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Psychology of Women Section Annual Conference 2004

*Psychology of Women Section Annual Conference,
University of Brighton, 7-9 July 2004.*

Please note: Institutional affiliation is accurate for first author, co-ordinator or discussant only.

KEYNOTE SPEAKERS

Sex, drugs and the role of the consultant midwife

F. MACRORY, 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 life-style. 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.
Faye.MacRory@CMMC.nhs.uk

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 dialoguing 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.

A.A.Phoenix@open.ac.uk

'I am still your sister': Psychology, women and HIV

C. SQUIRE, University of East London.

HIV poses particular and very difficult physical, social and economic problems for women. As a consequence, their psychological experiences of the pandemic are specific and powerful. Women living with or affected by HIV have also been in the forefront of developing support and education strategies that work, for themselves, their communities, and for HIV 'communities' more widely. This paper will look at the continuing gendering of the pandemic and responses to it. At the same time, it will examine the limitations of a gendered perspective for psychological approaches to HIV, taking into account the condition's emotional, microsocial and global impacts. The paper concludes by considering the notion of 'feminism' in the transnational context within which HIV is lived.
C.Squire@uel.ac.uk

A gendered occupation? Collecting and curating dress collections

L. TAYLOR, University of Brighton.

One major emerging theme in current debate is recognition of the long battle to even place fashionable Euro-American dress within the walls of museums of decorative and 'Industrial Art'. This exclusion was, from the mid-19th century, mired within an undercurrent of gendered prejudice which was only tackled in the post World War Two period. It is a fact that the large part of those involved in the study of artefacts of dress from the late 19th century were and are women, whether based in theatre wardrobe departments, museums, schools, universities or collecting privately. This presentation will assess the roots of this exclusion. It will also examine why women become collectors of dress, concluding with analysis of the current boom in blockbuster fashion exhibitions, even within the hallowed walls of the Royal Academy. Whatever is going on?
E.P.Taylor@brighton.ac.uk

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) it was assumed, either in order to fit in/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.C. Flugel, argued that dress is a kind of symptom, a compromise between unconscious sexual exhibitionism and conscious modesty. More recently, the novelist Alison Lurie interpreted punk, for example, as an infantile protest, safety pins and torn clothes transforming angry adolescents into the un-potty trained toddlers they 'really' were.

These and other similar theoretical approaches suffer from the underlying assumption that fashion is something that needs 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 not dismissing the significance of dress in the assessment of character and personality, I shall discuss three examples of fashion: countercultural dress, contemporary casual dress and the formal suit to illustrate some of these points.

e-wilson@dircon.co.uk

SYMPOSIA

Symposium: Critical LGBT Psychology: The state of the art

Convenors: V. CLARKE & E. PEEL.

This symposium showcases the state of the art in lesbian, gay, bisexual and transgender (LGBT) psychology. In particular, the contributions highlight the cutting-edge 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. LGBT oppression is discussed 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 strong strand of critical 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' (Turner, 1970) takes on a disputed morphology for those designated transgender. Particularly within western cultures, socialisation is governed from the moment a child is born, by 'compulsory heterosexuality'. The new-born infant is immediately sexed and gendered and from then onwards his/her body will be inscribed with numerous social, sexual and emotion scripts. Framing gender in this way means using cues through which we specify to which embodied framework (man-masculine-male/woman-feminine-female) we belong. Tensions exist when we attempt to shift framework. This is shown in counselling with transgender clients where the counsellor was heterosexual, lesbian or gay. Despite a shift in meanings in relation to self and other, tensions surfaced at the level of encounter between counsellor (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.

lyndsey.moon@ncl.ac.uk

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

C. CLIFFORD, North Birmingham Mental Health Trust.

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. They were recruited through advertisements in publications and e-mail/website networks of support agencies for transgendered people, and in total 19 male-to-female participants and nine female-to-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 number of 'specific transition domains' where social power has particular influence upon the individual. The core of the model focuses on the incongruence between the external and internal experience which is highlighted during these periods, and impacts upon the individual's psychological functioning. This model illustrates the interaction of social, political and environmental influences upon the individual.

clair.clifford@nbmht.nhs.uk

Pejorative slang and the creation of sexualities

E. PEEL, Aston University.

In Western societies, liberal ideology purportedly shapes contemporary perspectives on sexualities. 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 'lesbian and gay language' (e.g. Polari), 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 through slang descriptive words and phrases. The slang terms were collected in a naturalistic setting, forming part of an exercise within lesbian and gay awareness 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 393 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 practices; (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-specific sexual references for 'bisexuals' (e.g. 'high sex drive'). Terms equating 'gay men' with femininity and 'lesbians' with masculinity were common; this contrasted with a lack of such terms for 'heterosexuals', and with the listing of ambivalent personality traits for 'bisexual' (e.g. 'confused'). There was little variation between professional groups in the types of slang generated, which underscores the cultural robustness of this language in constructing sexualities. I conclude by contextualising the production of pejorative slang within the training context, highlighting the pedagogic function of the task in reducing heterosexism.

e.a.peel@aston.ac.uk

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 sexual orientation and finger lengths in their original article and in subsequent newspaper reports. Although the study found evidence for a biological marker of sexual orientation only among women, the discourse was focused more heavily on the homo/hetero distinction among men. This occurred both through verbal description of the findings and misleading uses of significance tests. Analysis of the anthropomorphisation of body parts shows that pregnant women were subtly given accountability 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 object choice for men and reproductive responsibility for women.

p.hegarty@surrey.ac.uk

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 intimate and sexual 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 sex with more than one woman), many within the poly community regard it as a more feminine way of managing relationships, with much emphasis 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 explore 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, femininity and feminism. The methodology used in the research is addressed in a companion paper to this one.

m.barker@mdx.ac.uk

Megbarker108@hotmail.com

Ani.Ritchie@solent.ac.uk

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

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

This paper addresses the 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 debate, the discussion was facilitated in the loosest possible sense by one of the participants, transcripts were read by everyone with 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 reflexivity when researchers are part of the group they are researching.

Ani.Ritchie@solent.ac.uk

m.barker@mdx.ac.uk

Megbarker108@hotmail.com

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

what it means to do non-heterosexist research, particularly in relation to doing qualitative research. In this paper, I explore the process and practice of non-heterosexist research using the example from my own research of a presumed heterosexual focus group participant (Finn) 'coming out' as 'gay'. I present 'Finn's' progressive build up to her coming out and the moment of her disclosure, and explore my failure to anticipate and respond to her coming out. I explore the lessons to be learnt from this incident, including what we might do when research participants unexpectedly come out during data collection. My argument is that doing non-heterosexist research is considerably more complicated than simply collecting data on participants' sexuality or including lesbians and gay men in research where their experience is clearly relevant but usually excluded. There is a long way to go before heterosexism is eradicated from the research practices of feminist psychologists, and feminist psychologists must reflect on and develop ethical and well-informed strategies for doing non-heterosexist research.
Victoria.Clarke@uwe.ac.uk

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 signal (to ourselves and to others) how our bodies should be read, understood and responded to. Clothes make the body meaningful and situate 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.

Hannah.Frith@uwe.ac.uk
K.Gleeson@uwe.ac.uk

Ambiguating appearance: Unsettling the links between displaying and reading of visual identities

K. GLEESON & H. FRITH, University of the West of England.

Psychologists, when they do address clothing, have tended to assume that it is an unproblematic tool for communication. Feminist psychologists have challenged this assumption in certain specific contexts, e.g. the dress of victims of rape and assault, problematising the notion that intentions can be read from clothing in a straightforward way. This approach assumes that the meaning of clothing is over-determined by the male gaze and that women's clothing practices are inevitably about display for male consumption. This paper argues that the meaning of dress is inevitably ambiguous and this is a major strength of clothing as a tool for negotiating identity. The very ambiguity of clothing allows women to renegotiate the meaning of visual identities in a fluid and ongoing communication with themselves and others.

K.Gleeson@uwe.ac.uk
Hannah.Frith@uwe.ac.uk

'Showing Seeing': The visual as a set of citational practices

Y. MOREY, University of the West of England.

This paper is concerned with exploring clothing and dress as a set of discursive practices that visually construct the body. Different sets of data, collected with the intention of capturing the ways in which meaning is visually negotiated and displayed through clothing practices, will be presented taking the lead from Mitchell's (2002) approach to find ways of 'showing seeing'. Following from Butler's (1990) conceptualisation of identities and bodies as performative, the discussion of this data focuses on visual subjectivity and embodiment as a set of citational practices. However, it also asks what is at stake when we attempt to 'show' the visual in research. The paper argues, with Mitchell (2002, p.175), that

as feminist researchers we must engage not only with 'the social construction of the visual, but also with the visual construction of the social'.
Yvette2Morey@uwe.ac.uk

A bittersweet escape? A dramaturgical reading of women's holiday clothes

A. GUY & M. BANIM, 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 and 'non-everyday' holiday identities. The analysis reveals ways that holiday dressing both plays with and conforms to dominant notions of femininity. A dramaturgical reading of the data is offered. Holiday was understood to be a special context where women believed they could present alternative, better, or more authentic aspects of self. 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 they signalled this through clothing choice and body habitus. 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 experience as they remind women of the liberatory possibilities of clothed habitus but also of the constraints encountered in daily life.
A.Guy@tees.ac.uk
M.Banim@tees.ac.uk

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 female embodiment and clothing. The paper does this through the specific theoretical lens of work on 'body image' (Weiss, 1999). This approach focuses on the means through which body images come into being through 'corporeal exchanges' with (non) present bodies and images of bodies rather than understood as 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 'trying on clothes', 'looking in the mirror' and 'feeling the presence of a female gaze'.

This account moves beyond positioning women and their relationships with clothing as either a victim of, or as resistant to, patriarchal notions of the ideal body and instead suggests we take notice of the multiple relationships women have with clothing and for example, the ways that women negotiate feelings of disgust, elation, anticipation and contentment.
rcolls@liverpool.ac.uk

Symposium: Transforming women's mental health – the contribution of training

Convenors: J. WILLIAMS & T. PARKES.

This symposium draws upon our work developing, piloting and providing a national training programme for staff working with women with mental health needs. We do not underestimate the difficulty of providing effective help to women whose mental health has been profoundly affected by abuses of power, discrimination and disadvantage; damage that is often further compounded by years of mistreatment and re-victimisation in services. It is our contention that the quality of women's mental health services will only improve substantially when they can acknowledge the huge impact that social inequalities, especially those based on gender, race, class and sexual orientation, have on women's mental health. Training, therefore, is an obvious

priority for service development. This symposium describes the background to this intervention; offers analyses of the dynamics of change; provides commentaries and reflections on the process of training; and makes the point that to effect change we need to understand the disempowerment experienced by many staff, as well as that experienced by women patients and clients.

Closing the gap between evidence and practice through training

J. WILLIAMS, Inequality Agenda Ltd. & S. SCOTT.

In 1998 the Department of Health funded the development of a gender awareness training intervention aimed at staff working with women with mental health needs in secure services – a programme directed by Sara Scott – and we began providing these courses in 2000. Since then we have provided over 70 courses to staff working with women in secure and other service contexts. This intervention has been fortunate in being able to draw upon the extensive literature on women's mental health developed over the last four decades. It has also been relatively easy to identify the training needs of staff – these were clearly articulated in the initial training needs analysis and then repeated many times in our conversations with them. However, closing the gap between evidence and practice is not as straightforward as it appears, and in this paper we identify some of the specific challenges of achieving change through training in this field.
inequalityagenda@btconnect.com

Working as a trainer: The significance of personal experience

C. BRESSINGTON, P. TREVIDI & C. SHAW, Inequality Agenda Ltd.

In common with all the members of the Inequality Agenda training team we were selected for our skills as trainers and knowledge about women's mental health. In common with all the members of the training team we work with training material which we contribute to developing. However, in addition we can – if we choose – draw upon past experience to quickly ground the process of learning in the reality of the lives of women who use mental health services: we are able to speak for women who have endured and survived the unspeakable. We know what mental health services do to women: how we are diagnosed, medicated, insulted, lied about, blamed, and abused physically and sexually. We also know about the ways that our class and race can shape the way we are treated. Sharing this knowledge in training requires judgment as well as courage, and in this presentation we share thoughts about this process and its consequences.
inequalityagenda@btconnect.com

Training: Resistance and change in women's mental health services

G. AIKEN, Adult Forensic Services, Manchester & L. HANKINSON, Inequality Agenda Ltd.

With recent Department of Health guidance recommendations for gender, 'race' and diversity sensitivity training for the health and prison service workforce (see, e.g. DoH, 2003a, 2003b), there are implicit assumptions that there will be collaboration and shared understanding and commitment to change by individuals, professions and organisations taking part in such training. Drawing on experiences of delivering a three-day training programme (Scott & Williams, 2004) to over 500 workers across a range of services in the North West of England between 2002–2004, we highlight the need to be alert to both overt and covert strategies of resistance to effecting positive cultural change within secure psychiatric and prison services for women. We argue that not only can such strategies be understood in terms of gendered and professional (inter)personal and (inter)group (power) dynamics, but that institutional practices and systems are central to support changes in organisational culture and the management of change.
GAitken@edenfield.bstmht.nhs.uk
inequalityagenda@btconnect.com

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 within secure services. We highlight some of the ways that services can re-traumatise and re-victimise women, particularly those women who have experienced previous life trauma, 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 important role as change agents. The paper describes the ways that this training intervention attempts to help staff to understand the severity of women's disempowerment, acknowledge their own feelings of powerlessness, and talk together about the ways that they can create more sensitive, positive and empowering environments for the women they work with.
T.Parkes@brighton.ac.uk

WORKSHOPS

Women on the margins? Mental health and substance misuse

F. MACRORY & G. AITKEN.
Faye.MacRory@CMMC.nhs.uk
GAitken@edenfield.bstmht.nhs.uk

INDIVIDUAL PAPERS

(ordered 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 accounts 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 freedom – experienced through their engagement with fashion, popular culture, 'Women's Rights' and a sense of sexual autonomy. 'Being fashionable' is constructed as a symbol of independence and being 'worth something'. However, the participants also describe how mini-skirt wearing confronted taboos around sex and sexuality head on. They experienced disapproval for 'exposing' their bodies – contravening norms of 'modest' femininity – and were actively engaged in a struggle for the right to fashion themselves. The findings are discussed in relation to feminist debates on gender, identity and fashion and to contemporary young women's fashion practices.
k.h.doherty@shu.ac.uk

You still feel different: The experience and meaning of women's self-injury in the context of a lesbian or bisexual identity

N. ALEXANDER, Newham Primary Care Trust.
This paper reports an intensive qualitative study of the subjective experience and meaning of self-injury for 16 women who identified as lesbian or bisexual and who had deliberately self-injured on repeated occasions. In individual interviews, the women talked about their experiences of self-injury and the role it played in their lives as lesbian or bisexual women. Interpretative Phenomenological Analysis (IPA) was used to elicit themes arising within their accounts. These highlighted a number of ways in which social and contextual factors contributed to the development of self-injury. Although many of these factors

seemed applicable to any woman who self-injures, there were some aspects that were specific to the experience of lesbian and bisexual women. In addition, the women's accounts raised a number of important issues about the way in which mental health services respond to lesbian and bisexual women who self-injure. It is argued that self-injury can be understood as a coping response that arises within a social context characterised by abuse, invalidation, and the experience of being regarded as different or in some way unacceptable. These factors are especially salient in the lives of women, and they emerge particularly strongly as part of the experience of women who are developing a lesbian or bisexual identity.
natasha.alexander@newhampct.nhs.uk

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 recorded through eight 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 them within wider discourses. This means of analysis identified interviewees' 'ways-of-seeing' the world and 'ways-of-being' in the world, whilst giving rise to a number of subject positions and power-relations. Four major discursive constructions could be identified, consisting of the Minority Discourse, the Quality of Advice Discourse, the Collectivist 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.
nadjaalim@hotmail.com

Examining the stranger in our midst: Teaching 'race' and gender awareness to trainee NHS professionals

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

This paper describes the work of clinical psychologists teaching trainee clinical psychologists and GP Registrars to incorporate 'race' and gender awareness in their clinical practice. The model developed involves experiential exploration of trainees' attitudes to 'the other' and challenges preconceived ideas about '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.
Christina.Blackwell@nmht.nhs.uk

Being out or fitting in: The perception of otherness in the police

J. BROWN, University of Surrey.

This paper examines the intersection of sexual orientation, ethnicity and gender within the police service. The paper argues that white heteromascularity is at the centre of the construction of police occupational identity. This defines the informal values and norms that create the tolerances of behaviour within the internal work environment and acceptance in the external social world of the police. A police officer can be other by virtue of one 'deviant' identity component, i.e. gender, ethnicity or sexual orientation; two, i.e. a combination of ethnicity and gender, sexual orientation and ethnicity;

gender and sexual orientation; or three, i.e. by being a black, gay woman. It is argued that tolerances and acceptance of otherness will decrease the greater the number of 'deviant' identity elements. However, it is also argued that acceptance and tolerance may be domain specific. In other words there may be some circumstances where the 'deviant' identity has some salience for the police such as the investigation of a gay murder or a child protection case involving a child from an ethnic minority. Some empirical data will be presented to support these propositions.
Jennifer.Brown@surrey.ac.uk

Bulimia as mental illness: Representations of responsibility and agency

M. BURNS, University of Exeter.

Dominant constructions of 'bulimia' frame it as a psychological disorder. However, women who are so diagnosed, or who identify as 'bulimic', describe the phenomenon and its causes in varied ways. The discourses deployed in such descriptions have effects at the level of subjectivity and practice. For example, a framing of bulimia as an illness/disease can work to position an individual as a victim of disorder thereby allowing the speaker to disclaim personal responsibility for the condition. However, this construction can simultaneously position this subject as passive and unable to 'resist' the eating disorder. Utilising a discourse analytic approach and drawing on data from interviews with 15 women who practise bulimia, I examine the various ways that women account for bulimia and negotiate, resist and take up a 'bulimic' identity. I will also discuss some of the potential effects this has on accounts of self and the implications of these constructions for experiences of health and illness.
mburns@orcon.net.nz

Professionalism, intimacy and motherhood

J. CALLAGHAN, University College Northampton.

Drawing on a series of group interviews with South African women students training to be professional psychologists, this paper attends to the ways in which the identity of 'psychologist' is discursively constructed as antithetical to 'mother' and 'relationship'. Discourse analysis, and feminist and post-colonial theory, highlight hegemonic constructions of 'the mother' as the object of the psychological gaze, the pathologised 'other'. Intimacy, mothering and relatedness are relegated to the space of the non-professional: they are the objects of professional interest. From this position, I unpack the ways in which professional training programmes construct the identity of the trainee psychologist, as 'devoted' to psychology training, and as separate from the world of interpersonal relationships. The discourse of professionalism, and the discourse of motherhood emerge as intersecting in exclusionary ways to militate against certain gendered forms of being professional.
jane.callaghan@northampton.ac.uk

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 frequency and severity of self-harming decreased significantly using an holistic approach.

Objective: To establish if the Narrative Therapy concept 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 model of care to enhance the recovery of women

with a tendency to self-harm in response to the effects of early trauma and abuse.

Methods used:

- Developing a model of care that is needs-led and not diagnosis dependent.
- Using Narrative Therapy to help the patient and the staff make sense of the relationship between severe trauma and severe self-harm.
- Creating a space for reflecting teamwork to support self-caring practices.
- Working with the dissociated aspects of the person in order to engage a collaborative approach to self-care.
- Exploring a team-based approach that works across all disciplines and with support from other patients.

Intended learning outcomes:

- The value of innovative practice ideas in managing self-harm, dissociation and violence.
- How Narrative-informed psychotherapy and nursing care work hand in hand to provide high standards of relational security.
- The concept of outsider witness practice in validating the trauma experience and the journey to hope.
- Consideration of other applications in nursing and general health care.

DClare@partnershincare.co.uk

Women's marital surnames: The accounts of couples about to get married

V. CLARKE, University of the West of England, C. BURGOYNE & J. REIBSTEIN, University of Exeter.

This paper provides a qualitative analysis of heterosexual couples' accounts of women's marital surname choices. The basis for the analysis is interviews with 62 heterosexual couples about to get married. Partners were interviewed separately and asked to reflect on their plans and expectations for marriage, including for the woman's marital surname. Most interviewees signalled a preference for 'married' names, although this was rarely accounted for in terms of traditional gender roles and views of marriage; rather, many interviewees cited explicitly non-gendered explanations for this preference, including 'avoiding confusion', 'convenience' and 'liking his surname'. Those interviewees that did cite a preference for tradition did so almost apologetically, and did so in ways that attended to the desirability of 'equality'. The analysis utilises Dryden's concept of 'balancing the books of fairness' – that is, an exploration of the discursive strategies that partners employ to maintain the appearance of an equal relationship despite arguable evidence to the contrary. The argument of the paper is that the interviewees' accounts of women's marital surnames provide evidence both of an equality norm, and of the continued significance of traditional patterns of marriage. Victoria.Clarke@uwe.ac.uk
C.Burgoyne@exeter.ac.uk
J.Reibstein@exeter.ac.uk

Misconceiving the non-conceiving: How parents and child-free people account for people's decisions not to have children

N. DONOGHUE, Murdoch University, Western Australia.

In Australia, as in much of Western Europe, rapidly declining birthrates are producing political concerns about an ageing population. This emerging public debate about the need for a higher birthrate has the potential to politicise relations between parents and child-free people as their interests are increasingly produced as being in conflict. This paper will explore how Australian adults understand their own and others' decisions about whether to have children, and how these understandings intersect with political judgements about the appropriate extent of public support for parenting, by analysing data from a series of focus groups with parents and intentionally child-free people. The paper will also examine how the accounts that child-free people give of their decisions are (not) reflected in the policy responses that are being advocated in Australia to increase the birthrate. n.donoghue@murdoch.edu.au

An analysis of the effects of cultural and gender difference in drug use among emerging ethnic groups

J. FERNANDEZ, Camden and Islington Mental Health and Social Care Trust.

A literature review was conducted 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 economically disadvantaged, when compared to other ethnic groups (Mahood, 1998).

