychosocial and mystical.

Findings: The multiple-genic patient and carer groups cited more factors for disease and symptoms. In both genetic conditions and for both patients and carers, environmental and medical factors were important for symptoms over time whilst psychosocial factors were cited more in the multiple-genic patient and carer groups and less for the corresponding single-genic groups. For the patient groups, there were no changes over time in the factors for disease whilst the carer groups mentioned more pathological factors over time whilst lifestyle was mentioned more by the carers for multiple-genic conditions and less for those of single-genic conditions.

Conclusions: Both patients and carers attributions reflect the genetic basis of their disorders, as those with multiple-genic conditions (where genetic factors interact with psychosocial/lifestyle factors) search for more attributions, specifically those of a psychosocial nature. Implications for adjustment are discussed.

Long-term lifestyle changes through action planning, coping planning and action control: Findings from the two-year follow-up of an RCT F.F. SNIETHOITA, University of Aberdeen & U. SCHUH, Freie University, Berlin.

Background: The aim of this study was to test the long-term effects of two brief physical exercise interventions targeting action planning, coping planning and action control.

Methods: A RCT with pre-test and three, six, 12 and 24 months follow-ups was conducted in a cardiac in-patient rehabilitation setting. The participants (N=240) were randomly assigned to a standard-care control, a planning (PG) or a planning-plus-diary group (PDG). Participants in the intervention groups performed action and coping plans. Participants in the PDG additionally received six-weekly self-monitoring logs after discharge targeting action control. Physical exercise, social cognitive theory measures, planning and action control were assessed at all times of measurement.

Findings: Repeated measure ANOVAs showed a significant time*group interaction for physical exercise (etat2=0.05, p<0.05). At Time 2 both interventions groups showed higher exercise levels than the control group (p<0.01). While the levels of exercise reported in the PG approached the levels of the control group, both groups in the PDG maintained higher levels of exercise over Time 4 (etat2=0.05, p<0.01) and Time 5 (etat2=0.05, p<0.001). Likewise, changes increased in PG and PDG, coping planning and action control remained significant over two years and mediated the behavioural effects.

Discussion: Action planning and coping planning are important factors for translating intentions into behaviour. A self-monitoring intervention can increase action control and thereby enhance the maintenance of lifestyle-changes over a two-year period. The full mediation of the behavioural effects through the effects on the volitional factors planning and action control supports the volition-theoretical background.

Smokers’ beliefs about smoking cessation services: A qualitative study F. Vogt, S. Hall & T.M. Mariteau, King’s College London.

Background: Smoking cessation services are effective at helping smokers to stop smoking. However, only a minority of smokers use them. The aim of this qualitative study is to provide some understanding of why many smokers do not use them.

Methods: 27 adult smokers were recruited from a general practice in a deprived part of London. Social cognitive theory informed the semi-structured interviews. Data were analysed using the framework method of qualitative data analysis.
This is characterised by a systematic process of sifting and charting material according to key issues and the Type 2 dataset.

**Findings:** Beliefs could be categorised into three themes: Beliefs about effectiveness, ineffectiveness, and undesirable aspects of one-to-one counselling. These three themes were used to identify moderating variables.

- **Effectiveness:** Problems included: lack of time, difficulty in initiating conversation, and feeling rushed.
- **Ineffectiveness:** Problems included: lack of engagement, difficulty in providing support, and feeling ineffective.
- **Desirable aspects:** Problems included: lack of time, difficulty in initiating conversation, and feeling rushed.

**Discussion:** These findings suggest that individual differences between smokers and non-smokers can influence their perceptions of smoking cessation. The implications of these findings are discussed in relation to future research.

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**Investigation of patient safety incidents: Development of training evaluation model using theory of planned behaviour**

L.M. WALLACE, L. EARRL, J. COKE & L. HIBGED.

Research on evidence into practice is largely atheoretical, and the implementation of management training has often shown initial learning and good intentions are not maintained over time. The aim of this study was to determine the role of psychological theory in the implementation of training models. This study reports on the role that psychological theory can play in addressing these issues.

**Background:** The NHS Safety Programme is key to the governments' plans to reduce premature deaths and health inequalities.

**Method:** A second, prospective questionnaire was completed two months later, collecting information on burnout, work-family conflict, and job satisfaction. Findings were compared with baseline data.

**Discussion:** Smokers hold two sets of negative beliefs about smoking cessation products and services that may prevent their use: they are ineffective and undesirable. Perceptions of the ineffectiveness reflect smokers' negative perceptions of talk-based treatments and evaluations about the fundamental requirements for stopping smoking. Addressing these perceptions may increase smokers' use of the NHS Stop Smoking Services and training models that are key to the government's plans to reduce premature deaths and health inequalities.

**Results:** Little research has investigated the influence of shift type (e.g. early/night) and eveningness-eveningness typology on morningness eveningness, even when measuring levels of stress and shiftworkers.

**Methods:** 285 police staff completed a questionnaire including the job strain and the composite scale of morningness eveningness. They were also assessed for the impact of shift work on general health and well-being.

**Findings:** Multiple regression analyses demonstrated the job strain and shift type to be a significant predictor of general health and well-being. In addition, significant interactions were found between shift type (day, afternoon and night) and morningness eveningness typology. Morning-types reported higher levels of stress and reduced positive affect and vigour prior to the day shift. Morning-types showed the reverse: their mood deteriorated with later starting times.

**Discussion:** These findings suggest that individual differences between smokers and non-smokers can influence their perceptions of smoking cessation. The implications of these findings are discussed in relation to future research.

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**Attributing smoking to genetic causes: impact on self-efficacy and quitting behaviour**


Background: The aim of this study was to validate a new measure of occupational stress. Musculoskeletal complaints were, at one time, the biggest cause of sickness absence in the workplace. However, recently this trend has changed in favour of stress-related and psychosocial illnesses (e.g. anxiety, depression). Occupational Health departments now have the task of developing valid and reliable measures to assess their employees' levels of stress.

**Methods:** An cross-sectional self-report questionnaire. Participants: 200 adults working in a range of blue and white collar occupations (e.g. bricklayers, civil servants).

**Measures:**
- **PES:** Perceived Stress Scale
- **HADS:** Hospital Anxiety and Depression Scale
- **SSS:** Stress Symptom Scale
- **WEMWBS:** Warwick Edinburgh Mental Wellbeing Scale
- **SF:** Short Form health survey
- **SF-6D:** Short Form health utility index
- **SF-36:** Short Form health survey

**Results:** A valid stress measure that can be used in different settings. The convergent validity of the SSS was confirmed. Associations between the SSS and HADS anxiety and depression subscales were r=0.88 and 0.93, respectively (p<0.01). When entered into a regression to control for other variables significant associations were found between the Manager's support and 'Control' subscales of the work environment. These findings suggest that personal factors play an important role in how work and non-work stressors are perceived. Discussion: A valid measure that can be included as part of an occupational stress assessment will identify employees who need treatment/support with the aim of speeding up return to work and reducing sickness absence. The PEST uniquely provides assessments of the relative contribution of environment and person factors (Fletch, 2004) to an individual's stress levels.

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**Valuation of the Person-Environment Stress Tool (PEST)**

L. ANDREWS, B.C. FLETCHER, K.J. PINE, University of Hertfordshire & L. E.H. SWANTON, Heales Medical Ltd.

**Background:** There is an urgent need to understand the relationship between depression and diabetes in South Asians, which future research must address if the needs of this population are not to be disregarded.

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**Conclusion:** There is an urgent need to understand the relationship between depression and diabetes in South Asians, which future research must address if the needs of this population are not to be disregarded.
effects. However, the literature is equivocal, suggesting that individual differences may moderate the influence of emotional writing. Methods: 97 healthy male and female undergraduates were randomly assigned to write about either their most stressful and traumatic experiences or less stressful, more positive topics for 15 minutes on each of three consecutive days. Alexithymia was assessed at baseline. Psychological health was assessed at baseline and at six weeks post-intervention. The writing of the emotional group was also analysed using the Linguistic Inquiry and Word Count programme. Findings: Alexithymia was not related to the main effect of writing condition or alexithymia on psychological health. However, a significant writing condition by alexithymia interaction was found (p<0.05). Within the disclosure group, high alexithymics had poorer psychological well-being than low alexithymics two weeks post-writing. The final model was able to explain a sizable amount of variability in depressive symptoms.

Discussion: These preliminary findings suggest that alexithymia moderates the effects of expressive writing on psychological health. They also indicate that alexithymics may not benefit from the writing intervention. The implications of the results will be discussed within the context of the existing research on individual differences and the emotional writing paradigm more broadly.

Team-working in health care: Longitudinal evaluation of a team-building intervention J. BAYLEY & L.M. WALLACE, Coventry University.

Background: Modernisation of health services is a priority in the UK (National Health Service Improvement Plan, 2004), and interprofessional team-working is essential to fostering the learning culture advocated for risk management (Building a Safer NHS for Patients, DoH, 2004). Training is needed to develop the skills required for interprofessional teamwork (Aagard, Department of Health, 2002). This paper presents an evaluation of a two-day team-building course delivered to teams of health care staff.

Methods: A single-sex focus group (68)=2.17, p<0.05), but this effect had been lost by time 3. Combined results suggest that the intervention had an effective measure to prevent pregnancy. Social Norm (SN) was shown to be salient, with several statements concerning norms and judgements by health professionals as difficult issues to deal with. Girls were also concerned about confidentiality. However, motives to comply with written instructions varied. Boys were aware of the difficulty in supporting their parents without forcing their own agenda. Challenging, especially for time allocation, was the only factor identified from the data. It was suggested that the intervention had a significant impact on access to EC, but felt the negative consequences of parenthood would be far more important factors. The TPB was found to be sufficient framework within which attitudes around EC use can be investigated.

Findings: Understanding of self and team members' roles and roles showed some improvement at both three and six months post-course. 'Personal empowerment' significantly improved at time 2 (t(68)=2.17, p<0.05), but had been lost by time 3. Association with colleagues was the only factor to maintain significant improvement between time 2 (t(68)=2.22, p<0.05) and time 3 (t(68)=2.03, p<0.05). Combined results suggest that the team-building programme led to a slight improvement in team working at three months but this had disappeared by six months.

Discussion: The design does not preclude there being other factors than skills learnt on the course affecting team-working. It appears the team-building course led to a modest improvement in team functioning at three months, but this had disappeared by six months. Follow-up interventions at time 3 and six months post-course are required to improve transfer of learning into practice.

Applying the theory of planned behaviour (TPB) to emergency contraception use in teenagers: An exploration of attitudes and beliefs J. BAYLEY & L.M. WALLACE, Coventry University.

Background: Teenage pregnancy is a significant concern in Britain, and the government have set a target of halving the rate by 2010. Hormonal emergency contraception (EC) can be used after unprotected sex to prevent pregnancy but many teenagers do not access it. Deregulation of EC to pharmacies has reduced some of the physical barriers to access but has not been able to substantially increase the proportion of women using knowledge and cultural orientations surrounding EC is essential to improving uptake.

Methods: Two single-sex focus groups (N=15 in each) with 30 adolescents (16-18) were conducted in school time to identify the beliefs of male and female teenagers about EC use. These focus groups were used as the theory of planned behaviour-based schedule.

Findings: Attitude (A) was shown to be salient, with teenagers considering EC to be a worthwhile measure for themselves rather than for their boyfriends. Teenagers had little confidence and a negative attitude towards EC use. However, an analysis of the data showed that attitudes around EC use can be investigated.

Discussion: Attitude (A) was shown to be salient, with teenagers considering EC to be a worthwhile measure for themselves rather than for their boyfriends. Teenagers had little confidence and a negative attitude towards EC use. However, an analysis of the data showed that attitudes around EC use can be investigated.
conducted. Using a discourse analytic perspective, this study examines how people account for smoking. The aim of the study was to generate a basis for further understanding of the in-depth understanding of how speakers attend to their own accountability in the taking up, cessation or continuation of a behaviour that is widely perceived as being detrimental to health.

Methods: Using data from three focus groups (eight participants in total), the study examined how ex-smokers talk about their experiences of smoking. The resulting transcripts were analysed using a discourse psychological approach.

Findings: The overall theme that arose was the accountability attached to talking about smoking. Within this overall category three sub-themes became apparent: The first of these themes is the location of blame in accounting for becoming a smoker, which was placed upon a constructed external environment, psychological health, parental and achievement motivation, problem-solving style, were assessed on standardised measures of questionnaire data collection in 655 young adults engaged in during leisure time, e.g. consumption health in young adults are essentially those largely alcohol or drugs.

Leisure, coping and health: The role of social, family, school and peer relationship factors
T. CASSIDY, Coventry University.
Background: Behaviours that damage or promote health in young adults are essentially those largely engaged in during leisure time, e.g. consumption of alcohol or drugs, smoking, eating excessively, and recreational activities. Social, family, psychological health, parental and peer influence are important factors in the construction of accounts of other dangerous appetitive behaviours such as alcohol or drugs.

Leisure, coping and health: The role of social, family, school and peer relationship factors

Methods: Design: The study was based on the theory of planned behaviour (TPB) and implemented intention in increasing fruit and vegetable consumption: Interventions based on the theory of planned behaviour (TPB) using the theory of planned behaviour (TPB) (Coulson, 2005). The study was conducted at one university in the UK.

Findings: Results show that the family environment, encouragement from parents and teachers, relationships with peers and friends, and media messages may all predict adult attitudes to, and engagement in, leisure. In turn leisure attitude and engagement are related to psychological distress, optimism, perceived control and social support.

Discussion: It is argued that the development of patterns of leisure attitudes and engagement in childhood need to be understood in predicting and changing adult leisure behaviours relevant to health and illness.

Coping and social support in relation to stress and burnout among nursing staff
L.H.K. COOPER, Coventry University, T.C. SKINNER, University of Southampton & L.M. WALLACE, Coventry University.
Background: Burnout is an emotional and behavioural impairment resulting from exposure to high levels of occupational stress. The study objectives were to examine the contribution of coping resources and influence of social support in relation to nurse stress and burnout. It was predicted that those experiencing less burnout will utilise positive coping mechanisms and/or receive more beneficial types of social support as preventive measures of burnout.

Design: Cross sectional study using four measures: (1) Maslach Burnout Inventory; (2) Power and

Champions’ Significant Others Scale–B; (3) The Perceived Stress Scale; and (4) Brief COPE.

Sample: Nurses were required for the present study with the majority describing themselves as being registered general (RGN, N=58) or Practice nurses (N=29) and between grades D to H. The age range of participants was with the mean being 44.5 years (SD 8.48). Unregistered nurses were not excluded.

Results: Nurse sample consisted of 190 female, 10 male nurses (210 female, 8 male nurses at University of Southampton), conferences and volunteers who responded to an advertisement placed in the Royal College of Nursing Bulletin.

Results: Burnout was positively correlated with perceived workload (r=0.23, p<0.01) and negatively correlated with social support gained from work colleagues (r=-0.22, r=-0.198, p<0.01), non-work colleagues (r=-0.44, r=-0.200, p<0.01), Burnout was highly correlated with items representing disengagement (r=0.49, r=0.199, p<0.01), venting (r=0.25, r=0.199, p<0.01), and self blame (r=0.32, r=0.199, p<0.01). Multiple regression analyses showed that perceived stress and emotional disengagement predicted 26 per cent of the variance for burnout. Questing: Perceived stress, social support and coping were all found to be independently related and predict burnout among this sample of nursing staff. In addition, emotional disengagement and especially coping (emotional disengagement) appear to play a mediating role between perceived stress and burnout. Health messages are made to NHS managers and health care professionals regarding preventive measures of burnout.

Promoting children’s fruit and vegetable consumption: Interventions using the theory of planned behaviour as a framework
L. CRABTREE, R. POVEY & D. CLARK-CARTER, Staffordshire University.
This study compared a motivational intervention based on the theory of planned behaviour (TPB) with a volitional intervention based on implementation intentions in increasing fruit and vegetable consumption in a sample of school children aged 11 to 16 years (N=198). TPB variables and fruit and vegetable consumption were assessed by self-report questionnaires at the start of the main intervention one week later (time 2). Participants were randomly allocated to a control group or one of two intervention conditions. A control condition that provided children with information about the benefits of eating five portions of fruit and vegetables. Experimental Group 1 formed an intervention intention about how, when and where to increase fruit and vegetable consumption. The control group was given a sticker which talked about snack foods and coincided with fruit and vegetable consumption over the control intervention (F(2,351)=6.46, p<0.001) and importance of healthy diets, fruit and vegetable consumption (F(2,351)=6.46, p<0.01). Multiple regression analyses showed this was solely the result of a significant effect for the ‘unhealthy – healthy’ comparisons. There was a significant effect of sugar consumption on both credibility (F(3,351)=5.31, p<0.01) and importance of healthy diets (F(3,351)=5.31, p<0.01) interaction (F(14,678)=2.36, p<0.01). Implications for further understanding the role of volitional and motivational interventions in improving fruit and vegetable consumption are discussed.

Methods: The data for this study were the 572 messages posted to an internet-based bulletin board for individuals living with IBS and included all messages posted during an eight-month study period in 2004. Thematic analysis was conducted using the guidelines set out by Boyatzis (1998).

Discussion: The analysis of the content of the self-disclosure was used within this internet-based support group in three main ways. Firstly, for the recursive self-disclosure, it may have served to initiate a transactional relationship with other group members for the purpose of attracting social support. Secondly, it is used by the support provider to illustrate the potential to be understood through reciprocal self-disclosure. Thirdly, it was used to share reciprocal social relationship feedback with the group.

Reducing sugary drink consumption in adolescents: A message framing study
N.S. COULSON & H. BUCHANAN, University of Derby.
Background: Adolescents regularly consume sugary drinks (James et al., 2004), which can lead to obesity and diabetes (Gregory & Locksley, 1999; Dalgleish & Cullinan, 2005). However, little attention has been focused on how to create dental health messages targeted at adolescents. While they are more likely to have maximum impact, the present study aimed to apply the concept of message framing to this population.

Methods: 377 adolescents (aged 11 to 15 years) self-reported consumption of sugary drinks prior to reading either a positively or negatively framed information sheet on the consequences of sugary drink consumption. Participants were then asked to rate the extent to which the information was credible and the importance of healthy teeth, followed by intention and attitudes toward drinking less sugary drinks.

Findings: The results indicated that whilst there was no overall main effect of framing condition on either intentions or attitudes, there was a significant frame (positive vs. negative) x sugar drink consumption (low vs. moderate vs. high) interaction (F(14,678)=2.36, p<0.01). Inspection of the univariate tests revealed this was solely the result of a significant effect for the ‘unhealthy – healthy’ comparisons. Additionally, there was a significant effect of sugary drink consumption on both credibility (F(3,351)=5.31, p<0.01) and importance of healthy teeth (F(3,351)=5.31, p<0.01) interaction (F(14,678)=2.36, p<0.01). Implications for further understanding the role of volitional and motivational interventions in improving fruit and vegetable consumption are discussed.

Methods: An action research method was used which involved: (i) interviewing a sample of adolescents and staff; (ii) conducting focus group discussions for different perspectives on organisational factors maintaining stress; (iii) understanding the operational procedures involved in service delivery; and (iv) reviewing the NHS Trust’s complaints management processes. Questionnaires were

Workplace stress: Action research in an artificial limb and appliance service (ALAS)
R. CUDDIHY & J. MOSES, Cardiff and Vale NHS Trust.
Occupational stress in NHS staff has seldom studied the difficulties experienced by those who deliver services via telephone communications. Between 2001 and 2003 ALAS referrals for wheelchairs and equipment doubled without a commensurate increase in staff or supply route resources. Workplace stress was perceived by managers to be especially high in staff in telephone contact with suppliers and service users experiencing delays.

Method: An action research method was used which involved: (i) interviewing a sample of administrative staff; (ii) conducting focus group discussions for different perspectives on organisational factors maintaining stress; (iii) understanding the operational procedures involved in service delivery; and (iv) reviewing the NHS Trust’s complaints management processes. Questionnaires were

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completed by 14 administrative staff including the
administered by a change in the internal standards of measurement. The
conducted with 10 patients (five men, five women,
12 months previously and subjected to thematic
(Agilitec, 2004) and partners of patients undergoing such major surgery. Little work has
and taking time out) and stress-related symptom
were conducted with 10 health professionals
and symptoms. Stress related symptoms were commonly
reported in the time leading up to exams: loss of
or, as social comparison negatively influenced
on stress recovery after coronary artery bypass
and mental health (p=0.000) and vertigo had a negative effect. Negatively
interpreted social comparison for information also led to a negative impact (p=0.000), role emotional (p=0.000) and mental
health (p=0.001).

Conclusions: Adjustment occurred by a change in
the rest, relaxation’ mechanism of the parasympathetic nervous system. AT can help
manage daily stress and regular practice prevents stress build up. Effectiveness of intervention was tested with the GHQ-12,
the Job Satisfaction items of the Nurse Stress Index and purpose-designed items.
Conclusions: Adjustment occurred by a change in
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manage daily stress and regular practice prevents stress build up. Effectiveness of intervention was tested with the GHQ-12,
the Job Satisfaction items of the Nurse Stress Index and purpose-designed items.
Prevalence of symptoms related to stress and fibromyalgia in University students M. DURÁN, J.GARCÍA, M.A. SIMON, J.C. FERNANDEZ & C. RODRIGUEZ, University of A Coruña.

Background: The prevalence of stress and fibromyalgia in adult non-clinical samples are scarce. So, the main purpose of this study was to gather evidence of symptoms associated to stress and fibromyalgia in the university population of A Coruña (Spain). A new eight-item instrument to assess some distinctive symptoms of fibromyalgia, such as diffuse widespread musculoskeletal aching, fatigue, stiffness, sleep disturbances, irritable bowel syndrome, concentration, severe headaches and psychological distress was developed for this study. The sample consisted of 1400 university students (17- to 49-years-old) from the University of A Coruña. Analyses showed the power of this scale to detect subjects with high levels of stress and fibromyalgia symptoms.

An overview of the research evidence base of the psychosocial well-being of children with chronic disease and their families D.R. ELLARD & J.H. BARLOW, Coventry University.

Background: Meeting the challenge of the National Service Framework (NSF) for the psychosocial well-being of the chronically ill child, their parents and siblings, will require a sound evidence base from which appropriate interventions can be implemented. The purpose of this study is to provide an overview of the current literature regarding the psychosocial well-being of children with chronic disease and their family.

Methods: Electronic searches were conducted using AMED, CINAHL, Cochrane Database, DARE, HIA, MEDLINE, NHS EED, PsycLit, PsycINFO, and PubMed. The inclusion criterion was limited to meta-analytic reviews. The titles of papers were reviewed, and those that met the inclusion criteria were retrieved. A new three-stage model explains educational aspirations and desire to postpone pregnancy may be associated with effective use of contraception. Indeed, other research has suggested that there may be a limited link between contraceptive use and desire to postpone pregnancy (e.g. Kendall, Afable-Munsuz, Speizer et al., 2005). Future research needs to pay further attention to a discrepancy between such logically congruent desires and behaviours.

Understanding symptom onset: The role of cognition and emotion S. FARNWORTH, University of London & J. OGIDEN, University of Surrey.

Background: A new three-stage model explains cultural, temporal and individual variations in symptoms. First, the model suggests that tensions relating to conflict and control arise as an individual interacts with their social world. Secondly, culturally specific meanings are used as a socially sanction pathway to express these tensions. Third, the individual appraises the socially sanctioned pathway as either personally relevant or irrelevant in the context of their own cognitions and emotions about the symptom. This model determines the course of the model of facts and emotions. It is hypothesised that there will be ethnic differences in the symptoms that participants report experiencing.

Methods: A questionnaire designed to measure perceptions of the symptom that people report experiencing most often and other common symptoms was completed by patients in general practice waiting room.

Findings: Preliminary data from a random sample of patients can only be considered exploratory. It is suggested that there will be ethnic differences in the symptoms that participants reported experiencing.

Discussion: The findings are discussed in the context of the new socially sanctioned pathway model of symptom onset.

The development of a risk assessment tool for users of a homeless drop-in centre J.A. FERGUSON & M. HIPWELL, Queen Margaret’s University College.

Background: Risk assessments are increasingly used with vulnerable groups as a way of assessing current and predicting future problems and focussing action (Holloway, 1998). This study developed a risk assessment tool for the users of a homeless drop-in centre. Using psychological theories (e.g., sensation seeking theory), the tool identified individual characteristics and behaviours likely to lead to risk to self, other users or staff of the centre.

Methods: A cross-sectional, quantitative design was used to develop a semi-structured questionnaire and a path model. The questionnaire was pilot-tested, finalised and used to develop a semi-structured tool for users of a homeless drop-in centre.