There was evidence found which argued that the social and economic polarisation of Bengali communities was influential on this ethnic group presenting to drug services. Interestingly 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 patriarchal structures existent in the Bengali community in Camden.

The implication for specialist care services is to try and understand the social dimensions 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 ethnicity to be more effective for emerging ethnic groups. jeff.fernandez@candi.nhs.uk

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 crisis of identity during adolescence. Young people struggle to present positive visual identities, constantly changing to achieve a recognisable and appropriate individual identity which also enables social inclusion. By adulthood women are expected to have resolved the problem of visual display and appear as if without effort or design. If we have the necessary cultural (and economic capital) we should be able to carry off an apparently artless, and authentic visual identity. However, although appearance is inevitable – we are always already visible – 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 fashion conference demonstrates that women 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. Anna.Fussell@uwe.ac.uk

Celebrity pregnancy: Celebrity or pregnancy?

H. GROSS, Loughborough University.

In 1991 *Vanity Fair* published a now famous picture of the actress Demi Moore heavily pregnant on its front cover. Since then, it seems, the press has seized on the announcements of pregnancy by famous people, whether royalty, film actors or politicians. Mathews and Wexler (2000) suggest that pregnancy has now become so visible that it has reached iconic status. In this paper I consider whether the apparent fascination with the pregnancy of 'celebrities' is simply a reflection of current obsession with all aspects of celebrities' lives, or whether it is pregnancy itself that is the focus of the gaze. Such focus could be viewed as a further compartmentalising of pregnancy, as proposed by Bordo (1993) or Young (1990), which seeks to remove pregnancy from the bodies of women themselves. At the same time, in common

with the media attention paid to women's shape or size at any time, pregnancy can be seen to take place within a 'web of surveillance' (Lupton, 1999) and the focus on transformations in appearance during pregnancy could be construed as another means of public surveillance of this private event. H.Gross@lboro.ac.uk

'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 corpus of publicly accessible weblog, newsgroup and chatlog transcripts.

It is a delicate matter to attribute 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 hormonal explanation for women's excessive emotions, and capacity for rational behaviour – is often, in practice, actively contested by women so accused, whether these ascriptions 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 encountering such an ascription – 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 avow their status as pre-menstrual shows that, when such assertions are made, they are often presented as pragmatic and considered explanations for mood or conduct, amongst other possible accounts. s.hansen@murdoch.edu.au

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 has 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 social interactions and specific contexts. Data from nine girls, aged between 12 and 15, who participated in two group discussions was analysed alongside existing literature. Analysis was informed by a feminist constructionist approach. In common with other feminist literature, menstruation was largely constructed as embarrassing, shameful and something to be hidden. Menstruation was also constructed as illness. The production and perpetuation of gender-related difference narratives was also evident. Implications for the subjugation of girls and women will be discussed, and it will be argued that current negative representations of, and practices in relation to menstruation need to be challenged. Sally.Johnson@Northampton.ac.uk

Changing the story: An examination of strategies for resisting heterosexism and racism

L. LAZARD, University College Northampton & L. MARZANO, Middlesex University.

The issue of social change is clearly central to discussions of oppressive practices which exist within the current cultural context. Drawing on literature concerned with changing heterosexist and racist practices we reflect, in this paper, on the complexities of these debates. We consider particular strategies for resistance within the context of particular theorisations of power to which specific calls for social change are aligned. These conceptualisations of resistance and social change are discussed with a view to articulate the implications that they have for recipients and initiators of heterosexism and racism. In the course

of this discussion, the ways in which these issues can be critically engaged with will be addressed.
lisa.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.

Research in psychology traditionally focuses on studying people who are not research psychologists. This may well be because we see other people are much more interesting than ourselves, but a discursive analysis suggests that something else might be going on. Discourses of 'stepping back'/'stepping inside', of 'distance' between our participants and our selves so that we can observe and analyse a research arena without being sucked into bland uncritical description are perhaps, in qualitative 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, advantages and disadvantages in keeping us and Others, as researchers and researched, safe and comfortable.

natty.leitner@north-bristol.swest.nhs.uk

Reading between the lines: Professionals working with South Asian women who have experienced sexual abuse

A. MAJUMDAR, 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 literature. '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 collective 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 try to seek help when faced with sexual abuse, yet perhaps in ways that are not recognised by systems requiring individuals to 'identify' themselves as 'survivors' 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 arisen from this analysis include the importance of language; how the roles of female family members and family hierarchies are constructed; the pathologisation of South Asian women in the mental health system; and the inter-personal construction of selfhood.

reaveyp@sbu.ac.uk

anamika@UEL-Exchange.uel.ac.uk
bipasha@ntlworld.com

'Ways of knowing': The ethics and methodologies of visiting young lives

L. MEASOR, University of Brighton.

This paper asks a number of questions about what the appropriate ethics and methodologies are for conducting research work 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 seeing the world of those we research. There are significant methodological issues to be considered in this context. The second but fundamentally connected 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 researched vulnerable 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 more serious ethical dilemmas. The paper offers little empirical data from that project but seeks to share some of the thinking about ethics and methodology 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 innovative and ethically conscious ways of working. At the core is the issue of trust and the search for ways of working which can secure the co-operation and indeed 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.Mearor@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. Twelve Black women of African-Caribbean descent participated in individual semi-structured interviews and focus group discussions concerning their experiences and perceptions of IRRs. Drawing on both discursive analytic and interpretive phenomenological analysis principles, the data was transcribed and analysed in order to identify the discourses believed to be evident within the accounts; the ways in which these discourses were reconciled in order to achieve a sense of meaning for the women is explored. 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 aspects of dominant 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 sexually exploited 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 (Bagely, 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 Black or Queer bodies as over-sexualised (Bakare-Yusuf, 1997; Creed, 1999). I use this discussion to situate my analysis of the findings of my study on the health needs of sexually exploited children and the responses and normative practices of health practitioners.

mehmoona@uvic.ca

'In your experience': Research as cultural translation

I. PALMARY, 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 extracts 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.

ipalmary@yahoo.co.uk

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, policewomen 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 Ramazonoglu and Holland (2002) to be 'othered' includes being silenced, socially excluded and treated as lacking rights. 'Otherness' is characterised as a 'fluid, socially constituted, repeatedly performed relationship' (Ramazonoglu & 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 in Western and non-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 ideals constructed and circulated? Are they constructing a particular Westernised and 'whitened' version of femininity? The professional gaze of the cosmetic surgeon/physician as expert constructs the healthy body not merely as 'unattractive' but as physically defective and in need of constant maintenance 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 fragment and reduce women to an inventory of replaceable and enhanceable body parts.

c.rankin@uws.edu.au

Re-membering the past: Gender, sexuality and identifications 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 'literal' 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 sexual agency. Drawing variously on Bergson, Halbwachs and Foucault, these approaches call for a reworking of memory by inviting an engagement with its relational, practical and collective qualities. Issues of social space, the localised contexts of remembering and the manner through which memories transform understandings of agency and action will be explored, with specific attention to how the past and present intertwine in regard to managing adult survivor identities. reaveyp@lsbu.ac.uk s.d.brown@lboro.ac.uk sjwerner@aol.com

'Love conquers all?': Analysis of advice and support offered to family and friends of lesbians and gay men

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

Research and popular literature indicates that a crucial factor in the well-being both of lesbians and gay men and of their family and friendship network is the acknowledgement and acceptance of homosexuality within the network (e.g. 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 and how to deal 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 men. How do they, e.g. outline what the relationship between family members and friends should be like and define the 'nature' of homo- and heterosexualities? 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 accounts as the glue which binds families together and ultimately should conquer all. Annadis.Rudolfsdottir@uwe.ac.uk Victoria.Clarke@uwe.ac.uk

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 and moved into Taiwanese families and have been recognised as a significant phenomena of 'new immigrant women' since early 1990s, which has raised many social needs, policy issues and social debates. By using structured questionnaire, this paper firstly describes the living conditions of those Foreign-Bride' families. Secondly, it analyses their 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 share a similar dislocation of nonbelonging which results from their curbed integration in Taiwanese society. Besides, 'foreign-brides' at least face another three key dislocations in the process of immigration: partial citizenship, the pain of family separation, and contradictory marriage expectation. yhds@ncnu.edu.tw

Crossing the borders

S. SMAILES, Manchester Metropolitan University.

The focus of this paper is working with issues of domestic violence, heterosexuality and minoritisation. The research was ESF and MMU jointly funded, exploring and evaluating minoritised women's experience of domestic violence service provision. In-depth interviews were carried out with Jewish, Irish, South Asian, African and African Caribbean minoritised women. My experience of entering into 'a world of radical otherness' (Abfelbaum, 2001, p.30) will be

deconstructed, as will the implications of 'difference' in terms of power, meaning and engagement.

As a qualitative researcher, and a person-centred counsellor, I endeavoured to work from the respondent's internal frame of reference 'crossing the border's of one's familiar life into the alien world of the narration' (Abfelbaum, 2001, p.30). The enormous value and richness of this engagement, as well as the risk, is acknowledged, as well as the potential for parallels between in-depth qualitative interviewing and counselling psychotherapy (McLeod, 2000). S.Smailes@mmu.ac.uk

'Rhetorically self-sufficient arguments' in parliamentary discourses of Lesbian and Gay Law Reform

M. SUMMERS, Murdoch University, Western Australia.

Using a discourse analytic approach, this paper examines the use of liberal-egalitarian principles within parliamentary speeches supporting or opposing Western Australia's *Acts Amendment (Lesbian and Gay Law Reform) Bill 2001*, which addressed a number of legal inequalities concerning such areas as discrimination, lesbian access to IVF and adoption procedures. The study was primarily concerned with the extent to which such principles are treated as beyond question, or 'rhetorically self-sufficient'. Linguistic resources concerning 'equality', 'human rights', 'democracy', 'the interests of the majority' and 'the interests of children' were given a kind of beyond-question, self-sufficient status, but their use was able to be undermined in a number of ways, relating to members' management of what the Bill was 'about', and the flexibility of these social constructs. It is argued that rather than pitting one set of resources against another, members on both sides of the debate face a rhetorical pressure to adopt and mobilise all of the same self-sufficient moral resources, due to the flexible, constructed, and non-hierarchical, yet often rhetorically self-sufficient nature of common sense liberal-egalitarian principles. msummers@central.murdoch.edu.au

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 Goods & Services. The study has two main aims; first, to discover whether services for disabled women have improved in the last five years; and second, to determine how attitudes perceived from friends, family, health care and social care professionals affected the way each woman sees herself as a disabled person and as a new mother. 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. j.m.topp@open.ac.uk

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* (Orbach, 1978) there have been a number of contradictory developments in relation to 'fatness'. The incidence of obesity has increased, cultural representations of the 'ideal woman' have become even thinner (Foster & Wadden, 1994), eating disorders such as anorexia nervosa and bulimia have risen (Malson, 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 Bordo (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.

Research on women's attitudes towards their bodies in 21st century society and the reasons given in the literature for changes in women's behaviour in relation to their bodies will also be examined.

marion@Abrata.com

Mothering by degrees? The social construction of the identities and 'responsibilities' of culturally diverse mature student mothers at an English university

A. VISICK, University of Luton.

In this paper I illuminate the ways in which Q-methodology – an interpretative pattern analytic research tool – can be used to identify available cultural narratives. My research explored both the mature student mother's constructions of self and 'responsibility', and constructions of her that exist in the wider cultural milieu. I interviewed the women and administered 50 Q-sorts, taking care to include a diverse range of participants. The Q-sort comprised 66 statements – all sufficiently controversial to invite strong agreement or disagreement – upon which participants could act. While there were problems in the use of this method and these are acknowledged, it proved a useful research tool. The three largest factors exemplified the contesting, or accepting of 'essential' motherhood and the 'rights' of women in higher education, but the smallest factor was perhaps the most telling. Factor 7 'spoke' of the neglectful mother who studies only to elevate her status in the community. While this view was a fictional work by the exemplar of factor 7, it must nevertheless be a culturally recognisable story or it would fail to 'make sense'. When considered with the interview data the analysis of the factors can contribute to a 'panoramic', as opposed to a 'snapshot' view of the women's constructions of self. amanda.visick@luton.ac.uk

Un/Dressing Kylie

A. VOELA, King's College London.

In a recent issue of musical magazine *Q*, Kylie Minogue poses modestly dressed, lying on green leaves and broken branches. Photographed by fashion photographer Keterina Jebb, who has in the past been inspired by 19th century painting, Kylie's posture and away-looking gaze bear obvious resemblance to typical representations of 'the beautiful dead woman' in painting, fashion and artistic photography. As fashion, painting and photography have used death in disparate ways, the composition is a locus of contrasting meanings and a coherent reading becomes impossible. Confronted with this impossibility the viewer may be inclined to fragment Kylie's body, tracing its parts to its artistic antecedents and the contemplation of mortality, or accept it in its totality as a publicity stand complacent with consumer culture. But can Kylie's body be read as both complacent and non-complacent at the same instance?

The present paper explores this possibility in a psychoanalytic framework. It argues that poised between art, fashion and consumer culture, Kylie's reclining dressed body remains unclassifiable, real, exhausting available significations without being itself exhausted or explained. Turning into an unfamiliar object, the iconic body comments on the domains it draws upon and the usages of death from the point of view of the remainder culture. It, therefore, offers a singular perspective for criticism which must be placed slightly beyond the intersection of art, photography and fashion. angie.voela@kcl.ac.uk

Who is the 'borderline' personality? Historical and contemporary intersections of 'Otherness'

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

The focus of this paper will be an exploration of historical developments resulting in the construction of 'borderline personality disorder'. The feminisation of the borderline concept over the last century will be examined in light of dominant discourses of mental health that are

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). Feminine differences whether they are psychological or biological are pathologised as 'unstable' when it is compared against the rational norm (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.
t.walker@hud.ac.uk

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.
moira_maguire@hotmail.com

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.
m.s.zeedyk@dundee.ac.uk

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.

lisa.lazard@northampton.ac.uk

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*.

LESBIAN & GAY PSYCHOLOGY SECTION

Symposium: Celebrating different relationships in the 21st century

Convenors: E. PEEL, Aston University & V. CLARKE, University of the West of England.
Chair: E. PEEL.

Discussant: V. CLARKE.

In the 21st century, psychology's understandings of relationships embrace, investigate 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 dating, and representations 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 the process of 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, via 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 data drawn from in-depth interviews with lesbian and gay couples about civil partnership, same-sex marriage and financial equality.

Design: The data are drawn from a broader 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 Bill 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 and marriage both 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 and collection of demographic information. Statements included 'Lesbian and gay couples should be treated the same as heterosexual couples in law'.

Methods: Strategic opportunistic sampling and snowball sampling were used to achieve a large sample, derived from 27 different countries. Most respondents identified as lesbian or gay (69.4 per cent, 1050) and were currently in a same-sex relationship (67.2 per cent, 1014).

Results: Analysis indicates that the legal recognition of same-sex relationships is perceived as an important equality issue for lesbians and gay men, and more support is evident 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 that 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 pertaining to personal relationship 'break-ups', issues of 'monogamy' and 'infidelity' within relationships. It is important to investigate and interrogate such sites of information because they are prevalent within society; they provide an accessible and public form of guidance and are usually framed as coming from a psychological perspective. In this instance the texts are examined in terms of the 'norms' they present as to relationship 'styles', sexuality and personal goals (in terms of personal relationships). By implication, these texts also describe 'other' relationships and personal preferences, which are constructed as less or completely undesirable. This research forms part of a larger research project examining the social constructions of 'infidelity', 'monogamy' and relationship 'break-ups'.

Design: Self-help texts were sampled from a variety of internet searches for popular texts discussing personal relationship issues. Texts were selected for their relevance and coverage of infidelity, monogamy and relationship break-ups and for their publication date – 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 within the self-help text (for example, in terms of adopting a hierarchical or non-hierarchical approach to the knowledge contained within the text).

Results: Within this paper the focus will be on three components of the overall findings of this research project. Firstly, the finding that the majority of the texts examined contained heterosexist norms, which often went unchallenged yet were implicit in the advice/discussions present within the texts. Thus othering sexualities that do not adhere to heterosex practices. Secondly, this paper will examine the 'coupledom' focus inherent within the majority of texts analysed, which often works to construct a privileged position for monogamous relationships between two people of opposite sex. Finally, the particular language techniques utilised to normalise and 'other' relationships styles, sexualities, etc., 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 inevitably present normalised ways of being and, therefore, also 'other' 'alternative' ways of being – which has various implications for individual subjectivity upon reading such material.

Metamours, frubbling and ethical sluts: 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 their constructions of their own identities and set-ups.

Design & Methods: The way in which polyamorous people negotiate their identities using both the conventional language of relationships and alternative languages was explored using real-life and online discussions as well as analysis of polyamorous literature and websites. Constructionist discourse analytic techniques were employed.

Results & Conclusions: The possibilities opened up by polyamory appear to be somewhat limited by the conventional language of partnerships, infidelities and jealousy. 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 progression of romantic relationships via chat rooms, MUDS and newsgroups have highlighted some important findings in respect to how serious, 'real', and successful these online relationships can be, this study was interested in whether results found in these previous studies generalise to meeting people via online dating services. In particular, it was interested in theories on presentation of self and the progression of relationships from online to offline.

Design: This study interviewed 30 men and 30 women about their experiences with using an Australian online dating service. These participants were randomly selected by the online dating company and were sent an e-mail invitation to participate in the study. A content analysis was performed on the data which was also re-coded to check on re-coder reliability.

Methods: Given that a sample from across Australia was desirable and that those without great e-mailing or instant messaging skills (and indeed many of the participants were not particularly internet-savvy) might be excluded from the study, it was elected to carry out telephone interviews.

Results: The results revealed that the progression of these relationships was markedly different to relationships developed via other spaces online. For example, most participants moved from communication from e-mail to phone to face-to-face at a much quicker pace than romantic relationships formed in other spaces online. These individuals also established trust in different ways to how previous research has found that trust is established in relationships developed in chat rooms. Moreover, how people strategically presented their 'selves' was also different to previous studies on developing relationships via newsgroups.

Conclusions: In conclusion, it is important that we do not consider the internet as one generic space, especially when it comes to relationship development. Furthermore, that successful relationships developed in online dating sites, contrary to previous studies on newsgroups, might have more to do with presenting an 'actual' self rather than an 'ideal' self.

**'I'm sure everybody 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 the 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, for instance, 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.

Psychology of Women Section Annual Conference 2005

*Psychology of Women Section Annual Conference,
University of Huddersfield, 6–8 July 2005.*

KEYNOTE SPEAKERS

'Friends are the families we choose for ourselves': Towards the democratisation of relationships

V. BURR, University of Huddersfield.

It is almost a truism to say that relationships occupy a place of central importance in women's lives in a way that is not so for men. Some, for example, Chodorow (1978), have gone as far as to say that women's sense of self is defined in terms of their relationships to others. However, many of women's close relationships have traditionally been located within the family, and to the extent that the family may be seen as an institution serving the interests of patriarchal society we may question its benefits for women and their sense of self. If social structure and subjectivity are interlinked, as I feel they must be, then it is no surprise that for many women their sense of self, founded within inegalitarian relationships, is sometimes characterised by a lack of self respect and self-esteem.

In this paper I will comment upon recent changes in family forms in western societies and upon the increasing importance of friendship networks in many people's lives. Drawing examples from popular culture as well as from social science research, I will discuss these changes as a form of 'democratisation' of relationships (Giddens, 1991, 1992, 1994) and reflect upon the implications this might have for women's sense of self.
v.burr@hud.ac.uk

**What's the use of masculinities?
Back to the problem of men ...**

J. HEARN, University of Huddersfield and Swedish School of Economics.

In this presentation I reflect on the state of knowledge in critical studies on men and masculinities. This includes considering some of

the diverse influences on this field of study and some of the key differences and debates. The study of men is not a single coherent field; rather it is beset by epistemological, methodological, political and practical differences, including the extent to which the studies adopt a critical relation to men. One of the most important aspects of difference concerns how men involved in this field relate – individually, organisationally, structurally – to women, feminists and feminisms. This includes how the modes of organising, networking, teaching and researching in this field connect, or not, to women's studies and gender studies. Related differences include the extent to which studies are historically grounded, culturally specific, relational, materialist, deconstructive, and anti-essentialist.

In particular, I consider some divergent concerns with micro and macro perspectives; impacts of transnationalisation and postcolonialism; and conceptual and theoretical issues. Specifically, I would like to cast doubt on the usefulness of the concept of masculinity/masculinities and urge a return to the study of men as a social category, and the need to investigate the dominance and deconstruction of men. This involves shifting analysis 'from hegemonic masculinity to the hegemony of men'.