Main Findings: Four stepwise regression analyses were conducted. Three individual characteristics and behaviours leading to risk. Age, drug use and alcohol use predicted violence to others (p<0.05, accounting for 99 per cent of the variance). Age predicted violence towards members of staff (p<0.05, accounting for 12 per cent of the variance, with younger users being more violent than older users). Drug use predicted self-harm (p<0.01, accounting for 31 per cent of the variance) and age predicted suicidal attempts (p<0.001, accounting for 37 per cent of the variance, with younger people more likely to attempt suicide.

Discussion: Sensation seeking (drug and alcohol use) was identified as risk behaviour in the group of homeless people, particularly in younger users. The findings highlight the importance of conducting risk assessment in the homeless user population to enable targeting of the most vulnerable users with a view to providing suitable interventions or referring to relevant services.

Investigating the impact of dementia on romantic couples L. FOSTER, Kingshill Research Centre, University of Bath, V. KODHAM, University of Bath & H.B. BULLOCK, Kingshill Research Centre.

Background: Research in dementia and other chronic illnesses has found relationships to be important to successful coping. This work explores the suitability of two different methodological approaches to assessing the impact of dementia in relationships.

Methods: 1. Twenty participants with mild dementia attempted to complete a maximum of five questionnaires that were designed for a general adult population. 2. Six couples, where one person has been diagnosed with mild dementia, were interviewed and discussed the impact of dementia on their relationship with their spouse.

Findings: 1. Between 20 per cent and 65 per cent of participants were able to complete five questionnaires. Participants were able to talk to the researcher about their opinions regarding the questionnaire but experienced difficulty in choosing an option from a likert scale to represent their feelings. These questionnaires were, therefore, considered to be inappropriate for this group. In contrast participants were able to articulate and discuss their experiences with the researcher.

Discussion: 1. Existing questionnaires designed for a general adult population are not suitable for people with mild dementia. Development of future measures should include people with dementia to ensure the measure is appropriate and represents their views correctly. 2. The themes identified may help researchers and health professionals to better understand the experience of a couple facing dementia from both spouses’ point of view.


Background: The diagnosis and treatment of childhood cancer produces challenges that may have a negative impact on a family’s psychological well-being. Poor prognosis is related to anxiety, guilt or lack of control in carers, which may lead to self-blame and depression. Optimistic people that experience a stressful situation, for example, chronic illness, into a more adaptive way that help them being engaged more with positive health behaviours. The aim of the study was to investigate optimism and anxiety and depression in families of children with cancer.

Methods: The sample comprised carers of children with cancer. Data were collected via self-administered questionnaires given to carers attending Birmingham Children’s Hospital. Optimism was assessed using the Life Orientation Test (LOT-R) and HADS: anxiety (0-21) and HADS: depressed mood (0-21), respectively. Higher scores indicate higher levels of optimism and anxiety and depressed mood.

Findings: 52 carers with a mean age of 39 (SD 7) completed questionnaires. Eighty-four per cent were female. Sixty-four per cent of carers were found to be at risk of ‘probable’ (01) clinically anxious mood and 44 per cent at risk of ‘probable’ clinically depressed mood. Mean scores (SD) for anxious mood, depressed mood and anxiety were 11 (SD=5), for depressed mood 9 (SD=5), and
optimism 14 (SD=5). There were significant negative correlations between optimism and anxious mood (r=–0.73, p<0.001) and optimism and depressed mood (r=–0.73, p<0.001).

Discussion: Consistent with previous research, carers of children with cancer are at risk of clinical anxiety and depression. Optimistic carers seem to have positive outcome expectancies about their child's chronic illness and experience less anxiety and depression. Health interventions are necessary to improve parents' psychological well-being and quality of life.

Illness perception and medication-adherence in older patients with coronary heart disease (CHD)

C. GAO, D.W. JOHNSTON, M. JOHNSTON & G. MOLLOY, University of Aberdeen, M. WITHAM, M. MACMURDO & A. STRUTHERS, University of Dundee & Ninewells Hospital, Dundee.

Background: The commonsense model of self-regulation suggests that people's illness and treatment representations influence their control of health threats. The Illness Perception Questionnaire-Revised (IPQ-R) has been proved to be a useful tool in assessing beliefs about illness and its treatment in clinical populations. Angiotensin-converting-enzyme inhibitors (ACEI) are a typical treatment for CHD, and adherence to ACEI is determined from Serum ACE. The aim of this study is to predict adherence to ACEI from patient's illness perceptions. Medication-adherence was measured objectively from serum ACE levels. A cut of serum ACE level <5u/l was set to define adherence to ACEI.

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Results: The IPQ-R was used to assess patients' illness perceptions. Medication-adherence was measured objectively from serum ACE levels. A cut of serum ACE level <5u/l was set to define adherence to ACEI.

Discussion: Illness representations successfully predict medication adherence in older CHD patients. Logistic regression analysis examined individually indicates that timeline-acute/long (β=–0.92, SE=0.48, Wald=3.65, p=0.05) and consequences (β=–1.92, SE=0.51, Wald=3.92, p<0.05) predicted adherence. Results were similar when both factors were entered into multivariate analysis: timeline (β=–0.92, SE=0.51, Wald=3.26, p=0.07) and consequences (β=–0.97, SE=0.52, Wald=3.47, p=0.06) predicted adherence.

Efficacy of a cognitive-behavioral intervention to reduce symptoms of fibromyalgia


Provided that studies about the differential efficacy of existing treatments in fibromyalgia syndrome (FMS), the aim of this study was to compare the differential efficacy of a cognitive-behavioral and a pharmacological therapy on fibromyalgia. Using a randomised controlled clinical trial, fibromyalgia patients were assigned to one of following experimental conditions: (1) pharmacological treatment (i.e. cyclobenzaprine); (2) cognitive-behavioral intervention (i.e. graduated exposure therapy); (3) pharmacological + cognitive-behavioural; and (4) no treatment. The results showed that the intervention group improved the severity of fibromyalgia symptoms at the end of the treatment and at follow-up. We conclude that cognitive-behavioral interventions must be considered not only as a single 'assist' agent but as an active one, and so they should be included in the treatment of Fibromyalgia syndrome.

Psychological intervention in oncological outpatients: A multi-component programme based on interdisciplinary collaboration and group application

J. GARCIA, M. DURAN, University of A Coruña, J. C. RODRIGUEZ, A. FERRER & A. SANCHEZ, Juan Canalejo Hospital.

Both the optimal management of human and organisational resources as the collaboration of different professionals in the different phases of oncologic disease are needed to carry out an effective intervention programme in a hospital context. In the Juan Canalejo Hospital of A Coruña (Spain) exists: (1) initial assessment of adaptation predictors; and (2) meeting-groups of patients that are similar in relation to the different treatment phases is being developed to reduce emotional suffering and to increase their quality of life. This programme has three different phases: (1) pre-intervention; (2) intervention; and (3) rehabilitation. Through them patients receive information related to the organisational functioning, feeding and care management, emotions, communication, attitude and psychopharmacological interferences. There are two aspects of the tool to be used to consider because they can be considered as basic elements to meet the purposes of this project. For the one hand, a narrow collaboration among psychologists, nurses, oncologists and the other, a detailed assessment of indicators of quality related to efficacy and efficiency through a control group of outpatients who refusing participate in the programme.

Can't pee – won't pee: Researching paruresis – the secret phobia

A. GARDNER, R. GIBBS & A. SMITH, UK Paruresis Association.

Paruresis could affect four million people in the UK alone. It is classified as a social phobia (DSM-IV) and because of the excessive secrecy, is also known as the secret phobia. This affects both men and women and prevents them using the public toilets or urinating at home when others are present. It is a fear of normal life affecting work, recreation and relationships. Gibbs (2004) study of Avoidant Paruresis (AP) is the first ever case outlet and the perceptions of people with AP. Gibbs’ Paruresis Severity Scale (PSQ) contains 11 items and is a statistically reliable measure for future research. The PSQ instrument includes additional questions about paruresis history, personal experience, and related issues. The sample was well distributed across the UK for different social strata and geographical location. Although 44 per cent of the sample sought treatment the majority reported they would not be able to seek help. The most common treatment methods were psychotherapy (47 per cent), graduated exposure therapy (36 per cent), self-help group (32 per cent), medication (28 per cent), and cognitive behaviour therapy (24 per cent). Success rates for these treatments were reported as: no improvement 44 per cent; some improvement 38 per cent, great improvement 15 per cent, and problem overcome two per cent. With the increasing demands for mandatory drug testing underlines the inability of paruritics to give urine samples poses great personal and professional problems. The law construes a failure to provide a specimen as a refusal. This makes the inability to pee as a result of psychogenic influences an unacceptable criminal offence.

Identifying accessible beliefs about/concerning sleeping for at least eight hours every night


Background: Eight or more hours of sleep each night is associated with optimal physiological and psychological function in healthy adults (e.g. Dement & Vaughan, 1999). Research has indicated, however, that many people sleep less than this (Jean-Louis et al., 2000) with detrimental effects on psychomotor performance and mood (Bonnet & Arand, 1995). The aim of this study was to identify those determinants of adult sleep duration using the theory of planned behavior (TPB; Ajzen, 1991).

Method: An elicitation study involving 60 semi-structured interviews was conducted to extract beliefs underlying the role of sleeping for at least eight hours every night.

Findings: The most frequently mentioned beliefs were identified. More advantages than disadvantages were reported by the young adults suggesting that members of this age group generally have a positive attitude towards sleeping for at least eight hours. In addition, accessible referents were perceived by the majority of young adults as support people (i.e. friends). There were twice as many inhibiting as facilitating factors, however, indicating that sleeping for at least eight hours every night for young adults to be a difficult behaviour to perform.

Discussion: This research will provide a unique perspective on the development of poor sleeping patterns and problems associated with chronic insufficient sleep experienced by many, otherwise healthy, adults.

Psychometric properties of the Myocardial infarction dimensional assessment scale (MIDAS)

M. GILCHRIST, A. TURNER & J. BARLOW, Coventry University.

Background: Myocardial infarction (MI) is a major cause of mortality and morbidity in the Western world. In the UK the incidence rate of MI for men aged between 30 and 69 years is about 600 per 100,000 and for women the rate is about 400 per 100,000. MI has a significant impact on health related quality of life. However, there are few MI specific quality of life measures. The aim of this study was to investigate the factor structure and to conduct an item analysis of the Myocardial Infarction Dimensional Assessment scale (MIDAS).

Methods: This 35-item MIDAS scale was designed by Thompson et al. (2002) to measure seven areas of health status: physical activity, insecurity, emotional reaction, opportunity cost over medication and side effects. In this study, the MIDAS scale was distributed to 206 MI patients (73 per cent male) who had enrolled on a lay-led chronic disease self-management programme. Reliability and structure of the scale were examined using standard item analysis, internal consistency (Cronbach alpha), and principal component analysis.

Results: Cronbach alpha was calculated as 0.97. A multi-dimensional model was found in accordance with Thompson’s findings, although only three factors (diet, concerns over medication, side-effects) were in total agreement. Conclusions: The current study provided partial support for the MIDAS original factor structure. We are currently examining the performance of the MIDAS in measuring the participant's attendance on the self-management programme.

Gloucestershire Drugs and Alcohol Team (DAAT) Database: Monitoring County-wide Christo Inventory for Substance-misuse Services (CISs) scores

M. GILES, S. DRYDEN, C. Hassall, S. O'NEILL, B. GASH, E. ALEXANDROU, H. FORD, M. YEADON & L. EARLL, Gloucestershire Drugs and Alcohol Team.

The Gloucestershire DAAT Database is designed to anonymously ‘track’ the movement of clients between 15 different countywide drug and alcohol services, and collate information regarding the service’s use. These services cover criminal justice, health, and voluntary/non-statutory sectors. Additionally, it strives to meet the requirements set by the National Drug Treatment Monitoring System (NDTMS).

As part of this process, CISs (Christo, 1998) scores are collected routinely from services. The CISs is a simple validated measure for assessing level of problem severity relating to social, psychological and physical functioning, providing outcome monitoring in a practice setting. It is a 10-item
questionnaire producing a single score of 0 to 20 (whereby a higher score indicates greater problem severity).

Of the 3368 records collected over two years, the average CISS score recorded for clients was 9.6, which indicates 'medium problem severity'. This is consistent with previous studies that measure CISS and producing an average score of 9.1 (Christo, 2000). Analysis produced significant relationships between CISS scores and self-care capacities, for example as clients reporting benefit claiming had significantly higher CISS scores than those in employment. Future research should focus on the validation of the tool for children and adolescent populations, given the recent expansion and Government emphasis on young people's services. Additionally, there has been working towards collecting CISS score information, in order to monitor any differences between outcome and initial assessment information.

A qualitative study into the personal experience of young people with diabetes exhibiting either good or poor metabolic control

R.A. GILLIBRAND, University of the West of England.

Background: Health outcome in terms of metabolic control is difficult to predict. This study investigated the experience of young adults with diabetes to see what (if any) factors were uniquely presented by those exhibiting either good or poor metabolic control.

Design: Telephone interviews were conducted. Questions were based on participants' comments voluntarily provided in previous quantitative studies.

Participants: Participants were selected from a current patient group who had participated in previous studies and given consent for further study. Eleven young people aged 16 to 25 years were selected displaying either good (HbA1C, five to eight per cent) or poor metabolic control (HbA1C, 10 per cent).

Data Analysis: Participants took part in semi-structured interviews. Interviews were transcribed and subjected to grounded theory (thematically) analysis.

Findings: Those participants in good metabolic control were more accepting of their diabetes, had both a daily routine for managing it and felt able to respond to their insulin requirements if necessary. They were more likely to discuss their diabetes with their work colleagues and love partners as accepting and heavily supportive. The family were more likely to offer them support both in practical terms and emotional needs.

Discussion: Good metabolic control is characterised by acceptance of diabetes, practical social support and the young person's ability to cope with the day-to-day demands of diabetes as well as responding to changing needs on unique occasions. Young people in poor metabolic control appear to have difficulty accepting the diagnosis of diabetes and are unwilling to admit to others that they have diabetes.

The Consumer Health Interest Model: Why consumers are interested in health products


Background: The Consumer Health Interest Model was developed to explain why consumers purchase health products. It consists of eight psychological constructs (e.g. Risk Perception, Self Identity, and Perceived Control) that determine interest and buying intention towards health products. The aim of the study was to validate the model and to identify the most important determinants.

Method: The model was validated in a quantitative study with 1046 Dutch subjects. A questionnaire was developed to measure the eight constructs. The questionnaire subjects read a description of a product with a health benefit and were asked to rate their 'interest in product' and 'buying intention'. Structural Equation Modelling was used to analyse the data.

Findings: For five out of eight constructs strong unidimensional constructs were measured (factor loadings for four of the eight 'path-analytic' models showed three constructs strongly linked to the dependent variables (r-values higher than five). Self Identity, Perceived Seriousness of Disease, and Product Health Link.

Discussion: This research identified strong health-related psychological factors that best explain interest in health products. Those interested in products with a health benefit perceive oneself as a health conscious person, perceives the targeted health problem as serious and believes that the product can improve one's health.

Linking social capital, masculinities and chronic ill health across the lifecycle

J. GRIFFITHS & J. SIXSMITH, Manchester Metropolitan University.

Background: This poster describes research investigating the processes linking social capital, masculinities and men's experiences of chronic ill health. It aims to illustrate a range of themes linking men's use of social capital and illness-related resources and behaviours at different points in the life cycle.

Methods: A qualitative, narratives approach was taken in their analysis of the situation of the study and co-constructed accounts emerging from life-course interviews (McAdams, 1995). Interviews were conducted with 25 chronically ill men aged between 16 and 44 (mean age 26), and narrative narratives were analyzed thematically (e.g. Boyatzis, 1998).

Findings: A number of key themes are explored that illustrate the disruption of social networks, undermining of valued masculinities, are contrasted with the support received through social networks and reinforcement or reconstruction of masculine identities, that occurred in the course of chronic illnesses.

Discussion: This work aims to contribute to an increased contextualisation of individual illness-related experience and behaviour, within gendered social networks. Research responds to the calls to disruption of social networks, undermining of valued masculinities, are contrasted with the support received through social networks and reinforcement or reconstruction of masculine identities, that occurred in the course of chronic illnesses.

Health care receipt and self-image in women with systemic lupus erythematosus: An interpretive phenomenological analysis


Background: Systemic lupus erythematosus (SLE) is a multisystem autoimmune disease with a host of disabling physical symptoms including rash, fatigue and organ failure. We sought to understand SLE patients' constructions of self-image and perceptions of healthcare.

Methods: Semi-structured interviews were conducted with 10 women aged 32 to 68 years who had been diagnosed with SLE one to 12 years ago. Most participants were married or de facto (60 per cent), but single (20 per cent) and widowed (20 per cent) women were also included. Most participants had active SLE disease (60 per cent), because they were retired (20 per cent) or unable (40 per cent); several participants were working part-time (40 per cent). Interviews were audio-recorded, transcribed and analysed using an Interpretive Phenomenological Analysis.

Findings: Four superordinate themes emerged: (1) SLE perceptions; (2) the 'past-self'; (3) understanding; and (4) integrated health care. Narratives of the time before diagnosis highlighted the tool for use with children and adolescent populations. Approximately a third were motivated due to the perceived endorsement of the course by the University (35 per cent) and the opportunity to meet similar others (31 per cent); over a quarter (25 per cent) were motivated because the course was local and central; 22 per cent perceived the course to be a novel way of managing long-term health conditions and 17.4 per cent were motivated by the inclusion of personal testimonies from previous participants.

Discussion: Press articles are an economical method of recruiting a wide audience for participation in community-based self-management interventions. These results have identified some key elements that participants relate and respond to when deciding to enrol.

The experience of becoming a LINK tutor of the Expert Patient Programme

C. HAMMOND, A. TURNER & J. BARLOW, Coventry University.

Background: Severe or profound hearing loss affects between 150,000 to 300,000 adults nationwide. The LINK Centre offers specialist rehabilitation for deafened people through the Expert Patient Programme (EPP). The EPP is delivered by volunteer lay tutors who themselves are deafened. Although there is evidence that EPP participants has been investigated, the experiences and perspectives of tutors has received less attention. This study adopts a phenomenological examination by examining the experiences of LINK tutors.

Method: In-depth, face-to-face interviews were conducted with six LINK EPP tutors. All interviews were reviewed using thematic content analysis.

Findings: Results showed that being a LINK EPP tutor was an enjoyable and rewarding experience. Although the desire to help others has been helped themselves, and the opportunity for self-mastery, were key themes with regard to motivations to become a tutor. Tutors regarded the course content as comprehensive. However, given the opportunity they would expand sections relevant to deafened person (e.g. communication tactics) and the experience of deafness would be considered a positive one and the themes of increased self confidence, esteem and worth were mentioned by all tutors.

Discussion: Results provide an insight into the views and personal experiences of a unique group
of lay tutors. Views expressed about course content, training and support can be used to inform future EPP development.

Illness perceptions and distress in patients with acne
J. HASSAN, Staffordshire University, H. RICHARDS, University of Manchester, S. GROGAN, University of Manchester & V. YATES, Royal Bolton Hospital.

Psychological distress in patients with acne has been more highly associated with patients subjective rather than clinical severity. This disparity may be due to patients' cognitive and emotional perceptions of their illness (Leventhal, 1984). This study aimed to identify illness perceptions of patients with acne, and examine relationships between these perceptions, clinical severity and psychological distress.

One-hundred and twelve participants (age 16 to 44) recruited from specialist acne clinics completed the Revised Illness Perception Questionnaire (IPQ-R), the Hospital Anxiety and Depression Scale (HADS) and a subjective measure of their face, back and chest acne. The Leeds Acne Grading Scale was used to objectively measure clinical severity.

Results indicate a strong illness identity was positively associated with beliefs in serious consequences, illness coherence and greater emotional representations of internal reproductive anatomy. The technique also enabled the identification of misconceptions regarding reproductive anatomy were less apparent seven months after sex education, indicating poor retention.

Discussion: Children's drawings are a useful means by which to assess knowledge of reproductive anatomy. The technique also enabled the identification of misconceptions in children's knowledge. Two different drawings: knowledge of internal biological processes is important for the development of health education programmes that target the negative physical representations associated with unhealthy behaviours.

Psychosocial characteristics of dental patients who gag
K. HEER, J.M. HAINSWORTH, K.J. FAIRBROTHER & K.B. HILL, Birmingham Dental Hospital.

Background: A pronounced gag reflex can disrupt dental care. The Expert Patient Programme (EPP) aims to provide a profile of a typical patient with gagging, with a view to develop a caregiving opportunity for patients to gain more insight into their illness whilst seeking to preserve a masculine social identity.

Methods: Patients attending the Anxiety Management Clinic, Birmingham Dental Hospital, were invited to complete a questionnaire comprising four parts: social background; onset of problem; triggers to gagging; and quality of life. The sample consisted of 16 patients (nine female; seven male).

Findings: Gagging was most common in patients aged 40 to 49, with a mean duration of 15.73 years. Data indicated a higher prevalence amongst white patients than those of African-Caribbean descent. Common triggers to gagging included brushing teeth, having dental instruments placed in the mouth, eating certain foods, and an associated fear or sensation of choking. Common triggers to gagging included brushing teeth, having dental instruments placed in the mouth, eating certain foods, and an associated fear or sensation of choking. Most patients were non-smokers (N=12) and consumed an average of six units of alcohol per week. Quality of life scores ranged from four to 70 (maximum=98). One patient's dental problems were having a significant impact on their quality of life.

Discussion: Participating in the study was an opportunity for patients to gain more insight into their gagging difficulties. The study aimed to increase awareness and appreciation of the triggers to gagging and to enable more effective treatment plans to be formulated from both a dental and psychological perspective.

The cultural appropriateness of the Expert Patient Programme: White 'tutors' views
A.E. HIPWELL, A.P. TURNER, J.H. BARLOW & C.W. WRIGHT, Coventry University.

Background: The Expert Patient Programme (EPP) is predominantly attended and tutored by white participants. Phase I of this study aimed to explore white EP tutors' experiences of tutoring South Asian (SA) EPP attendees and the tutors' perceptions of the cultural appropriateness of EPP for SA attendees.

Method: Semi-structured interviews were performed with all five of Coventry PCT's EPP tutors from across the UK who have delivered EPP to SA attendees and Phase III interviews with members of the SA community. A university cultural knowledge deficit. Phase II interviews with bilingual EP tutors from the UK who have delivered EPP to SA attendees and Phase III interviews with members of the SA community. A university cultural knowledge deficit. Phase II interviews with bilingual EP tutors from across the UK with the instruction to draw all the following sex education, misconceptions regarding reproductive anatomy were also evident. Representations of internal reproductive anatomy were less apparent seven months after sex education, indicating poor retention.

Discussion: Children's drawings are a useful means by which to assess knowledge of reproductive anatomy. The technique also enabled the identification of misconceptions in children's knowledge. Two different drawings: knowledge of internal biological processes is important for the development of health education programmes that target the negative physical representations associated with unhealthy behaviours.

An investigation of the Fear of Dental Pain Questionnaire: Reliability and validity
C.J. HO et H. BUCHANAN, University of Derby.

Background: Dental anxiety (DA) is distressing for both patients and dental professionals. For patients, DA may be a central contributing factor in the development and maintenance of DA, therefore, a specific tool to measure anxiety associated with dental treatment would be useful. The aim of this research is to investigate the psychometric properties of the English translation of van Wijk & Hoogstraten's (2003) Fear of Dental Pain Questionnaire (E-FDPQ) and whether the E-FDPQ itself increases anxiety.

Methods: Study 1 was designed to test whether the E-FDPQ increased anxiety. 104 participants completed measures of state anxiety and trait dental anxiety one week before and immediately after completing either: (1) the E-FDPQ; (2) a neutral questionnaire. In Study 2, 172 participants completed the E-FDPQ and the Dutch version; test-retest reliability was good (N=65), identified five common themes. These were coded as 'asthma identity', 'managing asthma', 'personal and social identity, 'being expert', and 'sport'. The theme of 'sport' appeared to be particularly salient as a key social activity enhancing a sense of social inclusion and normality, and also as a problematic context in which asthma is triggered and made visible at a personal and social level. A specific tool to measure anxiety would appear to represent the point at which the sense of difference from others becomes apparent.

In contrast, the normative beliefs of asthmatic and non-asthmatic adolescent males and females (N=120) regarding MAA ability and desire to participate in sports as part of the normal school curriculum to manage asthma in this context were elicited. The results indicated that while normative beliefs were generally positive, some effects of gender and asthma status were present.

The key to successful management of asthma lies in a proactive, preventative approach, supported by clear focus and support. Preliminary findings suggest that to meet the challenge of managing this chronic illness whilst seeking to preserve a masculine social identity, an avoidance of treatment, an anti-living psychrophobic treatment approach is employed, resulting in poor self-regulation of asthma.

Findings: In Study 1 there were no significant differences in pre-post anxiety scores across the three conditions, study 2 showed a factorial structure similar to that found with the Dutch version; test-retest reliability was good (r = 0.74, p < 0.01) and moderate correlations were found between the E-FDPQ and the Dutch translated anxiety measures (r = 0.65, p<0.01 for both). In Study 3, face validity was generally supported with suggestions for improvements. Conclusions: With minor translation amendments, the E-FDPQ is a valid, reliable and appropriate tool for measuring FDP, which can be employed, without increasing anxiety, among English-speaking samples.
Attitudes and beliefs about the uptake and adherence of exercise and physical activity in 60- to 70-year-olds in relation to fall prevention
M. HORNÉ, D. SKELETON & C. TODD, University of Manchester.

Background: Primary objective was to investigate attitudes and beliefs of community dwelling 60- to 70-year-olds towards uptake and adherence of exercise and physical activity relating to fall prevention.

Methods: Ethnographic qualitative study using nine focus groups (N=58; mean age=65.41 y) and 22 semi-structured interviews (mean age=64.91 y). Framework analysis was used for data classification.

Findings: Five themes emerged:
1. Perceptions of exercise and physical activity – meaning differences between exercise and physical activity; appropriate activities.
2. Reasons for undertaking exercise and physical activity – socialisation, general health and well-being, mobility/maintaining independence, longevity, weight reduction, personal development and self-satisfaction.
3. Motivation – social support, re-establish identity and ‘normality’ after retirement/bereavement, enjoyment, keeping up with the family, weight reduction and general feeling of well-being.
4. Barriers – general health, lack of confidence/motivation, no support or encouragement to remain physically fit and active and carer issues.
5. Beliefs surrounding exercise in relation to fall prevention.

Discussion: Older people are not generally motivated to perform exercise and physical activity on a regular basis purely to help prevent falls. Their main reason for taking up exercise or physical activity is largely for social contact, enjoyment, expression and self-development; the health aspect appears to be a secondary motivator only. Future work using the theory of planned behaviour will investigate the relative strength of these different components.

Stress in palliative care: Optimism, self-efficacy and social support
N.J. HULBERT, Cardiff University & V.L. MORRISON, University of Wales, Bangor.

Background: Caring for the terminally ill is a demanding, but rewarding area of health care. Staff and carers in this working environment put caregivers at risk from stress-related illness. This study aimed to investigate the effects of optimism, self-efficacy and social support against stress, comparing professional and volunteer caregivers at risk from stress-related illness. This study has examined the long-term psychosocial outcomes of this population although anecdotal evidence suggests that needs are high. The standard of care following discharge of paediatric care is poor and the necessity of providing dedicated services for adult women has been questioned. This descriptive study looked at quality of life in adult women and examined the influence of age and educational level on psychosocial outcome.

Methods: Questionnaire-based study of a cross-sectional sample of women attending a specialist TS clinic.

Findings: 109 women (mean age=32.2; sd=10.0) completed the WHOQOL-BREF; HADS and a demographic questionnaire. Age was negatively correlated with all domains of the BREF–26 (range: n=0.2 to –3.0, p<0.005) and was positively associated with depression (r=0.24, p<0.001) but not anxiety (r=0.19, p=0.051). Women with lower levels of education had poorer quality of life in the physical (F4.36,f=103, p=0.039), psychological (F9.45,f=1103, p=0.003) and environmental domains (F11.5,f=104, p=0.001) but not in the social domain (F0.75,f=1104, p=0.785). Less education was also associated with higher levels of anxiety (F10.04, df=102, p=0.02) and depression (F10.49,f=101, p=0.02).

Discussion: Women at risk of poor quality of life and clinically significant levels of psychological distress. Women with lower educational levels appear to be particularly vulnerable. The findings also suggest psychosocial outcomes are associated with increasing age highlights the need for medical and psychological input for TS women across the lifespan.

Does social problem-solving protect against distress?
S.M. LANG & M. HIPWELL, Queen Margaret University College.

Background: Social problem-solving is a self-directed metacognitive strategy (as defined by Rubin, 1989) which emphasises the importance of addressing problems as they arise. This study extended contemporary research in this area to consider the applicability of the social problem-solving model to Type 1 diabetes. This population experiences a higher problem load due to the challenges of diabetes self-management. It was proposed that those with more effective problem-solving ability will experience lower levels of anxiety, depression and stress.

Methods: A cross-sectional, between-group design was applied. Ninety-six participants (17- to 80 years-old) were drawn from an international diabetes population using the internet. The Social Problem-Solving Inventory-Revised was applied to assess problem-solving ability, with the Hospital Anxiety and Depression Scale and Perceived Stress Scale identifying levels of emotional distress. A MANCOVA was conducted to assess distress levels for high, medium and low social problem-solving groups. Time since diagnosis was a covariate.

Findings: Results of the analysis were found to be statistically significant (F2, 92)=4.13, p<0.01; Wilk’s Lambda=0.77, eta-squared=0.13 confirming the hypothesis.

Discussion: This study indicated that those with more effective problem-solving skills reported less emotional distress than those with ineffective problem-solving ability. This was true for all age bands, from 17 to 80. It is proposed that teaching social problem-solving skills may enhance protection against distress in a diabetic population.
Investigating the relationship between dispositional optimism, perceived cancer risk and breast/testicular self-examination

P.A. LIST, M. TRUeman, Keele University, M.P. JOHNSON, University of Newcastle, Australia & T.R. BAKER, University of Sheffield.

Background: Research indicates that dispositional optimism is positively associated with various adaptive health behaviours, including exercise, breast/testicular examination and skin self-examination. Some studies suggest that this relationship is most evident among people who consider themselves to be at increased risk of a related health problem. This study explores the relationship between dispositional optimism, perceived cancer risk and breast/testicular self-examination.

Methods: 137 adults (86 females, 51 males) were recruited using a snowballing method. Each completed the revised Life Orientation Test and a perceived breast/testicular cancer risk measure. They categorised on the basis of their dispositional optimism, perceived cancer risk, and breast/testicular self-examination. They also reported their self-examination frequency during the previous year. Participants were categorised on the basis of their dispositional optimism and perceived cancer risk scores, and a 2 x 2 (dispositional optimism: low, high x perceived cancer risk: low, high) between-groups ANOVA was calculated with number of self-examinations as the dependent variable. It was hypothesised that there would be an interaction between dispositional optimism and perceived cancer risk: participants with high perceived cancer risk and high dispositional optimism would report more frequent self-examinations than those with high perceived cancer risk but low dispositional optimism.

Findings: Significant main effects of both dispositional optimism (F(1,125)=5.716, p<0.001) and perceived cancer risk (F(2,125)=42.56, p<0.001) were found: high dispositional optimism and high perceived cancer risk were associated with more self-examinations. In addition, there was a significant interaction between dispositional optimism and perceived cancer risk (F(2,125)=36.40, p<0.001), which supported the hypothesis.

Discussion: These findings indicate that dispositional optimism is indeed most strongly associated with adaptive health behaviours among people who perceive themselves to be at increased risk.

Psychological correlates of intention to attend breast screening and actual breast screening among Malaysian women

H.S. ABDUL MAJID, International Islamic University of Malaysia.

Purpose of study: To identify psychological variables associated with planned behavior (TPB) that correlate with intention to attend breast cancer screening and actual breast cancer screening three years later among Malaysian women, using data from a prospective longitudinal study.

Method & Material: 300 women who had never had breast screening completed and returned a set of questionnaires distributed to them at their workplace. The questionnaire included items to tap attitude, subjective norm and perceived behavioural control and intention to attend and actual breast screening.

Findings: Perceived control and subjective norms towards breast screening significantly predicted intention to attend breast cancer screening. At three years later, women who had attended breast screening had more positive attitudes towards breast screening and stronger perceived control as assessed at baseline. Women who attended at three years ago had stronger intention to attend at baseline compared to those who had not attended breast screening.

Discussion: Perceived control appears to play an important role in shaping the intention to attend breast screening as well as the actual behaviour among Malaysian women. Health education and promotion should gear towards empowering Malaysian women to increase their health-related primary preventative behaviours.

Does birth experience have a lasting effect on personality?

A. MANYANDE & E. STROWGER, Thames Valley University.

Background: Animal studies have found that early experience of birth (birth and maternal separation) have long-term effects on behaviour (Boksma & Elkhodor, 2003; O’Day & Kraemer, 1999). Some studies have suggested that birth experience may have a lasting effect on humans e.g. Cantor-Graae and Ismail (2000) found a link between birth complications and later schizophrenia. There is also evidence that early experience (e.g. neonatal circumcision) causes a long-term sensitisation of the stress response (Taddio & Katz, 1997). Methods: A total of 117 participants completed the standardised Personality Trait Scale from the Five-Factor Model (McCrae & Costa, 1997). These were: (a) Agreeableness; (b) Extraversion; (c) Self discipline; (d) Dutifulness; (e) Anger; and (f) Anxiety. Background variables were also assessed including type of birth (long, short, caesarean, forceps, normal, etc), drugs used during labour, complications and separation after birth. Unrelated two-way ANOVA and unpaired t-tests were used to test for significant differences.

Findings: Analysis of the data shows that there was a significant effect of separation after birth on scores of anxiety and depression: starting tasks and this effect was pronounced for individuals in the ‘stress’ stress at birth group. A close to significant interaction was also found between length of labour and anxiety. There were no significant differences in personality traits between types of birth experienced.

Discussion: The results indicate that maternal separation (after stressful birth) makes it more difficult to start tasks and drugs administered during labour (long labour without drugs makes more anxious adults) may have long-term effects on the personality of the child and it is possible that birth experience mediated by the HPA axis. The theoretical and practical significance of these findings is quite substantial as they may have implications for the delivery of maternity services in supporting mother and child during childbirth. Future research could explore whether the impact of separation is proportional to the duration of separation.

Does the sedative influence of music reduce intra-operative requirements of propofol during major abdominal surgery?

A. MANYANDE, X.W. ZHANG, Y. FAN, Y.K. TIAN & P. YING, Thames Valley University and Huazhong University of Science and Technology.

Background: Music has been shown to decrease anxiety and level of sedation in patients undergoing surgery. However, most previous studies used conscious or lightly sedated patients and very few outcome measures. This study was designed to determine whether the calming effects of music during combined spinal–epidural anaesthesia could reduce the intra-operative requirements of propofol during hyrectomy.

Method: In a double-blind randomised clinical study, 100 women undergoing abdominal hysterectomy were allocated to either music or no music group. Music consisted of music or taped drill-in of propofol. Propofol concentration was adjusted gradually to achieve an observer’s assessment of alertness/sedation of three intra-operatively. The haemodynamic and bispertal index values during the sedation phase were recorded. Interleukin-6 was evaluated before, immediately after and one hour following intervention. Induction time, propofol target concentration, amount of propofol, cardiovascular depression and respiration depression were noted. Other outcome variables studied include systolic and diastolic blood pressure, heart rate, duration of surgery, duration of target control infusion and levels of satisfaction with care recorded by means of a visual analogue scale.

Results: The most significant outcome of the study was that patients exposed to music required reduced intra-operative amounts of propofol (p<0.05) and lower levels of propofol target concentration (p<0.02). Patients in the music group also experienced greater levels of satisfaction with care (p<0.02) and less induction time (p<0.05) than the control group. No other differences were noted.

Discussion: These findings tentatively confirm the importance of lowering anaesthesia using a non-pharmacological intervention. However, a much larger study would be needed to demonstrate whether there is a consistent reduction in concentration and level of anaesthesia requirements. If so, with those high levels of discord surrounding surgery, this might benefit from psychological interventions such as music or other relaxation techniques.

A longitudinal study of clinical and psychological status in Ankylosing Spondylitis


Background: Psychological factors may play an important role in the course and outcome of Ankylosing Spondylitis (AS) and also in clinical assessment and management of the condition. We previously assessed 168 AS patients regularly attending Wightington Hospital over two years in order to identify possible associations between clinical and psychological status.

Methods: 110 AS patients were assessed at six-monthly intervals on four occasions using validated tools for clinical (BASMI, BASFI, BASDAI) and psychological status (HADS and HLC-C). Data were stored and analysed in SPSS using independent samples, t-tests and Spearman’s rank correlation.

Findings: 89 participants completed all four assessments. The mean clinical and psychological scores were stable over the 18 months. Anxious and depressed subgroups had consistently worse disease activity (anxiety: p=0.003, depression: p=0.010) and function (anxiety: p=0.002, depression: p=0.007), but not range of movement (anxiety: p=0.114, depression: p=0.216).

Clinical scores correlated consistently and significantly with psychological scores but these correlations were nullified or reduced within subgroups as defined by anxiety, depression, disease duration >2 years and co-existent psychiatric comorbidities. Subgroups still generally worse clinical status although no effects were identified for those with beliefs in powerful others or chance.

Discussion: Clinical status in AS correlated significantly and consistently with anxiety, depression and internality over 18 months. We had identified patient subgroups for which the strength of clinical/psychological associations has differed markedly. Thus interpretation of clinical scoring needs to take psychological factors into account. These findings have important potential applications both in the assessment and management of AS patients.

Emotional disclosure: A tutor’s perception

L.A. McFARLAND, J.H. BARLOW, A.P. TURNER & C. WRIGHT, Coventry University.

Background: The role of emotional disclosure in the self-management of long-term conditions (LTC) is quite substantial as they may have implications for the delivery of maternity services in supporting mother and child during childbirth. Future research could explore whether the impact of separation is proportional to the duration of separation.
**Spouse control beliefs and predicting recovery from stroke: General and specific control measures**

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**Background:** Data show that spouse control beliefs potentially influence patient health outcomes. Theory would suggest that the more specific the level of measurement of control beliefs the better the prediction of health outcomes. This study is investigating whether the specificity of control beliefs in spouses improves the prediction of health outcomes in stroke patients. The control hypothesis tests this in a sample of stroke patients.

**Methods:**

- **Design and sample:** Longitudinal study; Measures were gathered at two time points, two and eight weeks following discharge. N=75 stroke patient/spouse dyads. The dependent variable was the patient's ambulation recovery scale of the Functional Limitations Profile.
- **Predictor variables:** A single item was used to measure specific control beliefs and a patient perceived behavioural control about a specific ambulation behaviour that patients could not currently perform. General spouse perception of patient perceived behavioural control was assessed using a four-item scale.

**Analysis:** Correlations between control beliefs and ambulation recovery were investigated.

**Findings:** The behaviour specific measure of spouse control beliefs was significantly correlated with patients' ambulation recovery (r=0.24, p<0.05), while the general measures of spouse control at eight weeks was not, r=-0.12, n.s.

**Discussion:** The specific spouse control beliefs about recovery were associated to predicted to stroke patient recovery over eight weeks while the spouse general control beliefs about recovery were not. Targeting specific control beliefs, rather than in spouses appearing to have the potential to improve recovery in stroke.

**How do we measure patient ‘enlightenment’? Evaluating the benefits of a service user informed programme of education and support for people with Type 1 diabetes**

M. MORRIS, S. BOOKER, University of the West of England & A. JOHNSON, Southmead Hospital, North Bristol NHS Trust.

**Background:** This study was designed to evaluate the impact of a programme of education and support for people with Type 1 diabetes. The efficacy of programmes of education are often evaluated on self-report and diabetes questionnaires but do not measure individual experiences or their subjective impact.

**Methods:** 90 people with Type 1 diabetes were recruited to an eight-week user informed programme of education and support. Twenty per cent of people with Type 1 diabetes before they took part in the programme to explore their expectations and the problems they were experiencing at that time. Follow-up interviews were used to identify what participants had learnt, changes they had made to their self-management regimens and what they perceived to be the most valuable elements of the programme. One hundred and seventy volunteer participants were interviewed before and after the programme.

**Findings:** Data analysis suggests the most common patterns of regimen change involved the management of hypoglycaemia, flexibility with their insulin, and managing illness and stress. It was also clear that a number of participants experienced times that could be categorised as ‘enlightening’ during the course of the programme. These ‘experiences’ were unique to each participant and were major turning points in their diabetes self-management.

**Discussion:** These ‘experiences’ are often ignored because they cannot be measured or quantified by standardised questionnaires. Therefore, the full impact of interventions and the possibility of interventions to modify a person’s humour styles to benefit health should be investigated.
through collaboration with a team of specialists. Findings: Six proximal programme objectives were developed, based on patient-child communication. Learning and change objectives, based upon abilities, knowledge, skills and self-efficacy, identified the immediate focus for the proximal programme. Theoretical and practical methods and practical strategies utilised theories of attitude change and formation, theories of learning and social representations. The three components produced were a standalone single session and a course of six sessions preceded by a taster session. Materials produced were a facilitator support pack, a patient’s portfolio, and a stand-alone leaflet. Discussion: Through employing experimental methods, providing clear descriptions of interventions and ensuring theoretical specificity, this research has potential to contribute significantly to the existing body of evidence following an evaluation of effectiveness.

Building self-control strength over time M. OATEN & K. CHENG, Macquarie University, Sydney.

Background: This research investigates whether the repeated practice of self-control improves regulatory strength over time. In three longitudinal studies, we recruited university students to participate in a programme of self-regulation.

Methods: The self-regulation programme concerned physical exercise, a study programme to reduce errors during exams, and monitoring financial behaviour.

Findings: Manipulation checks indicate exercise increased from one to six sessions per fortnight (for those in the physical activity programme), study time increased on average by 10% per week in the study programme, and savings as a per cent of income increased on average by 30 per cent (for those in the financial monitoring programme). These students also showed significant improvement in self-regulatory capacity as measured by a laboratory task (Stroop; VTT) and self-reported regulation by participants. This paper will focus on the meaning of pain, and emotional meanings, which are not fixed and for many are ontologically invisible. However, pain encompasses individual’s difficulties in explaining sensations that cannot be seen (i.e. making the invisible visible). Furthermore, emotional meanings can be influenced by cultural, social and emotional life. Discussion: This study highlights how the lived experience of chronic pain patients is at odds with a biomedical approach to pain and pain management. This has implications for practice and medical education, as health professionals need to be supported in taking a bio-psychosocial view that is more in tune with patient needs. There is a need for further research in this area as it appears that previous experience of living with pain may be very influential on the meanings that people attribute to their pain, and may transcend demographic factors.

Representations of polycystic ovary syndrome in UK women’s magazines: A qualitative analysis C. PERCY, Coventry University.

Background: Polycystic ovary syndrome (PCOS) is a disorder that affects four to eight per cent of women of reproductive age. It is characterised by anovulation, irregular periods and difficulty conceiving. Women with PCOS may also experience weight gain and the growth of unwanted facial and body hair. PCOS poses broader health risks for women, including obesity and problems associated with insulin resistance. As women’s magazines have been shown to be an important source of health information, it is useful to explore their coverage of PCOS, and the quality of information provided.

Methods: Articles relating to PCOS were collated from issues of the most read UK women’s magazines published in 2003–2004. These were subjected to content analysis.

Findings: Findings indicate that magazine articles relate mainly to reproductive and appearance concerns. Where weight is addressed, the focus is primarily on appearance, and often without health implications of PCOS are given less coverage.

Discussion: The analysis suggests that PCOS is often represented in women’s magazines in a limited way, emphasising the impact of PCOS on capacity to conceive, and on problems concerning
Barriers to recruitment in cancer clinical trials: Doctors’ and patients’ perceptions of suitability for trials

Discussion: The results provided support for the original theoretical model and emphasise the importance of time-related factors, regrets about the past, and feelings about the future. A more detailed examination of these constructs is required to allow for the development of useful assessment tools and interventions.

Cancer and work: The effects of cancer on working lives
J. PRYCE, University of London, J. MORRELL, CancerBACUP, F. MUNIR, C. HASLAM, K. COX, University of Nottingham & F. BOND, University of London.

Approximately 90,000 people of working age are diagnosed with cancer (Office of National Statistics, 2000). Recent developments in drug treatment have meant that the majority of cancer patients go on to make a full recovery and subsequently, this means that more people continue to resume their everyday life during or following treatment – including remaining in or returning to employment. Despite this, little is known about the specific work-related needs of cancer patients during this transition. With this in mind, alongside them (e.g. employers, line managers, co-workers and (Occupational) Health professionals), CancerBACUP distributed a questionnaire to cancer patients who had been referred to the service. The survey included items of cancer-specific and generic demographic information, disclosure and self-efficacy, work and non-work-related supports and needs. Results suggest that cancer effects working lives in a different way to other chronic illnesses. Specifically, in comparison to studies of other chronic illnesses, e.g. diabetes, irritable bowel syndrome. The predictors of working during and following treatment, work satisfaction and receiving work adjustments were also explored. The implications are three fold. There is need to:

(i) better understand the effects of cancer and the changing experiences at work across the treatment and post-transition period; 
(ii) improve the information and support for cancer patients about managing their work issues in the workplace and health care settings; and 
(iii) develop a theoretical model of cancer and work to inform research and practice.

Recruiting first degree relatives for prevention research: A comparison of direct and indirect methods of contact
E. REID, T.M. MARTEAU, King’s College London, A. FORBES, St. Mark’s Hospital, J. SANDERSON, Guy’s and St. Thomas’ Hospital Trust, C. MATHEW & C. LEWIS, Guy’s, King’s and St. Thomas’ School of Medicine.

Background: There is increasing interest in conducting gender-related epidemiological and behavioural studies with relatives of identified patients with common multitudes of conditions. The most effective way of approaching such relatives is unknown. We report on two methods of approaching relatives, identified by patients: researchers contacting relatives directly; researchers contacting relatives indirectly via patients. We predict that the former will lead to a higher response rate.

Methods: 377 patients with Crohn’s disease attending one of two hospitals consented to their first degree relatives being approached to complete a brief questionnaire assessing interest in prevention research. Thirty-five per cent (133/377) of patients gave the names and addresses of 392 relatives directly contacted by the researchers; 38 per cent (144/377) requested study materials be sent to them so that they could pass the materials on to their relatives. Overall, 0.79 per cent (6/737) requested a mixture of the two methods and 25 per cent (94/377) failed to meet inclusion criteria.

Results: 246 responses were received from patients (306/392 (78 per cent) of their relatives directly contacted) and 412 relatives (108/144 (76 per cent) of those directly contacted by researchers) responded. Similarly high numbers in each group expressed interest in participating in the research (89 per cent (262/296) direct; 86 per cent (240/276) indirect).

Discussion: As predicted, direct contact maximised response rates. Concern has been expressed that direct contacting may undermine the privacy of relatives. The high level of interest in research across the two recruitment methods suggests that although indirect methods may maximise privacy, they may also allow the opportunity to take part in research that is of interest.

The effects of a risk-image manipulation upon young people’s prototype perceptions
A. RIVIS, University of Derby.

Background: The aims of the present study were to: (a) examine the importance of drinker and non-drinker images for young people’s drinking decisions; and (b) examine the effects of manipulating the concreteness of actor versus abstainer images upon young people’s prototype perceptions.

Methods: The study employed a 2 (image: actor versus abstainer) x 2 (image type: prototype versus exemplar) x 2 (image recall: immediate versus delayed) design. N=232 undergraduate students voluntarily completed standard measures of prototype perceptions and variables from the theory of planned behaviour (Ajzen, 1991) and the Willness Model (Gibbons & Gerard, 1995). The data were analysed using MANOVA and regression analysis.

Findings: Findings showed that: (a) perceptions of both drinker and non-drinker images were predictive of young people’s drinking decisions; and (b) the manipulation most strongly affected prototype perceptions. Specifically, those people who had been asked to focus upon an abstainer prototype, such that prototype perceptions were more favourable among participants’ who had been asked to focus upon an exemplar of the non-drinker prototype category than among participants who had been asked to focus upon an exemplar of the non-drinker category (N=68.10 vs. 59.77 and 60.59 vs. 53.42, abstainer and actor perceptions, respectively).

Discussion: The findings: [a] replicate previous work supporting the predictive validity of actor and the concreteness of the prototype in valuing related behaviour; and [b] possess implications for interventions aimed at increasing the favourability of non-drinker images, and decreasing the favourability of drinker images.

Social adaptation and respiratory infection in pre-school children transitioning to school
L. RIXON, J. TURNER-COB, University of Bath & D. JESSOP, University of Bristol.

Adaptability to stress is shaped early in life and the potential of hypothalamic-pituitary-adrenal (HPA) axis activity to influence health later in life were examined. The present ESRC-funded study investigated 105 children experiencing the social stressor of primary school transition. Children were recruited from pre-schools in the south-west of England. Parents and teachers longitudinally (over 12 months) recorded adaptation, temperament, salivary cortisol and resistance to upper respiratory infection (URI) at three time points: (1) within six months prior to; (2) two weeks after; and (3) six months after, starting school. Results revealed a trend towards an increase in awakening and evening cortisol at school transition. Teacher reports of higher internalising social isolation, introversion, anxiety and the school transition predicted lower awakening cortisol and extraversion predicted higher awakening cortisol. Temporospatial characterised by higher activity levels and extraversion/surgery were related to higher evening cortisol and higher reports of smiling and laughter and teacher reports of greater impaired physical health. Longer URI duration was predicted by awakening cortisol and flatter diurnal cortisol decline, whilst evening cortisol negatively predicted the onset of URI during months two and six post-transition. Evening cortisol consistently and negatively predicted onset of URI. In conclusion, the study has implications for understanding factors that predict the developing stress-response in young children, with associated repercussions for health across the lifespan.