Studying men is not new and not necessarily radical, but it can be ...
hearn@hanken.fi

Equal marriage advocacy: Challenge and compromise

C. KITZINGER, University of York.

This talk explores the range of arguments deployed internationally in favour of equal marriage – with a focus on how these arguments are shaped by the opposition to them, both from outside and from within the LGBT and feminist communities. In particular, I show how in the contexts of these debates 'marriage' itself emerges as an essentially contested symbolic concept of fundamental social importance. I discuss how its various meanings (civil contract, holy union, patriarchal institution) are constructed through contrasting the discursive

construction of 'marriage' with 'civil partnerships' and consider the implications of this for LGBT and feminist psychology.
celia_kitzinger@yahoo.com

WORKSHOPS

Feminism & Psychology/POWS Review publishing workshop – Getting published in academic journals

R. CAPDEVILA, University College Northampton – *Feminism & Psychology* & L. O'DELL, University of Brighton – Editor of *POWS Review*.

rose.capdevila@northampton.ac.uk
L.J.O'Dell@brighton.ac.uk

Dance–Movement–Therapy an alternative tool for psychotherapy

S. PIMENTEL, University of Sheffield.

A practical workshop exploring dance–movement–therapy as a valuable tool for helping those who find it difficult to put their traumatic experiences into words. Participants are advised to wear comfortable clothes if possible. No dance experience is necessary and Sylvia will be working with different levels of movement to ensure that the workshop will be accessible to all.
s.pimentel@sheffield.ac.uk

Zizek on men and masculinity

A. VOELA, King's College London.

What do men want today? Are we now witnessing the most profound changes in masculinity or the emergence of the new face of hegemony? Slavoj Zizek's writings bring together Lacanian Psychoanalysis, Sociology, Philosophy, Cinema, Popular Culture and Everyday Life in a highly complex and unique fashion and his ideas have become increasingly important in discussions of gender and sexual relations. The present workshop focuses on Zizek's ideas on Masculinity. Aiming at tackling the theoretical complexity of his

arguments, it sets specific questions and approaches his theory via a wide range of examples. It features 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 theorists.

Masculinity in the psychoanalytic tradition.

Men and women: Is the sexual relation really impossible?

Woman 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 (obscene) father: Vulnerability and the changing relations of power and paternal authority.

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

On Love: Zizek, Irigaray, Bowman.

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

angie.voela@kcl.ac.uk

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 pre-menopausal 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 and infertility. In a patriarchal culture with an ideology of individual choice in which 'woman' is defined 'in terms of mother in ways which regulate the lives of all women – those who are mothers and those who are not' having breast cancer and being infertile may have a profound impact on a woman's subjectivity. How a woman perceives her own subjectivity is intricately linked with cultural perceptions of female subjectivity in general, but also with the individual experience of her body in particular. A Foucauldian Discourse Analysis of semi-structured interviews with women with breast cancer and infertility shall illustrate this complex experience.

e.adams@uel.ac.uk

p.a.dell@uel.ac.uk

k.n.gannon@uel.ac.uk

Portraits of Self: Women in their middle years

J. ARNOLD, Nottingham Trent University.

This paper is a first report of a joint project I undertook with my daughter (a photographer) that draws on a mutual interest in the positive portrayal of women. Together we collected stories (in one-to-one conversations and through focus group discussions) and photographic portraits of more than 50 middle-aged women from across the UK. Middle-aged women are under-represented and little understood and what emerges from the stories are portraits that reveal past, present and future selves. Women show how their lives connect to the lives of previous and future generations of women in often funny and unexpected ways. The challenge (reluctance or resistance) to being photographed became part of the discussion about how others see middle-aged women and their mixed feelings about being visible and finding voice. The narratives and photographs provide a collection of powerful visual and psychological portraits of work, relationships, roles, families, and bodies.

jill.arnold@ntu.ac.uk

Heteronormativity and happiness: Discourse analysis of well-being in lesbian gay and bisexual (LGB) populations

C. BASHIR, Five Boroughs Partnership NHS Trust & S. WARNER, Manchester Metropolitan University.

Traditional psychological approaches have centred on a deficit model of human functioning. The focus has been on symptoms or traits that are undesirable because they are indicative of underlying pathology; arguably most evident in the treatment of sexual orientation. The field of positive psychology has sought to shift psychology's focus to well-being and qualities that enhance human functioning and happiness.

However, in a similar methodological spirit to traditional psychology, happiness studies fail to contextualise their research to account for the experience of minoritised groups and have further marginalised the voices of LGB groups.

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 these are given meaning 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 experience of LGB individuals.

colbashir@hotmail.com

SJWarner@aol.com

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. Three discursive accounts emerged from my analysis and I will describe and subsequently unpick these in relation to social and cultural positionings, and to the notions about masculinity that they suggest. I propose that whilst these accounts may represent different ways of consuming lap dancing; they also all invest a great deal of linguistic work in positioning themselves as autonomous and in possession of a 'good' masculine identity. I will discuss which salient features of these discursive accounts enable the men to position themselves in ways that portray their consumption of lap dancing as benign and inherently male.

Sarah2.Booker@uwe.ac.uk

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 of women (Dworkin, 2002). It illustrates the ongoing tension between human agency and structural, deterministic forces (Gatens, 1996). 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 (Burr, 1996). This qualitative research examined interview data using a discursive thematic analysis and located power in the social actors. The findings support 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).

J.Brandling@bath.ac.uk

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. BURGOYNE, University of Exeter.

This paper offers a qualitative analysis of data drawn from in-depth interviews with 18 lesbian and gay couples about civil partnership, same-sex marriage and money management. Interview transcripts were coded and analysed using a grounded theory approach to yield 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 offered 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.

m.l.burns@exeter.ac.uk

Being a man: Justice and care

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

This paper will consider ways in which masculinities are theorised. We 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 (1975) 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 presentations, we would like to argue that these discourses, underpinned by their apparent standing in the psychological establishment and their resonances with everyday talk, 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.

rose.capdevila@northampton.ac.uk

k.ciclitira@mdx.ac.uk

lisa.lazard@northampton.ac.uk

l.marzano@mdx.ac.uk

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 in the UK and Tobago, the small sister island of Trinidad (West Indies), on issues revolving around 'becoming a woman', the female body and eating. I will discuss how within each cultural context specific problematisations of recognition and its antonym disrespect were found to interlink with differences in the way the 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

existed in the way self-other relationships were constructed. While the young British women's constructions of self were oriented to self-determination, acceptance and having friends, the young Tobagonian women's constructions of self were marked by idiosyncrasy and a demarcation from others. My findings have implications for how we as psychologists conceptualise self-esteem, individualism/collectivism, body image and eating attitudes.
nikedorrer@yahoo.co.uk

Gender differences and perceived psychological contracts: A study of retail and administrative workers

A. GAFFNEY & C. GEORGE, University of Hertfordshire.

Rousseau (1995) defines a psychological contract as a 'commitment to action based on individual beliefs about the obligations that 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 terms of their perception of their psychological contract. Male workers tended to perceive their contract as being more relational than did female workers. The results are discussed with reference to gender stereotypes and work type.
c.george@herts.ac.uk

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 these lesbian teachers; work demands were made on home life and relationships but home life was separated strictly from school. In particular, they report confusion around hiding lesbian identity, conflict with teacher identity and feelings of discomfort and exclusion from workplace relations. Exclusion appears 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 normative values of school culture and the discourses of teacher professionalism, where heterosexuality is both assumed and highly valued.
cathy.gibbons@nottingham.ac.uk

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 ($N=158$) show that this bias can be reversed by presenting data about one woman and asking participants to predict data about men. Participants consistently took 'the effect to be predicted' as 'the effect to be explained' when their predictions were unconstrained (Experiment 1) or were constrained by forced choice items (Experiments 2). Participants also focused explanations on the gender group that they

predicted on a second explanation task (Experiment 3). This suggests that the effect is due to a shift in cognitive representations of gender rather than conversational pragmatics. Implications for social cognition theories are discussed, and recommendations about the presentation of gender difference findings are proposed.

p.hegarty@surrey.ac.uk

'Twice as much fun': Bisexual 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. Theories of identity development focus on monosexual identities and research around gender and sexuality also tends to exclude bisexuality, or to combine bisexual 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 exclusively gay or lesbian. Discourses of bisexuality as 'challenging' emerged, with difficulties experienced by self or others in conceptualising a phenomenon that is not routinely included in discussions around sexuality. A further set of discourses around bisexuality as 'potential' emerged, with participants constructing identities that related to greater actual or 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 transgendered as that is the term that the individual uses.
Patricia.Hudson@btinternet.com

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 female-to-male transsexual as they talk about relationships. If inter-subjective recognition is a pre-requisite for a healthy sense of self, for the transsexual subject self-recognition comes from both recognition of their own 'core' gender and confirmation of this from those they relate with/to (Rubin, 2003). Thus, continuity in social relations, particularly the way in which family, friends and partners relate to the participants, is highlighted as imperative for the transsexual's new sense of gendered self. 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.
K.E.Johnson@brighton.ac.uk

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; emerging as a social and health care issue. Moving beyond evaluation practice models, predominantly employed in UK when qualitatively researching domestic violence in the health arena, the research presented adopted a feminist Foucauldian approach. Posited is the necessity of understanding the impact of dominant medical discourses and practices upon women and health professionals at the point of contact. Responding

to domestic violence has been described by health professionals as 'Opening Pandora's Box' and thus consistent with this metaphor is the apparent discomfort experienced when responding to domestic violence. Such discomfort is further explored, when manifest by health professionals deploying 'horror' and 'warfare' discourses to impart their experiences. The impact of such discourses, and the way that they appear to enable the apparent subversion of traditional medical subject positions will be scrutinised moving on to theorise the implications for women and health professionals.
v.lavis@hud.ac.uk
c.c.horrocks@hud.ac.uk

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 Pregnancy Study being conducted in Primary Care (i.e. in three General Practices) in Greenwich, funded by the Primary Care Trust.

The study is being undertaken in order to set up a sensitive system for identifying psychological difficulties in mothers and fathers during pregnancy and postnatally. The system includes general practitioners, midwives, health visitors and an analytical psychologist.

A secondary aim is to describe the psychological processes in pregnancy. So much is known about the medical, physical and physiological processes and these are closely monitored, but little is known about the mental and psychological changes and processes: unless these are known and understood appropriate treatments cannot be introduced.
JAFLee@aol.com

Drinking and intimacy in women students' friendships

M. MAGUIRE & D. PHILPOTT, University of Westminster.

This exploratory study sought to explore the role and meaning of alcohol drinking in the lives of women students. Twenty-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 used to promote intimacy by facilitating self-disclosure in a 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.

M.S.Maguire@Westminster.ac.uk

Matrices of femininity in hospital-based 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 19 interviews conducted with nurses who nurse in-patients diagnosed as 'eating disordered', the paper examines how gender and gender-power relations are articulated in these accounts. The paper focuses in particular on the various ways in which 'patient', 'pathology', 'nurse' and 'nurse-patient relationship' are feminised. Our analysis thus aims to elucidate how 'the feminine' persistently appears and reappears in these accounts as a series of binary opposites such that 'nurse' and 'patient' are positioned within a matrix

of dichotomously-structured and hetero-patriarchally-defined 'femininities'.
Helen.Malson@UWE.ac.uk
v52@optusnet.com.au

'Under pressure?': Negotiating relationships in known egg donation

N. MARTIN, R. DEERY, E. BLYTH & 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 individuals who had experienced known egg donation either as the recipient or the donor, or the partner of the recipient or donor. These interviews are currently being analysed using the voice-centred relational method of data analysis (Brown & Gilligan, 1992; Mauthner & Doucet, 1998), which provides the researcher with the opportunity to be reflexive during the analytical stages of the research as well as providing a 'voice' for those taking part in the research. Preliminary 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.
n.martin@hud.ac.uk

Exploring the gendered construction of academic careers

P. McCOLL & PAUL 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, as well as monitor and analyse statistical data. However, the objective structural under-representation and disadvantage revealed by such analysis may or may not be matched by subjective perceptions. The stories which emerge may not match expectations. This was the case with a survey of equal 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 than male academics against a factor measuring experience of career opportunities. Different perspectives are gained from different fields of literature, leading to alternative interpretations. Critical feminist literature paints a generally bleak picture of women's experience in HE in the UK, emphasising the disadvantage women face as 'outsiders' in a patriarchal community. More recent work analyses the impact of New Public Management, generally, and on women's experience in particular. A theme running through some of this work is the construction of identity and the ways in which women (and men) are shaped by, collude with, resist or manipulate dominant discourses, or find a natural home within them. From another perspective, the literature on careers points to their emergent nature, and ideas of relationship and enactment. Within this strand, Gallos (1989) drew attention to women's developmental differences from men, whether these are considered from a sociological, cultural or psychological standpoint. Future research is planned to explore similarities and differences in career experiences of male and female academic staff.
p.mccoll@tees.ac.uk
paul.iles@tees.ac.uk

Positioning girls and young women as 'workers': Negotiating childhood, adulthood, family and work

L. O'DELL, University of Brighton, S. O'TOOLE, University College Northampton, G. DE ABREU, Oxford Brookes University & T. CLINE, University of Luton.

Children and young people who work have occupied a troubled and contradictory position in British culture and policy for many years. Child workers are seen to be in need of protection from the adult world of work. Concurrently, young people who work are positioned in more favourable ways in discussions about responsibility,

autonomy and agency. 'Appropriate' work (within British mainstream culture) for young people and children is seen to be activities which are differentiated from adult roles and, with adult supervision, are seen as beneficial to the developing, autonomous person. However, what is deemed as 'appropriate' work is highly gendered, with work typically performed by girls and young women rendered invisible in a definition of work as activities that are paid and take place outside the home. In this paper we discuss some initial data from our ongoing ESRC funded project on children in 'atypical' work roles. The initial phase of the project surveyed over 1000 young people (in years 10 and 12) in six British schools. The pupils were asked what working activities they performed (both paid and unpaid work) on a regular basis. We report on the initial analysis of this survey, with particular attention to the gender and ethnicity of the young workers.
L.J.O'Dell@brighton.ac.uk

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 powerful 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.

Aims: To study the prevalence of child abuse within male and female professionals of mental health. To see the possible trauma symptoms and whether or not these symptoms have been overcome by a sample of psychotherapists who reported experience of child abuse.

Method: 400 Members of the Universities Psychotherapy and Counselling Association were invited by a letter to participate in child abuse research. One-hundred-and-twenty-four members agreed to participate in the study. Instrument includes questions for the assessment of childhood trauma, ways of coping, general health, power and recent life events. The questionnaires used were chosen to fully cover childhood traumatic events: physical abuse, emotional abuse, sexual abuse, neglect and witnessing domestic violence. The ScHARR (School of Health and Related Research) Ethics Committee of the University of Sheffield approved the research study.

Results: 103 professionals completed the questionnaire. One-third were men and nearly two-thirds were women. Age varied between 31 and 73 years old. Reports of child abuse were high among the sample; 58/103 (56.3 per cent) of the questionnaire respondents had experienced abuse of some type. Overall, 21.4 per cent of the respondents suffered problems with general health but a majority (78.6 per cent) identified themselves as having good health. There is a significant difference between those who experienced abuse in childhood and those who did not. However, the scores of trauma child abuse are not significantly high.

Conclusions: The results strongly suggest that psychotherapy is a good resource to surmount childhood abuse trauma.

s.pimentel@sheffield.ac.uk

'Heroes and Matriarchs': A discourse analysis of female door supervisors

B. RICKETT & A. ROMAN, Leeds Metropolitan University.

As more women move into non-traditional employment (Bartholomew, 1994), research has tended to centre on, first, women in non-traditional, professional roles, and second, quantifiable career outcomes for these women (e.g. the glass-ceiling effect; Sevastos, 2003). However, what is obscured by this research is the experience of working-class women who step out of the conventional stereotypical work-role (Connell, 1993). This present 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 and these could serve to place women in traditionally-masculine work-roles in greater positions of agency and power.
b.rickett@leedsmet.ac.uk

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), 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 independence from 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 aspirational 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 imbalance that it defines. The participants used discursive strategies to negotiate their positions in order to meet the contextual motivations of the discourse. Masculinity was found to be interest-driven, being that it is in the interest of men to acknowledge the existence of hegemonic masculinity despite how they position themselves in relation to it. Finally, it was proposed that to be a 'new man' in this modern and more liberal society, a man needs to negotiate a masculine identity which expresses a distance from the traditionally hegemonic type thus being socially acceptable, while still upholding the power imbalance from which men benefit.
samantharob@hotmail.com

Collapses in romance: Stories about the gendering of parenthood

E. SEVÓN, 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: (1) What is the process of gendering parenthood like? (2) How are different emotionalities related to different genres in the mothers' stories?

All the mothers' stories begin within the romance genre. The stories, however, change from romance via irony and stories of collapses and comparisons to stories of companionship in the last interviews, even though some mothers' stories remain close to the romance genre throughout the interviews. The mothers' stories about the gendering of parenthood were often very emotionally loaded, recounting mothers' understanding, anger, solitude, exhaustion, guilt and tiredness. The contradictory cultural narratives of good mothering and shared parenthood create clashes in motherhood and in negotiating parenthood with the spouse.
eija.sevon@edu.jyu.fi

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 discursively manage 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 and seven women 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 'troubled' (Wetherell, 1998) for men than it is for women. For instance, the men in my study typically negotiated a positive identity for themselves and their 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 their negotiation of a self-help group identity makes them complicit.

Sarah.seymour-smith@ntu.ac.uk

Exploring new positionalities: 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 ($N=4$) analysed salient issues in regards to South Asian women. Semi-structured one-to-one interviews ($N=4$) were then conducted to develop emerging themes. Both 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 while working full-time. The importance of defining oneself within the parameters of the family identified four main issues, which included politicisation of identity, reciprocal respect, unspoken boundaries and parental input into traditional heterosexuality. This study repositioned the South Asian female as a dynamic individual constructed by and constructing her own identity from the cultural backgrounds available. The implications of this study result in the necessity to explore heterogeneous Asian female identities in terms of positive identity politics
amandasingh1970@aol.com

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.

Increasingly attention is shifting away from a focus 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 mothers 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. The midwives and community nurses surveyed placed rather less emphasis than mothers on the value of continuity of care in pregnancy in promoting disclosure of mental health problems. Community midwives appeared less confident than health visitors in detecting and responding to antenatal depression but both groups of professionals had limited knowledge of relevant services.

nstanley@uclan.ac.uk

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 East London.

This exploratory study examines the impact of incarceration on relatives of individuals convicted of a serious crime. Research indicates that the relatives frequently face emotional, economical and health problems which seriously affect their well-being (Brown, 2002). They may be subjected to 'secondary victimisation'; many suffer acute discrimination exacerbated 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 events, including bereavement, 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 experience? If so, what form do these attributions take? Is self-blame linked to failure to seek help and to the experience of trauma? In exploring the experiences of a minority group and the effects of incarceration on the family, this research examines the relationship between attributions of blame, trauma and health. Finally, it will discuss the implications of this research for both research and practice.
s.tullett@uel.ac.uk

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 made his case with reference to 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 descent to Hades in order to retrieve the beloved Eurydice. It examines the contemporary representation of the uninhabitable landscape as a land of sexual pleasure, Orpheus' status as a stranger, his idiosyncratic relationship with Eurydice and his failure to regain her from Hades. It highlights his latent anxieties and fantasies, as well as the ways in which the hero experiences and resists the idea of a traditional and exploitative masculinity. But 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 sovereign masculinity devoid of intimate loving relationships.
angie.voela@kcl.ac.uk

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, Cloitre & Dulit, 1995; Department of Health, 2002). In this paper, it is argued that the traditional explanations that focus on the individual woman as the site of difficulties, and as the sole 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 deployed by the health professionals that seemingly construct women's experiences as a 'conflictual inconvenience' 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.
t.walker@hud.ac.uk

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

H. WALLACE, Metro Centre, London.

'Time to Think' is a comprehensive study which explores the lives and experiences of lesbian, gay and bisexual young people in London. It explores the effects of growing up and interacting in a heterosexual society and the extent, experience and effects of discrimination, victimisation and rejection on mental health and alcohol/drug use. This presentation summarises some of the findings of the sex and sexuality part of the survey 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.

Hazel@t-metro.co.uk

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 career decision strategies 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 (Bangladeshi) is also considered regarding gender difference.

Method & Findings: The methodology and outcomes arising from this community audit approach will be described with an emphasis on identified gender differences in terms of career choice, use of job information, organisational perceptions and career attractors. 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 the attraction strategy for firefighter applications along with other corporate processes. Reflections 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.
philip.wilson@london-fire.gov.uk

Scientific constructions of motherhood: Playing handmaiden 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 'sensitive/insensitive', '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 handmaiden to social values. This paper seeks to reveal the ways in which this process continues today within the domain of motherhood.
m.s.zedyk@dundee.ac.uk

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 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 its 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.
nikki.shelton@ntlworld.com
s.l.johnson@leedsmet.ac.uk

Division of Health Psychology Annual Conference

*Division of Health Psychology Annual Conference,
University of Coventry, 7-9 September 2005.*

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 – are highly 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 achievement because people may fail to deal effectively with self-regulatory problems during goal pursuit. This talk analyses the types of problems that beset goal striving, and examines how the formation of if-then plans ('implementation intentions') can help resolve

these problems and promote goal attainment. Particular attention is given to the problem of shielding goal pursuit from unwanted influences. 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 biopsychosocial model in health psychology.

SYMPOSIA

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

Convener & 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 DHP 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 groups), the studies examined several different risks (e.g. cardiac events, cervical cancer) and used a range of different outcome measures, including recall, preferences, intention and anxiety.