The role of scheduling efficacy in promoting exercise adherence and alleviating depressive symptoms
M. RYAN, The University of Texas at San Antonio.

Background: A significant limitation of many studies of exercise as an antidepressant is the transparent nature of the depression measures. The expectancy biases of the parents also confounded findings in these studies. The present study minimises expectancy artefacts while evaluating self-efficacy and self-esteem accounts of the phenomenon.

Methods: 188 male and 193 female undergraduates completed questionnaires ‘designed to identify factors promoting adherence to an exercise programme’. The Physical Self-Description Questionnaire (PSDQ) provided subscale scores for physical activity level, perceived physical endurance, physical self-esteem, and global self-esteem. Task efficacy and scheduling efficacy scores were assessed. The Symptom Assessment–45 includes symptoms of depression among those of other psychological disorders and was presented as an inventory of ‘disturbing thoughts and concerns that frustrate exercise efforts’.

Findings: PSDQ and self-efficacy scores were entered simultaneously into separate regression analyses to predict depressive symptoms for males and females. Scheduling efficacy significantly decreased depressive symptoms in both male and female respondents (βs=.252 and −.219), as does global self-efficacy (βs=.424 and −.210). However, physical activity level has no direct effect on depression (β=.023). Furthermore, task scheduling efficacy are significant predictors of physical activity level, with physical activity level having a stronger direct effect on scheduling efficacy that are mediated in turn by perceived physical endurance, physical self-esteem, and global self-esteem.

Discussion: These findings indicate that scheduling efficacy produces both direct and indirect
Discussion:

predictor of intention for all behaviours was PBC, behaviour increased these values to 52.0 per cent variance in behaviour. Inclusion of past per cent of the variance in intention and 10.2 per cent of the variance in behaviour as a predictor improves these figures markedly lower. Although RAF trainees are ostensibly free-living, certain criteria are imposed on their physical activity participation; the effects of weight obligatory to exercise. The small amount of variance in step count explained by self-reported behaviour suggests participants are unable to accurately recall incidences of walking. This supports previous suggestions that habitual behaviours, such as walking, are not open to introspection (Buelette & Wood, 1998) and thus cannot be accurately reported (Aarts & Dijkstra, 1999). These findings have major implications for measurement in walking promotion interventions. **Self-reported walking explains little variance in actual step count** E.J. SCOTT & F.F. EVES, University of Birmingham.

**Background:** The American College of Sports Medicine (1995) recommends accumulating 30 minutes of accumulated moderate intensity physical activity on most days of the week. Walking at a self-selected moderate-to-brisk pace fulfils the moderate intensity criterion and can easily be accumulated in daily life. Thus walking has become a major target of health promotion. **Methods:** 138 RAF trainees (77 per cent male, aged 20.06±3.72 years) were New Lifesystems NI-2000 pedometers for seven days. Participants then completed a seven-day Physical Activity Recall interview (Salis, Haskell & Wood, 1985), during which participants itemised all incidences of physical activity during the week. Walking, marching and running were identified as possible contributors to step count and regressed against recorded step count. **Results:** In total participants recorded 79,671 ± 22,220 steps, correlation between step count and self-reported walking across the week was low (r=0.063, ns). Separating step count into weekdays (working days) and weekends noticeably improved correlation for weekdays (r=0.175, p<0.05) but not weekends (r=-0.029, ns). Regression of identified contributors on step count explained 7.5 per cent weekdays variance, with running as the only significant predictor (β=0.263, p<0.001) and 1.7 per cent weekend variance. Discussion: The small amount of variance in step count explained by self-reported behaviour suggests participants are unable to accurately recall incidences of walking. This supports previous suggestions that habitual behaviours, such as walking, are not open to introspection (Buelette & Wood, 1998) and thus cannot be accurately reported (Aarts & Dijkstra, 1999). These findings have major implications for measurement in walking promotion interventions. **An exploration of the experiences of children with diabetes** K.L. SHEPHERD, University of the West of England. **Background:** This is a qualitative study employing grounded theory methodology (Strauss et Corbin, 1994) to explore the life experiences of young people 11 to 17 years of age with insulin dependent diabetes mellitus (Type 1). A plethora of research has been conducted about children with chronic disease, but the range of research involving children and appertaining to their conceptualisation of health and illness is quite narrow and limited. This exclusion of children from research has restricted the understanding researchers may gain of the ill child (Broom & Richards, 1998).

The aim of the study was to access young people's thoughts and perceptions regarding living with a chronic disease and how this impacts upon their lives. Diabetes encompasses extensive behavioural demands and invades all aspects of young people's physical, psychological, social growth and development. Investigating and analysing children's perspectives on living with diabetes, gives them a 'voice' (Mayall, 1996) whilst considering their social impact/power as consumers of health care and their positioning as a minority social group (Brough & James, 1999).

Methods: 146 RAF trainees (77 per cent male; aged 20.2±4.02 years) completed both parts of the study. During the first visit participants completed a questionnaire containing scale-correspondent measures of TPB predictor variables, including past behaviour and its influence on intentions and 10.2 percentage in behaviour. Inclusion of past behaviour increased these values to 52.0 per cent and 7.7 per cent in behaviour. The stronger predictor of intention for all behaviours was PBC, with affective attitudes making a significant contribution for some activities. Discussion: The predictive validity of the TPB within this population was comparable to those used in previous research, however, for behaviour the amount of variance explained was markedly lower. Although RAF trainees are ostensibly free-living, certain criteria are imposed on their physical activity participation; the effects of this on the modelling of behaviour will be discussed.

**Breaking bad news: Investigating gender and communication style using the Medical Interaction Process System**

E.J. SCOTT & F.F. EVES, University of Birmingham.

**Background:** The theory of planned behaviour (TPB, Ajzen, 1991) has been confirmed as a valid model for predicting physical activity behaviour, explaining 45.5 per cent variance in intentions and 27.4 per cent variance in behaviour for physical activity. The addition of past behaviour as a predictor improves these figures further (Hagger, Chatzisarantis & Biddle, 2002). This study investigated whether the TPB was effective as a predictive model when used in a non-free-living population.

**Methods:** 146 RAF trainees (77 per cent male; aged 20.2±4.02 years) completed both parts of the study. During the first visit participants completed a questionnaire containing scale-correspondent measures of TPB predictor variables, including past behaviour and its influence on intentions and 10.2 per cent variance in behaviour. Inclusion of past behaviour increased these values to 52.0 per cent and 7.7 per cent in behaviour. The stronger predictor of intention for all behaviours was PBC, with affective attitudes making a significant contribution for some activities.

Discussion: The predictive validity of the TPB within this population was comparable to those used in previous research, however, for behaviour the amount of variance explained was markedly lower. Although RAF trainees are ostensibly free-living, certain criteria are imposed on their physical activity participation; the effects of this on the modelling of behaviour will be discussed.

Health professionals’ views of clinical guidelines regarding communicating the care management plan to patients N.K. SHERGILL & L. YARDLE, University of Southampton.

**Background:** Clinical guidelines, such as those developed by NICE, have the potential to enhance clinical effectiveness. Research has shown that there is great variability in the application of clinical guidelines by health professionals. The theoretical framework to investigate the implementation of a clinical guideline is the Communication Process Model (CPM) (Ford et al., 2000). This tool allows the exploration of the content of speech (for each utterance) during the consultation including: content of speech (medical and social/psychological issues) and modes of exchange such as giving information, question asking, showing agreement and giving empathy and support. Doctors were also rated on body language and patient centredness using a Likert scale within the MIPS.

**Results:** The small amount of variance in step count explained by self-reported behaviour suggests participants are unable to accurately recall incidences of walking. This supports previous suggestions that habitual behaviours, such as walking, are not open to introspection (Buelette & Wood, 1998) and thus cannot be accurately reported (Aarts & Dijkstra, 1999). These findings have major implications for measurement in walking promotion interventions. **An exploration of the experiences of children with diabetes** K.L. SHEPHERD, University of the West of England. **Background:** This is a qualitative study employing grounded theory methodology (Strauss et Corbin, 1994) to explore the life experiences of young people 11 to 17 years of age with insulin dependent diabetes mellitus (Type 1). A plethora of research has been conducted about children with chronic disease, but the range of research involving children and appertaining to their conceptualisation of health and illness is quite narrow and limited. This exclusion of children from research has restricted the understanding researchers may gain of the ill child (Broom & Richards, 1998).

The aim of the study was to access young people's thoughts and perceptions regarding living with a chronic disease and how this impacts upon their lives. Diabetes encompasses extensive behavioural demands and invades all aspects of young people's physical, psychological, social growth and development. Investigating and analysing children's perspectives on living with diabetes, gives them a 'voice' (Mayall, 1996) whilst considering their social impact/power as consumers of health care and their positioning as a minority social group (Brough & James, 1999).

Methods: 17 participants participated in a semi-structured interview. Non-participant observations were carried out at all the clinics. Data from the interviews and observations was coded in line with the tenets of grounded theory, utilising the software package Atlas Ti.

Findings: Young people with diabetes are conscious of the extent of the demands independent on the balance of power. They present a multi-dimensional image of ‘self’, shaped by context and association rather than disease. The diabetes is another facet of the self, which has catalystic rather than defining qualities. Notions of ‘normality’ and attainment were paramount.
How do participants experience neuroimaging procedures? Preliminary qualitative findings


Background: Neuroimaging procedures are increasingly used in experimental and clinical health settings. The focus of this study is on exploring experimental participants’ attitudes towards neuroimaging procedures, and new experimental procedures using semi-structured interviews.

Methods: Individuals with prior experience of MEG and/or fMRI were invited to an individual interview to recount their experiences of taking part in neuroimaging projects. These interviews focused on responses to the procedures and their accounts of how they felt while being scanned. A series of pre- and post-scanning interviews were then conducted with people new to MEG. Pre-scanning interviews focused on expectations of the process and post-scanning interviews invited individuals to reflect retrospectively on the neuroimaging experience. Interview data were analysed using thematic discourse analysis enabling an in-depth investigation of participants’ talk.

Findings: Generally participants describe their experience of MEG and/or fMRI as ‘interesting’ and feel well informed about the procedures per se. Moreover, participants were viewed more favourably than MEG – with the experience of fMRI being characterised as ‘surprisingly relaxing’. Participants often described their accounts of the experience of being inside the scanning equipment, and the experimental procedure itself. Yet within the fMRI context in particular, participants expressed variability relative to the behaviour of the experimenter.

Discussion: Making sense of participants’ experiences within the oftentimes dominant medical model is a crucial role for health psychologists. Through research of this kind we can prioritise the patient and use their experiences to develop neuroimaging best practice. This research will have far reaching implications for the future of neuroimaging research and for health policy and practice.

Multifactorial nature of accidents: A survey of older adults presenting at a local A&E department

C. SPANOU, Cardiff University, A. GOUGH & C. WRIGHT, Coventry University.

Accidents, especially falls, are the most dramatic and quantifiable aspect of a larger problem that extends beyond injury to the loss of confidence, the fear of reoccurrence, and the possible immobility and social isolation produced, affecting older people’s lives considerably and having substantial repercussions. The aim of this study was to explore the potential associations between a number of possible intrinsic factors, such as psychological ill health, chronic illness, ADL dysfunction, and alcohol, linked with accidents in older adults. A descriptive, non-experimental, cross-sectional, non-comparative group design was selected. Data (N=210 older adults presenting at the local A&E department) were collected using a structured questionnaire assessing a detailed medical history, accident and injury records and a blood alcohol saliva testing device and analysed using non-parametric tests. Falls were the leading cause (74% of their accident). Logistic and statistically significant associations between psychological ill health and chronic illnesses (such as hypertension (p=0.004), osteoporosis (p=0.045), diabetes mellitus (p=0.004), thyroid problems (p=0.001), history of previous accidents (p=0.0005), alcohol (p=0.002) and GAD-7 (p=0.013), benzodiazepines (p=0.004), HZ- receptor antagonists (p=0.0003).

The findings of this study highlight specific target groups and factors and their possible association with ill health (both physical and psychological), drug treatment (both prescribed and over-the-counter), and alcohol use among the older population of Coventry. Hence, this provides further knowledge and consequently, improves the understanding of risks and occurrence of accidents among older adults and assists in formulating more specific injury prevention strategies.

Catastrophising and illness representations in chronic pain

N.J. STIMPSON, J. MOSELEY & J. HAMPSON, Cardiff University & Cardiff and Vale NHS Trust.

Background: This study explores the quantitative relationships between illness representations (clinically judged) with scores on the Pain Catastrophising Scale (PCS) and the Revised Illness Perception Questionnaire (IPQ-R). The study uses qualitative methodology to examine a selection of participants’ responses to increase understanding of the quantitative results.

Methods: All those people currently on the waiting list for an assessment for a chronic pain management programme (n=132) were approached to participate in the study. Of these, 77 (58.3% per cent) people agreed to participate. Each of the participants completed the IPQ-R and the PCS. The participants were categorised into two groups by the Chronic Pain Team’s Clinical Psychologist according to whether the cause of their pain was considered to be Known or Unknown.

Findings: It was found that scores on the PCS were highly associated with scores on the IPQ-R and especially with the emotional representation and illness coherence subscales. The qualitative data was used to illustrate and explore the findings of the quantitative analysis.

Discussion: Results suggest that the clearer a person’s representation of their illness is, the less likely they are to catastrophise. This has implications for how illness is communicated by health professionals and also for clinical interventions in chronic pain. As catastrophising is known to be linked to a poorer prognosis with chronic pain, the study highlights the importance of cognitive interventions.

Influences of self-efficacy, outcome expectations, mood and aversive feedback on simulated physiotherapy performance

I. TIJOU, L. YARDLEY & L. BIZO, University of Southamptton.

The literature suggests self-efficacy (SE), outcome expectations (OE), mood and pain are important in physiotherapy adherence. SE and OE have been found to be important in healthcare including physiotherapy. The influences of mood and pain on physiotherapy adherence are less well studied. The aim of this study was to assess the contribution of SE, OE, mood and pain on performance at a simulated physiotherapy task.

A physiotherapy simulation required participants to respond at a steady speed over an extended period to achieve virtual recovery. Performance feedback was given in an auditory (loud ‘scream’ whenever a physiotherapy ‘movement’ was performed, that decreased in volume with recovery), visual (on-screen red bar which reduced with recovery) or combined auditory and visual feedback condition. Eighty-four student participants completed SE, OE, and mood questionnaires at baseline and five further points.

In hierarchical regression analyses, RA patients who were out of employment had higher fatigue after one year (p=0.28, p=0.05). This effect was removed (β=0.24, n.s.) by adding perceptions of consequences which in turn predicted fatigue (β=0.44, p<0.001). Subsequently, this effect of functional disability was removed (β=0.24, n.s.) by adding perception of severity with which in turn predicted fatigue (β=0.30, p=0.05). The meditational relationships were complete as being out of employment related to greater functional disability (β=0.45, p<0.001) and more severe perceptions of consequences (β=0.29, p<0.001). Finally, functional disability related to perceptions of consequences (β=0.68, p<0.001) and removed the relationship of employment status with perceptions of consequences (β=0.12, n.s.).

Discussion: Targeted care is suggested to halt the progression of fatigue for RA patients presenting with severe illness perceptions. Levels of perceptions of consequences explained apparent effects on fatigue of functional disability and employment status.
Young people's attitudes towards the delivery of sex education using CD-ROM technology
T. UR-REHMAN, K. NEWBY & L.M. WALLACE, Coventry University
Background: It has been suggested that teenage pregnancy and sexually transmitted infection (STI) within England and Wales are causing increasing concern because of the long-term impact on fertility and health. Despite widespread research efforts, there is still uncertainty as to the most effective sex education interventions. The development of CD-ROM technology is part of this strategy of targeted sex education. It is a promising area of work but their popularity with young people within this context is unknown.
Method: A cross-sectional survey design was administered to N=334 teenagers aged 13 to 16 years across 14 age classes. Within a larger study, covering aspects of sex education, participants were asked to indicate whether they would like CD-ROMs to be used within sex education lessons and to explain their answer. SPSS Text Analysis for Surveys was used to categorise open-ended responses and give meaning to the data.
Findings: Of all respondents, 71.3 per cent indicated that they would like CD-ROM used within sex education lessons. Positive attitudes towards the use of CD-ROMs were linked to the presentation on information on an individual basis that was perceived as especially beneficial for embarrassing issues, the appeal of using technology, the opportunity to learn and the advantage of being able to work without disturbance or distraction. Of those who reported that they would not use CD-ROMs used, the common reasons given were that they might lose the expense of using information with their peers, or that the material was complicated and uncertainty of what would be involved.
Discussion: Attitudes towards CD-ROM technology within the context of sex education were positive for the majority of young people who would engage well with this media. It is recommended that this method of delivery should be included in a comprehensive package of education that includes other modes of learning such as group discussion.

Children's knowledge and understanding of stress: A preliminary investigation
A.Z. VALENTINE, H. BUCHANAN & R.C. KNIBB, University of Derby.
Background: Children as young as five have a basic understanding of stress (Charmian & Chandiramani, 1995) yet there is little research exploring children's understanding of other psychological states. Stress is a commonly used term in Western society and has been linked to a number of illnesses. The present study aims to investigate children's conceptualisation of stress from four to 11 years of age.
Methods: Individual semi-structured interviews were conducted with 50 children aged four to five (N=11), six to seven (N=13), eight to nine (N=13), and 10 to 11 (N=13) about causes, consequences, and experiences of stress. Children who were not able to explain stress were read a gender specific story about a toy woman, 12-year-old, and 17-year-old, and was linked to a number of illnesses. The present study aims to investigate children's conceptualisation of stress from four to 11 years of age.
Findings: Children's definitions of stress became more sophisticated with age, however, children as young as four had some knowledge of stress. 45 per cent of children aged four- to five-year-olds, 62 per cent of six- to seven-year-olds, and 100 per cent of older children provided a relevant explanation of what stress means. Children's definitions were often emotional expressions such as angry and being annoyed, as well as when stress is likely to occur, for example when tired. Most children had both indirect (88 per cent) and direct (94 per cent) experiences of stress. The number of children who could name a person who had been stressed increased with age, as did the number of children in each age group who had personally experienced stress.
Discussion: The findings have implications from both theoretical and health promotion perspectives, especially developing age appropriate health education.

The role of illness perceptions and treatment beliefs of individuals with essential hypertension in explaining non-adherence to anti-hypertensive medication and lifestyle advice
J. WALBURN, University of London.
Background: The implementation of effective treatment for hypertension continues to be poorly controlled in the UK. Poor adherence to anti-hypertensive medication is thought to be an explanation.
Aims: This study applied the theoretical framework of the extended Self-Regulatory Model to examine the relative contribution of illness perceptions and treatment beliefs in explaining reported adherence to anti-hypertensive medication. In addition the study explored the relationship between illness perceptions, beliefs about the coherence of lifestyle advice and reported adherence to specific lifestyle recommendations.
Design: The study was cross-sectional in design whereby 171 patients diagnosed with essential hypertension in primary care, randomly selected from two GP practices, completed self-report postal questionnaires assessing their illness perceptions (The Revised - Illness Perception Questionnaire), treatment beliefs (Beliefs about Medicines Questionnaire), reported adherence to anti-hypertensive medication (Medication Adherence Report Scale), and adherence beliefs and health outcomes (Lifestyle Advice Questionnaire).
Results: The findings showed that treatment beliefs were significantly associated with reported adherence to anti-hypertensive medication. Non-adherence was associated with weaker beliefs about the necessity of medication and stronger concerns about taking anti-hypertensive medication. Illness perceptions were logically associated with treatment beliefs, influencing adherence through either direct or indirect pathways. A hierarchical linear regression analysis confirmed the univariate results finding that treatment beliefs explained the most variance in adherence, followed by socio-demographic and clinical factors, and illness perceptions. Illness perceptions were inconsistently associated with reported adherence to lifestyle recommendations whereas coherence of advice was not significantly related to reported adherence.
Conclusions: The extended Self-Regulatory Model is a useful theoretical framework to help understand reported adherence to anti-hypertensive medication. Non-adherence was associated with weaker beliefs about the necessity of medication and stronger concerns about taking anti-hypertensive medication. Illness perceptions were logically associated with treatment beliefs, influencing adherence through either direct or indirect pathways. A hierarchical linear regression analysis confirmed the univariate results finding that treatment beliefs explained the most variance in adherence, followed by socio-demographic and clinical factors, and illness perceptions. Illness perceptions were inconsistently associated with reported adherence to lifestyle recommendations whereas coherence of advice were not significantly related to reported adherence.

Creating habits around healthy food products
M.F. WEEGEIS, R.LJON & E.H. ZANDSTRA, Unilever RdT Vlaardingen.
Background: Nowadays many food products with health benefits are launched on the market, such as cholesterol-lowering spreads. Many of these products need to be consumed regularly to be effective. One way to establish repeat consumption is to create a habit (frequent, goal-directed behaviour done automatically). This study aims to provide insight into the factors determining habit formation around a single food product in the health literature with its focus on total diets.
Method: Eight in-depth interviews were conducted to investigate the use of a specific food product (four men, four women). Before the interview, participants made a list of all behaviours they performed regularly (from daily to yearly), which were used to discuss the history and drivers of these behaviours and barriers to change the behaviour. Then, the interview focused on repeated behaviour around the product. Grounded theory was used to generate behavioural categories.
Findings: Participants listed between 12 to 30 repeated behaviours. Four categories of repeated behaviours were identified: 1. behaviours you have to-do (doing the dishes); 2. behaviours you want-to-do (taking a shower after work); 3. special behaviours (going to the beautician); and 4. traditions (birthday traditions). The majority of these behaviours were assigned to the first two categories. The underlying factors are frequency, automaticity, social and emotional involvement and strength of association with a specific moment (e.g. time of day).
Discussion: Based on this framework, we hypothesise that habits around healthy food products are more easily established in food products with high emotional involvement and when the behaviour is attached to a specific moment.

Health professionals' and users' interpretation of screening test results
H. WEST & R. BRAMWELL, University of Liverpool.
Background: Pregnant women are routinely offered serum screening tests, for Down's syndrome, open neural tube defects and Edward's syndrome. Informed decisions rely on health professionals understanding probability information. This study aims to apply theoretical research to the context of prenatal genetic screening.
Methods: Screening scenarios were presented to 45 pregnant women, 41 partners or companions, 42 midwives, and 41 obstetricians. Participants were asked to estimate the probability that a positive test result meant that the baby actually had Down's syndrome.
Findings: The majority of responses were incorrect (6.5 per cent). Most respondents gave extreme under- or over-estimates (close to zero or 100). Obstetricians gave the highest proportion of correct answers (34.1 per cent). Women were significantly more likely to correctly answer frequency scenarios than percentages scenarios. Obstetricians gave the highest proportion of correct answers (7.9 per cent overall), and were unaffected by the change from percentages to frequencies. Percentage presentation produced more under-estimates and frequency presentation over estimates.
Discussion: Most people, including health professionals, do not draw mathematically correct inferences from probabilistic screening information. A simple change from percentage to frequency presentation does not help everyone to reason with probabilities. There are fundamental differences in the ways that different groups interpret probabilities, creating potential communication barriers between health professionals and service users.

‘Thinking aloud’ about probabilistic screening test information
H. WEST & R. BRAMWELL, University of Liverpool.
Background: Cognitive psychology has shown that people have difficulties understanding probabilistic risk information. This study uses a think-aloud interview method to investigate people’s reasoning processes in the context of prenatal genetic screening.
Methods: Screening scenarios were presented to 16 pregnant women, 15 midwives, and 10 obstetricians. Participants were asked to estimate the probability that a positive screening test result meant that the baby actually had Down's syndrome, or that an engine part was cracked. While doing this, they were asked to talk through what they were thinking. This commentary was tape recorded, transcribed, and subjected to content analysis.
Findings: Reasoning strategies were coded as show-me heuristic strategies, those relying on the data, and 47.8 per cent of participants explored two or more strategies before giving their final answer. Heuristics were used by 10 participants (18.9 per cent) for one core of information (54.3 per cent), and guessing by six participants (11.3 per cent). Evidence of heuristic reasoning was found in 40 per cent of interviews with health professionals, and 10.7 per cent of interviews with service users. Computation included actual calculations, and responding with information direct from the scenario (used by 50.9 per cent and 56.6 per cent of participants respectively).

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There were differences between the strategy use of participant groups.

Discussion: Evidence was found of a wide range of specific strategies. Knowledge of the different reasoning strategies people use may aid health professionals to communicate screening test risks more effectively.