The first paper, by Dan Mason, reports findings from a web-based experiment designed to test the effect on recall of supplementing numerical 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 in relative or absolute terms on patients' preferences for preventative treatments. She will also present findings from a related systematic 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 final paper, by David French, reports findings from a study of the psychological impact of an inadequate cervical smear test result, suggesting that this is an ambiguous risk communication that raises anxiety and leads to feelings of dissatisfaction with the information received.

Recall of health-related risk information presented graphically and interactively

D. MASON, S. SUTTON, University of Cambridge, T.M. MARTEAU, King's College London) & A.L. KINMONTH, University of Cambridge.

Background: Graphical representations of risk offer a straightforward means of supporting the communication of health risk information. Electronic presentation formats also present the possibility of allowing the receiver to manipulate/interact with the representation. An experimental study compared participants' recall of hypothetical risk information when presented as percentages, 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 cardiac event, presented in one of the three formats. One week later they were invited to return to the website where they were asked to recall the risk information ($N=373$).

Findings: Controlling for education level, there was no improvement in recall accuracy when participants were shown static bar charts as opposed to percentages alone ($OR=0.91$, $p=0.75$). 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 more accurate recall than the alternatives. Given the hypothetical nature of the task, it is possible that interactivity encouraged the participants to engage with the task in a way that they did not in the other two conditions. The benefits of such presentation techniques can only ultimately be judged 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 for the sole purpose of preventing disease (e.g. drugs or food-stuffs which aim to reduce cholesterol levels). These medications and products aren't designed to treat existing diseases: they are designed to reduce the risks. This paper explores: (a) how the format in which risk reduction information is presented can influence people's acceptance of such products; and (b) whether attention to relative changes in risk can result in people making sub-optimal choices.

Methods: Data will be presented 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 ($d=0.61-1.15$). The experimental 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. This effect was found both when the risk reductions were described in relative or absolute terms.

Discussion: The 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 to women 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 potential effectiveness of brief smoking cessation advice given by practice nurses to women attending routine cervical screening.

Methods: 242 women, recruited from eight general practices, were allocated using cluster randomisation to either: (1) brief smoking cessation advice from a practice nurse plus written information; or (2) no advice. Advice included information on the health risks of smoking and the benefits of stopping smoking to reduce these risks. It was designed to increase perceived coherence of the link between smoking and the risk of cervical cancer. One-hundred-and-seventy-seven (73 per cent) women completed questionnaires two weeks post-intervention. Data have been received so far for 145 (60 per cent) at 10 weeks.

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. Evidence that this results in quitting and is cost effective requires a fully powered trial.

Inadequate cervical smear test results as ambiguous risk communications

D.P. FRENCH, 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 piece of information, 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 do not lead to 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 Patient 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 across 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 17.5 million people living with a chronic disease at any one point in time. This figure is likely to increase with the current demographic changes (e.g. increased life expectancy). Thus, it is not surprising that the role of psycho-educational interventions in facilitating adaptation to the challenges of chronic disease is receiving growing recognition. In the UK, Barlow and colleagues have been evaluating the impact of the Stanford University model of lay-led self-management courses for participants and peer tutors alike for the last 12 years. Recently, the Stanford course has been adopted as the foundation of the Department of Health's Expert Patient Programme (EPP) that is being rolled out across primary care in England and by the Welsh Assembly in Wales.

Summary: Presentations have been chosen to illustrate the increasing diversification 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 study of participants with arthritis. The latter identified some of the factors associated with the course's positive outcomes. David Ellard will present results from a study examining the perceived benefits and suitability of the Stanford course for NHS employees. This study includes the perspectives of employees and managers. Chris Griffiths will present outcome findings from an innovative study which involved adapting the course for Sylheti speaking, Bengali participants in Tower Hamlets, London. Patrick Hill will conclude the presentations with findings from a study examining tutors' perspectives and the impact of acquiring self-management skills on their own lives.

The experiences of osteoarthritis patients attending the arthritis self-management programme

A. TURNER, Coventry University.

Background: While there is effectiveness data for the Stanford, lay-led Arthritis Self-management Programme (ASMP) there is very little qualitative data examining participants' experiences.

Furthermore, there is little data regarding the active ingredients which make the ASMP effective. We aimed to gain greater understanding of OA participants' experiences of attending the ASMP. **Method:** A sub-sample of 31 participants were purposively selected and interviewed at three points in time: prior to attending the ASMP, and at four and 12 months follow-up. Due to attrition, 19 participants were interviewed across all time points. Interviews were audio-recorded, transcribed verbatim and analysed using interpretative phenomenological analysis. Results presented here focus on follow-up interviews only.

Follow-up results: The ASMP both reinforced participants existing self-management skills (e.g. exercise) and introduced new ones (e.g. improved communication). Participants valued the sharing of experiences with similar others in a supportive, validating, empathic environment. It was clear that goal setting was an important factor in initiating self-management strategies. Participants described how being held 'accountable' by tutors and other

participants provided the necessary motivation and commitment to undertake their goals. Participants also derived hope and inspiration from participants and tutors whom they perceived to be coping well with their problems. Comparing downwards with those they perceived to be worse off enabled participants to adopt 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 have also been identified as being 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 assist 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 deliver the Expert Patient Programme (EPP) to NHS employees who have a Long-Term Medical Condition (LTMC). The project was piloted in two NHS Workforce Development Confederation areas. 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 ascertain 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 EPP course had been delivered. 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 workplace to focus on their own health needs with similar others. Many were more accepting of their condition and felt less guilty about having a condition that interfered with work. All managers expressed qualified support for staff with long-term conditions to either attend the EPP or to train as tutors. Managers were clear 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, staffing levels, and cost.

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 & J. RAMSEY, Barts and Queen Mary's School of Medicine and Dentistry, London.

Background: People of South Asian origin suffer increased prevalence, morbidity and mortality from a range of chronic diseases. Bangladeshis experience the highest socioeconomic deprivation and report the highest levels of chronic illness of any minority ethnic group 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 Bangladeshi lay tutors with chronic illness, or to a waiting list control group. Data were collected in 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 per cent confidence interval: 0.08–1.25) and self-management behaviour (0.53; 0.01–1.06). Just over half of intervention participants (121/238, 51 per cent) attended three or more of six education sessions; in pre-planned per-protocol 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) and in addition, improved depression scores (0.64; 0.07–1.22). Health care use was unaltered. The programme cost £123 per participant to run.

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 effects of developing the skills to self-manage one or more long-term health conditions. The study engaged participants who had achieved a recognised level of self-management in that they occupied the role of trainers or tutors in the NHS 'Expert Patients Programme' (Department of Health, 2001).

Design: The qualitative method Interpretative Phenomenological Analysis was used.

Methods: A semi-structured interview was undertaken with six participants who fulfill the roles of trainers or tutors in the Expert Patients 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 reconstruction as the person developed self management.

Conclusion: The study indicates the need to support people with long-term 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.

Convenor: 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, as well as to identify 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 are likely to 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 posits that it promotes eating disorders and overeating.

Prolonged periods of restraint result in persistent hunger, and may also lead to a breakdown 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 (Ogden, 2003). 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 Kulda'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, both to media exposure 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 restraint 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 thinness cognitions that are central 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. This makes possible 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 an affect-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 than 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 the form of food diaries (Halliwell *et al.*), 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 thinness 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 may present a true 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 exposure to thin-ideal media has a negative effect on many women. It is normative that women want to be thinner, and they frequently engage in weight-loss behaviours, such as restrained eating – over 90 per cent of girls and women diet at some point in their lives, although less than a third are actually overweight (Wolf, 1991; Kilbourne, 2004). What is of most interest from both a health psychology perspective and a concern with reversing or preventing such disordered eating is an understanding of the processes through which this impact may occur. Two previous studies showed that media exposure had a direct effect on eating disorder symptomatology, while also demonstrating mediating roles for body dissatisfaction and thin-ideal internalisation (Stice *et al.*, 1994, *JAP*, 103, 836–840), and body-specific actual-ideal self-discrepancies (Harrison, 2001, *JSCP*, 20, 289–323). The present research aims to integrate, and extend, this research, through testing a model in which media exposure predicts restrained eating through two sets of mediators: first, thinness-related self-concept cognitions (thin-ideal internalisation, weight-related actual-ideal self-discrepancies), which – in turn – are linked to body-focused affect (body esteem, weight-related anxiety). **Method:** Using research on 'Consumer Culture' as a cover story, a large sample of young women aged 18 to 30 years ($N=800$) completed a questionnaire that contained the following measures: Media exposure to TV and magazines, thin internalisation (SATAQ 3), weight-related self-discrepancy index (WRSD), body esteem (Mendelson *et al.*, 2003), weight-related anxiety (PASTAS), restrained eating (DEBO). **Findings:** Controlling for age and BMI, we tested our model through structural equation modelling, which enables direct tests of mediation, and found support, although relationships were more complex than anticipated. **Discussion:** These findings highlight the importance of both self-concept-related cognitions concerning thinness and negative affect concerning one's body as predictors of restraint eating. These mediators should, therefore, be examined further in both experimental and longitudinal research.

Restrained eating as a moderator of media exposure effects: Investigating the impact of viewing ultra-thin and average-size models on body image, mood, dieting intentions and advertising effectiveness

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

Background: Research shows that exposure to thin ideal bodies in the media has negative effects on women's body image. Furthermore, this negative impact is specifically due to the thinness, rather than the attractiveness, of the models, and average and ultra-thin models who are equally attractive can be equally effective in advertising (Halliwell & Dittmar, 2004, *JSCP*, 23, 105–132; Dittmar & Howard, 2004, *BJSP*, 43, 1–33). However, there are some contradictory findings whereby viewing ultra-thin models is associated with positive effects (e.g. Myers & Biocca, 1992). Mills and colleagues argue that restrained eaters use thin models as inspirational comparison targets and, therefore, self-enhance after viewing these images (Mills, Polivy, Herman & Tiggemann, 2002, *PSPB*, 28, 1687–1699). Two recent studies have supported this hypothesis (Joshi, Herman & Polivy, 2004, *IJED*, 23, 105–132; Mills *et al.*, 2002). However, if restrained eaters use models as comparison targets for self-improvement, then it

would follow that average-size attractive models may be seen as an undesirable future self and may increase body image concerns. The present research aims to further our understanding of how levels of restrained eating influence women's reactions to media models.

Methods: The present experimental study examines whether levels of restrained eating, assessed one month prior to exposure, moderate the impact of viewing equally attractive ultra-thin or average-size media models compared to control images amongst a large sample of young women ($N=400$). Body image concerns, mood, behavioural intentions and advertising effectiveness are investigated as outcome measures.

Findings: Preliminary analyses demonstrate that women high and low in restrained eating showed different patterns of responses to ultra-thin, average-size, and control images.

Discussion: The findings have important implications for developing interventions to protect women from body dissatisfaction, as well as informing debates about the use of ultra-thin models in the media.

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: Restrained eating is often prompted by body dissatisfaction (e.g. Stice & Agras, 1998), and there is considerable evidence that restrained eating has negative consequences including overeating, pre-occupation with food, lowered mood, weight fluctuations and the development of both eating disorders and obesity (see Ogden, 2003). However, little is known about the impact of restrained eating on daily fluctuations in body image experiences and therefore on one of the main motivators of restraint. A recent study found that women reporting high levels of maladaptive eating attitudes, indicating a risk factor for developing an eating disorder, also experience relatively negative daily body image states (Melnyk, Cash & Janda, 2004). As specific situational factors, such as meal times, impact on women's body image experiences (Tiggemann, 2001), the present study extends previous research by examining the impact of restrained eating on daily body image fluctuations in the specific context of food consumption.

Method: Restrained eating, body dissatisfaction, body image investment and body image affect were assessed amongst 40 college women. These women then kept a food, mood and body image diary for one week, submitting a questionnaire each day to encourage regular completion. As part of this diary they completed a Body Image States Scale after each meal.

Findings: Preliminary findings indicate that restrained eating is associated with food intake, extent of negative body image affect overall, and impact of food consumption on body image.

Discussion: These findings further our understanding of restrained eating on women's daily experiences of body image concerns and are relevant to health promotion interventions regarding diet.

Effects of film-induced mood on eating behaviour depend on restraint and disinhibition scores from the Three Factor Eating Questionnaire

E. COUGHLAN & M. YEOMANS, University of Sussex.

Background: Traditional models see negative mood as a key stimulus leading to breakdown in attempts to cognitively restrict eating (dietary restraint). However, the traditional measures used to assess restraint confounded actual food restriction with fluctuations in body weight. Thus, the short-term over-eating usually interpreted as disinhibition of restraint could reflect variability in tendency to overeat in general, leading to greater weight fluctuation. This idea is reinforced by the outcome of recent studies which classified women in terms of both restraint (measured by the Three Factor Eating Questionnaire restraint scale, TFEQ-R) and tendency to overeat (measured by the TFEQ disinhibition scale, TFEQ-D). Only women who

scored high on both measures (HRHD) ate more in response to a stress stimulus (Haynes *et al.*, 2003, *Eating Behaviours*, 4, 369–383). The present study investigated this further.

Method: Median split TFEQ-R and TFEQ-D scores on a database of potential participants allowed recruitment of equal numbers of women defined as high (H) or low (L) on each measure, so yielding four groups: HRHD, HRLD, LRHD, LRLD. Eight women in each group were randomly allocated to one of three film conditions: a neutral film designed to elicit boredom, a film which increased positive mood and a frightening film which induced negative mood. Ad libitum snack foods were available throughout.

Findings: Intake varied depending on an interaction of TFEQ-R and TFEQ classification and film watched ($F(2,84)=3.20, p<0.05$). Only the HRHD group showed the classic disinhibition pattern, consuming significantly more in a negative affect state than the other conditions. In contrast, HRLD ate the least overall, and tended to decrease intake in the negative affect condition. The two LR groups ate similarly when in the neutral condition, and intake decreased significantly in the negative mood condition. However, LRHD women ate significantly more than the other groups in the positive mood condition.

Discussion: Thus these data found relative over-eating in two conditions: HRHD when in a negative mood state, and LRHD when in a positive state. These data emphasise the complexity of mood-induced eating, but suggest that a general tendency to overeat interacts with restraint to determine the expression of over-eating.

Symposium: Living with long-term health conditions of childhood: Experiences and interventions

Convener & Chair: J. BARLOW, Coventry University.

Discussant: K. SHAW, Institute of Child Health, Diana, Princess of Wales Children's Hospital.

Aims & Rationale: This symposium aims to draw together contributions reflecting individual experiences, interventions and service delivery in the field of child and adolescent health. The issues to be discussed are particularly relevant at this time, given the launch of the Children's National Service Framework (NSF) in the Autumn of 2004. The NSF highlighted the need to consider ways to improve all aspects of children's and families' well-being and to develop effective interventions and services.

Summary: Living with long-term, health conditions of childhood can have a pervasive effect not only for children themselves but also for parents, siblings and other family members. The family's journey can begin before diagnosis, when signs and symptoms of a health problem manifest and parents seek medical assistance. Following diagnosis, parents have to come to terms with their child's changing health needs and have to adjust to their own changing roles and expectations. Anna Cheshire will commence the symposium with a qualitative study based on interviews with mothers of children diagnosed with cerebral palsy. Mothers' reactions and their search for meaning and acceptance are described. It is accepted that caring for a child with a long-term health condition can be stressful and parents' own psychological well-being can suffer. Moreover, many parents can lack self-efficacy in their own abilities to contribute to their children's care given the range of health and social care professionals involved in children's services. Interventions directly targeting parental psychological well-being are rare. Julie Barlow will report the results of an evaluation of a simple massage-based intervention designed to enhance parental self-efficacy and psychological well-being in the context of childhood illness. This will be followed by Lesley Powell who will present the results of a qualitative evaluation of the same intervention focusing on children's outcomes. The symposium will conclude with a presentation by Karen Shaw on a randomised, controlled trial of a transition service for adolescents with juvenile idiopathic arthritis. This unique study includes reports from both adolescents and parents.

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 shown to be at particular risk from psychological distress around the time of their child's diagnosis. The aim of this study was to produce a qualitative account of parents' experiences and feelings of having their child diagnosed with cerebral palsy (CP).

Methods: Semi-structured interviews were conducted with a sample of 14 mothers who cared for their child with CP. Interviews were then analysed using interpretative phenomenological analysis.

Findings: A 'diagnosis journey' is described. This journey starts when their child begins to have problems, this was sometimes at the time of birth, but more often as in infancy. Mothers described their search for a diagnosis for their child, their shock when they finally receive one, their initial emotional reaction to the diagnosis and coping strategies employed. Finally through to adjustment and acceptance of their child's disability. Sources of stress for mothers at this time include, fighting for a diagnosis, feeling overwhelmed by new medical information and the number of appointments and health professionals involved in their child's care, coming to terms with the loss of their previous lifestyle and re-evaluation of what they were expecting their lives to be, search for a reason as to why it had happened and frustration at lack of support from disability services.

Discussion: Having their child diagnosed with CP was an extremely stressful and upsetting event for mothers. However, having the diagnosis allowed mothers to put in place appropriate practical coping strategies (i.e. accessing correct therapy and support for their child) and access support for themselves. This allowed them to move forward and come to terms their child's condition.

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 abilities 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 the study was to evaluate the impact of the programme in terms of 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 standard measures, mailed to participants 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 anxious mood ($p=0.028$) and perceived stress ($p=0.016$), and a significant increase in satisfaction with life ($p=0.007$) and parents' self-efficacy for managing children's psychosocial well-being ($p=0.041$). Changes on depressed mood and generalised self-efficacy were in the expected direction. 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 such 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). Children 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). Following the TSP 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 problems and circulation, 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 may be expected from a simple intervention and certainly appear to warrant further systematic investigation.

Growing up and moving on: Development and evaluation of a transitional care programme for adolescents with Juvenile Idiopathic Arthritis (JIA)

K.L. SHAW, J.E. McDONAGH & T.R. SOUTHWOOD, University of Birmingham.

Background: This abstract reports the development and evaluation of the first controlled trial of transitional care in JIA, where transition is defined as a holistic, multidimensional, active process that addresses the medical, psychosocial, and educational/vocational needs of adolescents as they move from child to adult centred care.

Methods: A Programme of Transitional Care (PTC) was developed in response to a national needs assessment that comprised focus-groups with young people who have JIA and their parents and a survey of multidisciplinary professionals. The resultant PCT was implemented in 10 rheumatology centres over a 22-month period and recruited 308 patients with JIA and 303 parents. Data were collected prior to entering the programme and again at six and 12 months. The primary outcome measure was health related quality of life. Secondary measures included arthritis-related knowledge, satisfaction with healthcare and pre-vocational experience.

Findings: Compared to baseline values, significant improvements in all variables were observed for adolescents and parents at six and 12 months (with the exception of career advice at six months). There were no significant deteriorations between six and 12 months and continuous improvement was observed for both adolescent and parent knowledge. Whilst the proportions of adolescents with vocational plans and performing household activities increased over time, these changes were not statistically significant.

Discussion: This study represents the first controlled trial of a transitional care programme in any chronic illness and shows that structured, multi-disciplinary transitional care can improve adolescents' HRQL, disease knowledge, satisfaction with healthcare and some markers of vocational readiness.

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

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

Convenor: P. SHEERAN, University of Sheffield.

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 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. 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. Armitage shows that in cigarette smoking:

(a) intention is a potent mediator of the past behaviour-future behaviour relationship; (b) implementation intentions produce a significant reduction in smoking; and (c) changes in perceived control mediate the effects of the intervention. These findings suggest that both motivational and volitional processes are important in smoking cessation, yet further work is required to tease apart the effects of the intervention from the effects of personal mastery on perceived control. In the second presentation, Ravis, Sheeran and Armitage examine cigarette smoking in adolescents, contrasting Ajzen's (1991) intentional model of behaviour regulation with the habitual mode, the reactive mode and automatic stereotype activation. The findings suggest that adolescents' smoking is principally controlled by automatic, habitual and reactive processes, and that adolescent smoking cessation programmes should ensure that images of smokers are negative, reduce willingness to smoke, and encourage adolescents to be more critical of themselves and their behaviour. The third presentation, by Sniehotta tests whether self-monitoring, awareness of standards, comparisons between standards and actual behaviour and regulatory effort in reducing discrepancies between behaviour and standards could predict three health behaviour changes over and above motivational measures and action planning. Action control is a powerful predictor in all three studies and accounts for substantial additional variance over and above past behaviour, intentions and action planning. Moreover, the influence of past behaviour and intentions were all mediated by action control. Finally, based on 40 experimental tests, Sheeran and Webb find that interventions that produce statistically significant increases in intentions (relative to a control condition) engender only a small difference in subsequent behaviour ($d=0.26$). Non-student samples and longer time intervals both attenuate these effects. Behaviours that are performed frequently in stable contexts, and are therefore likely to come under habitual control, are more difficult to change. Sheeran and Webb conclude that, consistent with

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 apparently unmediated by modifiable cognitions. In fact prior research shows that intentions at least partially mediate the effects of prior smoking on future 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, ANOVA and MANOVA. **Findings:** Results showed that: (a) intention was a potent mediator of the past behaviour-future behaviour relationship, $Z_{Sobel}=2.41$, $p<0.05$; (b) participants in the experimental condition showed a significant reduction in smoking, $F(1,42)=29.61$, $p<0.01$, $\eta_p^2=0.41$; and (c) changes in perceived control mediated the effects of the intervention, $Z_{Sobel}=2.12$, $p<0.05$.

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 are attributable to the intervention per se, or to the mastery experiences accompanying successful behaviour change.

Behaviour regulation, self-regulation and adolescent cigarette smoking

A. RIVIS, 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 (Ouellette & Wood, 1998), the *reactive* mode (Gibbons *et al.*, 1998) and *automatic stereotype activation* (Bargh & Chartrand, 1999). Two distinct modes of self-regulation have also been identified – assessment and locomotion (e.g. Higgins, Kruglanski & Pierro, 2003) – and recent research suggests that there are individual differences in assessment and locomotion tendencies. The present study examines the importance of these different modes of behaviour-regulation and self-regulation for adolescents' cigarette smoking, and investigates the role of self-regulatory mode in moderating cognition-behaviour relations.

Methods: 136 secondary school pupils voluntarily completed the Regulatory Mode Questionnaire (Kruglanski *et al.*, 2000), and measures of intentions, perceived behavioural control, willingness, prototypes and past behaviour in relation to cigarette smoking. Two weeks later they reported their behaviour.

Findings: Hierarchical 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 in adolescents' smoking behaviour; and (b) the assessment mode of self-regulation moderated the past behaviour-future behaviour relation, such that 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. SNIHOTA, University of Aberdeen.

Background: Changing behaviour requires intentions and action control. Based on self-regulation theory a measure assessing 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 in CHD patients (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 (all Sobel-tests, $p<0.05$).

Discussion: In the course of lifestyle changes, intentions and plans must be translated into action. Cybernetic models of control provide a heuristic background for the 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 behaviour in several models of health behaviour (e.g. the theory of planned behaviour, protection motivation theory). Meta-analyses of prospective correlational studies support this conclusion and show 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 effect 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 behaviour 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, $d=0.26$. Non-student samples and longer time intervals both attenuated behavioural effects. Although perceptions of controls did not moderate impacts on behaviour, more objective indices indicated that greater control was associated with larger effects on behaviour. Behaviours that were performed frequently in stable contexts, and therefore likely to come under habitual control, also were 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 Content Validity (DCV)

Conveners: B. POLLARD, M. JOHNSTON, D. DIXON, J. HART, J. FRANCIS, University of Aberdeen & D. BONETTI, University of Dundee.

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

- Objectives:**
1. To clarify the problem of construct redundancy/overlap 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. This process matches measurement items to the theoretical definition of the construct the items aim 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 behaviours. However, the potential overlap between measures of constructs within the same model and redundancy of constructs between different models 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 ratings (15 min).
5. *Illustrations* of empirical studies carried out using DCV (with group participation) (10 min).
6. *Interactive discussion* about DCV, potential applications, and implications (15 min).

Description of the intended participants:

This workshop would be suitable for people who use models or those interested in method and measurement development or construct overlap or redundancy. The maximum number of participants for the workshop: 40.

INDIVIDUAL PAPERS

Promoting MMR vaccination: A case of message framing

P.G. ABHYANKAR, D.B. O'CONNOR & R.J. LAWTON, University of Leeds.

Background: Applying prospect theory to health communication, Rothman and Salovey (1997) predict that messages highlighting potential 'gains' of performing a behaviour would facilitate prevention behaviours. Alternatively, messages emphasising 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 behavioural intentions (a prevention behaviour) among 140 women. Participants responded to a handout 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 mediated nor moderated by TPB variables. Study 2 ($N=110$) compared MMR vaccination behaviour with other prevention behaviours (e.g. using sunscreen, obtaining flu vaccine) 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. The present study tested the ability of the theory of planned behaviour to predict actual participation in physical activity and explored the development of activity habits in a 12-week longitudinal study.

Methods: People enrolling in a gymnasium ($N=94$) completed standard theory of planned behaviour measures at baseline and follow-up; 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 ($\beta=0.38$, $p<0.05$); (b) stable exercise habits developed in the first five weeks of the study ($F_s[1,91]=4.82-15.18$, $ps<0.05$); and (c) successful prior performance enhanced perceptions of behavioural control ($\beta=0.49$, $p<0.05$).

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 sequela of chronic conditions 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 other facets of adjustment, or potential mediating variables. This study sought to determine not only prevalence of psychological morbidity, but explored the role 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 comprised the HADS, Trinity Amputation and Prosthesis Experience Scales, Self-Consciousness Scale and Appearance Schemas Inventory.

Findings: Prevalence of anxiety and depression was found to exceed community norms. Participants reported particular difficulties with adjustment to limitation, but this was not mirrored in 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. The importance of appearance-related schemata 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 focus group discussion

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

Background: There is a paucity of research on spousal caregiving in Huntington's Disease (HD), with only a few key papers discussing the effect of this role (e.g. Kessler, 1993). The aims of this study were to: (1) perform an in-depth analysis of the experiences of spousal caregivers 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 quality of life (QoL) 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 8.5 hours of focus group materials were tape recorded and transcribed verbatim. Data were analysed using interpretative phenomenological analysis (IPA, Smith *et al.*, 1995) in order to identify emerging themes.

Findings: Analysis of the focus group data supported the identification of four superordinate themes: Levels of Support; Dissatisfaction with Caregiving Role; Practical Aspects of caregiving; and Feelings and Emotional Well-being. 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 disease process took over their lives as well as the life of their HD-affected spouse. These data have been used to inform the development of a 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

F.L. BISHOP, L. YARDLEY, University of Southampton, N. BEYER, Copenhagen University Hospital, K. HAUER, University of Heidelberg, G. KEMPEN, Maastricht University, C. PIOT-ZIEGLER, University of Lausanne & C. TODD, University of Manchester.

Background: The aim was to determine which attitudes and beliefs influence uptake of and adherence to falls prevention 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, The Netherlands, Germany, Greece, Italy, Switzerland and the UK). Participants were recruited to provide a range of experiences related to falls interventions (people who 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 anticipated benefits (e.g. physical, psychological, but rarely related to falls prevention), predispositions (e.g. past experience), and triggers (e.g. offer of transport). Factors which encouraged adherence to interventions were positive effects of the intervention and supporting factors (e.g. enjoyment). Factors which discouraged 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 parent/guardian carers 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 (e.g. adult-onset Huntington's Disease, teenagers without a health problem) and a sense of JHD as being different. Children with JHD and the parents 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 unhelpful support 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 health care 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: Relatively 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 focussing on two psychological constructs previously identified as key predictors of effective contraceptive use (Brown, Hurst & Arden, 2005).

Methods: Participants ($N=207$ 14- to 19-year-olds) completed baseline measures of their contraceptive behaviour within the last six months, alongside measures from the theory of planned 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 contraceptive use including intentions to use it [$F(8,196)=8.23$, $p<.001$]. Further analyses suggest that it is anticipated regret rather than self-efficacy that plays a significant role in increasing intention to use contraceptives [$F(8,198)=1.98$, $p=0.05$].

Discussion: These results indicate that anticipated regret may be an important psychological construct to incorporate when developing 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 when applied to predicting contraceptive use (cf. Caron, Godin, Otis & Lambert, 2004).

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

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

Background: Taylor, Klein, Lewis, Grunewald, Gurung and Updegraff (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.

Method:

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

Participants: 40 students from the University of Teesside 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: A hybrid sample of items was generated containing both naturalistic items (collected during a series of 11 semi-structured interviews) and items derived from the literature. Literature based items were based on both the Taylor *et al.* paper and a wider literature review. The final Q-set comprised 61 statements.

Analyses: Principal 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 corresponded with fight, flight, 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 ($\chi^2=8.26$, $p<0.01$).

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 behaviour, pain).

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

R. COOKE, Aston University & D. 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 and/or behaviour. 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 ($r+=0.40$), and between perceived behavioural control (PBC) and intentions ($r+=0.41$). There was 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 are advised to attempt to modify attitudes to screening to increase screening intentions. Intentions were a stronger predictor of attendance behaviour than PBC, suggesting that motivation to attend a screening is more important than perceptions of control over attendance. The results of this study are discussed in the context of increasing screening uptake.

Participation in a food allergy online support group: A qualitative exploration of motives and outcomes

N.S. COULSON & R. KNIBB, University of Derby.

Background: Food allergy has been shown to severely affect quality of life of adults and children (Avery *et al.*, 2003; Sicherer *et al.*, 2001), however, specialist health service provision for food allergy is lacking (Eaton, 2004). Sufferers are, therefore, turning to support groups for help and information. The objective of this study was to explore the motivations, advantages and disadvantages of participation in a computer-mediated support network for individuals coping with food allergies and to explore the impact of participation on interaction with health care providers.

Methods: A moderated computer-mediated support group for individuals coping with food allergies was identified. The senior moderator posted a 'news' item to group members that included a brief overview of the research and an invitation to participate in a semi-structured web-based interview. In total, 27 group members participated and responses were subjected to a thematic analysis.

Findings: Social support was found to be the primary motive for group participation, notably informational, emotional and network support. Through participation respondents indicated a number of benefits which can be broadly described as: (1) social support and information retrieval; (2) disclosure; (3) accessibility; and (4) coping strategies. Any disadvantages identified revolved around the accuracy and trust in posted information. In terms of the impact of group participation on interaction with healthcare providers, participants generally identified the most important benefit as being empowerment through decision-making and this was received positively in most, though not all, cases.

Discussion: It was evident from the responses that the computer-mediated support group fulfilled a number of patient needs and was of benefit particularly for their own sense of empowerment. However, there remains a need to review and assess the quality of information disseminated through such groups, as well as evaluating the impact of participation on patterns of health care.

Predictors of subjective health in an older heart failure (HF) sample

A.D.M. DAVIES, L. LOFTUS, D. KING, V. LUDGATE, E. RODRIGUES & B. STEPHENS, University of Liverpool and MerseyCare NHS Trust.

Background: A single rating of self-assessed overall health (SAH) (very good to very poor) has been used to summarise how the patients perceive their health status and is reported to predict clinical outcomes and mortality in a wide range of diseases (Fayers & Sprangers, 2002). This study aims to identify predictors of subjective health in older patients suffering HF.

Design: Phase 1 cross-sectional correlational data from a two-phase longitudinal study.

Methods:

Participants: 163 non-dementing HF heart failure patients (mean age, 75.5 years, SD, 7.25, range 56 to 93 years, 65 per cent males).

Measures: Illness variables (NYHA class and fatigue); cognitive status (MMSE) and social relationships (social support and social isolation).

Findings: 30 per cent of patients rated their health as 'poor' or 'very poor' and 58 per cent as 'average'. Unexpectedly, advanced age was associated with better-perceived health ($p<0.001$). No gender differences were found. Multiple regression analyses indicated that 'fatigue' and 'NYHA class' (as markers of disease severity)

explained 42 per cent of the variance in subjective health. Social isolation accounted for a further seven per cent of unique variance. Objective measures of HF severity (LVEF, FEV1 and FVC) did not add significantly once fatigue and NYHA class were entered. Importantly mental status as measured by the MMSE did not contribute independently 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 to exercise therapy

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

Background: Patients in a trial of therapy for vestibular-related dizziness were required to make a written implementation intention. The therapy involved carrying out home-based exercises twice a day for a period of 12 weeks. Participants were asked to choose and record in their therapy booklet two times that they would carry out the exercises.

Method: Out of the 163 participants taking part in the trial, 132 participants (mean age 62 ranging from 23 to 91 years) returned their therapy booklets. These participants were categorised into three groups, those that made a specific time plan (e.g. 8.00am and 6.00pm) ($N=50$), those that made a vague plan (e.g. AM or PM) ($N=14$), and those that made no plan ($N=76$). Participants' Theory of Planned Behaviour (TPB) beliefs were assessed pre- and post-therapy on a seven-point bipolar scale (-3 to +3) 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. ABERNETHY, C. HENRY & F. SUTHERLAND, Glasgow Caledonian University.

Findings on time perspective are intriguing. A future time perspective has been associated with decreased psychopathology and positively associated with health-promoting behaviours.

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 Subjective Happiness Scale and the Mindful 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 ($t=5.04$, $p=0.000$) and more mindfulness (full engagement in a situation) ($t=2.63$, $p=0.01$).

Surprisingly participants subjective happiness scores did not alter significantly across exercise levels ($F(2,257)=0.787$, $p=0.456$). Frequent exercisers showed a predominance of future orientation in line with other studies on health-promoting behaviours and time perspective. Interpretation of results will focus on possible reasons for low BTP, why engagement in exercise was not related to happiness and consideration of whether techniques to promote BTP for health management are really viable.

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 20 to 39, 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. Most felt their 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 has identified reasons why women choose a particular mode of delivery and highlighted 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. FERGUSON, J. WARD, H.J. CASSADAY, University of Nottingham & J. 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 non-toxic odours. The former reflects a direct physiological challenge, whilst the latter can involve psychological and physiological processes. We further tested whether the effects of odour on symptom reporting were dependent on participants' awareness of odour.

Method: 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 screened 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 atmosphere 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. However, 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 effect was not influenced by individual differences and there were no significant effects on IL-6.

Conclusions: The results indicate that an everyday odour at a low concentration can influence 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, University of Queensland, B. McAVOY, National Cancer Control Initiative, Australia, K. LUXFORD, National Breast Cancer Centre, Australia, N. RANKIN, Cancer Institute NSW, Australia, on behalf of the Clinical Practice Guidelines for the Psychosocial Care of Adults with Cancer Implementation Steering Group.

Background: While psychosocial issues associated with a cancer diagnosis are widely recognised, there are few resources available that provide clinicians with a comprehensive overview of 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 approved by Australia's 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 all health professionals who work with cancer patients and their families and predominately cover evidence relating to the most commonly occurring cancers in Australia. The guidelines provide recommendations about the psychological, physical and practical aspects of cancer.

Discussion: The guidelines are the world's first evidence-based recommendations to assist 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 & M. HAY, Monash University, Australia.

Background: Breast cancer-related lymphoedema is a debilitating condition affecting between 10 and 44 per cent of breast cancer patients. 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 well-being, social and family well-being, emotional well-being, functional well-being, additional concerns relating to breast cancer and arm morbidity.

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 than women 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.

Self-management and cancer

C. FOSTER, J. HOPKINSON, H. HILL & D. WRIGHT, University of Southampton.

Background: The aim of this systematic review is to investigate self-management of people affected by cancer. There is clear interest in and emphasis on patient self-management in the UK. New policy from the Department of Health is encouraging a move towards partnership between health professionals and patients evidenced by the piloting of the Expert Patient Programme for patients living with chronic conditions. The central message of this Programme is that having an active role in managing one's own chronic condition enhances quality of life.

Methods: Searches were conducted using BIDS, BNI, Cancer.gov, CINAHL, Medline, Psychinfo, and Web of Science. Papers were selected on the basis of pre-defined eligibility criteria and rated by three independent coders. Key information was extracted to data sheets.

Findings: 37 studies met the eligibility criteria. Three studies were conducted in the UK. Most studies included heterogeneous groups of patients: at various stages, with different cancers and broad age groups. Within this body of work self-management is poorly defined and few studies specifically explored what patients do to help themselves, what enables patients to act for themselves, and how this can be supported.

Discussion: There is currently insufficient evidence to determine how to support self-management of people affected by cancer. Further work is needed to establish a strong evidence base informed by appropriate theory. Findings from this review are clearly of relevance to health psychology.

Impact of predictive genetic testing for BRCA1/2 in a clinical cohort: Three years on

C. FOSTER, University of Southampton, M. WATSON, The Institute of Cancer Research, R. EELES, D. ECCLES, S. ASHLEY, Royal Marsden NHS Trust, R. DAVIDSON, Princess Ann Hospital, J. MACKAY, Institute of Child Health, P.J. MORRISON, Belfast City Hospital, P. HOPWOOD, Christie Hospital & D.G.R. EVANS, St Mary's Hospital, Manchester.

Background: This prospective multi-centre UK study assesses 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 following the test result. 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. Eighty-nine 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 five 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 levels of 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 no longer term negative impact on mental health. However, there is a need to clarify risk management among female non-carriers and reasons for insurance difficulties. Experiences of individuals tested for BRCA1/2 are clearly of relevance to health psychology.

A pilot of cognitive behavioural therapy (CBT) for female urinary incontinence

A.E.K. GARLEY, Lancashire Care NHS Trust & J. UNWIN, Lancashire Teaching Hospitals NHS Trust.

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 were based on cognitive behavioural therapy (CBT).

Methods: Adopting a case series design, 10 participants attended individual sessions – baseline (four sessions), treatment (manualised CBT, five sessions) and follow-up (four sessions).

Weekly self-report ratings of episodes of enuresis were taken. The Hospital Anxiety and Depression 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 was maintained at 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. The 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?

C. GILBERT, University College London/Pfizer Ltd., M. JACKSON, Canterbury and Coastal PCT, A. HAREENDRAN, Pfizer Ltd., A. JOHNSON, Kent and Canterbury Hospital & S. NEWMAN, University College London.

Background: Physiological measures of disease status often have only weak to moderate correlations with patient reported levels of health status in COPD. Individuals with mild dysfunction in lung physiology sometimes have significant impairment in their health status, and vice versa. This research explores how individual's experience and adapt to 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 issues 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 has on people's lives 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 adaptation to COPD can help to explain the lack of strength in the relationship between lung function and health status. Understanding personal responses to COPD 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 may reflect unrealistic beliefs about the effect of food on the body. Based on research relating obsessive-compulsive behaviour and eating disorders to 'magical thinking' (MT), and variants of MT like 'thought-shape fusion' (e.g. Shafran & Robinson, 2004), it was hypothesised that there is a significant association between MT, dieting behaviour, and beliefs about food between the ages of 12 and 15.

Methods: 319 schoolchildren from the North of England aged 12 to 15 completed a series of measures including a measure of MT specifically designed for children and adolescents (the Magical Thinking Scale; Bolton *et al.*, 2002), 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: It appears that 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. HAEFELI, 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 adopted 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 initial findings were used to inform the development of an interview schedule for use in Phase 2, involving in-depth interviews conducted with 283 Directors, H&S Managers and workers' reps from 129 organisations. The focus groups and interviews were recorded, transcribed and subjected to thematic analysis. The majority of respondents reported that neither they, nor their organisations, were aware of how much work-related injury or illness was costing. Most organisations had never assessed these costs and many felt that they would not benefit from doing so. Respondents reported that other factors are often considered to be more influential in motivating managers to invest in health and safety, including: moral obligations to staff, legal implications and impact on company reputation. The findings suggest that wider health and safety concerns, in addition to cost, should also be considered when trying to motivate organisations to manage health and safety risks.

Physical self-esteem in exercise and dieting behaviour

M.S. HAGGER, University of Essex.

Background: This presentation will report on a series of recent studies examining the structure of self-esteem in physical contexts and the effects of

physical self-esteem on exercise and dieting behaviours. A multidimensional, hierarchical model of self-esteem is presented in which global self-esteem is positioned at the apex of the hierarchy, with physical self-esteem at the domain level and four competence-related constructs at the subdomain level: physical conditioning, body attractiveness, physical strength, and sport competence. It was expected that this model of self-esteem would be replicable and generalisable across age groups and cultures, and physical self-esteem would have a significant influence on behaviours that maintain energy balance, namely, exercise and dieting.

Methods: A series of six studies examined the structure of physical self-esteem in samples from five different countries ($N=6588$) and a subset of this sample completed self-report measures of exercise and dieting behaviour.

Results: Preliminary analyses supported proposed model of physical self-esteem in young people and adults from different cultures (Studies 1, 2 and 3). There was also evidence for gender differences in physical self-esteem 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 multidimensional, hierarchical approach 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

S.C. HALE, S. GROGAN & S. WILLOTT, Staffordshire University.

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.

An awareness of the factors that influence men when making 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, transcribed and analysed using Interpretational Phenomenological Analysis.

Findings: This analysis identified a number of factors that influenced men's decision 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 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

A. HANBURY, Wolverhampton City Primary Care Trust, L. WALLACE, Health Services Research Centre, University of Coventry, M. CLARK, Wolverhampton City Primary Care Trust & D. CUSHWAY, University of Coventry.

Background: Adherence of health professionals to clinical guidelines is variable. 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 predictor/s of adherence ($N=50$). A tailored intervention consisting of small group interactive educational sessions was developed and delivered ($N=50$). The questionnaire was re-administered and 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. The model accounted 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. Further data will be reported comparing before and after questionnaire scores and audit adherence data.

Discussion: A TPB-based 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 guideline 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 a comprehensive understanding, despite having received school-based sex education (SBSE). This study assessed the learning outcomes of a SBSE 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 seven months after SBSE). Knowledge scores were assigned to children's interview responses using 18 measures developed by the investigator.

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 ($N=75$, mean age 10.79 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. It is suggested that 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: Two studies tested a key hypothesis of Leventhal *et al.*'s (1980) common-sense model of illness representation that exposing individuals to external sources of information about an illness results 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 2 x 2 mixed model ANOVA (prime condition by attentional bias for each word list) with repeated measures on the second factor was performed for both studies. **Findings:** Analysis of Study 1 revealed a significant interaction between the prime and attentional bias for cold related words ($F(1,86)=4.66$, $p<0.05$, $ETA2=0.05$), with a significant main effect of the prime ($F(1,86)=7.70$, $p=0.05$, $ETA2=0.08$). 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 ($F(1,69)=7.789$, $p<0.05$, $ETA2=0.10$), with both prime 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 receiving a specific illness prime incurred a response bias for words related to that specific illness, but not for other illness-related words. In both studies the attentional bias scores 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 Leventhal *et al.*'s theory.