The relationship between the psychological and physical impact of chronic illness and psychological well-being.

H. WILLIAMS, A. TURNER & J. BARLOW, Coventry University.

Background: Approximately 85,000 people in the UK have multiple sclerosis (MS). Research has also showed that psychological distress is greater in individuals with MS. However, very little research has focused on the wider aspects of psychological and physical impact on MS and relationship between psychological well-being and the perceived physical and psychological impact of the condition has on quality of life.

Method: Eighty-three (83) participants were female. In this exploratory study were all people with MS. Data were collected by self-report questionnaire, which comprised the Hospital Anxiety and Depression Scale (HADS), and the Multiple Sclerosis Impact Scale (MSIS-29). Data were analysed using Pearson product moment correlation.

Findings: 37 per cent of participants were male and 62 per cent were female. Mean anxiety and depression scores were 9.99 (SD=3.72) and 8.16 (SD=2.84) per cent of the sample was found to be at risk of clinically anxious mood and 58 per cent at risk of clinically depressed mood. Mean MS Impact score was 45.46 (SD=14.94). Strong positive correlations were found between anxiety and depression scores (r=0.56). The findings also suggest discrimination power, thereby reducing burden pressures of dealing with other distressing co-morbid conditions. Participants reported that there was a lack of understanding about haemophilia among the general population leading to stigmatisation, discrimination and often social isolation. Consequently, this had an impact on many areas of their lives. Three broad themes emerged when exploring the experiences and difficulties associated with living with haemophilia: these were: communication difficulties between participants and others, reduced work and social opportunities and restricted personal relationships.

Discussion: The results provide an insight into the experiences of living with haemophilia and the impact the condition has on an individual's everyday life. The findings of this study will be used to inform the development of a more responsive educational service for individuals with haemophilia.

New method of scoring the Functional Limitation Profile using Item Response Theory.

J. WINTER, M. JOHNSTON, F. SNIEHOTTA & B. POLLARD, University of Aberdeen.

Background: The Functional Limitation Profile (FLP, UK Sickness Impact Profile) is widely used to assess activity limitation. However, it retains problems regarding illogical scoring. The Functional Limitation Profile (FLP, UK Sickness Impact Profile) is widely used to assess activity limitation. However, it retains problems regarding illogical scoring. Item Response Theory (IRT) may overcome problems by identifying discrimination power and difficulty for each item. Methods: Eight of 12 FLP categories were completed by 68 stroke patients. The MULTILOG software (Thissen, 1991) was used to fit a two-parameter IRT model estimating discrimination power and difficulty for each item.

Findings: Overall 50 of the 101 items (50 per cent) discriminate levels of activity limitations among stroke patients. These items discriminate best at lower levels of disability but were sensitive over a narrow range. Social interaction items discriminate best at higher levels of disability but were sensitive over a narrow range. Social interaction items discriminate best at higher levels of disability but were sensitive over a narrow range. Social interaction items discriminate best at higher levels of disability but were sensitive overall. Furthermore, the difficulty of each item is located along the disability scale and correlates significantly with the FLP item weights (r=0.45, p<0.001).

Discussion: The results provide an insight into how MS impacts on an individual’s daily life and their psycho-social well-being. Results highlight important areas of health care. Managing not only the physical symptoms of MS but also the impact the condition has on quality of life and psycho-social well-being.

Living with haemophilia: A qualitative study of the experiences of people with haemophilia.

H. WILLIAMS, A. TURNER & J. BARLOW, Coventry University.

Background: Approximately 6000 people are infected with haemophilia in the UK and it is more common in males than females. There are a number of different types of haemophilia, which vary in the degree to which the disorder can be inherited or acquired. However, very little qualitative research has been undertaken to explore the experiences of these individuals and how the condition impacts on their quality of life.

The aim of the study is to explore the experiences of people living with haemophilia and to determine the main areas of impact on their lives.

Method: Semi-structured interviews were conducted with eight members of the Haemophilia Society. Interviews were conducted over the telephone and audio data were analysed using thematic content analysis. The median age of participants was 59.5 years (range 35-66) and 75 per cent of the sample were male. Many participants reported co-morbid conditions including HIV, hepatitis C and rheumatoid arthritis.

Findings: Living with haemophilia involved pain, surgery, complications and regimes and the added pressures of dealing with other distressing co-morbid conditions. Participants reported that they were in denial of understanding about haemophilia among the general population leading to stigmatisation, discrimination and often social isolation. Consequently, this had an impact on many areas of their lives. Three broad themes emerged when exploring the experiences and difficulties associated with living with haemophilia: these were: communication difficulties between participants and others, reduced work and social opportunities and restricted personal relationships.

Discussion: The results provide an insight into the experiences of living with haemophilia and the impact the condition has on an individual’s everyday life. The findings of this study will be used to inform the development of a more responsive educational service for individuals with haemophilia.

Patient involvement in treatment choices for end stage renal failure: A systematic review.

A. WINTERBOTTOM, H. BEKKER, M. CONNER, University of Leeds & A. MOONEY, St James University Hospital.

Background: Policy encourages the involvement of patients with chronic conditions in the management of their condition. It is unclear if end stage renal failure (ESRF) patients are involved in choices about their illness management.

Aim: To examine patients’ involvement in decision making about treatment choices for end stage renal failure.

Design: Systematic review.

Search Strategy: Medline and PsycINFO were searched, the search terms ‘decisions making’ combined with ‘renal’, ‘transplant’ and ‘dialysis’; articles about physician choices, quality of life, reviews and case studies were excluded.

Results: 14/955 articles met the criteria. The design, methods and research aims were too heterogeneous to form a systematic synthesis. Findings were integrated under four themes:

Information provision - there was little consistency in the way information was provided; it is unclear what patients need to enable involvement in their care.

Patient participation – no patterns emerged from the evidence, but patients express different beliefs about involvement in treatment choices.

Decision making cognitions – few studies assessed patient’s reasons for treatment choices; reasoning about autonomic choices varied from making difficult care decisions, theoretically informed, primary research is essential to improving services in accord with policy guidelines.

Escalation in patterns of cannabis use: Motivations and inhibitions in a UK adult population.

K. WRIGHT & E. TERRY, University of Warwick.

The study characterised self-reported factors that influence motivations and inhibitions in relation to escalation in patterns of cannabis use among an adult population. First, we describe the patterns of cannabis use (two to seven days/week) and 90 ‘less-frequent’ cannabis users (not exceeding four days per month) were recruited. In total, 322 adults from rural and urban locations throughout central and southern England by survey. Later, a subset of 30 frequent users, and 30 less-frequent users were interviewed to gain an in-depth understanding of what motivates and inhibits regular cannabis use. Seven of the less-frequent users had never used cannabis on a regular basis for seven different reasons primarily related to personal discomfort. The most commonly-reported motivational reasons across all remaining 53 participants were increased use by peers, partners and family members (N=40), changes in circumstances leading to increased opportunity (N=25), and beneficial effects (N=21). The most commonly-reported reasons for inhibition were changes in circumstances and increased responsibility (N=20), physical and mental health concerns (N=14), and reduced enjoyment (N=1). Changes in circumstances in both cases primarily related to leaving home/family, financial reasons and increased work and social opportunities and changes in personal relationships. It was also a common reason for cannabis abstinence (N=22), and although changes in this context related less to environmental and family factors, it was influenced by peer usage, changes in lifestyle patterns, desirability and health concerns. Also, beneficial effects such as enjoyment and relaxation, tended to outweigh negative effects such as feeling de-motivated and dependent.
What do young people really think about work-life balance? A cross-cultural comparative study of the values and expectations of work-personal life integration of young British and Asian students.

U. CHATRAKUL, N.A. AYUDHYA, S. LEWIS & J. SMITHSON, Manchester Metropolitan University.

The overall aim of this study is to explore the values and expectations of work-personal life integration (WPLI) of young British and Asian students studying in the UK. Much of the current public and academic discourse on WPLI has focused on people who are already in the workforce, particularly those with family responsibilities. While there is evidence to suggest that WPLI is also an important concern for young people, few empirical studies have examined the issue in-depth. Furthermore, there is a major limitation of the literature as the majority of work on WPLI has been conducted with culturally developed Western countries. In today’s context of globalised economies, there is a recognition that the domains of work and personal life are not unique to the West and their values and importance vary across cultures.

With a theoretical focus on the role of entitlement to WPLI support from a life course perspective, this study contributes to the field by:

1. Exploring the views on WPLI of young people about to enter the workforce.
2. Examining their sense of entitlement to support for WPLI from their future employers and the Government.
3. Examining the similarities and differences in WPLI values and expectations between young British and Asian students studying in the UK.

The paper draws upon quantitative data from semi-structured individual interviews and focus groups. Thirty undergraduate and postgraduate students (aged 21 to 26 years) from the Manchester area were recruited following a call for participants posted on career centre websites. Fifteen male and female British and 15 male and female Asian students from the UK were interviewed. Asian students were from China, India, Indonesia, Malaysia, Singapore, and Thailand. Four focus groups were conducted with participating students drawn from the interviews. All interviews and focus groups were audio-recorded and transcribed.

Theoretical analysis based on grounded theory is in progress and results will be submitted for publication. Some of the initial themes that emerged from the preliminary analysis include:

1. Exploring and negotiating personal definition of WPLI.
2. WPLI is an important concern, but for the future.
3. Social comparison of young people’s values and expectations of WPLI.

WPLI appears to be important to young people across cultures, but both British and Asian participants feel it is impractical to prioritise at this stage. The most immediate concern for many is securing a full-time position after graduation. WPLI is seen as an issue that they would consider more strongly in their second job or after several years in their first job. Cross-cultural differences have emerged in terms of their expectations for WPLI support from their future employers and the Government.

Theoretical implications are discussed in the context of understanding young people’s sense of entitlement, and the role of national culture in understanding young people’s WPLI values and expectations from a life course perspective.

Practical implications for organisations are also discussed, and the need for organisations to pay attention to the issue in order to recruit and retain today’s talented and valuable young employees, who will become both the managers and the parents of tomorrow.

Using decision-making theory to predict use of selection techniques.

P.A. CRUISE, City University.

Background: Organisations are facing increasing pressure in the selection of employees as a result of the evolutionary changes to the structure and nature of work as well as the external socio-economic environment in which they are forced to operate. Noted factors contributing to these mercurial conditions are technological advancement; the changing nature of work; globalisation and the forces of change (Lievies, Van Dam & Anderson, 2002; Oleary, 2002; Herriot & Anderson, 1999; Casiso, 1995). Studies examining the impact of these factors have predominantly focused on the implications for practice by enunciating the need to recognise the changes in the organisational platform and highlighting the subsequent need for practice to complement these changes. However, there has been very little empirical investigation examining these changes from a theoretical perspective into the impact of any of the specific factors on hiring decisions in general and the use of selection techniques in particular.

The theory of adjudicated contests within the realm of decision-making posits that when there is a constraint upon your choice between two alternatives, the choice usually comes down to an ancillary criterion. If these global factors present possible constraints upon the decision to choose a candidate and or the type of selection system to be utilised, why have modern selection research failed to sufficiently utilise decision-making theory as frameworks for analysis?

The aim of the present study is to identify the relationship between factors influencing hiring decisions and external market conditions in predicting an organisation’s use of pre-specified selection techniques. The study also seeks to answer two key questions: (a) what is the relationship between market factors and use of selection techniques; and (b) if market constraints are controlled how will factors influencing hiring decisions affect choice of selection approach?

Methods: The study is an exploratory, cross-sectional investigation of the use of selection techniques in a developing country. The research is quantitative in approach in which data were gathered with the use of questionnaires. Items were taken from an international HRM questionnaire previously used in 12 countries. Participants consisted of 50 HR Managers with an average age of 43.2 and 91 per cent of the sample having attained tertiary level education. Participants represented organisations from both the public and private sectors as well as small, medium and large corporations. Data were initially analysed using correlation tests, with partial correlations subsequently being used to control for variables of external market factors.

Findings: The data were analysed using SPSS (Spearman Rho Correlation) and selection factors and use of paper based selection techniques revealed significance p<0.05, of ‘complex technology’ with the use of cognitive ability tests (0.352), assessment centres (0.336), personality tests (0.398) and structured interviews (0.329); and ‘rapidly changing conditions’ being correlated with the use of structured behavioural interviews (0.342). Partial correlations later revealed that ‘proven work experience’, ‘personnel fit’ and ‘person-team fit’ are good indicators of which selection technique the organisation will choose.

Discussion: There are a number of implications for the above findings. How would findings for example, impact the ability of Occupational Psychologists to make sense of existing systematic, standardised selection systems to companies in the developing world? If choice of selection technique is influenced by market factors, how will the decision makers and practitioners embark on marketing standardised selection tools? Will providing empirical evidence and reiterating best practice be enough? Understanding the dynamics of choice and constraints on decisions have such a potential impact, could collaborative research and practice with social psychologists and Occupational Psychologists to better promote the message of ethical, objective and valid selection practice?
The experience of cultural adjustment among expatriate professional football players in the UK

I. DONALDSON, The University of Manchester.

There is a wide literature base that investigates cultural adjustment among expatriates in non-footballing occupations, which suggests that expatriates can experience various difficulties adjusting to, and coping with, the locality. This research has shown that these difficulties can be overcome by adopting and practising appropriate selection, training and support policies. The aim of this study is to develop an expansion on the samples used in expatriation research, so new insights can be offered. There has been no empirical research published that investigates cultural adjustment among expatriate football players. This is alarming given the nature of the modern football environment means that the expatriate cannot be ignored. This research could not only initiate research in an area previously neglected in the literature, but could also offer invaluable insights into cultural adjustment that could be utilised in the future to ease the expatriation process in professional football players and beyond.

This study will be qualitative in nature and will consist of two stages: in-depth interviews of three player liaison officers and in-depth interviews of 12 professional football players. After contacting the Professional Footballer’s Association, the national trade union for professional footballers in England and Wales, three player liaison officers in the north-west region were approached and agreed to be interviewed.

A stratified sampling approach has been adopted to obtain a sample of professional football players. The aim is to obtain a sub-sample of players from each of the four professional football divisions. This has been done by contacting the two professional bodies responsible for managing the Premier League and three Football Leagues, who in turn provided lists of all expatriate players currently registered to play in their respective leagues. All football clubs in the north-west have been notified of having two players from each of the four leagues represented in the sample. The interviews will all be semi-structured in nature and will be analysed according to conversational analysis.

As the interviews are to be conducted in August, once the football season begins, the only findings that can be outlined are the tentative observations made from the interviews with the three player liaison officers. The PLD’s are responsible for assuring the welfare and are especially responsible for expatriate players, whom they assist with practical matters, such as making accommodation and financial arrangements. There is little in the psychological effects of the move and a culture appears to exist where it is a taboo to discuss psychological distress, while all the time the permitted does or exist as some players fail to settle and prematurely terminate their contracts.

There has been a call for an expansion of the samples used in expatriation research. This study expands upon existing expatriation research by focusing on a sample based in the UK, which has not yet been covered, and a sample representing a different occupational group. It will be interesting to see whether the findings are similar to those aforementioned samples or entirely different.

What makes a good role model for professional women at different career stages?

K. GASELTINE, City University.

Background: Junior professional women have long been advised of the value of a role model, sponsor, or mentor to achieve success (Speizer, 1981), and organisational policies for development in non-managerial roles for women have duly tried to facilitate the emergence of such developmental agents. Rationales and examples of role models and role modelling are supplied by two key psychological theories: social learning theory (Bandura, 1977, 1986), and identification theory, which suggests that similarity to an individual is what may establish the necessary emotional or cognitive connection (Kohlberg, 1969).

Few studies, however, have focused on what a role model is to an individual (Gibson, 2003), that is, how attributes are interpreted, or how an individual makes sense or meaning of a role model. Moreover, most research has focused on education or early stages of organisational life, tied to the individual’s self-concept (Super, 1980). However, the idea of stability of self-concept in later career stages has been investigated more recently (for women in particular: e.g. Levinson, 1996; Melamed, 1996). Continuing self-concept malleability is also supported by the concept of ‘possible selves’ (Cross & Markus, 1991; Ilbag, 1999). Therefore, the idea of a continuing focus for role models. Gibson (2003) has found that individuals construe role models throughout their career, although the emphasis changes from positive, close and global at early career stages, where the self-concept is most undeveloped, to specific, possibly negative at later stages.

This study is based upon explorations of the repertory grid to elicit constructs of role models from women at different career stages. This is a qualitative study using data from interviews with women from a professional services organisation. Ten women grouped into ‘early’, ‘middle’ and ‘late’ stages of their careers, will be interviewed. The repertory grid technique will be used to elicit construals of role models. Participants will also be asked to rank individuals they choose as elements relative to each construct. Constructs from all participants will then be categorised and compared between career stages. Further exploration of the topic within each interview will be content analysed.

Anticipated Findings: It is expected that there will be some clear differences in how women construe role models between the three career stages, with later stages having more cognitively complex construals of role models (for example, placing more emphasis on specific rather than global attributes of role models, and focusing less on demographic traits). Moreover, senior women are expected to have a clearer notion of how a role model differs from other developmental agents.

Implications: It is expected that this study will have three key implications for the professional development – and possibly the retention – of women. First, managers will be better able to encourage opportunities for women throughout their careers to select role models who fit their constructs (for example, by exposing women to managers from a range of potential models). Second, such organisational actions should be provided at each key career stage, not simply at early tenure levels. Third, the need for professional women, which is often focused around internal mentors, should be broadened to include a variety of relationships including external or ‘distant’ role models who may be easier to find than close mentors.

Gender diversity and career progression in the Council of Europe

E.J. GÁVIN & M.J. DAVIDSON, University of Manchester.

The global workforce currently consists of almost equal numbers of men and women, a situation that has not always been the case. The continual influx of women to the workforce since the 1970s (Wirth, 2001). However, despite this increasing participation, women are experiencing a glass ceiling in terms of access to senior management in many organisations (Davidson & Burke, 2004). The typical pattern of staff distribution forms a gender pyramid, with fewer women in senior positions and becoming increasingly absent throughout the hierarchy.

The Council of Europe is a Pan-European, inter-governmental organisation with a Human Rights agenda. It is supported by a Secretariat (administration) of around 2000 staff, representing 46 Member States. The role of the Secretariat is to ensure this organisation derives from the specific yet extensive nature of the cultural diversity within its workforce, the exploitation of unexplored terrain within the field of academic research. This paper details a study commissioned by the CoE to investigate whether women and men have equal access to management careers in this organisation. Research methods include interviews, focus groups, an online questionnaire for around 1000 staff and statistical analysis of data relating to recruitment and retention. Preliminary findings suggest that in recent years the Council of Europe has advanced gender equality through a number of organisational interventions, resulting in almost equal numbers of men and women in lower management. However, the pyramidal distribution of men and women throughout the organisation. Further analysis indicates that in accordance with Catalyst (1998), the most significant career barriers for women in this organisation may be:

1. The absence of career progression structure.
2. Negative assumptions about the commitment and managerial abilities of women.
4. Forms of ‘cultural discouragement’ such as rewarding long-hours rather than results.
5. Traditional performance reviews that have not been updated to reflect more recently introduced flexible working patterns.

Addressing the issues of diversity and transparency and structure surrounding internal promotion procedures. Such practice not only serves to conceal possible discrimination, but also provides a focal point for allegations of injustice, whether or not it actually exists. A further emergent factor is the interaction between gender, nationality and organisational seniority, which reflects an interesting situation in which the organisation’s commitment to national diversity contrasts with other European organisations potentially having an adverse affect on the promotion of women within the organisation.

This paper will comment on the relevance of the findings for advancing the discourse on gender equality within the organisation, and management, with particular contributions to the debate on the role of gender within a multi-national organisation. Initial findings include a discussion of the recommended interventions, with respect to short, medium and long-term organisational change.

Using competencies in career development: Sense or nonsense?

S. HAASE, University College Worcester.

Theoretical Background: Competency frameworks form the basis of diversity in human resource processes (Whiddett & Holt, 1997). One purpose they serve is personal development, or career planning (CIPD, 2001). Many authors describe the benefits that competencies can bring to these areas as a method of assessment of personal strengths and a focus on aspirations of the individual and employer. However, it is evident that there remains a lack of agreement within the organisation (Craig, 1992; Rothwell & Lindholm, 1999). However, studies supporting these arguments are lacking.

Organisational Background: All police officers in the UK start their career as probationer officers and then work their way through the system, having the option of transferring to another organisation. However, they are increasingly asked to take responsibility for their own careers. These circumstances put special demands on career development processes. In this respect, the introduction of the first organisation-wide competency framework into the UK police force is expected to play a facilitating role. This represents the progression of the general use of competencies in career development (CIPD, 2001), in the light of which a more detailed exploration of an effective combination of the two concepts appeared necessary. This study sought to attend this issue, taking an exploratory approach to collecting evidence.

Methods: Qualitative information was gathered from career development experts and practitioners in four organisations, six consultancies and 18 Police Forces. Telephone was used as the method. Those respondents who felt unable to participate in a telephone interview were encouraged to respond to the same questions through email. A mixture of free response and closed questions was applied, covering topics such as definitions of the concepts, operationalising competencies in career development, perceived advantages and disadvantages of such proceedings, etc. Each interview lasted approximately one hour. Quantitative content analysis (Mayring, 2000) was used to analyse free
response questions in order to identify common issues and problems perceived by participants. Findings: There is no general agreement with regard to the definition of competencies or career development. However, competencies appear to be frequently used in different types of selection and assessment interventions, mainly focussing on the assessment of current performance effectiveness and potential, gap analysis and assignment of individual development plans. Even though participants mentioned a range of advantages of the use of competencies, transparency and setting standards, there were also some critical voices. Some respondents perceived competencies as being too prescriptive, narrow and rigid, creating the risk of building mediocrity.

Discussion: The interviews indicate that competencies are seen as valid tools in career development. However, they seem to play a rather restricted role, generally reflecting the organisation-specific knowing-how-standards, assessing the individual's capability to effectively perform the present job or their suitability for the aspirated job. Only rarely are they used to support an individual's overall ability to manage their careers. Furthermore, the criticisms expressed with regard to the application of competencies to the career context, points out that there are a few issues that need to be addressed. The use of competencies is successful. On the whole, the findings raise the question if competencies as currently used present holistic enough an approach to effectively address career-related issues.

‘The car in front is NOT a Toyota?’
C. HARDY, University of Nottingham.

Background: Global expansion is occurring at a feverish pace as organisations continue to pursue strategies in an attempt to remain competitive within the shifting dynamics of our economy. Given the strategic significance and the increased need to develop tailor-made, fast-tracking performance improvement programmes, it is important (both to the organisation and the individual) to assess the extent to which the employee can perform the present job or their suitability for the aspirated job.

Results: There will be numerous IVs (each factor investigated), comprising of both categorical and continuous data. The DV is whether the employee was successful (completed the full duration of the job). The DV, but also to determine whether these factors can increase the probability of predicting the outcome over personality alone. At present, the data is still in collection phase and no data can yet be reported.

Discussion: This paper provides great value to this area of research as it uses the latest method of assessing the importance of personality (i.e. the Multi-Occupational Personality Questionnaire) together with other factors to add to a theoretical model of the factors that affect expatriate adaptation. Overall, individual work organisations wishing to select “appropriate” candidates or to implement appropriate interventions to aid in their employees’ cultural adaptation.

‘Service with a smile’: The effect of caller verbal aggression on emergency control room staff
K. HOLLIS & C. SPRING, University of Sheffield.

Increasingly, call centre employees are finding themselves the victims of serious verbal abuse from the very customers that they are employed to assist (Grandey, Dicket & Sin, 2004). Although research examining the effects of customer verbal abuse on call centre staff is sparse, the research that has been conducted to date has demonstrated the adverse psychological and behavioural consequences that caller verbal aggression can have. Stress reactions amongst the complaints reported by call centre workers frequently exposed to hostile callers (Holman, 2002; Grandey et al., 2004). The current study examined the consequences of caller verbal aggression upon emergency control room staff. This is a context in which the effect of verbally aggressive employees has not been explored. However, it was considered a valuable context to examine, as it was anticipated that the heightened sense of urgency in emergency control room staff would exacerbate the issue of caller verbal aggression to an even higher level than in other call centres.

A study by Grandey et al. (2004) examined the effects of caller verbal aggression on call centre employees. The current study built upon the work of Grandey et al. (2004) by applying an occupational stress model within a sample of customer verbal aggression within the emergency control room context. A selection of Grandey et al. (2004)’s original hypotheses were tested to ascertain whether similar results could be obtained in an emergency control room setting. The current study also examined the boundaries of Grandey et al. (2004) research by examining a number of variables not included within their original model. This included a more detailed examination of factors that predict caller verbal aggression on burnout, job satisfaction and alcohol consumption. Also examined were the potential interactions between elements of support and humour as a coping strategy, on the relationship between the frequency of verbally aggressive callers, and employees’ stress appraisals of such callers. Finally, the effect of increased/decreased job demands on employees’ stress appraisals of verbally aggressive callers was examined.