Positive psychological processes following illness

S. JOSEPH, University of Warwick.

Background: In recent years there has been a surge of interest in positive psychological approaches to understanding trauma and adversity. Various terms have been coined to describe the positive changes people often report, e.g. stress-related growth, benefit finding, and post-traumatic growth. Health psychologists have begun to recognise the theoretical and clinical potential of this new 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 will be 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 that for some patients there are widespread positive changes in their outlook on life. Research studies are consistent in documenting positive changes following a wide variety of illness and health-related conditions. Studies, using qualitative and quantitative methods, have shown growth in people with chronic and life-threatening illnesses (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 facilitation of growth and benefit finding in patients, 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)

C. KARAMANIDOU, J. WEINMAN, King's College London & D. MACLEAN, Renal Pharmacy, Guy's Hospital, Guy's & St. Thomas' NHS Trust, London.

Background: The incidence of non-adherence is a major treatment problem in ESRD particularly for 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 efficacy 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 at least six 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, patients' beliefs about 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 for both groups.

Results: Preliminary results show a significant increase in knowledge, belief of phosphate-binding medication efficacy as well as a reduction of concerns about this type of medication in the intervention group.

Conclusions: The findings 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 the study was to test whether a health check augmented with a leaflet drawing upon research into the theory of planned behaviour (TPB) (Ajzen, 1991) and implementation intentions (Gollwitzer, 1993) could 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 using TPB-specified constructs. Intervention participants undertook a health check, received a leaflet that included TPB-derived persuasive messages, and were asked to form implementation intentions regarding exercising. All participants completed a follow-up questionnaire measuring self-reported behaviour four weeks later. ANCOVA was used to test for between-group differences.

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 , respectively; $d=0.96$). TPB-specified cognitions 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 exercise behaviour change. The 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: Food allergy has been shown to severely affect quality of life in allergic children and their families (Avery *et al.*, 2003; Sicherer *et al.*, 2001), however, health service provision to support these 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 only one of this type run in this country. 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, and at three months and six months follow up. All children attending ($N=24$) part and completed food allergy specific questionnaires, a generic quality of life questionnaire (PedsQLTM), 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 LOC scores over time, indicating that children were more ready to adopt adaptive health-related behaviours as time progressed ($p>0.05$). 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 has been 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 five per cent 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; Sicherer *et al.*, 2001). However, these studies have used proxy ratings, inappropriate comparison groups, or non-validated QoL measures. This study aimed to assess QoL of children with FA (FA children) 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 ($N=16/N=11$), were asked to take photographs and keep a diary 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 ($p<0.5$) in the *health* and *food/drink* domains, particularly reflecting concerns about food labelling. FA children took significantly more *health*-related photographs but fewer *leisure* photographs than control children ($p<0.5$). There was a great degree 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

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 behaviours – in essence the intention-behaviour correlation may reflect a methodological confound. The psychometric literature on cuing and serial order effects supports this argument. To date there is no experimental data that directly tests this hypothesis. The current study is designed to assess it 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 in terms of frequency and recency. Half the participants reported their intentions first followed by their past behaviours and for the other half this was reversed. Two months later, 53 per cent reported how often they had performed each of the behaviours in the intervening period.

Findings: These data were analysed cross-sectionally and longitudinally using moderated hierarchical regression analysis. The results showed that question order moderated the intentions-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.R.C. McEACHAN, R.J. LAWTON & M. CONNER, University of Leeds.

Background: A 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 relatively unexplored. Although existing research classifies behaviours based on frequency of engagement this approach ignores the 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 health promotion specialists, 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 three expert judges. 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. motivational, affective, and knowledge dimensions), and more objective perceptions (e.g. likelihood, severity and valence of consequences, social impact, frequency and approach/avoidance dimensions).

Conclusions: This study is the first to provide a comprehensive taxonomy of ways in which individuals perceive health-related 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 per cent. Despite this, adherence to colorectal cancer screening is poor and cost-effective methods of promoting uptake are urgently required. People are more likely to engage in disease detection behaviours, such as screening, if the costs of not doing a particular behaviour are emphasised, as opposed to the gains. However, colorectal cancer screening can both detect and prevent cancer, and the relative advantages of gain vs. loss-framing depend on whether people see screening as preventing a health problem or detecting one (Rivers *et al.*, 2005).

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

Method: 390 people, aged 60 to 64, were invited for flexible 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

V. MORRISON, J. SOULSBY, M. DOODY, J.M.J. WILLIAMS, M. GILLEECE, R. WILLIAMS, H. TAPPING, H. PARRY & N. STUART, University of Wales Bangor/NWW NHS Trust, Bangor.

Background: Emotional reactions to cancer diagnosis, to subsequent disease and to treatment are commonly highly emotional, yet, as highlighted by an Expert Group of European partners in cancer care (2004) little is known about the psychological processes which maintain emotional distress and negatively impact upon patient QoL. A ruminative 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, levels of rumination, 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),

POMS-SF (fatigue, tension, vigour, anger, depression, confusion), RSQ (response styles- rumination, distraction), WHO5 (well-being), FACIT (cancer specific QoL- physical, social, emotional, functional), mini-MAC (coping-helplessness/hopelessness, anxious preoccupation, fighting spirit, cognitive avoidance, fatalism), demographics, illness and treatment history, and perceived stress.

Findings: Stage of treatment and age, but not gender, influenced coping, mood and QoL. In hierarchical regression significant variance in QoL was explained by perceived stress, depression, low vigour, and helplessness/hopelessness coping. Rumination effects were evident where rumination was entered consequent to stress appraisal and prior to emotions (adding 19 per cent).

Conclusion: Ruminative coping responses contribute significantly to poor QoL in cancer and haematology patients and offer a target for cognitive behavioural intervention with this population. A potential role for mindfulness-based CBT will be introduced.

Fit and healthy? The prevalence of eating disorder symptomatology in athlete and non-athlete populations

K. MOSES, Sheffield Hallam University & R. COOKE, Aston University.

Background: Little research has investigated the link between competitive sport and eating disorder symptomatology (EDS). The present study compared EDS in athlete and non-athlete populations and had two aims. First, to assess the impact of sport on EDS relative to other variables (gender, perceptions of sporting performance, self-esteem, personality). Second, to examine the possibility that endurance sports (swimming, running) which emphasise low body weight were associated with greater EDS compared to contact sports (rugby, football, ice-hockey) which emphasise muscle strength.

Methods: 200 athletes and 199 non-athletes completed the Eating Disorder Inventory-2 (EDI-2), Eysenck Personality Questionnaire (EPQ-R-A), Rosenberg Self-esteem Scale (RSE) and three perceptions of sporting performance measures; the Will to Win, Task, and Athlete Satisfaction Questionnaires (ASQ).

Findings: Multiple regression was conducted to test the impact of the predictors on EDS. The predictors explained 52 per cent of the variance in EDS, with significant betas for ASQ, sport, self-esteem, task, and will to win, with no significant effects for gender or personality. Further analyses demonstrated that athletes had lower self-esteem and ASQ scores. One-way ANOVA tested the relationship between sport type and EDS. Tukey tests demonstrated that endurance sport athletes reported higher levels of EDS relative to contact sport athletes, and non-athletes.

Discussion: Athletes appear to be at increased risk of developing eating disorders when compared to non-athletes. In particular, endurance athletes (who need to maintain low body weight for optimal performance) appear to be at the greatest risk. Thus, interventions are needed to reduce the risk of athletes developing eating disorders.

Exploring self-efficacy as a predictor of effective management of chronic illness at work

F. MUNIR, C. HASLAM, A. GRIFFITHS, H. LONG, S. LEKA & S. COX, University of Nottingham

This study explored self-efficacy (SE) as a predictor of disease management behaviours in 1467 employees. The theoretical basis of SE has recently been discussed as an element of disease management within health psychology and evidence suggests that aspects of self-managing for example, heart disease or arthritis, are associated with self-efficacy beliefs (Lorig *et al.*, 2001). Much of the research and intervention around SE and disease management has been within health care settings (e.g. Clark & Dodge, 1999). However, it is known that SE is shaped by the social environment such as the workplace and a significant proportion of adults managing chronic illness are of working age. Hence, this study examined factors associated with SE beliefs in managing illness at work and explored whether SE

predicted both disease and work management behaviours.

Employees from four organisations were sent a questionnaire irrespective of their health status. This allowed those employees managing a chronic illness but who had not told their employers, to complete the questionnaire confidentially. The questionnaire included measures on self-efficacy in managing symptoms and work performance, current self-management behaviours, outcome expectations and disclosing illness at work. Results suggest employees manage a range of illnesses at work including diabetes, asthma, depression and musculoskeletal pain. Self-efficacy was found to be a predictor of disease management at work and also predicted managing work tasks, disclosing illness and asking for work adjustment. The paper will discuss comparing self-efficacy by type of illness, occupation and work culture and the implications for workplace interventions.

Stress-induced eating in external eaters: Is there an attentional bias towards food words when stressed?

E.F. NEWMAN, D.B. O'CONNOR & M. CONNER, University of Leeds.

Background: External eaters are characterised by a tendency to eat in response to environmental eating cues rather than internal hunger signals, and are reported to increase intake under stress (Conner *et al.*, 1999). It has been proposed that certain stressors cause a shift in attention towards external information (Heatherton *et al.*, 1991), which could underlie food intake changes in individuals who eat in response to external information. Attentional biases for food stimuli have been demonstrated in eating-disordered individuals and restrained eaters (Faunce, 2002). External eaters have shown attentional biases for food words in a modified Stroop task (Johansson *et al.*, 2004); though research has not examined the influence of stress.

Methods: Independent groups of 32 high and 37 low external eaters were taken from a student sample. Both groups performed a computerised modified Stroop and dot probe task with food word stimuli as measures of attentional bias, in either a stressful or a control condition.

Findings: The low external eaters in the control condition showed the greatest bias for food words overall in the Stroop task; though an interaction emerged between stress and external eating for snack words specifically ($p < 0.05$), where high external eaters showed an increased bias when stressed, and low external eaters demonstrated the opposite pattern.

Discussion: These data may suggest a role for an attentional processing shift in understanding the relationship between stress and increased intake in external eaters, although it would be useful to also explore attentional biases for pictorial stimuli in high external eaters.

Written emotional disclosure and stress reactivity: Does it matter who you are or what you write?

D.B. O'CONNOR, L. ASHLEY & S. BELLERBY, University of Leeds.

Objectives: Writing about stressful or traumatic events has been found, in many studies, to have beneficial effects on health outcomes. However, the evidence has been inconsistent. Recent work has suggested individual differences variables such as alexithymia and/or the linguistic structure of disclosures may moderate the effects of the intervention.

Methods: 97 healthy men and women were randomised into either a written emotional expression group or a control group. The emotional disclosure group was instructed to write about the most stressful or upsetting experience of their life, for 15 minutes over three consecutive days. The control group wrote about non-emotional, non-stressful experiences over the same period. Two weeks later, systolic and diastolic blood pressure measures were taken in response to laboratory-based psychological stressors (e.g. delivering a presentation). Trait alexithymia was assessed at baseline. The linguistic structure of the disclosures was analysed using the Linguistic Inquiry Word Count package.

Results: Preliminary analyses revealed no significant main effects of condition on any of the cardiovascular outcomes two weeks later. However, in the disclosure group, a significant interaction ($p < 0.01$) was observed such that participants high on alexithymia who disclosed a larger number of positive emotions had greater systolic blood pressure stress reactivity compared to low alexithymics. The results of other multivariate and univariate analyses will also be presented. **Conclusions:** These preliminary results point to the importance of considering individual differences variables and the linguistic structure of the written disclosures when investigating the benefits or otherwise of writing interventions.

Symptoms as the product of a socially sanctioned pathway: The example of diet

J. OGDEN, University of Surrey.

Background: The concepts 'culture bound syndromes' and 'ethnic disorders' have been used to describe a series of 'folk illnesses' and problems that can seem inexplicable to modern medicine. Although providing a useful descriptive framework, these concepts do not provide any real insights into how such syndromes or symptoms arise and what social or psychological factors are necessary for their production.

Methods: A qualitative analysis of existing texts on eating behaviour to develop a new model of symptom experience.

Findings: The present paper presents a new model to explain why, when and where symptoms occur. This new model highlights how tensions relating to issues of conflict and control arise as an individual interfaces with their social world and that these tensions require communication. It is argued that culturally located meanings offer a socially sanctioned pathway, which if appraised as personally relevant by the individual will be adopted as the forum for communication.

Discussion: This model, with its socially sanctioned pathway at the core, is derived from an analysis of the literature on diet but is also offered as a means to understand, explain and even predict folk illnesses and medically unexplained symptoms.

Sexual activity, fertility and contraceptive use in middle-aged and older Australian men: The MATeS study

M. PITTS, La Trobe University, Australia, C. HOLDEN, Monash University, Melbourne, R. McLACHLAN, Prince Henry's Institute of Medical Research, Melbourne, R. CUMMING, University of Sydney, G. WITTERT, University of Adelaide, D.J. HANDELMAN, University of Sydney & D. DE KRETZER, Monash University, Melbourne.

Background: Men continue to remain sexually active in their later years. The aim of the Men in Australia, Telephone Survey (MATeS) was to explore sexual activity, fertility and contraceptive practice in a representative population of Australian men aged 40 and over.

Methods: A representative sample ($N=5990$) of Australian men (40 years and older) was obtained by contacting a random selection of households with unbiased sampling stratified by age and State, achieving a response rate of 78.5 per cent. A computer-assisted telephone interview was administered to explore reproductive health and related knowledge and beliefs, general health, relationship issues, fertility and contraceptive use.

Results: The majority of men reported having sexual activity in the last 12 months (age-standardised proportion, 77.2 per cent). The proportion of men having sexual activity was lower in older age groups but 36 per cent of men aged 70+ reported continuing sexual activity. An age-standardised proportion of 12.1 per cent men had never fathered children, of whom about a third still desired fatherhood. Two-thirds of men had used condoms, but 41.4 per cent of those aged over 40 years, having casual sexual relationships, choose not to use condoms. An age-standardised vasectomy rate of 25 per cent was reported with 5.6 per cent of vasectomised men having no children. Although 9.2 per cent of vasectomised men regretted having the original procedure, only 1.4 per cent had had surgical reversal.

Discussion: Understanding men's knowledge and concerns about sexuality, fertility and contraception is important to direct 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, Doctor of Clinical Psychology Training Course, College Lane, Hatfield, N. COHN, St. Andrews Centre for Plastic Surgery and Burns, Broomfield Hospital, Chelmsford, Essex & A.M. POSSAMAI, Child and 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 burn 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 (SWAP), the Beck Depression Inventory-II (BDI-II), and the Youth Quality of Life Questionnaire (YQOL). The school sample completed all questionnaires with the exception of the SWAP. 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 statistical significance. 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 disease feel more confident advising patients about physical issues than psychosocial issues. The purpose of this study was to learn from members of a New Zealand burns care team of their perceived skills in advising patients on both physical and psychosocial issues. A questionnaire developed in the UK with specialist nurses working in burns or head and neck cancer was used.

Method: In this cross sectional study, 55 health care professionals (members of the burns care team at a hospital in South Auckland, New Zealand) completed a self-report questionnaire. The questionnaire comprised 19 items covering a range of physical and psychosocial issues and participants were asked to rate their perceived skill in advising burns patients about these topics.

Findings: Analysis using ANOVA demonstrated that the participants felt more skilled in advising patients about aspects of physical rehabilitation compared to psychosocial rehabilitation.

Discussion: Differences in perception of skills about advising patients on physical and psychosocial issues are discussed and the New Zealand finding are compared to the UK findings. Potential implications and suggestions for future training input are also explored.

Meanings of art-making in later life: An interpretative phenomenological study

F. REYNOLDS, Brunel University.

Background: This study explored older people's motives for taking up or intensifying involvement in visual art-making following retirement. There is little prior research into older people's creative occupations.

Method: The research followed principles of interpretative phenomenological analysis (IPA). Twelve participants were interviewed, two men and 10 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 professional artists since retirement from work. Participants were skilled in various arts media including oil and watercolour painting, pottery, and textiles. The 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 meanings and creative influences in their artwork, focusing on four pieces that had personal significance.

Results: IPA revealed that art-making enhanced perceived control over daily life and health, promoting confidence and self-esteem. Art provided challenge, widened horizons, 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.

Conclusions: Participants regarded their later life as an opportunity for continuing personal growth, creativity, and challenge. The study contributes to a growing literature on healthy ageing.

The impact of risk information on knowledge and optimistic bias

K.A. ROBB, A. MILES, J. WARDLE, University College London, J.L. CAMPBELL & 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 whether giving simple 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 risk factor information ($N=1053$) or to a control group (no information, $N=1056$). The risk information was a leaflet using simple sentences and graphs to describe the main risk factors. A questionnaire assessing knowledge, perceived risk, demographics, and 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 (4.9 vs. 8.4, $p<0.001$). There was no overall effect of risk information on mean perceived risk score, but the information group 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 risk perceptions. Future research should examine cognitive processes that link general health knowledge with perceived vulnerability.

Illness and symptom attributions in multiple- and single-gene 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 peoples' attributions reflects the objective genetic status of their condition. Changes in patient's and their carer's attributions with single-gene (L-thalassaemia and Becker's dystrophy) and multiple-gene disorders (Coeliac and Psoriasis) were compared.

Methods: A prospective design was used with 40 single-gene and 80 multiple-gene patients and their carers. 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-gene patient and carer groups cited more attributes as causes for disease and symptoms. In both genetic conditions and for both patients and carers, environmental and mystical factors were cited less as a cause for symptoms over time whilst psychosocial factors were cited more in the multiple-gene patient and carer groups and less for the corresponding single-gene groups.

For the patient groups, there were no changes over time in the factors for disease whilst the carers, cited more psychosocial factors over time whilst lifestyle was mentioned more by the carers for multiple-gene conditions and less for those of single-gene conditions.

Conclusions: Both patients and carers attributions reflect the genetic basis of their disorder, as those with multiple-genetic 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. SNIHOTTA, University of Aberdeen & U. SCHOLZ, Freie Universitaet 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 programme. 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 formed action plans and coping plans. Participants in the PDG additionally received six-weekly self-monitoring logbooks 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 ($\eta^2=0.05$, $p<0.05$). 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 controls at Time 3, participants in the PDG maintained higher levels of exercise over Time 4 ($\eta^2=0.05$, $p<0.01$) and Time 5 ($\eta^2=0.05$, $p<0.05$). Likewise, changes in action planning, 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. MARTEAU, 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 themes.

Findings: Beliefs could be categorised into three themes: Beliefs about effectiveness, ineffectiveness, and undesirable aspects of one-to-one and group support. Beliefs about the effectiveness included: Moral support, information, and social pressure to quit. Beliefs about the ineffectiveness comprised: they entail much talking but no problem solving, and counselling is useless because willpower is the core ingredient in stopping. Undesirable aspects mentioned included: Using support is being weak-willed, and for group support, smokers varied between anticipating feeling annoyed and feeling intimidated by the other smokers.

Discussion: Smokers hold two sets of negative beliefs about smoking cessation products and services that may prevent their use: they are ineffective, and they are 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 that are key to the governments' plans to reduce premature deaths and health inequalities.

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

L.M. WALLACE, L. EARLL, J. COOKE & L. HIGBED.

Research on evidence into practice is largely atheoretical. Research on the implementation of management training has often shown initial learning and good intentions are not maintained once the manager returns to work. This study reports on the role that psychological theory can add to refining prediction of which staff will utilise learning effectively. Patient safety is a key component of clinical governance in the NHS, and of worldwide concern. Systematic and comprehensive 'no fault' investigation of patient safety incidents is essential to remediation and prevention. The skills required of staff are complex, and implementation may be influenced by personal values and organisational culture. The National Patient Safety Agency is training staff in all 607 NHS trusts in England and Wales in Root Cause Analysis, a method of investigating and learning from patient safety incidents. The training includes workshops over three days, web-based resources, and networking with peers. Evaluation of the training includes questionnaires administered two time periods after training. This study uses both cross sectional data from two independent samples at time 1 (at the end of the course; $N=600$ staff) and at six months after the course ($N=1000$). Of these, 500 staff are assessed at both time periods in a longitudinal design. These samples are selected via purposive stratified sampling (by region, trust type) from 5320 attendees. Measures are knowledge items, and psychological variables of the theory of planned behaviour, as well as contextual constraints (such as resources and organisational barriers). Multiple regression is used to determine the contributions of knowledge level, anticipated barriers/ context, and TPB variables assessed at the end of the course on reported behaviour six months after the course. Implications are drawn out for training practice, and for using TPB to improve targeting of additional supportive interventions once staff have returned to work.

Shiftwork, stress and health: The moderating effects of morningness-eveningness and shift type

T.A. WILLIS, D.B. O'CONNOR & L. SMITH, University of Leeds.

Background: Shiftwork has been linked to health difficulties, including cardiovascular and gastrointestinal problems. One's level of morningness-eveningness is considered important, with evening-types believed to find it easier to adjust to the disruption that shiftwork entails. However,

little research has investigated the influence of shift type (e.g. early/night) and morningness-eveningness when measuring levels of stress and shiftworkers.

Methods: 285 police staff completed a questionnaire including the job strain and effort-reward imbalance models, as well as the Composite Scale of Morningness. They also provided information concerning general health, affect and stress prior to working three different shift types. A second, prospective questionnaire was completed two months later, collecting information on burnout, work-family conflict, and job satisfaction.

Findings: Multiple regression analyses demonstrated the job strain and ERI models to be significant predictors of affect, burnout and general health. In addition, significant interactions were found between shift type (day, afternoon and night) and morning/evening typology. Evening-types reported greater negative affect and stress, and reduced positive affect and vigour prior to the day shift. Morning-types showed the reverse: their mood deteriorated with later starting shifts.

Discussion: These findings suggest that individual differences variables such as morningness-eveningness, moderate the impact of shift work on general well-being. In addition, they indicate that workplace interventions to ameliorate shiftwork stress should be tailored to individuals and shift type.

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

A.J. WRIGHT, J. WEINMAN & T.M. MARTEAU, King's College London, P. AVEYARD & K. BROWN, University of Oxford.

Background: One of the first applications of the Human Genome Project is using genotyping to tailor smoking cessation therapies. This descriptive study explores the potential impact of such tailoring by examining whether attributing smoking to genes is associated with reduced self-efficacy (SE) and quitting behaviour.

Design: Prospective longitudinal study.

Participants: 591 smokers, participating in a trial of NRT-assisted smoking cessation. Smokers knew they had been genotyped for mutations related to smoking behaviour, but were not informed of the results.

Measures: SE and attributions for smoking assessed pre-quit; seven-day abstinence four weeks post-quit.

Analyses: Total and situation-specific SE in smokers who did/did not believe genes were a cause of their smoking was compared using ANCOVA/MANCOVA. Whether SE mediated the impact upon quitting of perceiving genes as a cause of smoking was examined using regression.

Findings: Preliminary analyses suggest that 205 smokers (34.7 per cent) rated genetic factors as completely unimportant causes of their smoking. This group had higher SE, in terms of total score ($F(1,490)=3.42, p<0.07$), SE for managing habit/cravings ($F(1,489)=4.67, p<0.05$) and SE for managing positive affect ($F(1,489)=4.99, p<0.05$). The two groups did not differ in SE for managing negative affect ($F(1,489)=0.02, ns$). Perceiving genes as a cause of one's smoking was associated with a lower probability of quitting ($\text{Exp}(B)=0.61, p<0.05$). Neither total SE nor any of the situation-specific SE subscales were associated with quitting, so mediation was not demonstrated.

Discussion: Perceiving smoking to be caused by genetic factors was associated with lower levels of SE and lower quit rates. This may be problematic for genotype-tailored cessation interventions.

POSTERS

The prevalence of comorbid depression in South Asian adults with diabetes: A systematic review of the literature

S. ALI, K. KHUNTI, M. STONE, C. SKINNER & M. DAVIES, University of Leicester.

Background: Studies have shown that depression with diabetes impacts negatively on diabetes management and quality of life. Pharmacological and psychotherapeutic interventions for managing

depression may alter outcomes related to glucose control in these patients. South Asians have an increased risk of Type 2 diabetes, also the prevalence of poor glycaemic control, microalbuminuria, hypertension, retinopathy and heart disease have been shown to be higher in this group compared to White Europeans.

Aim: To review the literature examining the prevalence of comorbid depression and diabetes in South Asians, as well as associations with glycaemic control and diabetes related outcomes.

Method: Medline, EMBASE and PsycINFO databases were searched using MeSH terms, free text and key authors to identify all studies examining the relationship between depression and Type 2 diabetes.

Results: The prevalence of depression in patients with Type 2 is higher compared with individuals without diabetes. Higher risks were observed in female, less educated, lower income and younger age groups. However, the majority studied white samples and few examined race or ethnicity as a contributing factor. Not one examined the incidence of depression or depressive symptoms in South Asians. Hyperglycaemia and diabetes complications were significantly associated with depression in patients with diabetes. However there were no attempts to examine whether outcomes associated with depression are also observed in south Asians with diabetes.

Conclusion: There is an important gap in our understanding of 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

Validation of the Person-Environment Stress Tool (PEST)

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

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 and stress-related 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.

Method:

Design: Cross-sectional self-report questionnaire.

Participants: 200 adults working in a range of blue and white collar occupations (e.g. bricklayers, civil servants).

Measures:

1. The PEST includes:
 - a. two risk assessments of stress (working environment and home environment)
 - b. lifestyle questionnaire
 - c. Stress Symptom Scale (SSS).
2. The Hospital Anxiety and Depression Scale (HADS; Zigmond & Snaith, 1983).

Analyses: Pearson's correlations and regressions.

Results: Preliminary analyses provided evidence of the convergent validity of the SSS. 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 risk assessment of the working environment measure. Further analyses suggest that personal factors play an important role in how work and non-work stressors are perceived.

Discussion: A valid stress 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 (Fletcher, 2004) to an individual's stress levels.

Expressive writing and psychological health: The moderating influence of alexithymia

L. ASHLEY, D.B. O'CONNOR & F. JONES, University of Leeds.

Background: A number of studies have found expressive writing to produce salutary health

effects. However, the literature is equivocal, suggesting that individual differences variables may moderate the effects of emotional writing. **Methods:** 97 healthy male and female undergraduates were randomly assigned to write about either their most stressful and traumatic experiences or trivial topics, for 15 minutes on each of three consecutive days. Alexithymia was assessed at baseline. Psychological health was assessed via the GHQ-28 both at baseline and two weeks after the intervention. The writing of the emotional group was also analysed using the Linguistic Inquiry and Word Count programme. **Findings:** Preliminary analyses revealed no main effect of writing condition or alexithymia on psychological health. However, a significant writing condition X 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 findings of the linguistic analyses of the expressive essays will also be presented. **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 inter-professional working (Agenda for Change, 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 longitudinal survey design was used to assess the impact of the course on $N=109$ attendees. Questionnaires were administered immediately after the course (time 1), three months on (time 2) and at six months on (time 3). Telephone interviews were also conducted with team members and managers at six months post-course to gain a secondary perspective of team functioning.

Findings: Understanding of self and team members strengths and weaknesses 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 this effect 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 ($t(53)=2.08$, $p < 0.05$). Combined results suggest that the teambuilding programme led to a slight improvement in team working at three months but this had disappeared at six months.

Discussion: The design does not preclude there being other factors than skills learnt on the course affecting outcomes. 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 between three 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 uptake. An assessment of attitudes and cognitions surrounding EC is essential to improving uptake. **Methods:** Two single-sex focus groups ($N=15$ in each) with teenagers aged 13 to 14 were conducted in school time to identify the beliefs of male and female teenagers about EC use. These focus groups followed a theory of planned behaviour-based schedule.

Findings: Attitude (A) was shown to be salient, with teenagers considering EC to be a worthwhile measure to avoid teenage parenthood and an effective measure to prevent pregnancy. Social Norm (SN) was shown to be salient, with several statements showing both peer pressure and judgement by health professionals as difficult issues to deal with. Girls were also concerned about confidentiality. However, motivation to comply with negative pressure was low. Boys were aware of the difficulty in supporting their girlfriends without forcing their own agenda. Perceived behavioural control (PBC) was shown to be salient, with girls reporting high self efficacy in accessing EC, and the ability to overcome external barriers

Discussion: Teenagers noted anticipated problems in accessing EC, but felt the negative consequences of parenthood would be far more important factors in their decision. The TPB was found to be sufficient framework within which attitudes around EC use can be investigated.

Challenges and rewards for community pharmacists undertaking medication reviews with older adults – a qualitative analysis using interpretative phenomenological analysis (IPA)

D.L. BIGGERSTAFF, University of Warwick & C. LINDSAY, Solihull Primary Care Trust.

Background: Ageing can lead to drug metabolism problems with increased risk for side-effects (estimated five to 17 per cent of older adults' hospital admissions). Older people are more likely to have co-existing medical conditions and be prescribed several medications. Medication use is a major contributory risk factor for falls – a leading factor for disability and mortality in older adults. Falls, an identified target area for improvement, have an adverse affect on people's psychological and physical health (Gillespie, 2004; DoH, 2001).

Methods: Results were obtained from in-depth interviews with community pharmacists, a partnership initiative between University of Warwick and Solihull Primary Care Trust (PCT). Pharmacists had previously completed 58 medication reviews. In-depth interviews were conducted with pharmacists (three women, two men). Transcripts were analysed for themes and categories identified from the data using IPA. Tensions and contradictions in the data were explored.

Findings & Discussion: Pharmacists reported increased professional and personal reward in reviewing medication. Reviews were perceived as challenging, especially for time-allocation and locum cover. Pharmacists reported greater sense of job satisfaction in their clients' expressed need for discussion of medication use. A related theme was their sense of enjoyable social engagement with patients in the community. Doubts were expressed about whether general practitioners acted on their medication reviews with instances of insufficient feedback. Pharmacists felt professionally isolated from primary health care delivery. Participants welcomed their enhanced role in health care and valued increased patient contact. This study illustrates the potential for health psychology's greater involvement in community pharmacy, to promote dialogue regarding doctor/pharmacist/patient co-operation. It also illustrates the value of a specific rigorous qualitative methodology (IPA).

Why do people (re)turn to complementary medicine? Abstract beliefs and concrete experiences

F.L. BISHOP, L. YARDLEY, University of Southampton & G. LEWITH, Aldermoor Health Centre.

Background: The aim was to investigate the predictors of ongoing use of and adherence to

complementary and alternative medicine (CAM). Drawing on Leventhal's Self Regulation Model it was hypothesised that while patients' beliefs about treatment and perceptions of illness would predict ongoing CAM use, patients' experiences of treatment would be the strongest predictors.

Methods: This was a postal questionnaire study involving two waves of data collection. The dependent variables were measured three months after the predictor variables. The predictor variables were patients' beliefs about treatment, perceptions of illness, and experiences of treatment. The dependent variables were ongoing CAM use (making follow-up appointments) and adherence to practitioners' recommendations to make lifestyle changes (e.g. diet, exercise). Variables were assessed by previously validated self-report questionnaires. Participants were 279 patients from six CAM clinics.

Findings: Logistic regression analyses showed that patients' beliefs about and experiences of treatment accounted for 47 per cent of the variance in making lifestyle changes and 35 per cent of the variance in making follow-up appointments. Abstract beliefs and concrete experiences were statistically reliable predictors of making lifestyle changes ($\chi^2(25)=59.79$, $p < 0.001$) and making follow-up appointments ($\chi^2(18)=52.98$, $p < 0.001$). Experiences of treatment were stronger predictors of adherence than beliefs about treatment and illness.

Discussion: The results suggest that people return to CAM primarily because they have positive experiences of the treatment process. Furthermore, this study emphasises the need to attend not only to patients' abstract beliefs about treatment but also their concrete experiences of treatment when investigating adherence.

An application of the transtheoretical model to corporate fitness centres

J. BOTTEN, N. McMURRAY & P. REDDY,
The University of Melbourne.

The purpose of the study was to investigate the association between corporate fitness centres (CFCs), psychological well-being, and exercise behaviour, with the Transtheoretical Model (TTM), including the stages of change, exercise self-efficacy and decisional balance, applied in order to achieve this objective. A longitudinal and cross-sectional design was adopted, whereby 147 respondents completed a survey prior to the opening of a CFC at the participating organisations, and a follow-up survey six months later. Both surveys included measures of psychological well-being, perceived physical health/fitness, and work-specific variables. Both surveys required respondents to categorise their general exercise behaviour over the previous three months according to one of five stages of change: precontemplation, contemplation, preparation, action or maintenance, with the follow-up survey also incorporating stages of change for the CFC.

The results indicated that the general exercise stages of change remained stable between survey administrations, with the exception of respondents in the action stage at baseline who tended to be in the maintenance stage at follow-up. The results also demonstrated that respondents in the CFC maintenance stage obtained higher scores than those in the other stages for the exercise self-efficacy and decisional balance variables, in addition to variables measuring physical and psychological well-being and work satisfaction. It was concluded the TTM provides a valid framework for understanding exercise behaviour within the workplace context, by assisting in tracking exercise behaviour over time, measuring differences between individuals at various stages, and predicting future exercise behaviour.

'You get cancer off curries and all sorts now': A discourse analysis of the accountability in the talk of smokers and ex-smokers

A. BOULTER, University of Derby & A. LOCKE,
Loughborough University.

Background: Cigarette smoking continues to be the most preventable cause of premature mortality in industrialised countries. Although much research attention has been paid to smoking, relatively little qualitative research has been

conducted. Using a discourse analytic perspective, this study examines how people account for smoking. The aim of study was to generate a more in-depth understanding of how speakers attend to their own accountability in the taking up, cessation or continuation of a behaviour that is well documented as being detrimental to health.

Methods: Using data from three focus groups (eight participants in total), the study examined how smokers and ex-smokers talk about their experiences of smoking. The resulting transcripts were analysed using a discursive 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 exogenous factor. The second theme was the accountability of quitting set within a bio-medical repertoire, whereby ex-smokers drew upon this dominant interpretive repertoire to account for behaviour change. The third theme was concerned with how smokers normalised the action of smoking in justifying their continued smoking behaviour.

Discussion: This study has exposed some of the discursive resources that participants draw upon when talking about smoking. It is suggested that further discursive psychological work could look at 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

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 exercise. An area that has been ignored in both health and leisure research is the link between developmental experience and leisure behaviour. This study explored the relationship between social, family, peer and school factors, and leisure engagement within a transactional model of stress and health.

Methods: The study used a survey method with questionnaire data collection in 655 young adults aged between 18 to 25 years. In addition to information of a wide range of social, family, school and developmental factors participants were assessed on standardised measures of achievement motivation, problem-solving style, locus of control, optimism, social support, family environment, psychological health, parental and teacher encouragement and leisure attitude and engagement.

Findings: Results show that the family environment, encouragement from parents and teachers, relationships with peers and socioeconomic factors in childhood 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 individuals who report 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 22 to 61, with the mean being 44.5 years (SD 8.48). Unregistered nurses were not excluded.

Recruitment: 200 participants (190 female, 10 male) were recruited from friends and family, MSc student nurses (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 stress ($r=0.23$, $N=198$, $p<0.01$) and negatively correlated with social support gained from work colleagues ($r=-0.22$, $N=198$, $p<0.01$), and non-work colleagues ($r=-0.20$, $N=200$, $p<0.01$). Burnout was highly correlated with items representing disengagement ($r=0.49$, $N=199$, $p<0.01$), venting ($r=0.25$, $N=199$, $p<0.01$), and self blame ($r=0.32$, $N=199$, $p<0.01$). Multiple regression analyses showed that perceived stress and emotional disengagement predicted 26 per cent of the variance for burnout.

Conclusions: Perceived stress, social support and coping were all found to be independently related and predict burnout among this sample of nursing staff. In addition, social support and especially coping (emotional disengagement) appear to play a mediating role between perceived stress and resultant burnout. Recommendations 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 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 study (time 1) and again one week later (time 2). Participants were randomly allocated to a control group or one of two intervention groups, all received information about the benefits of eating five portions of fruit and vegetables. Experimental Group 1 formed an implementation intention about how, when and where they could eat five portions a day, whilst Experimental Group 2 stated ways they could overcome motivational barriers to eating five portions a day. There were no significant differences between the three groups concerning fruit and vegetable consumption and TPB variables at baseline. However, the volitional intervention did have a significant effect on fruit and vegetable consumption over the control intervention ($F[5,140]=14.80$, $p<0.01$). Implications for furthering our understanding of the role of volitional and motivational interventions in improving fruit and vegetable consumption are discussed.

The process of sharing social support within an internet support group for individuals living with IBS: The role of self-disclosure

N.S. COULSON, University of Derby.

Background: A growing number of individuals living with chronic illness are participating in internet-based support groups. Within these groups, the provision and receipt of social support appears to be a central function (Coulson, 2005). However, little is known about the processes through which social support is shared. By adopting an interactional perspective, the aim of this study was to examine the processes through which social support is elicited and provided within a group for individuals living with irritable bowel syndrome (IBS), focussing particularly on the role of self-disclosure.

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).

Findings: The analysis suggested that self-disclosure was used within this internet-based support group in three main ways. Firstly, for the recipient self-disclosure of worries and anxieties 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 how coping may be achieved through reciprocal self-disclosure. Thirdly, it was used to share reciprocal social companionship relationships.

Discussion: Self-disclosure within this internet-based support group appeared to be instrumental in the elicitation and provision of social support. Future studies should seek to explore the extent to which these strategies are replicated across other support groups as well as exploring other possible functions of self-disclosure within internet-based support groups.

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 tooth decay (and erosion if the drinks are carbonated; Dugmore & Rock, 2004). However, little attention has been focused on how to create dental health messages aimed at adolescents so 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 (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 sugary 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' item. Additionally, there was a significant effect of sugary drink consumption on both credibility ($F(2,351)=5.31$, $p<0.01$) and importance of healthy teeth ($F(2,351)=6.46$, $p<0.01$).

Discussion: The results of our study suggest that the effects of message framing may be dependent on current sugary food consumption. Oral health promotion may be more successful when directed towards adolescents who consume a moderate level of sugary drinks as information may be more likely to be believed and the goals of oral health promotion endorsed.

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) obtaining management 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

completed by 14 administrative staff including the GHQ-12, the Job Satisfaction items of the Nurse Stress Index and purpose-designed items.

Results: Results demonstrated a moderate level of psychological distress (GHQ-12 mean=15; sd=5.4), low job satisfaction, high perceived workplace stress and unmet educational needs in communicating with service users. Four workshops on stress management, complaints handling, disability awareness, enhancing telephone skills and coping with difficult situations were run. Themes derived from the qualitative interview data and the questionnaires were used to construct a formulation of workplace stress on which feedback was invited during the psychology-led workshop. Questionnaires were completed post-workshops and a report including the formulation was distributed to ALAS managers for dissemination. **Conclusions:** Workshop participation had a statistically significant impact on GHQ-12 scores, perceptions of unmet educational need and frequency of thoughts about leaving. Management have implemented 10 report recommendations for positive change in the workplace.

The effects of optimism on cardiovascular reactivity and recovery: A different psychological cascade for women?

C DEIGHAN & M. HIPWELL,
Queen Margaret's University College.

Background: Differences in cardiovascular reactivity and recovery have been indicated as markers in the development of hypertension and heart disease. This study investigated the role of dispositional optimism in cardiovascular reactivity and recovery in conditions of acute induced stress, in an older sample of women than has previously been examined.

Methods: 216 women (mean age 33.7, standard deviation 12.21) completed the Life Orientation Task Revised (LOT-R, Sheier *et al.*, 1994). On the basis of their scores on the LOT-R, 56 women formed two experimental groups, optimists and pessimists, which differed significantly on levels of dispositional optimism ($p < 0.001$). Both groups participated in two consecutive challenges, a mirror tracing task and a serial subtraction task. Blood pressure readings were taken at baseline, during the tasks and post task.

Findings: Contrary to the expectation that pessimists would be more reactive and show less recovery from stress, results indicated that optimists displayed greater diastolic reactivity and poorer diastolic recovery than pessimists. However, the effect of group did not reach significance ($p < 0.06$). Optimists also displayed a non-significant trend of greater systolic reactivity than pessimists and better recovery from stress.

Discussion: The results were not explained by demographic characteristics, health behaviours or stage of menstrual cycle which were controlled, either experimentally or statistically. It is possible that age, gender and methodological issues underlie the unexpected findings, which will be discussed.

Adjustment in chronic illness

B. DIBB & L. YARDLEY, University of Southampton.

Background: Little is understood about how adjustment occurs due to its cognitive nature. Using response shift theory, this study aimed to determine in what way adjustment occurs and what predicts adjustment.

Methods: Using the Thentest procedure (Schwartz & Sprangers, 1999) 301 people with Ménière's disease, all members of a self-help group (SHG), completed questionnaires assessing QoL (functional QoL (SF-36)) and goal-oriented QoL (GOQoL) at baseline and 10 month follow-up. Baseline predictors comprised mechanisms (SHG comparisons (Identification/Contrast scale and SHG items), antecedents (self-esteem (Rosenberg's scale), perceived control (IPO-R), optimism (LOT), and demographic factors), and catalysts (disease severity). The data was analysed using *t*-tests and regression analysis.

Findings: Results showed that a response shift had occurred by a change in the internal standards of measurement. Regression results showed self-esteem to have a positive effect on this shift while

vertigo had a negative effect. Negatively interpreted social comparison for information also had a negative effect influencing role physical ($p = 0.000$), role emotional ($p = 0.000$) and mental health ($p = 0.001$).

Conclusions: Adjustment occurred by a change in the internal standards of measurement. The importance of self-esteem in this change highlights the importance of ensuring advice and help offered within SHGs is esteem enhancing. As social comparison negatively influenced adjustment this would indicate that providing information in the correct way may be important to encourage a positive interpretation and so not hinder the adjustment process.

How effective is autogenic training as a stress reduction technique for students?

A. DONNELLY & M. HIPWELL,
Queen Margaret's University College.

Background: Autogenic Training (AT) is a relaxation technique, designed to switch off the stress-related 'fight-flight' response of the sympathetic nervous system and switch on 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 undergraduates.

Methods: Qualitative and quantitative.

A pre-test/post-test longitudinal control group design tested the hypothesis that stress would be lower in an intervention group (IT) than a matched control group of students. The IT ($N = 8$) took a six-week course in AT. The matched control group ($N = 8$) had no intervention. The stress response was measured with the General Health Questionnaire (GHQ) (Goldberg, 1978), the Perceived Stress Scale (Cohen, 1983), skin temperature and Galvanic Skin Resistance. A focus group provided additional information about the effectiveness of AT.

Findings: Statistical analyses partially confirmed the hypotheses. The IT showed a significant decrease in mental health problems, GHQ total ($Z = -2.52$, $N = 8$, $p = 0.01$); in poor coping, GHQ coping subscale ($U = 11.5$, $N_a = 8$, $N_b = 8$, $p = 0.03$) and a significant increase in self-esteem, GHQ self-esteem subscale ($\chi^2 = 12.08$, $N = 8$, $df = 2$, $p = 0.02$). This partial support for the hypotheses was confirmed by the qualitative findings.