The current research took place within in a NHS Ambulance Control Room. Data is currently being collected in two stages. Stage 1 (which is the point at which this abstract ends) involved the distribution of a questionnaire to all call-taking staff within the emergency control room context.

The questionnaire included measures of all the aforementioned factors and included a number of demographic variables. Stage 2 will consist of a number of semi-structured interviews with a small volunteer sample of employees from the questionnaire stage of the research. The purpose of this secondary stage of the research is to build upon, and further explore the findings of the questionnaire stage.

Data collection will be completed within the coming weeks. Results and a discussion of the implications of the study’s findings will be available for presentation at the POP conference in September.

Passengers’ experience of rail travel
A.K. JAIN, T. COX, J. HOUDMONT & E.J. CORBETT, Nestlé UK.

Commuting has been identified as ‘obviously stressful’ (Evans, Wener & Phillips, 2002) and there appear to be numerous reasons why this is the case. Stress research on commuters has identified that non-railway users are paying a lesser burden, perhaps often elevated (Guilian et al., 1990; Novaco, Stokols & Milanesi, 1990), but also there may be some detrimental physiological effects. Evans et al. (2002) in a study investigating expatriate employees, identified verbal aggression, rain travel stress and elevated salivary cortisol. Additionally Singer et al. (1997) noted possible links between presenting with burnout. One of the main causes of travel stress relates to stress. Kluger (1998) identifies stress as a factor that frustrates the goal of arriving at a destination. Impedance can be defined as either objective or subjective (Novaco et al., 1990). Objective impedance which refers to stimuli which are not related to an individual. Subjective impedance is more applicable to rail users, especially journey distance or duration (Singer et al., 1997).

Factors relating to the passenger experience to appear to be extremely important in the commuting literature. Singer et al. (1997) suggest that infrequent travellers are more likely to experience acute stress. Whilst frequent passengers commuting for personal reasons might not have high levels of time urgency, therefore, are likely to have low stress levels (Lucas & Heady, 2002).

Some of the studies that have measured stress for car and rail users have also considered the possibility that the recorded stress levels may be due to a factor that is common to both. As well-being is correlated to work stress (Randall, Griffiths & Cox, 2001), it may be beneficial to use a broader well-being scale to assess such extraneous factors.

This study has two main hypotheses. First, as impedance increases, passengers will report higher stress levels. Second, given that the impetus for travel for personal reasons will report lower stress levels than passengers travelling for work purposes. The effects of well-being will be investigated. These factors will be considered during analyses, as individuals with poor general well-being might have inflated stress levels.

Questionnaires were distributed to 125 participants on trains running between two cities in the mid-west and north-west of England on a single day. The sample comprised of 80 males and 45 females who completed the questionnaire voluntarily. Demographic data was obtained (age and sex) followed by five pieces of information about passengers most recent train journey. Stress was measured using the Stress and Arousal Check List (SACL, Gotts & Cox, 1988) while well-being was assessed with the General Well-Being Questionnaire (GWBQ, Cox & Gotts, 1987). The data will be analysed using appropriate statistical techniques and the project will be completed by August end.

The psychological and physiological problems caused by stress can lead to behavioural changes which can, in turn, lead to changes in the body. The sequelae of these physiological problems can be detrimental to both the individual employee and the organisation. For example, reduced productivity, absenteeism and lateness (Koslowsky, Kluger & Reich, 1995; Guilian et al., 1990). This study assesses the stress caused by impedance and other environmental factors. The possible benefits of reducing travel and commuting stress arising because of these factors, especially for rail users, is potentially enormous.

Designing a presentation exercise for the selection of innovators at Nestlé UK
A.S. JOSEPH, City University.

Background: The overall aim of this study was to provide Nestlé UK with a bespoke selection tool that reliably identified high innovators and could be used alongside other selection tools in an assessment centre. This tool was to be valid, fair and cost effective. The contribution to Occupational Psychology was to provide understanding of the validity and usefulness of presentations in selection. In addition, it was intended to further our knowledge of selecting for innovation implementers. This was particularly important since innovation selection tools have not been researched previously.

Nestlé UK have identified innovation as one of their core values, and were interested in recruiting high innovators into all of their business areas. The innovation process consists of two stages; idea generation and implementation. Although there are selection tools that measure divergent
thinking styles and personality traits associated with innovation, these can be criticised for only measuring a single phase and do not indicate whether an individual will actually be innovating in a real work context. It is, therefore, recommended that in order to create innovation solution this is needed to identify the behaviour that are typical of innovation in that specific organisation.

Methodology: The work done at Nestlé had already developed a competency framework for innovation at Nestlé, providing behavioural indicators for both idea generators and idea implementers.

Seven interviews were then conducted with employees from different functional areas who were rated as high or low innovators by their managers. The interviews provided an understanding of project and product management at Nestlé during the pre-selection round and focused on the basis of the exercise. The information from the interviews together with the competency framework was used to design a Presentation Exercise that was piloted on an external group of volunteers to ensure that it elicited the desired behavioural indicators.

The final presentation tool was validated by trialling it on 18 Nestlé employees. Six were rated as low innovators, and 12 were rated as high innovators by their managers. The tool was shown to be effective and positive feedback was received from Nestlé employees. This validation exercise was also conducted to ensure the tool did not discourage high and low innovators. Furthermore, the Innovation Profile for each person was compared with answers from a self-report Innovation Questionnaire.

Preliminary Findings: The results from the validation exercise showed that this presentation exercise differentiates between high and low innovators. It is particularly useful in identifying people who have been rated lower on innovation by their managers also score lower on the Presentation Exercise, and vice versa. Implications for this project include the clear practical value, as Nestlé will be using the presentation exercise alongside the various other tools it has created. This research also contributes to the field of innovation and selection which has so far been under-researched.

Finally, the research provides practical use to the area of selection, displaying the necessary steps to be taken when creating and validating a presentation exercise.

Exploring the influence of Corporate Social Responsibility (CSR) activities on employee emotional engagement using Repertory Grid Technique

A.C. Maynes, S. Levy, C. Clegg, C. Brown,

Background: Corporate Social Responsibility (CSR) and employee engagement are well-used and popular terms in business and the world of work. However, the link between the two is limited and the evidence presented largely anecdotal. CSR can be defined as a set of voluntary assumptions that extend beyond an organisation’s purely economic and legal requirements (Boatright, 1997). Such activities frequently evoke thoughts of the environment, engaging with local communities and dealing with issues of fairness and ethics. From an organisational perspective, the drivers of CSR are diverse and may be rooted in a range of motivations. These include promoting the ‘employer brand’, compliance, or as a lever to improve business performance via one of the key stakeholder groups – motivated employees (Harter, Schmitt & Hayes, 2002).

Employee engagement can be defined as a positive attitude towards and involvement with the organisation and its values (Robinson, Perrymans & Hayday, 2004). Literature suggests engagement represents the final step in a three-stage process which includes commitment, involvement with, and commitment to, the organisation. Moreover, the stronger driver is the employee’s sense of being valued and seen (Meyer & Herscovitch, 2001). Employee emotional engagement has clear overlaps with the more exhaustively researched concepts of commitment (Cohen, 1991; Cohen, 1992; Vandenberg & Lance, 1992) and organisational citizenship (Barbuto et al., 2003). However, there are important differences – engagement is a two-way process: organisations work to retain employees, who in turn have a choice about the level of engagement they offer the employer.

Can the type of CSR activities a company pursues influence employee engagement? This study aims to explore: (1) employee perceptions of the Corporate Social Responsibility (CSR) initiatives in a multi-national IT organisation, and (2) attempt to identify how these perceptions influence employee engagement to that organisation.

Method: This exploratory/investigative study utilises Repertory Grid Technique (Kelly, 1955). The technique has been used extensively to depict a person’s mental frame of reference – the unique meaning and organisation they attach to experiences (Francella et al., 2004). Rep Grid practice has traditionally relied on utilising individuals as elements in a list to rate, in relation to an element form and wording beyond this domain has often been neglected (Wright & Lam, 2002). By extending the boundaries of choice to a less constrained set of elements it may be possible to capture more work-related cognitions. In particular, how employees construe complex organisational realities such as culture and non-transactional items (which by definition include people, objects, activities, and events).

Drawing on a convenience sample (N=10) from a single business unit within a multi-national CSR organisation, elements comprising generic CSR activities were supplied. Constructs were elicited using traditional techniques by participants on a scale of 1 to 5. The resulting grids were analysed quantitatively (content analysis) and quantitatively (hierarchical cluster analysis and principal components analysis).

Anticipated Findings: It is anticipated that the type of CSR activities in which the collaborating organisation engages will have impact on the emotional engagement of its employees. Furthermore, the degree of engagement will depend on the personal relevance or connection the individual has to these activities.

Discussion: This study aims to further the employee engagement debate. As such it represents a new, and more comprehensive piece of work on the CSR strategy of the collaborating organisation.

The types of bullying that exist within the UK police force

H. MURDEN & P. LEATHER, University of Nottingham.

Background: The focus of this paper is upon the nature and types of bullying amongst police officers. Specifically, three key questions are asked:

• What forms does bullying amongst police officers take?
• How big is the problem?
• Which aspects (forms) of bullying amongst police officers take?

Several empirical studies have suggested there is that the problem of bullying amongst the police might be widespread, but in reality there is a paucity of rigorous empirical research investigating the topic. There is, however, existing research suggesting that the typical organisational culture in police forces is one that can be characterised as macho and male dominated (Crank, 1998). It is also this precise type of organisational culture which has been associated with increased levels of bullying and harassment (Einarsen & Skogstad, 1996). Research to date also shows that the principal predictors (stressors) of impaired well-being (strain) amongst police officers are organisational factors rather than the dangerous and acute nature of some of the tasks that police officers sometimes have to undertake (Bowlman & Campbell, 1994). There are a number of strands of evidence which, therefore, support the hypothesis that bullying might be a significant problem within the police.

Methods: This research investigate bullying based upon a stress audit conducted in a UK police force. A questionnaire was compiled using information gathered from police focus groups and distributed to all members of the Force. This integration of qualitative (focus group) and quantitative (questionnaire) methodologies ensured that the items presented in the latter were well-grounded within the reality of daily life for the police officers. The questionnaires were completed by 1354 police officers (963 male and 381 female) (six did not stipulate time and 86 part-time). Logarithmic transformation was performed on the bullying data to eliminate problems of excessive skew and kurtosis. Findings: Factor analysis of the stressor item bank used revealed nine stressor factors for police officers. Factor analysis of the specific bullying items revealed one factor, one factor having to do with direct attacks against one’s character (e.g. on the basis of gender, race, sexual orientation, etc.), the other having to do with extent of one’s work.

Subsequent multiple linear regression analyses showed that bullying in the form of persistent work criticism was a major influence on reported well being, job satisfaction, organisational commitment and intention to quit (as measured by propensities for off-the-shelf quit intentions). A minority of officers who report bullying, when it does occur it has profound consequences. Discussion: This research demonstrates how the unique culture and environment of the police force may elicit workplace bullying. Current literature offers similar information regarding police staff (Rayner, 2000). This study, therefore, adds to the occupational psychology literature as it stipulates the forms bullying may take within the police force. Forces throughout the country may utilise these findings to attempt to measure or to be made more alert to the types bullying. Future research may wish to investigate and understand the differences in the nature of bullying in comparison to other organisations; public or private sector, within the UK.

Do visualisation techniques have a positive impact on individual’s motivation and performance in an organisational setting?

D. PALM, City University.

Background: This research aims to investigate the global application of visual imaging and its effectiveness on an individual’s performance and motivation. Mental imagery refers to imagining the process of mental performance (Morgan & Waller, 1987). This study, therefore, adds to the organisational psychology literature as it provides further evidence of the effectiveness of mental imagery in enhancing motivation and achieving performance. This research endeavours to put mental imagery to the test in organisational settings and attempts to provide an explanation of where it fits within existing frameworks of motivation and performance.

Visualisation are often divided into two techniques: rehearsal and end point visualisation. Rehearsal visualisation is used in actual tasks, end point visualisation refer to the outcome of a process. The main research question is whether participants would report higher levels of motivation and performance on professional goals aided by the use of visualisation techniques (ViTs) as opposed to those unaided by ViTs. Three hypotheses will be tested:

1. Participants will report a higher level of performance and motivation in achieving goals aided by the use of ViTs compared to an unaided goal.
2. Participants will report an increase in their imaginary ability over the experimental period.
3. Participants with the more items presented will report higher level of usefulness and a more overall positive impact on their goals.

Methodology: A maximum of 15 participants were recruited from a list of candidates who attended a motivational training programme which had ViTs as one of its core components. They were asked to complete an initial assessment form on their current use and quality of visualisation techniques and how it impacted on their goals. First hypothesis will be tested:

ViTs: goals 1, 2, 3,
DVIs; self-rating on motivation, performance, usefulness, on a nine-point Likert scale. A modified version of the Van Vught Critical Incident technique (1988) was used. Descriptive statistics were calculated using SPSS. Reliability was assessed using Cronbach’s alpha. The analysis of the feedback provided in the visualisation diaries and the interviews should provide for recommendation for improving future training and application of visualisation techniques. Furthermore, an explanation will be provided for where the visualisation technique fits within existing theories on socialisation and innovation.

As far as the author is aware, this is the first study of its kind in the UK. Visualisation techniques have so far commonly been tested in sports, clinical, and counselling psychology.

Outstanding work-induced marginalisation – with a lot of help from new friends

V.A. PHILLIPS, University of Surrey.

Marginalisation within the employment realm is generally considered only inasmuch as marginality in relation to some aspect of the dominant cultural norm or work life. By no means are the pathways of marginalisation confined to work life. Doctoral research of the present author examines marginality rooted in, and arising out of, the terms of employment. The study also considers the implications for the work-nonwork relationship. Other studies have shown that marginalisation in the work context may occur as a corollary of non-normal – e.g. part-time (Lawren et Corbin, 2003) or temporary (Henson, 1996) – contractual arrangements. In this research project rotating shift workers (RSWs) similarly report feeling discontinuous/fragmented, vividness and ease to categorisation by goals. Rational: look for significant difference between DVS categorised by goals.

Second hypothesis:
RSVs, pre-trial, not rating on detail, uninterrupted/fragmented, vividness and ease to evoke of VIs. DVS’s rating on nine-point Likert scale on detail, uninterrupted/fragmented, vividness and ease to evoke of VIs. Using repeated measure within subjects analysis. Rational: look for significant difference in self-rating pre and post-trial period.

Third hypothesis:
Frequency analysis non-parametric: chi square.

Categories: good performers vs. bad performers. Observed frequencies: type of VI, use of script, high or low usefulness. 

Applied implications and value: The research should shed light on the effectiveness of a psychological tool in enhancing motivation and performance at the workplace. The analysis of the feedback provided in the visualisation diaries should provide for recommendation for improving future training and application of visualisation techniques. Furthermore, an explanation will be provided for where the visualisation technique fits within existing theories on socialisation and innovation. The study underscores the synergic impact of individual and group efforts for organisational identification which varies across case, but also within case over time. On a pragmatic note, it demonstrates that the needs and experiences peculiar to the growing number of individuals employed under non-normative contracts must be better understood if organisational effectiveness is to be maximised (through productive intra-workgroup functioning) and if so-called ‘work-life balance’ initiatives are to be truly amenable to all.

Attributional analysis of older workers’ performance in selection interviews for call centre roles

R. SHORT, City University.

Background: Due to demographic changes, older workers will form an ever-increasing proportion of the UK workforce. Age discrimination legislation will take effect in the UK in October 2006. Organisational psychological research into older workers is therefore an area of increasing importance.

The research aims to investigate whether there are age-related differences in attributional patterns similar to those observed for younger workers (Silverste, 1996) and if so how these relate to (self-) selection outcomes in an applied setting. The research setting of selection by initial phone and follow-up face-to-face interviews for insurance call centre roles presents low numbers of successful older applicants, despite the efforts of the employment organisation to attract and fairly assess older applicants.

Organisational members hold different beliefs about how different demographic groups behave. These beliefs relate to social constructions about what makes a successful applicant. Attributional analysis has been used as a useful and unobtrusive method for assessing age-related differences in social constructions that may be affecting selection outcomes. This technique extracts different beliefs about causes of events and actions. These causal explanations are then coded and analysed according to several bipolar dimensions (e.g. internal/external, global/specific). Patterns of causal ascription are described. The main aims of the research are to investigate whether:

- Older applicants make different attributions for their performance during the selection process from those made by younger applicants and, if so, how such patterns of attribution relate to their success in the selection process.
- Selectors make different attributions for older applicants’ performance from those they make for younger applicants and how these patterns of attribution relate to selection outcomes.

Method: 200 participants (10 older and 10 younger) will be interviewed by the researcher at the beginning and end of the selection process. Each interview will last around 45 minutes and will be audio-taped and later transcribed. Data collected will be analysed by means of systematic coding and data display, enabling credible conclusions to be drawn and subsequently verified (Miles & Huberman, 1994). Findings will suggest ‘what works’, and ‘how useful’ strategies as a means to establish group membership generalise to non-work organisational settings; moreover, additional strategy exemplars were also identified, e.g. role modelling/mimicking. Reciprocally inclusive efforts (where newcomer’s desire to belong is matched by existing members’ willingness to embrace them) engender strong organisational identification; whilst both unilaterally exclusive individual efforts (newcomer not wanting to belong despite existing members’ willingness to include them) and unilaterally exclusive group efforts (not willing to embrace a newcomer who wants to belong) were associated with weak organisational identification. Other factors such as newcomer’s attendance was found to facilitate inclusive reciprocity; whilst lack of continuity was sufficient to forestall newcomer ingression – even where reciprocated efforts were strongly inclusive.

This study underscores the synergic impact of individual and group efforts for organisational identification which varies across case, but also within case over time. On a pragmatic note, it demonstrates that the needs and experiences peculiar to the growing number of individuals employed under non-normative contracts must be better understood if organisational effectiveness is to be maximised (through productive intra-workgroup functioning) and if so-called ‘work-life balance’ initiatives are to be truly amenable to all.

Attributional analysis of older workers’ performance in selection interviews for call centre roles

Second hypothesis:
DVIs categorised by goals.
Therefore, there is a need to identify strategic organisational culture and individual values do of the organisation. In order for strategy to succeed between the value of the individual and the culture development of strategy and that a gap may exist traits and experiences (Hambrick & Mason, 1984). These dynamic capabilities were defined by Teece, to get people to think about things differently.

The key to planning successfully for the future is been due to the pace of change in today's volatile world of work. This data will be available in time for the conference. This study is part of a larger project examining flexible career development for police staff. The project is due to be completed in Spring 2007.

Psychometric assessment of strategic thinking: A comparison between voluntary and commercial organisations

G.L. STEPTOE-WARREN, Coventry University.

Background: Over the last two decades there has been a growth of academic interest in the application of the concept of career anchors, and theories that attempt to better understand the strategy formation processes. (Hodgkinson, 2001). This has been due to change in today's volatile marketplace with new technological breakthroughs, legislative constraints and the economic climate all having an impact on a company's strategic planning. The key to planning successfully for the future is to get people to think about things differently. These dynamic capabilities were defined by Teece, PSano and Shuen (1997) as the firm's ability to integrate, build and reconfigure internal and external competencies to rapidly changing environments and if the competencies of top managers are aligned to the organisational strategy then the organisation will achieve its performance targets (Thomas, Litschert & Ramaswamy, 1991) However, managers' strategic choices may also depend on their own personal traits, and moreover, that from outside, that it is particularly efficacious available from within the organisation, rather than from outside (Leather, Lawrence, Beale & Cox, 1998). This is in keeping with the matching hypothesis, wherein the value of any source or type of support is dependent on the nature of the problem on stressor upon which it is bought to bear. Logically, support from within the organisation is best placed to resolve any pressures that might be encountered within the workplace.

What is the influence of perceived support and social rewards on work motivation and job satisfaction during the transition from trainee to qualified solicitor?

J.P. WYHMARK, University of Nottingham.

Background: City law firms such as stockbrokers, accountants, investment firms, and law firms have for many years preferred to employ high performing graduates of the country's best universities on two-year training schemes. This particular project will examine employees in a leading City law firm. The training schemes in City law firms typically last two years. During this time trainees will experience four separate areas (seats). Most commonly, this comprises of a compulsory corporate law seat and a choice in the other three seats. Therefore, during the two year training contract a trainee solicitor will experience work in corporate law and three other seats before applying to the firm for any one of the restricted seats. This rapid transition from trainee to qualified solicitor also represents a problem in that the supportive environment of being a trainee ceases to exist once an individual becomes qualified. In 1991 Meyer and Allen suggested that career anchors (Christensen & Maxham, 1984) It, therefore, appears that an organisation's culture and individuals' values may have an effect on career progression and job satisfaction. (Leather, Lawrence, Beale & Cox, 1998) This is in keeping with the matching hypothesis, wherein the value of any source or type of support is dependent on the nature of the problem on stressor upon which it is bought to bear.

Hypothesis: Based on the two-year training process for solicitors, two hypotheses are presented. The first is that both supervisor and organisational support will be positively correlated with motivation and job satisfaction. Furthermore, perceived support will be lower for qualified individuals than for trainees.

Method: Participants

Participants will be trainee and newly-qualified solicitors. Solicitors are defined as those solicitors employed on a two-year training contract within the law firm. Qualified solicitors are, for the purpose of this study, defined as those who have been qualified for less than two years.étin proposed that each individual has only one. The questionnaires have been criticised as the weighting process is subjective such as the life balance and need for stability (Arnold, 2004), which is largely unaccounted for by other career models, such as Hoke and Krathen of Vocational Choice. These factors are of vital importance when considering career development, not everyone has the same values about work, therefore, the hierarchical approach to career progression is not suited to everyone. Career anchors can help us to understand some of the other lifestyle factors that may impact on what we want and need from our career. This presentation focuses on a normative study carried out with a sample of approximately 500 people based in the UK. Currently there are no gender or age differences in the scores, in other words, people respond in a similar way. However, (Brindle & Whapham, 2003a) suggest that using both a normative and ideographic approach to career anchors provides us with a broader picture of the individual. The data will be used to determine the number of anchors through factor analysis to develop norms for the instrument. This will be used to test the analysis and interpretation of an individual's results clearer as it will be possible to determine what constitutes a high or low score. Finally it will be used to track for trends in career anchors as (Schein, 1996) felt that there would be a shift in the pattern of career anchors as society changes in time and in world of work. This data will be available in time for the conference.
The relation between bright side personality and emotional intelligence

K. CALLANAN, City University.

Background: Emotional Intelligence (EI) has become a topic of great interest within the last 10 years. Lately, it has become the subject of scientific enquiry in what differentiates people in their emotional skills. It is not without its drawbacks, however, and some have even condemned EI’s psychometric properties and validation (Austin, Salkofke & Egan, 2005). EI is deemed to be an ability to process information and assessed by cognitive tests, more recently it is proposed to be a set of traits and abilities in its own right. Nevertheless, it is an area of individual difference research with significant wide implications for organisations. The central issue is whether personality or EI is the greater predictor of workplace performance. A combination of the two may be more predictive of superior workplace success. Within the organisational context, EI is a great indicator of work performance and assessed value than cognitive intelligence for people in goal setting, accomplishment and actualising one’s potential. Of significance here are large-scale sample studies carried out in the US, Holland, Israel and Saudi Arabia which show correlations of 0.80, 0.75 and 0.64 respectively between EI and self-actualisation (Bar-On, 2005). This implies high EI scorers are more diligent, dutiful and industrious than low EI scorers. The aims of this study comprise four hypotheses:

Hypothesis 1: EI scorers will have higher than average EI and four important outcomes (general well-being, job satisfaction, organisational commitment and intention to quit).

Hypothesis 2: EI will be found to contribute to a nomological network of EI’s psychometric properties and validation (Austin, Salkofke & Egan, 2005). EI is deemed to be an ability to process information and assessed by cognitive tests, more recently it is proposed to be a set of traits and abilities in its own right. Nevertheless, it is an area of individual difference research with significant wide implications for organisations. The central issue is whether personality or EI is the greater predictor of workplace performance. A combination of the two may be more predictive of superior workplace success. Within the organisational context, EI is a great indicator of work performance and assessed value than cognitive intelligence for people in goal setting, accomplishment and actualising one’s potential. Of significance here are large-scale sample studies carried out in the US, Holland, Israel and Saudi Arabia which show correlations of 0.80, 0.75 and 0.64 respectively between EI and self-actualisation (Bar-On, 2005). This implies high EI scorers are more diligent, dutiful and industrious than low EI scorers. The aims of this study comprise four hypotheses:

Hypothesis 3: The efficacy of using EI as a selection measure and its implications for retention and performance.

Hypothesis 4: EI can make a valuable contribution in identifying leadership talent.

Methodology:

Sample: This study will draw on a cross-section of the working population from two or more organisations. To avoid a shortfall of participants a convenience sample will be drawn from those in employment.

Materials: The Hogan Personality Inventory (HPI) will measure personality and participants will be assessed by occupational scales of the HPI; namely service orientation, stress tolerance, reliability, clerical potential, sales potential, and administrative potential. Participants will complete these questionnaires by pencil and paper method. Bar-Or’s EQ-I will measure emotional intelligence. This comprises high EQ-I scorers are more diligent, dutiful and industrious than low EQ-I scorers. The aims of this study comprise four hypotheses:

Hypothesis 1: EI scorers will have higher than average EI.

Hypothesis 2: Good or above average performers will have higher than average EI.

Hypothesis 3: The efficacy of using EI as a selection measure and its implications for retention and performance.

Hypothesis 4: EI can make a valuable contribution in identifying leadership talent.

Discussion – Work in Progress:

The Hogan Personality Inventory (HPI) will measure personality and participants will be assessed by occupational scales of the HPI; namely service orientation, stress tolerance, reliability, clerical potential, sales potential, and administrative potential. Participants will complete these questionnaires by pencil and paper method. Bar-Or’s EQ-I will measure emotional intelligence. This comprises high EQ-I scorers are more diligent, dutiful and industrious than low EQ-I scorers. The aims of this study comprise four hypotheses:

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Hypothesis 4: EI can make a valuable contribution in identifying leadership talent.
different demographic groups. This area has received less than satisfactory attention in the UK and in the US. The quantification of group differences on personality measures will potentially facilitate our understanding of whether or not different groups could be adversely impacted by the use of these tests for job selection. The purpose of this project is to investigate whether or not personality scales used in personnel selection is likely to lead to adverse impact for various demographic groups in British organisations. Gender, age and ethnicity differences will be examined.

The methodology is as follows: For the sample, archival test score data from organisations on applicants who completed personality inventories, while applying for professional level positions. Data usage will be historical. Testing period will be limited and the original reason for application will be taken into account. Gender categories will be male and female; age categories will be young, middle and old; ethnic group categories will be Whites, Blacks, Asians and Chinese. Overseas applicants will be excluded to ensure all groups are British citizens. The procedure will involve data to be drawn from archival job vacancy file at subject organisation, in which raw test scores, gender, age, and ethnicity for job applicants will be entered in a spreadsheet for analysis. For each study variable, the range, mean, median, and standard deviation will be calculated separately for the different subgroups of interest. Independent t-tests will be conducted. Mean demographic group differences will be computed using an effect size statistic d. The d statistic is commonly used and considered the most appropriate means of comparing group differences practices. The primary interpretation of d is its magnitude, although statistical significance of group differences can also be interpreted.

Findings from this study may have many significant implications depending on the degree of difference found. For instance, if large differences were found between different demographic groups in a certain personality inventory, this would potentially signify adverse impact. Subsequently, employers should consider their choice of instrument used in the future.

Do meta-perceptions of the Big Five predict performance better than general self-ratings? E.J. ZISSELSBERGER, University of Nottingham.

Background: One central theme within the field of occupational psychology is the relationship between personality and job performance. In general, the main body of research tends to centre around the role of the Five Factor Model (FFM) in performance prediction. For instance, studies have demonstrated that both Conscientiousness and Emotional Stability are effective predictors of overall work performance across a range of different occupational groups. Similarly, even though the remaining three personality dimensions – namely Extraversion, Openness and Agreeableness – do not specifically predict overall job performance, they can still predict success in specific environments and to certain performance criteria. These findings clearly show the potential for personality to predict job performance. However, one of the key criticisms levelled against personality measures is that they lack a specific context. With this in mind, Woods (2004) linked each of the Big Five personality traits to specific meta-perceptive contexts and showed that the addition of meta-perceptions (how people think they are seen) to the Big Five ratings improved their predictive validity. The current study will attempt to replicate these findings by focusing on the links and examining the effects within a new sample and within different performance criteria. This will be achieved by administering a personality questionnaire containing meta-perceptive ratings, which require the participants to consider how particular Big Five traits would be rated by their supervisors, colleagues, clients, friends and romantic partners. As these meta-perceptions are more consistent with job performance assessments (which are also based on observer ratings, e.g. appraisals), it is expected that the ratings will enhance the overall predictive validity of general personality measures.

Methodology: This study will administer two personality measures – one operationalised to measure general personality ratings and the other to measure meta-perceptive ratings – to a large group of trainee commercial practice lawyers. The sample will consist of male and female trainee lawyers working for an international law firm based in the City of London. The participants will come from different practice groups and be of varying age and tenure. The collected data will be analysed using correlations and multiple regression to identify significant predictors of Five ratings and job performance. Differences between the general and meta-perceptive ratings will also be examined.

Findings: The data will be analysed to determine whether meta-perceptive personality ratings improve the predictive validity of general personality measures in relation to job performance criteria. It is anticipated that the results will support previous research findings, which suggest that meta-perceptive ratings are able to improve the prediction of job performance criteria.

Discussion: This particular research has both theoretical and practical implications within assessment practice. In particular, personality measurement is conceptualised and applied in occupational practice. Moreover, it adds a new dimension to traditional research examining the relationship between personality and job performance.

Wessex & Wight Branch Workplace Bullying Conference 2005


Working together to tackle workplace bullying: Concepts, research and solutions

KEYNOTE SPEAKER

Workplace bullying: An agenda for the future

S. EINARSEN, University of Bergen.

Our understanding of workplace bullying has increased tremendously in the last decade. What of the future? This keynote will outline the fundamental challenges for us as researchers and practitioners in this difficult and changing arena. How do we define and treat all those connected with bullying incidents? Where does the responsibility for bullying lie? How will the whole field shift as our perceptions of this problem evolve? What is the relationship between leadership and bullying and the role of managers in the quest for a bully-free environment. This keynote will take us into the future and sketch an agenda for which we need to prepare.

LARGE SCALE SESSIONS

Intervening against workplace bullying: Does it work?

H. HOEL, The University of Manchester.

Most studies of workplace bullying have so far focused on examining the problem and establishing its prevalence and its outcomes. By contrast, there is very little evidence on the effectiveness of practical interventions despite considerable effort by practitioners to address the problem in the workplace. To our knowledge no previous study has systematically assessed the effectiveness of intervention aimed at reducing bullying and minimising negative behaviour and bullying at work. This presentation reports on an intervention study carried out in five large UK organisations between 2003 and 2004. The organisations include three NHS trusts, one large public sector organisation and a Government agency. The study was carried out by means of a four-stages strategy: (1) examining the experience of bullying, destructive behaviour and bullying and its antecedents within the participating organisation; (2) obtaining pre-intervention data; (3) developing and carrying out interventions within the participating organisations; and (4) obtaining post-intervention data. Here self-report data were supplied along with more objective data from the organisation. In line with previous research, the present study used a large scale and a Government agency. Three interventions were carried out with a focus on policy communication, negative behaviour awareness and stress management. The study was funded by the British Occupational Health Research Foundation (BOHRF).

Taking action against bullying: A long-term intervention project within the US Department of Veterans Affairs

L. KEASHLY, Wayne State University, Michigan.

This presentation will discuss the development, implementation and evaluation of a grant-supported initiative to address stress and aggression in the US Department of Veterans Affairs. Our initial premise was that the causes of aggression and bullying are deeply rooted in the organisational culture and climate. Thus, any prevention efforts that are likely to be effective must involve the active participation and support of individuals at every level, in order to gain meaningful consensus on the unique context of the organisation and be-data-driven in terms of accurately defining the nature of the problem and assessing the impact of any efforts. In describing the VA project, I will illustrate how we worked to develop these critical aspects. Further, I will provide evidence of changes in intervention and bullying that are the indicators of organisational dysfunction that are linked to engagement in this process. Finally, I will discuss lessons we have learned as a result of our own experience that may be useful to others who wish to undertake such change efforts.

Bullying – is there room for compassion and forgiveness?

N. TEHRANI, Assessment & Rehabilitation Consultants.

For people who have experienced bullying in the workplace everywhere tends to become black and white. The bully is either viewed as a malevolent psychopath who enjoys destroying people or someone with a Machiavellian personality who sees the distress of others as a predictable outcome of having to get a job done efficiently. While it may be true that some people do have these traits, the greater number from my clinical experience falls into a rather large category of ‘managers’, including: managerially incompetent, socially unaware, stressed or lacking in basic communication skills.

If my experience is true, then are we focussing on the wrong place? Should we be looking at some of the people who see themselves as being victims of bullying and asking ourselves whether there is a need to increase our levels of understanding of
what is happening? Perhaps instead of looking towards litigation and compensation some of our efforts should go towards helping victims to be a little more compassionate and forgiving and less interested in retribution and punishment.

Bullying at work: The experience of managers

P. WOODMAN, Chartered Management Institute.

This presentation will launch new research findings that uniquely look at bullying as experienced by managers. It explores how bullying has been both observed and personally experienced by managers at all levels; how individual managers respond to incidents; and what steps are being taken by organisations to address the matter. It provides insights into the effectiveness of policies on bullying and what works best. The research carried out by the Chartered Management Institute with the support of Acas, Unison and Royal Solicitors has also led to the development of separate guidance offering practical advice.

WORKSHOPS

Dealing with contemporary workplace bullying challenges

The views of ‘the Experts’ – the targets of workplace bullying

O. FIELD, C. CHRISTIAN & K. MUNDAY,
Members of the Management Committee of DAWN.

The title of this workshop draws on the concept of the ‘expert patient’. In the medical arena there is increasing recognition by doctors, nurses and other health professionals that their patients often understand their diseases better than they do, and that this knowledge and experience has for far too long been an untapped resource. Drawing on their own experiences of being bullied, along with that of members of DAWN (an anti-bullying in the workplace mutual support and campaign group), the presenters will highlight some of those areas which need to be urgently addressed in order to curb bullying and its harmful effects.

Organisational stressors and bullying

P. KELLY & C. BORROW, Health and Safety Executive, Occupational Health Psychology Unit.

HSE launched the Management Standards for Tackling Work-Related Stress in November 2004. This is an organisational strategy which aims to tackle organisational stressors via good management practices. This workshop will provide an introduction to the Management Standards for Work-Related Stress and how organisational stressors could influence peoples reporting and perception of bullying.

Harassment and bullying in the Ministry of Defence – civilians working with the Royal Navy

R. OSBORNE & P. KELLY, Royal Navy Civil Service.

To explore how harassment and bullying is dealt with in the MOD Civil Service, including an insight into the team ethos of Royal Navy personnel and their interaction with civilian staff. Delegates will gain an understanding of the handling of complaints by civilian staff and what measures are in place to reduce harassment and bullying.

Combating bullying in schools: Lessons for the workplace

S. WILLETT & C. SOWERBUTTS, Department for Education and Skills.

The Department for Education and Skills would like to share its recent initiatives aimed at tackling bullying, such as peer mentoring, are equipping children with valuable expertise which they can take into the workplace. We have, therefore, invited a number of children and young people to come along to our workshop and talk to us about their experiences of bullying, and their views on how best to tackle it, and, therefore, envisage that this will be a very lively session.

The aim of the Department for Education and Skills Improving Behaviour in Schools team is to create an environment, both in and out of schools, where bullying has no place. Achieving this will have wider implications for school discipline and also society as a whole, since the young people of today inevitably becomes our workers of tomorrow. As such it is key that they understand what is and is not acceptable behaviour in the workplace, as well as develop the skills to address negative behaviour and deal with it.

Creating future policy and solutions for workplace bullying

Can anyone become a bully?

S. BROCKWAY & V. GARROW, Roffey Park Institute.

In this workshop, Valerie Garrow, Principal Researcher, and Sharon Brockway, Development Consultant, will explore what makes individuals engage in bullying. They will explore the impact that external forces may have on behaviour and responses towards others. The session will also include the sharing of small group exercises where participants will be asked to complete specific tasks under timed conditions. This will be followed by a debrief and plenary discussion.

In this session, the potential effects of external factors in provoking bullying behaviour will be debated, including change, organisational culture, values, stakeholder expectations and economic/commercial pressures. Roffey Park is initiating research into the impact of external factors, particularly change and culture, on bullying behaviour at work, and is interested in hearing the views and experiences of conference participants at this workshop.

The workshop exercises will be conducted with respect to ethical considerations and in line with BPS standards.

Harassment and bullying – let’s cut it out!

S. EXALL & P. FARMER, British Telecom.

Often seen as a cliché but BT believes that its ability to achieve its key performance objective is through the performance of its people. BT also believes that its people should work and be treated in a professional way without fear or intimidation. BT has had, and continues to have, a number of initiatives (with additional support) on dealing with harassment and bullying together with values on the behavioural expectations of people. This has also been supported by a number of initiatives to raise awareness and support the values and policy.

This presentation will talk about BT’s journey to cut out harassment and bullying behaviour and support it gives to its people.

Learning from experience

L. MUNRO & D. ALLEN, BAE Systems Plc.

An interactive session looking at what BAE Systems have done to combat discrimination, bullying and harassment in the workplace. Delegates will be invited to consider the impact of handling of real complaints and the outcomes of investigations carried out by the company to gain a better understanding of who really wins when a compliant is investigated and how action at the right time and level can make all the difference to the person feeling harassed.

INDIVIDUAL PAPERS – 14 SEPTEMBER

Workplace bullying among a group of professionals in Turkey

S. AYTAC, N. BAYRAM & N. BILGEL, University of Uludag, Medical Faculty.

Objectives: To determine the prevalence of workplace mobbing (bullying) among a group of white-collar workers who are all government employees and full-time personnel in health, education and security sectors; to evaluate the association between bullying and health outcomes and to assess the effectiveness of policies on bullied workers. This is the first study about this matter in Turkey.

Design: Questionnaire survey. Our sample group was selected from the personnel lists of the different governmental institutions. They were directorate of health, directorate of education and directorate of security. Several questionnaires were brought them by the researchers in closes envelopes and filled out by themselves anonymously. All scales (except Hospital Anxiety and Depression Scale) were translated from English into Turkish and were evaluated by the academic staff of Uluda University (Faculty of Education, Division of Psychology). The translation was conducted by the Department of Education in English) to avoid translation-based errors; In the second phase, it was translated from Turkish into English by a British academic employee whose native language is English and but who can also speak Turkish.

In the third phase, the translation from English into Turkish was evaluated by a Turkish academic employee. The final editing were made by another academic employee with English as native language, and who had profound knowledge about the topic.

Subjects: Full-time government employees in the fields of education (primary, secondary and high school teachers), health (medical doctors, nurses/midwives and health technicians) and security (policemen)

Main outcome measures: A 20-item inventory of bullying designed by Quine (1999), Job induced stress scale (House et al., 1972), the hospital anxiety and stress scale (Zigmond & Snaith, 1983), job satisfaction scale (Quinn & Saines, 1979) and the tendency to leave workforce (Lazarus & Folkman, 1979). The Hospital Anxiety and Depression Scale was translated into Turkish in 1977 and its reliability was found as 0.81 and alpha alfa for anxiety and 0.77 for depression.

Reliability (cronbach alfa) of the Turkish versions of the outcome measures: A 20-item inventory of bullying designed by Quine (1999): 0.83, Job induced stress scale (House et al., 1972): 0.82, The hospital anxiety and stress scale (Zigmond & Snaith, 1983): Anxiety: 0.80; depression: 0.73, Support at work scale (Busa et al., 1997): 0.89, Job satisfaction scale (Quinn & Saines, 1979): 0.86, The propensity to leave scale (Carroll et al., 1978): 0.75.

Results: Some 944 employees returned questionnaires – a response rate of 77 per cent. We included some of the unanswered questionnaires from the study because of the missing data. Finally 877 employees were included into our study.

Among them 483 (55.1 per cent) reported experiencing one or more types of bullying in the previous year. Some 416 (47.4 per cent) had witnessed the bullying of others. When bullying occurred, it was most often an interpersonal problem and underestimated. It has severe physiological and psychological consequences. Support at work can reduce the damage and set up systems for this kind of support is essential. 55.1 per cent of staff among government employees with different occupations reported being subjected to bullying behaviours in the workplace in the previous year and 47.4 per cent had witnessed the bullying of others. Staff who had been bullied had lower levels of job satisfaction, higher levels of job induced stress, depression and anxiety. Intention to leave found to be the same among bullied and not bullied staff and this can be explained by the high unemployment rate in Turkey.

The most seen type of bullying was work overload, which is not acceptable behaviour in the workplace, as such it is key that they understand what is and is not acceptable behaviour in the workplace, as well as develop the skills to address negative behaviour and deal with it.

To determine the prevalence of workplace mobbing, depression and job induced stress among health and education sectors. The results of this study showed that about 20% of the employees had experienced bullying. The prevalence of the outcome measures was as follows: depression: 0.73, Support at work scale: 0.89, Job satisfaction scale: 0.86. The propensity to leave scale: 0.75.

The correlation coefficients were as follows: depression: 0.73, Support at work scale: 0.89, Job satisfaction scale: 0.86. The propensity to leave scale: 0.75.

The results were statistically significant differences between bullied and not bullied employees in terms of anxiety, depression, job induced stress and support at work.

Conclusions: Mobbing is a serious problem and underestimated. It has severe psychological and physiological consequences. Support at work can reduce the damage and set up systems for this kind of support is essential. 55.1 per cent of staff among government employees with different occupations reported being subjected to bullying behaviours in the workplace in the previous year and 47.4 per cent had witnessed the bullying of others. Staff who had been bullied had lower levels of job satisfaction, higher levels of job induced stress, depression and anxiety. Intention to leave found to be the same among bullied and not bullied staff and this can be explained by the high unemployment rate in Turkey.
Towards a better understanding of workplace bullying: A practical model based on qualitative interviews in Belgium

E. BAILLIEN, I. NEYENS & H. DE WITTE, KU Leuven.

Most research exploring organisational antecedents of workplace bullying is based on the experiences of victims. In this qualitative research, a different approach was chosen by performing in-depth interviews with vocational insiders with a large amount of experience and knowledge on mobbing at work (e.g. employees assigned to prevent and handle mobbing and HRM-staff members). The research focus was to detect task, team and organisational risk factors and to understand the bullying process. Based on a list of possible risk factors, detected in previous research, 126 semi-structured interviews were conducted. Each interview was entered in a structured Word-file which reflected if the quoted risk factor: (1) had been mentioned spontaneously or not; (2) was a causal, preventive, sustaining or discontinuing factor; and (3) was related to the victim or the perpetrator. The interviews yielded over 200 bullying cases. The analysis of these cases enabled to reconstruct the process of bullying at work and the role of various risk factors within this process. The results suggest that task, team and organisational factors can cause mobbing situations, strains and conflicts. These factors also seem to moderate the style of conflict management and the way employees cope with frustrations and strains. More specific team- and organisational factors (e.g. a gossip culture) can directly cause mobbing. Finally, mobbing as such can also influence and change the task, team and organisational interactions. In turn can promote new frustrations or strains, causing additional mobbing at work. In this presentation we will use examples of real life cases to explore the bullying process and to illustrate the role of the task, team and organisational aspects in becoming a victim or perpetrator of workplace bullying.

Encouraging a supportive culture in the prevention of workplace bullying and harassment: Working with care

D. BEALE, Loughborough University & P. LEATHER, University of Nottingham.

Much research on workplace bullying and harassment focuses on negative behaviours without placing them in the context of the wider range of interactions between people at work. Preventing bullying and harassment concentrate on condemning unacceptable behaviour without encouraging more positive behaviour. This paper reports an ongoing project carried out in collaboration with the Royal College of Nursing, which seeks to promote a more supportive culture in healthcare settings. The Working with Care suite of tools provides a number of individual and team exercises designed to:

- encourage positive behaviours and discourage negative behaviours;
- increase understanding of behaviours that may be perceived to be bullying or harassment (whether intended or not);
- increase awareness of the behaviours that contribute to a climate in which toxic/antisocial behaviours are tolerated;
- promote acceptance of strategies that might be used to retrieve problem situations;
- help to promote a supportive culture where bullying and harassment are unlikely to occur;
- provide space for teams at all levels of an organisation.

Feedback from focus groups and small-scale pilot studies with teams indicated that all respondents agreed that such an initiative was needed, and 91 per cent considered that this initiative would be moderately or extremely effective.

Leadership and bullying at the workplace

M.B. NIelsen, S. BERGE MATTHIESEN & S. EINARSEN, University of Bergen.

The aim of the study was two-fold: To identify characteristic management styles of leaders who expose one or more of their subordinates to bullying and to explore possible relationships between bullying from supervisors and symptoms of post-traumatic stress among victims of the negative acts. The study was based on a survey with 221 respondents, of whom 199 (90 per cent) had been the target of bullying from one or more of their supervisors. Three subscales were measured by the inventory Constructive and Destructive Leadership Behaviour (CDLB; Einarsen, Skogstad, Aasland & Bakken-Løseth, 2002), asking the respondents to rate the leadership behaviour of their immediate leader. The subscales included are: Constructive; tyrannical; popular but disloyal; and detailed leadership. The inventory was supplemented with a laissez-faire leadership scale (Bass & Avolio, 1990). Symptoms of post-traumatic stress disorder were measured by the inventory IES-R (Weiss & Marmar, 1997). The study revealed that bullying from supervisors is associated with specific leadership styles. Of the five leadership scales, tyrannical, laissez-faire and detailed leadership styles have the highest mean values. Tyrannical and laissez-faire leadership seem to be especially associated with bullying. However, the occurrence of laissez-faire leadership could reflect social ostracism and not laissez-faire leadership. The findings indicate further that leadership styles associated with symptoms of post-traumatic stress above the recommended cut-off values for the disorder. After mutual control between the leadership styles, tyrannical leadership style contributing to the variance in all three symptoms of post-traumatic stress (regression analysis).

Building essentially on a correlational design, the present study does not permit conclusions of direct cause-effect relationships between destructive leadership and negative reactions in the victims.

Experiences of workplace bullying among ‘non-traditional’ students:


Background: Are experiences of workplace bullying a contributing factor of some adults to re-enter education, and if so, what are the issues of concern for both businesses and education?

Aims: The present exploratory study had three related aims. First, to examine the level of current and prior exposure to workplace bullying of adults returning to either: (i) full-time; or (ii) part-time tertiary education. Second, to determine whether current or previous exposure to workplace bullying differs across these two groups of respondents entering the different modes of education. Third, to examine the relationship between exposure to workplace bullying and salient work environment and social atmosphere variables across the two student groups.

Method: 84 full-time and 211 part-time ‘non-traditional’ students completed the Psychosocial Workplace Inventory, the Work Harassment Scale, the Work Atmosphere Scale, and the Work Stress Symptom Scale (Bjerkan & Østern, 1999a, b, c, d) alongside the Work and Life Attitudes Survey (Warr, Cook & Wall, 1979).

Results: Overall, 33.4 per cent (N=93) of the respondents had been bullied in the previous six months (38.3 per cent, N=50 full-time; 36.1 per cent, N=62 part-time). Over 40 per cent (42.1 per cent, N=120) of respondents had witnessed colleagues being bullied during this period (48.1 per cent, N=39 full-time; 35.6 per cent, N=62 part-time). Over half of all respondents (56.8 per cent, N=162) had been bullied in their previous career (61 per cent, N=50 full-time; 55.2 per cent, N=112 part-time). Exposure to workplace bullying was found to be significantly related to a negative social atmosphere and work environment variables in the workplace.

Conclusion: These findings provide further data regarding the incidence of workplace bullying and the insidious effects of exposure to such behaviours on the workforce and are a cause for concern for businesses (e.g. retention and recruitment), businesses organisations such as the Institute of Directors, the Trades Union Congress, and the Confederation of British Industry (e.g. health and safety), and education institutions (e.g. pastoral care).

Unfairness to fatties! Attitudes to obesity in the UK workplace

M.J. UMNEY, Middlesex University.

The existence of discriminatory attitudes towards obese people has been recognised for some time across a wide range of social areas in the US (e.g. Puhl & Brownell, 2001; Maranto & Stenoien, 2000). The association of negative attributes with overweight people has been found to start with pre-school children in organisations in the south west of England, and questionnaire data gathered from employees in a range of organisations.
A behavioural model of destructive leadership
M.S. AASLAND, A. SKOGSTAD & S. EINARSEN, University of Bergen
The aim of the present study was to test empirically the conceptual validity of a proposed model of destructive leadership, called 'Constructive and Destructive Leadership Behaviour' (Einarsen, Skogstad, Aasland & Bakken, 2002). The model is an extension of Blake and Mouton's 'Management Grid' (1964). The extension involves lengthening the two axis of human-oriented leadership and task-oriented leadership, so that these axis also describe destructive aspects of leadership. A confirmatory factor analysis also showed that leadership behaviour correlated positively high with bullying. Perceiving one's immediate leadership behaviour was also measured with a questionnaire with 42 items. Destructive and constructive leadership behaviour of their immediate superior using a questionnaire measures all kinds of task, team and organisational risk factors. This study wants to discover which risk factors are recruited by two associations of targets of bullying. The wrongdoing behaviour of their immediate superior is somewhat similar to negative acts and bullying as described in research on workplace bullying. Long-term health deterioration was reported. Future research converges with Popper's use of attachment theory to explain a leader's resilience in the face of threat (1994). The third finding converges with Heifetz' s use of attachment theory to explain the characteristics of emotional instability and self-doubt predicted [X per cent] of variance in the high risk of being bullied. The interaction of an avoidant adult attachment style with the characteristics of emotional instability and social boldness predicted [X per cent] of variance in the low risk of being bullied. The interaction of a secure adult attachment style with the characteristics of game playing and lack of empathy predicted [X per cent] of variance in the high risk of being a bully ([stat]). The second finding converges with Heifetz' s use of attachment theory to explain the characteristics of emotional instability and self-doubt predicted [X per cent] of variance in the high risk of being bullied ([stat]). The second finding converges with Heifetz' s use of attachment theory to explain the characteristics of emotional instability and self-doubt predicted [X per cent] of variance in the high risk of being bullied ([stat]). The second finding converges with Heifetz' s use of attachment theory to explain the characteristics of emotional instability and self-doubt predicted [X per cent] of variance in the high risk of being bullied ([stat]).

Workplace bullying: Should work come with a health warning?
S. GARVEY, University of Lincoln.
The TUC report one in five employees will experience bullying sometime in their working lives, but has little information about the devastating impact bullying has upon a person's life. Previous research has used questionnaires to gather information about the problem but this method does not give those who have been targeted the opportunity to share their experiences of being bullied and the effect it has had on them personally. There is little research looking specifically at the nature of targets perception of bullying and the effect it has had in relation to their ability to function in society after being targeted. Bullying causes both psychological as well as physiological effects that are both severe and long-term. One way to study the nature of these effects is to use case study research. The research reported here is significant in that it uses case studies of targets who are still suffering the effects of workplace bullying as much as five years after the initial incidents took place. There are 20 participants in this research, five from Ireland, two from the US and 13 from the UK. By thematically analysing the case studies the research shows that the psychological and physiological effects of bullying have affected all participants regardless of which country they are from. All the participants have been diagnosed with symptoms of post-traumatic stress disorder (PTSD). Four of the participants have remained working, 16 participants are on long-term sick leave, five of the participants are so severely traumatised that they have been separated from their partners and one spent 10 months in a psychiatric unit. This small-scale research provides invaluable information about the destructive nature of workplace bullying and contributes to our knowledge of workplace bullying.

Differences in personality between bullied victims and a non-bullied group in a Norwegian sample
L. GLASO, S. BERGE MATTHIENSEN, M. BIRKELAND & S. EINARSEN, University of Bergen.
The aim of the study is to examine differences in personality between a group of bully victims and a non-bullied group. The sample comprised 63 victims and a matched contrast group of 63 respondents who completed Goldberg's (1999) International Personality Item Pool (IPIP-50). Significant differences were found between victims and non-victims on two out of five personality dimensions. Victims tended to be more neurotic and less conscientious. The results suggest that, using a five-factor framework, personality traits seem to be associated with bullying. Hence, personality should not be neglected being an important factor in understanding the bullying phenomenon.

Bullying as retaliatory acts of whistleblowing
S.B. MATTHIENSEN, M.B. NIELSEN & S. EINARSEN, University of Bergen.
Blowing the whistle, according to Miceli and Near (1992), can be defined as the disclosure by organisational members of immoral, illegal or illegitimate practices under the control of their employers, to persons or organisations that may be able to affect action. So far, bullying and whistleblowing have been treated as rather separated research areas. The aim of the paper is to investigate the link between bullying and whistleblowing. The present study is based on a postal survey, in which most of the participants are recruited by two associations of targets of whistleblowing. The present study is based on a postal survey, in which most of the participants are recruited by two associations of targets of whistleblowing. The present study is based on a postal survey, in which most of the participants are recruited by two associations of targets of whistleblowing.

Attachment theory and bullying
V.C. LYNCH, Thames Valley University.
Hazen and Shaver's 1987 extension of attachment theory (Bowlby, 1969, 1971, 1981) to provide a psychological understanding of adult romantic relations is further applied to explain business relations with regard to bullying. In a multiple regression questionnaire study of 97 employees of a UK company, adult romantic attachment styles are correlated with personality characteristics to predict reciprocal bullying and victimisation. The Experience in Close Relationships Scale (Brennan, Clark & Shaver, 1998), I5Q+ (Psychometrics Ltd., 2002) and The Negative Acts Questionnaire (Einarsen & Hoel, 2000) were used to measure operationalisation. Three findings emerged. The interaction of an anxious adult attachment style with the characteristics of emotional instability and self-doubt predicted [X per cent] of variance in the high risk of being bullied. The interaction of an avoidant adult attachment style with the characteristics of emotional instability and social boldness predicted [X per cent] of variance in the low risk of being bullied ([stat]). The interaction of an avoidant adult attachment style with the characteristics of emotional instability and social boldness predicted [X per cent] of variance in the low risk of being bullied ([stat]).
A quantitative study of task, team and organisational risk factors for mobbing at work in small- and medium-sized enterprises (SMEs)


Most research exploring organisational antecedents of workplace bullying is limited to large organisations. Small- and medium-sized enterprises (SMEs) differ in many task, team and organisational aspects from those large organisations. This study tries to discover which risk factors at the task, team and organisational level cause or sustain mobbing in SMEs. The study contains a literature review, a qualitative phase and a quantitative survey. In this presentation, we will focus on the results of the quantitative survey. Many studies found a lower prevalence of mobbing in SMEs compared to large organisations. We develop some hypotheses to explain this lower prevalence of mobbing (e.g. a lack of hierarchy and a direct way to communicate). The lower prevalence rate could however also represent an underestimation of bullying, because victims are more easily dismissed in SMEs. This leads to some hypotheses regarding risk factors that could increase mobbing in SMEs. For example, a lack of a clear policy against mobbing could increase the risk of mobbing in SMEs. These hypotheses are tested in a quantitative survey. The sample consists of 50 organisations, selected according to size, sector and region. The questionnaire measures task, team and organisational risk factors, as well as bullying at the workplace. This moment, 285 questionnaires have been returned (response: 33 per cent). The results will be presented at the conference.

A model for understanding workplace bullying

M. SHEEHAN, University of Glamorgan.

The model described in this paper has been inductively developed for the purposes of comprehending further how workplace bullying may be understood and prevented. It has been developed to answer the question posed: ‘what is bullying? – a question often posed, in one way or another, during a research process. The model draws from workplace bullying literature suggesting that many of those who experience workplace bullying come to understand the experience as an epiphany or turning point in their lives, an understanding that may be conceptualised as a series of platforms underpinning their experiences.

Each epiphany may be seen as necessarily unique, complex, and exquisite, as it develops within the context of each participant’s dynamic and creative social milieu. First, the experience may be envisaged as the primary platform through which all understanding of their experience occurs. Second, there are six supporting platforms that shape the experience. They are named as spatial, temporal, action, ideological, affective and social milieu. It will be argued that each experience within each platform is unique to the individual and may change at any time as further understanding occurs. The model helps to explain how individuals make sense of, and give meaning to, their experience.

The destructiveness of laissez-faire leadership behaviour

A. SKOGSTAD, University of Bergen.

Research has documented that some five to 10 per cent of employees in Europe are subjected to bullying at any time, leading to severe psychosomatic and mental health problems in the target. Leaders and managers are involved in 50 to 80 per cent of these incidents. One may distinguish a passive from an active class of destructive leadership behaviours, i.e. the absence of considerate leadership behaviour versus the presence of experienced negative acts by leaders. The absence of considerate behaviours has been described as laissez-faire leadership. Bernard Bass defines laissez-faire leadership as the absence of involvement in subordinates and their work performance. Decisions are often delayed; feedback, rewards, and involvement are absent; and there is no attempt to motivate followers or to recognise and satisfy their needs. In the present study relationships between laissez-faire leadership and the outcomes job satisfaction, psychosomatic complaints, role stress, affective organisational commitment and subordinates’ evaluations of leader efficiency were studied across two measurements in a sample consisting of public post officers in Norway (N=1038). Results showed significant relationships between laissez-faire leadership and outcomes, which may indicate that this passive leadership style may be experienced to have negative consequences comparable to those resulting from active negative acts by leaders.

The negotiation of power by gendered leaders: How bullying is mobilised in gendered organisations

P.T. THOMAS & D. LEWIS, University of Glamorgan.

Our paper draws on the accounts of 10 post-experience management students to help explore how notions of leadership and management identity are the product of masculine power relations in the daily life of owner-managers and how such power-relations might be constituted as ‘bullying’. Specifically, our paper aims to better understand the consequences of mobilising ‘gender’ along with ‘gendered discourse’ in specific contexts where managers might contextualise this ‘space’ and identity as a result of the organisation ‘space’ of masculinity in which bullying may result as part of their everyday lives. The paper argues as to how ‘gender’ and ‘gender-derived leadership’ oppresses, dominates or contrastingly opposes or resists such inequalities and oppressions which are often when recognised outwardly seen as bullying. Based on a pro-feminist, post-structural and qualitative ethnographic perspective, we argue how the adoption of such an approach helps us better understand the complexities and consequences of such categories within, as leadership and bullying in organisational contexts where such behaviours are reproduced to fit domination in institutional formations cultural schemas.

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KEYNOTE SPEAKERS

Learning styles
F. COFFIELD, Institute of Education.
This talk will give an account of a systematic and critical review of learning styles which I and a team of colleagues undertook for the Learning and Skills Development Agency. Before presenting the findings, I shall explain in some detail the problems associated with the rigorous and comparable treatment of all the learning style instruments chosen for study, e.g. the key questions posed, the criteria for selection and rejection, and the framework for analysing each model. Out of 70 instruments found, 13 were selected for detailed examination. A continuum of ‘families’ of learning styles will be presented as well as the main psychometric weaknesses of the approach. The implications for pedagogy will then be discussed and the talk will end with some positive recommendations for teachers, psychologists and inspectors.

W(h)ither educational psychology
P. FARRELL, University of Manchester.
These are exciting yet challenging times for educational psychologists. For different, but complementary, reasons there is a whole range of opportunities and threats that are currently facing the profession. Our ability to respond effectively will have a profound impact on the future shape of educational psychology services in the next decade. In this presentation this will consider some of the key on-going debates and priorities and discuss their implication for the development of the profession both in the UK and overseas. In particular this presentation will focus on the ongoing debate about initial and post-qualification training for EPs, the continuing tensions between individual referral models versus consultation approaches to EP practice, the impact of changing and uncertain employment arrangements and the possible consequences of impending developments in welfare reform that are taking place in England. The presentation will draw on developments in the UK and overseas. This presentation will conclude with a discussion of an alternative approach that has the potential for developing psychology services that should enable us to respond more effectively to the needs of all children, their families, schools and communities.

Pupil Attitudes to Self and School survey
W(3) Insights is the only company to be written into the new DfES draft guidelines on Behaviour Improvement Programme evaluation both at the level of individual pupil assessment and whole school. The predictors of desirable pupil attitudes have in more than 30 years of experience working as applied educational psychologists in local education authorities. Their flagship products and methods have now been translated into a new Pupil Attitudes to Self and School survey.

P.A.S.S. – Innovations in self-evaluation to promote inclusion, raise standards and increase pupil and adult awareness.
This conference presentation sets out to describe some of the work carried out by the P.A.S.S. team, including the P.A.S.S. measure of pupils’ attitude to school. The potential contribution of EPs in shaping further policy, practice and research in developing, and maximising PSSPs – especially for the NEET population (not in employment, education or training). Some Scottish and international perspectives about transitions from school to post school life will be discussed. The process of two Future Needs pilot schemes in West-Dunbartonshire and Clackmannanshire which aimed at developing effective transition planning in accord with Beattie and the (ASL) (Scotland) Act 2004. A glossary of terms defining some of the terminology used by school and post school sector.

Early identification of risk of specific learning difficulties
W. ARMSTRONG, S. MARCH & C. MCGHEE, Glasgow Psychological Service.
Early identification of children who may be at risk of later specific difficulties is considered a vital component of assessment and achievement. However, early identification needs to discourage not only self-fulfilling prophecies and lowered expectations of children but also unjustified and unnecessary concern on the part of parents and other professionals. This is best achieved when an early identification procedure is clearly linked to intervention programmes and evaluation procedures. The early identification assessment discussed in this presentation was originally developed as part of the Assessment for Learning Programme (Learning and Teaching Scotland/Scottish Executive).

The skills assessed were selected on the following basis:
1. Linked to current curriculum guidelines;
2. Skills which have a ‘cross-cutting’ nature, i.e. skills for which evidence can be gathered across different curriculum areas.

Particular ‘at risk’ skills were identified. The ‘at risk’ skills in this particular assessment are wide ranging and have not been defined by any specific diagnostic tools, but are intended to help with programme planning and intervention. For this reason a planning format incorporating suggestions for intervention strategies was also provided.

A pilot project was carried out in four nurseries in the East End of Glasgow during 2004/2005, supported by funding from the Scottish Executive ASN Division. This workshop will describe the materials used, comments on the evaluation, and identify possible next steps.

Restorative Interventions in Highland
P. BARBER, Highland Psychological Service.
Restorative interventions in schools are beginning to agree!

The place of research is crucial for the future of EPs and participating in research is recognised as a core function of the profession. However, the challenge is to develop and sustain this broader role by clearly defining it within models of service delivery. EPs have the training and the expertise but the role of research has often been viewed as an ‘add on’ to our ‘main’ task of assessment. This presentation describes the West Lothian model which views research as integral to school improvement and the development of learning and teaching; a gift to the applied psychologist.

We will summarise West Lothian Education Department’s ‘Succeeding Together’ philosophy based on the principle of the Scottish Learning Organisation (Senge, 1990). We will then show how this initiative has allowed the EP Service to work collaboratively with schools in evidence based practice using an ‘action enquiry’ methodology. Examples of work undertaken by the
service, together with feedback from schools will be described. Finally, the challenge for the development of this role for EPS will be discussed.

Improving children’s attainment, motivation and self-esteem

C. BOYLE, South Lanarkshire Psychological Service.

Psychological Services are committed to working with local authority colleagues to close the gap between the lowest achieving and attaining group of pupils and the rest of the school population. Children who do not experience success in school often become discouraged. They blame themselves, feel ‘stupid’, and lack motivation. This can mean that they are less likely to acquire those very skills they need in order to progress. This applies to a significant number of children.

This workshop and to address this problem by changing the ways children think about themselves and the ways they explain their lack of achievement to themselves.

It was hypothesised that by helping the children to think more positively about themselves and by changing the ways in which they thought about success and failure (changing their attributions from ability to effort) they could be helped to increase their motivation and their attainment. Gains were made by pupils in the measured areas of reading and writing. In school surveys or questionnaires were issued to pupils, teachers, and parents and results indicated that parents and especially the parents of pupils are very aware of positive changes in motivation, attainment and self esteem. These changes are less apparent to the teachers.

The findings point to a potentially fruitful way of offering additional intervention and support to children with learning difficulties and of increasing attainment. The cognitive behaviour methods complement more directly focused curricular work very well.

The findings have implications at individual and system levels. For psychologists, the process of assessment may now include investigating children’s attributions, motivation and self-esteem, and intervention may now include techniques for changing these.

Bullying: Research into practice

J. BOYLE, S. HUNTER & S. TURNER, University of Strathclyde & Falkirk Psychological Service.

This workshop will consider the practical implications of two theoretical approaches, which contribute to our understanding of the problems of bullying in schools. The first is the transactional model of coping (Lazarus & Folkman, 1984) which provides an understanding of the appraisal processes and coping strategies used by the victims of bullying (Hunter & Boyle, 2002, 2004; Hunter et al., 2004). The second is the participant role approach (Argyris, 1999), which views school bullying as a social phenomenon in which the participant roles taken by those other than the bullies and victims are central to the problem and to its management.

We will examine why appraisals are important, and present evidence which suggests that the nature of the appraisals made by victims predicts whether or not they will seek help from others, and may provide a rationale for solution-focused work to facilitate change and outcomes, rather than dwelling on negative outcomes and past harm. Finally, we will present evidence from an intervention framing the participant role approach to tackle the problems of bullying in schools by focusing on bystanders.

CPD

V. BURT, BPS CPD Officer.

In order to facilitate CPD planning and recording, the BPS now offers an online CPD record for members. The online system provides members with an easy way of maintaining a personal record, which remains confidential whilst being compiled, and is entirely paperless. This is intended to facilitate CPD planning and attendance and to enable members to submit their completed record at the touch of a button, without further form filling. Completed records can be retained on the database for a period of up to five years for ease of reference.

As CPD is now a Society requirement for members holding a Practising Certificate, the system has been designed to be flexible enough to have relevance for psychologists at all stages of their careers and in all sectors and settings of employment.

The workshop will provide participants with a demonstration of the Online CPD System and will include an overview of the Society’s CPD requirements.

Service delivery in a Glasgow Learning Community

F. DOCHERTY & F. WILLIAMS, Glasgow Psychological Service.

Glasgow’s Learning Communities are part of the Scottish Executive’s conceptualisation of an effective system facilitating social inclusion and raising attainment.

This seminar will examine the role of Psychological Services in working, in a very day-to-day practical way, with education and children’s services in creating structures and an integrated planning framework that promotes these aims.

The general principles of these structures and planning framework are that they:

- must be rigorous enough to accommodate changes to the legal framework of additional support and any other new guidelines;
- must be consistent with the ideas and principles involved and to draw out the main requirements.

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Participants will have the opportunity to discuss how their own current constructive and strengths-based developments map on to the positive psychology paradigm.

Supporting children through family change
P. LYNCH, North Lanarkshire Psychological Service

Which children are more at risk of long term difficulties following parental separation or divorce? How are schools currently supporting these children?

This workshop explores the above issues by looking at current research and by drawing on our recent work in North Lanarkshire in which a number of primary headteachers were interviewed to explore the support given to children experiencing family change. There will be an opportunity to view relevant resources and to consider how schools can best support children through family change.

Supporting transition using Reciprocal Teaching
A. McINALLY, East Dumbarton Psychological Service

Baer and Brown (1984) identify metacognition as an individual's knowledge about and control over his or her own cognitive processes. One method that explicitly teaches children to use metacognitive strategies in their reading is Reciprocal Teaching.

This workshop presents an example of a reciprocal teaching project. The project was used to help support children from three Primary 7 classes, whose members also included children with significant additional support needs.

The aim of the project was:
- To enhance the metacognition and the reading comprehension of the P7 pupils during their transition year.
- To promote the use of these skills within the wider curriculum.
- To develop independent learning skills.
- To promote inclusive learning skills.

Dialogue-based peer support methods were utilised in order to support these aims.

Inclusion of lesbian and gay pupils in schools. 'It's like asking questions about wife battering'
E. McINTYRE, Dumfries & Galloway Psychological Service

This presentation will describe the outcomes of quantitative and qualitative research, which involved surveying secondary headteachers as well as interviewing eight class teachers from one rural Scottish authority. The questionnaire covered issues such as policy inclusion, homophobic bullying, and the support and resources that primary and secondary teachers can be committed to its resolution, and to maintain commitment between the participants. Negotiation, mediation and consensus decision making should all be roles that some teachers take on in their day to day work remit. They should be able to listen to, and articulate other people's points of view, although there may be a lack of mutual engagement. It should also be accepted by all sides that the common end should be to the benefit of the client.

A group has designed a training package for educational psychologists to train their colleagues in the basic principles of conflict resolution, and for educational psychologists to deliver in-service training to other professionals. Ultimately, this process should prove beneficial to all concerned and reduce the demand for legalistic, time consuming procedure.

Managing conflict – a video workshop approach
J. PUGH & R. REDPATH, East Renfrewshire Psychological Service

In this workshop, materials will be presented that have been developed to support upper primary and secondary age pupils to successfully manage everyday situations that have the potential to result in conflict. This involves the production, viewing and discussion of role-play scenarios that deal with the causes of conflict at school. It provides young people with the opportunity to rehearse alternate ways to cope with conflict in a challenging, yet safe environment. Through this experience young people are encouraged to critically evaluate their own behaviour and explore new possibilities.

Based on a Social Constructivist model of learning and development, the aim throughout is to elicit the young person’s perspectives and attitudes through solution oriented questioning as opposed to providing pre prescribed information and direction.

The materials being discussed include a DVD that models the framework for a group session but can also be viewed by the participants at the introductory stage to demonstrate the format of group sessions. This dvd provides guidance on how the group might set up, record and review their own scenarios.

A multi-agency response to problematic sexual behaviour in children
J. STOCKBRIDGE, Dumfries & Galloway Psychological Service

The workshop will hear feedback from educational psychologists and social work representatives on the local working party considering the development of multi-agency training, policies, procedures and practice guidelines on the needs of children with problematic sexual behaviours.

An ecological and inclusive perspective has been used to provide a framework for discussing these issues thus emphasising the ‘within’ child factors and alternatively emphasizing the role of education and other children’s services in supporting children.

This pupil group could be eligible for consideration within the ASL act as having specific and exceptional additional educational needs. This could be challenging if we are committed to inclusive practice, which has minimal non mainstream resources.

The educational psychology service was responsible for the development of procedural guidelines to support teaching staff to manage the complex and confidential information in relation to problematic sexual behaviours. Social work services were responsible for the identification of a consultancy service to support the authority through a two-year transition period. Key staff will be trained in this specialist area of work with the aim of creating a core group of staff able to carry the work forward. Also being developed is a multi-agency training package aimed at developing varying levels of skill ranging from general awareness raising to specialist direct assessment and therapeutic services. Research and, therefore, an evidence base will form part of this work.

Local experience in Scotland and research indicates that children with such behaviours, once identified, are least likely to present problematic sexual behaviours in or leaving care. The research entitled 'Promoting Educational Resilience for LAAC' considered at the last Annual Conference strongly suggests that by capitalising on factors within the school environment, children's unit and community, we can endeavour to promote educational resilience for all Looked After and Accommodated young people.

In this workshop our aim is to continue on from last year's presentation by discussing how we have transformed our research into action within the local authority, schools and children's unit.

Discussion will focus around our work with other agencies to develop resilience, social competence, attachment and literacy and how we have established a team of LAAC psychologists involved in change at a local authority level.

We will consider the need to create psychological services for LAAC and why Educational Psychologists in particular, have an important role to play in affecting change for this group of children through supporting positive experiences and by addressing the factors that have, in the past, helped suppress the talents and potential of these young people.

This workshop will be useful for Educational Psychologists and Psychological Services Managers keen to develop their service for LAAC, and those individuals who are looking for practical advice on how to improve education for young people in care.

POSTERS

Communicating: Creativity and Change
C. CHAPMAN & P. PATRONE, Aberdeenshire Psychological Service

Recent legislation has highlighted taking account of and noting the views of children and young people as a core value in the fostering of children (Education (Additional Support for Learning) (Scotland) Act 2004). This poster explores ways of using creative communication with children to provide them with an opportunity to express themselves within an authority framework. Work reflected in the poster:
- Methods for eliciting children’s views and acknowledging the value of their unique contribution.
- Use of the personal letter format, based on principles from Narrative Therapy, to communicate with pupils following involvement with them.
Example interventions highlight the use of these principles at differing levels: whole school, small group and individual pupil. These examples aim to use mutually accessible language to communicate with children. The very process of actively listening to the children’s views and feelings and then reflecting key positive elements back to them in ‘real’ language is in itself a powerful change agent. By engaging in the process of respectful communication positive personal feelings are promoted in both child and adult.

Supporting the care of traumatised children

C. CRUICKSHANK & R. MARTORANA,
North Lanarkshire Psychological Service.

Trauma is defined as ‘an event, which is, or is realistically perceived to be, threatening to the life or personal integrity of self or others and the response to the event is one of fear, helplessness or horror’ (DSM-IV, 2000). Many children and young people in Scotland and around Britain have suffered a trauma in their lifetime, like the loss of a loved one, or abuse. Children who have been separated from their families are particularly likely to be affected by trauma, which can impact on their daily functioning, and potentially their future. There are many biological and psychological theories, such as genetic inheritance and attachment theory, which can help us understand the behavioural manifestations that result from a traumatised childhood.

The trauma that affects children and young people can also have a distressing effect on those around them. The people that care for these children can suffer from a deterioration of their own well-being as a result. This is sometimes known as Secondary Traumatic Stress (STS).

STS is the stress that results from caring for or about someone who has been traumatised. Although secondary trauma is not readily recognised amongst those caring for traumatised young people, parents/carers and teachers are the ones who are particularly vulnerable and susceptible to it.

From an educational perspective, it is important to be aware of what STS is, and how to recognise, prevent and treat it in order to successfully support traumatised children.