Discussion: AT is an effective relaxation technique. Effects are cumulative but noticeable stress reduction requires consistent daily practice, often incompatible with a typical student lifestyle. Future research might focus on alternative methods that can be incorporated more easily into a students' routine.

Recovery after coronary artery bypass grafting surgery: The health professional perspective

M. DUNCKLEY, D. ELLARD & J. BARLOW,
University of Coventry.

Background: An integral part of UK Government policy is the prevention and treatment of coronary heart disease. One National Service Framework goal is to increase the number of coronary artery bypass grafting (CABG) operations carried out. Although CABG is effective in relieving angina symptoms, many people do not report an improved quality of life, a return to normal activities or, therefore, experience a good recovery after surgery. It is important to identify facilitators and barriers to recovery so interventions can be developed to help maximise the benefit of undergoing such major surgery. Little work has utilised the experience of health professionals in identifying these relevant factors.

Methods: Semi-structured interviews were conducted with 10 health professionals (cardiovascular surgeons, nurses and physiotherapists) experienced in providing care for patients undergoing CABG and subjected to thematic analysis.

Findings: Participants identified facilitators to recovery after CABG as: support network providing emotional and instrumental support, optimistic personality, exhibiting fighting spirit and having a relaxed attitude towards the surgery. Barriers included clinical factors, spending a long time in ITU, having little time to prepare for the surgery,

being very anxious and patients making unfavourable comparisons of their recovery compared to that of peers. Relationships between factors such as personality and social support and between clinical factors and attitude to surgery were also noted.

Discussion: Findings indicate a large number of factors relevant to investigating recovery after CABG. This highlights the importance of a holistic approach, rather than investigating factors in isolation.

Patients' perspectives on recovery after coronary artery bypass grafting surgery

M. DUNCKLEY, D. ELLARD & J. BARLOW,
University of Coventry.

Background: One treatment for coronary heart disease is coronary artery bypass grafting (CABG) surgery. More people, particularly women and those over 70 years of age, are undergoing this procedure in the UK. While many experience a good recovery after CABG, some do not and report a quality of life worse than that prior to surgery. Little work has used qualitative methodologies to identify what patients consider to be a good recovery or the relevant factors in achieving this.

Methods: Semi-structured interviews were conducted with 10 patients (five men, five women, 55 to 79 years) who had undergone CABG six to 12 months previously and subjected to thematic analysis.

Findings: Participants considered recovery to be a return to normal activities. Participants who were older and had severe angina prior to surgery reported recovery took six to 12 weeks compared to those experiencing few symptoms previously, who felt it took six months or longer. Support from family, friends, peers and health professionals was considered vital in successful recovery. Having confidence in the health care team and time to prepare for surgery was beneficial. Participants talked of their recovery in comparison to that of peers and of having determination to succeed in their goals for recovery. Many participants also expressed some initial post-operative anxiety related to aggravating chest wounds.

Discussion: Findings indicate how patients define recovery, important for health professionals to be aware of when providing detail on risks, benefits and probable course of recovery so patients can make fully informed choices regarding surgery.

Impact of exam stress on UK AS-level students

O.M. DUNN, R. WILDE & L.V. WILDE,
Coventry University.

Background: The aim of this study was to document the extent and seriousness of the subjective experience of exam stress for UK teenagers, the strategies that young people use to cope with exam stress and whether these appear to be useful.

Methods: Three successive cohorts of UK AS-level students ($N = 608$) from West Midlands-based schools responded to a cross-sectional survey which assessed levels of four coping strategies (talking to others for support, taking active measures to prepare for exams, using substances and taking time out) and stress-related symptom levels in the run-up to and during exams.

Findings: It was common for students to rate exams as stressful, with over half rating them as extremely (15 per cent) or very (36 per cent) stressful. Stress related symptoms were commonly reported in the time leading up to exams: loss of sleep (61 per cent), increased arguments with family, friends or partner (61 per cent), more illnesses (26 per cent) and suicidal thoughts (eight per cent). Worrying levels of use of substances to cope with exam stress was reported: comfort eating (33 per cent), drinking more alcohol (25 per cent), smoking more (18 per cent) or using recreational drugs (10 per cent). Similar findings were found in each cohort suggesting results are stable and robust. The complex relationship between coping strategies and stress symptoms is explored.

Discussion: Exams appear to pose a significant source of stress for the majority of UK teenagers. Rates of problems and the frequent use of what seem unsuccessful coping strategies suggests that more focussed help needs to be provided to this group. Schools are well placed to offer this support.

Prevalence of symptoms related to stress and fibromyalgia in University students

M. DURÁN, J.GARCIA, M.A. SIMON, J.C. FERNANDEZ & C. RODRIGUEZ, University of A Coruña.

Epidemiological indicators about stress and fibromyalgia in adult non-clinical samples are scarce. So, the main purpose of this study was to gather data about the prevalence 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, Raynaud's phenomenon, 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.

Purpose: 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 effective 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, HTA, MEDLINE, NHS EED, PsycLIT, PsycINFO, and PubMed. The inclusion criterion was limited to meta-analytic reviews. The titles of papers were reviewed, abstracts were obtained and reviewed, and full copies of selected papers were obtained.

Results: Six Meta-analytic reviews of the psychosocial well-being of children were identified: two on psychological adjustment to chronic conditions in general, one on sickle cell disease, one on chronic arthritis and one on asthma. One meta-analysis was identified on the well-being siblings. Evidence shows that children with chronic conditions and their siblings are at increased risk of psychosocial distress, although only a minority will experience clinical symptomatology. Findings generally indicate that the child with a chronic condition is more likely to have behavioural difficulties, this impacting on the psychosocial well-being of the whole family.

Conclusion: This overview has highlighted the need to extend the evidence base for psychosocial well-being of children and their family. It is essential that effective interventions are implemented and embedded in service provision in order to maximise the well-being of children, adolescents, their parents and siblings.

Investigating the predictive ability of educational aspirations and desire to postpone pregnancy for adolescent condom use

V. ELLIOTT, K. NEWBY & K.E. BROWN, Coventry University.

Background: The number of teenage pregnancies within the UK remains worryingly high. Latest figures suggest that rates have recently risen (*Social Trends*, 34, 2004). There is some evidence within the literature that future aspirations and desire to postpone pregnancy may be associated with effective use of contraception (Brown, Arden & Hurst, 2003; Rivara, Sweeney & Henderson, 1985). The current study aimed to investigate the predictive ability of future aspirations and desire to postpone pregnancy for condom use.

Methods: Participants completed questionnaires containing items relating to their condom use, future educational aspirations, and the importance placed on avoiding pregnancy. Only sexually active participants were included in the current analysis ($N=883$, 13- to 16-year-olds).

Findings: Linear multiple regression analyses, using the enter method, were performed on males and females separately. Findings showed that neither desire to avoid pregnancy nor future educational aspirations significantly predicted condom use. For females, $F(2,494)=0.898$, $p=0.408$, adjusted $R^2<0.001$. For males, $F(2,383)=0.085$, $p=0.919$, adjusted $R^2<0.005$.

Discussion: These findings fail to support existing assertions that future 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 (eg. Kendall, Afable-Munoz, Speizer *et al.*, 2005). Future research needs to pay further attention to the reason for a discrepancy between such logically congruent desires and behaviours.

Understanding symptom onset: The role of cognition and emotion

S. FARNWORTH, University of London & J. OGDEN, 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, symptoms which have culturally specific meanings are used as a socially sanctioned pathway to express these tensions. Third, the individual appraises this socially sanctioned pathway as either personally relevant or irrelevant in the context of their own cognitions and emotions about the symptom. This study assesses the third part of the model which focuses on cognitions and emotions. It is hypothesised that participants' cognitions and emotions relating to the symptom that they report experiencing most often (their 'Achilles' heel) will differ from their cognitions and emotions about other symptoms in terms of beliefs about cause, benefit and function. Additionally it is hypothesised that there will be ethnic differences in the symptoms that participants report experiencing most often.

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 analysis from data from patients in Primary care showed some support for the model with consistent differences being reported for cognitive and emotional variables between symptoms which patients report as their 'Achilles' heel' and those that they don't.

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 and managing service delivery (Holloway, 1998). This study developed a risk assessment tool for the users of a homeless drop-in centre. Using psychological models of risk behaviours (eg. 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 that was piloted, finalised and implemented with a convenience sample of 40 homeless drop-in centre users.

Main Findings: Four stepwise regression analyses were conducted to identify the main individual characteristics and behaviours leading to risk. Age, drug use and alcohol use predicted violence to others ($p<0.05$, accounting for 54 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 for younger users. The findings highlight the importance of conducting risk assessment in the homeless user population to enable the identification and 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, K. RODHAM, University of Bath & R. 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 and assessed coping, life satisfaction and personality. 2. Six couples, where one person has been diagnosed with mild dementia, were interviewed (separately) 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 the questionnaires. Participants were able to talk to the researcher about their opinions regarding the questions, but experienced problems when choosing an option from a likert scale to represent their feelings. These questionnaires were, therefore, considered to be inappropriate for this group.

2. In contrast participants were able to articulate and discuss their experiences with the researcher. Interpretative Phenomenological Analysis has uncovered themes related to the relationship from both the person with dementia and their spouse.

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.

The relationship between optimism and anxiety and depressed mood among families of children with cancer

M. FOTIADOU, J. BARLOW, L. POWEL & H. LANGTON, Coventry University.

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, such as a 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 its relation with 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 anxious and depressed mood were measured using the Lot-R (0-24) and HADS: anxiety (0-21) and HADS: depressed mood (0-21), respectively. Higher scores indicate higher levels of optimism and anxious and depressed mood.

Findings: 52 carers with a mean age of 39 (SD 7) completed questionnaires. Eighty-four per cent were women. Sixty-one per cent of the carers were found to be at risk of 'probable' (≥ 11) clinically anxious mood and 44 per cent at risk of 'probable' clinically depressed mood. Mean scores (SD) for anxious mood, depressed mood 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 ($r=-0.66$, $p=0.001$) 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 anxious and depressed mood. 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 carers' psychological well-being and quality of life.

Illness perception and medication-adherence in older patients with congestive heart failure (CHF)

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 effective pharmacological treatment for CHF and adherence to ACEI determined from Serum ACE. The aim of this study is to predict adherence to ACEI from patient's illness perceptions. **Methods:** *Design:* cross-sectional. *Sample:* 58 stable CHF patients ≥ 70 years old (mean age 80) in NYHA Class II-III who were prescribed ACEI. IPQ-R was used to assess patients' illness perceptions. Medication-adherence was measured objectively from serum ACE levels. A cut point of serum ACE level < 5 u/l was set to define adherence to ACEI. Logistic regression was used to determine the relationships between illness perception variables and medication-adherence.

Findings: 16 (28 per cent) of the patients did not adhere to their ACEI medication. Logistic regression analysis examined individually indicates that timeline-acute/long ($\beta=-0.92$, $SE=0.48$, $Wald=3.65$, $p=0.05$) and consequences ($\beta=-1.02$, $SE=0.51$, $Wald=3.92$, $p<0.05$) predicted adherence. Results were similar when both factors were entered into multivariate analysis: timeline ($\beta=-0.92$, $SE=0.51$, $Wald=3.26$, $p=0.07$) and consequence ($\beta=-0.97$, $SE=0.52$, $Wald=3.47$, $p=0.06$) predicted adherence.

Discussion: Illness representations successfully predict medication-adherence measured by an objective method. The result suggests that CHF patients who believe that their illness is acute and less serious are more likely to adhere to ACEI. This unexpected finding may be related to the age of the participants and requires further research.

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

J. GARCÍA, M. DURAN, C. RODRIGUEZ, J.C. FERNANDEZ & M.A. SIMON, University of A Coruña.

Provided that studies about the differential efficacy of existing treatments in fibromyalgia syndrome are scarce, the aim of this study was to compare the differential efficacy of a cognitive-behavioural and a pharmacological therapy on fibromyalgia. Using a randomised controlled clinical trial, 28 fibromyalgia patients were assigned to one of following experimental conditions: (1) pharmacological treatment (i.e. cyclobenzaprine); (2) cognitive-behavioural intervention (i.e. stress inoculation training); (3) pharmacological + cognitive-behavioural; and (4) no treatment. The results show the superiority of cognitive-behavioural intervention to reduce the severity of fibromyalgia both at the end of the treatment and at follow-up. We conclude that cognitive-behavioural 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. GARCÍA, M. DURAN, University of A Coruña, M. SANROMAN, L. FERRER & A. SANCHEZ, Juan Canalejo Hospital.

Both the optimal management of human and organisational resources as the collaboration of different professionals implicated 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) a programme based on: (1) initial assessment of adaptation predictors; and (2) meeting-groups of patients that are similar in relation to their pathology and treatment phase is being developed to reduce emotional suffering and to increase their quality of life. This programme has three different phases: (1) pre-chemotherapy; (2) chemotherapy; and (3) rehabilitation. Through them patients receive information related to the organisational functioning, feeding and care, management of emotions, communication, attitude and psychopharmacological interventions. There are two aspects that deserve a special consideration 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 psychiatrists. For 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 own home when others are present. It is disruptive of normal life affecting work, recreation and relationships. Gibbs (2004) study of Avoidant Paruresis (AP) is the first one ever carried out on this condition 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 individual items comprises additional questions about paruresis history, personal experience, and related issues. The sample was well distributed demographically, representing diverse social strata, and geographical location. Although 44 per cent of the sample sought treatment the majority of those waited 20 to 30 years before seeking 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 low: 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 under observed conditions the inability of paruretics 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

L.J. GERRARD, S.R. COOPER, Y. HARRISON & A.J. TATTERSALL, Liverpool John Moores University.

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 determinants of adult sleep duration using the theory of planned behaviour (TPB; Ajzen, 1991). **Method:** An elicitation study involving 60 semi-structured interviews was conducted in order 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 to support performance of the behaviour. There were twice as many inhibiting as facilitating factors, however, indicating that sleeping for at least eight hours every night is perceived by 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 200 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, dependency, diet, concerns 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 seven-dimensional structure was identified in accordance with Thompson's findings, although only three factors (diet, concerns over medication, side-effects) were in total agreement.

Conclusion: The current study provided partial support for the MIDAS original factor structure. We are currently examining the performance of the MIDAS in measuring changes after attendance on the self-management programme.

Gloucestershire Drugs and Alcohol Team (DAAT) Database: Monitoring Countywide 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 Database.

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 substance use. These services cover criminal justice, health, and voluntary/non-statutory sectors. Additionally, it strives to meet the requirements set out by the National Treatment Agency (NTA) and 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 findings indicating an average score of 9.1 (Christo, 2000). Analysis produced significant relationships between CISS scores and various other items, for example, those clients reporting benefit claiming had significantly higher CISS scores than those in employment. Future research should focus on the validation of the tool for use with children and adolescent populations, given the recent expansion and Government emphasis on young people's services. Additionally, the database has been working towards collecting discharge 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 determine what (if any) factors were uniquely presented by those exhibiting either good or poor metabolic control.

Design: Semi-structured 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 Elicitation: Participants took part in semi-structured interviews. Interviews were transcribed and subjected to grounded theory (thematic) 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 and found them accepting and actively 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

I.A. GORTEMAKER, M.C. VAN HOLLAND & P.A.D. MUSTERS, Unilever R&D Vlaardingen, The Netherlands.

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. After completing 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 above 0.50). The obtained path-analytic model showed three constructs strongly linked to the dependent variables (*t*-values higher than five): Self Identity, Perceived Seriousness of Disease, and Belief in Product Health Link.

Discussion: This research has 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, perceive the targeted health problem as serious condition and believe 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 experiences and behaviours at different points in the life cycle.

Methods: A qualitative, narratives approach was taken in the research, focussing on the situated and co-constructed accounts emerging from life-course interviews (McAdams, 1995). Interviews were conducted with 25 chronically ill men aged between 16 to 83 years. Participant narratives were analysed thematically (e.g. Boyatzis, 1998).

Findings: A number of key themes are explored that illustrate commonalities and divergences amongst men's social networks and related social norms at various points in the life cycle. These are linked with masculine identities, and illness-related experiences and behaviours. Themes around disruption of social networks, undermining of valued masculine identities, are contrasted with the support and reciprocity within 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. The research responds to the calls from a number of writers for further qualitative exploration into processes by which social capital may be linked with health and illness. It is suggested that health psychology will benefit from further work that contextualises individual illness experience within gendered social networks.

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

E.D. HALE, S. MOLE, D.L. MITTON, K.M.J. DOUGLAS, N. ERB, G.D. KITAS, Dudley Group of Hospitals NHS Trust, Y. NORTON, Lupus UK, A.C. LYONS, Massey University & G.J. TREHARNE, University of Birmingham.

Background: Systemic lupus erythematosus (SLE) is a multisystem rheumatic disease with 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 were not in work 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 verbatim and analysed using Interpretive Phenomenological Analysis.

Findings: Four superordinate themes emerged: (1) diagnostic difficulties; (2) the 'past-self'; (3) understanding; and (4) integrated health care. Narratives of the time before diagnosis highlighted difficulties. Current self-image was described in relation to its discrepancy from the 'past-self'. Family, friends and employers did not understand

the fluctuating nature of SLE, which often led to isolation. Only healthcare professionals who specialise in SLE were perceived to have some insight into their condition. Even these specialists were not felt to fully understand psychosocial concerns, and hence were not providing information that met these concerns.

Discussion: Women with SLE ground their self-image in the lost 'past-self', as seen in similar studies of back pain and other chronic illnesses. This can be linked to theories of self-discrepancy. Support from trained volunteers with SLE, as available at the open-access SLE clinic in Dudley, could improve communication and minimise SLE patients' feelings of isolation.

Exploring the motivations of people with a long-term health condition to enrol on an Expert Patient Programme

C. HAMMOND, H.L. WILLIAMS, A. TURNER & J. BARLOW, Coventry University.

Background: The Expert Patient Programme (EPP) assists those with a long-term chronic condition to develop skills to better manage their condition. Recruiting and retaining a sufficient number of participants is crucial to the success of the Programme. Recruitment methods typically include GP referral, support group membership, word of mouth and media sources. A recent, local newspaper article reported that the EPP would be delivered at Coventry University as part of a research study and successfully attracted 65 participants. The aim of this study is to identify which aspects of the press article motivated participants to enrol.

Method: Data were collected through semi structured telephone interviews with 55/65 participants. Interviews were analysed using thematic content analysis.

Findings: The majority of participants were motivated by the description of the course content (e.g. pain/fatigue/depression management) (74 per cent). 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 (26 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 targeting 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 the experience of EPP participants has been investigated, the experiences and perspectives of tutors has received less attention. The study aims to address this omission by examining the experiences of LINK tutors.

Method: In-depth, face-to-face interviews were conducted with six LINK EPP tutors. All interviews were analysed using thematic content analysis. **Findings:** Results showed that being a LINK EPP tutor was an enjoyable and rewarding experience. Altruism, the desire to help others as they had 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). The experience of being a tutor was 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, Staffordshire University & V. YATES, Royal Bolton Hospital.

Psychological distress in patients with acne has been more highly associated with patients' subjective rating of severity 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-thirty-five participants (age 16 to 44) recruited from specialist acne clinics completed the Revised Illness Perception Questionnaire (IPO-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 of acne ($r=0.351$ $p<0.000$) and greater emotional representations ($r=0.297$ $p<0.001$). Patients who considered their illness serious had less belief in their personal control of their acne ($r=-0.370$ $p<0.000$), and higher scores on emotional representations ($r=-0.342$ $p<0.000$), anxiety ($r=-0.255$ $p=0.004$) and depression ($r=-0.265$ $p=0.003$). Expectation of a long illness was related to greater perceptions of serious consequences ($r=0.469$ $p<0.000$), higher anxiety ($r=0.314$ $p<0.000$) and depression ($r=0.324$ $p<0.000$). Objective rating of severity was not related to patients' illness perceptions, however patients' subjective rating of the severity of their facial acne was. Multiple regression analysis revealed illness perceptions were significantly associated with anxiety and depression. Acne duration was unrelated to psychological distress. The results support a relationship between illness perceptions experienced by patients with acne and anxiety and depression, highlighting the need for psychological intervention.

The use of children's drawings to assess their knowledge of internal biological processes

M. HAY, Monash University, Australia.

Background: Internal bodily processes are difficult for children to describe verbally, making an assessment of their knowledge using an interview technique problematic. Allowing children to construct their own drawings may provide a method to assess their understanding of internal biological processes. This study utilised a drawing task to assess fifth and sixth graders' knowledge of both the internal and external features associated with puberty, and of male and female reproductive anatomy. **Method:** Children ($N=75$, mean age 10.79 years, $SD=0.62$) were individually tested before, immediately following and seven months after completing a standard sex education programme. A control group ($N=73$, mean age 10.50 years, $SD=1.02$) who did not receive sex education completed the drawings across the same time intervals. Two black line-drawings of a body outline were presented on A3 (297mm x 420mm) white paper with the instruction to draw all the physical changes that happen to a boy and a girl during puberty, including changes to the inside. Drawings were scored in terms of the number of primary and secondary sex characteristics included at each of the three time periods. **Findings:** The drawings produced by many children were explicit in content and included representations of facial and body hair, breasts, male and female genitalia. Univariate ANOVA using difference scores revealed that representations of internal reproductive anatomy, especially female reproductive anatomy, were significantly more common in the drawings of children who had completed sex education. Although increases in knowledge were evident

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 their knowledge of reproductive anatomy. The technique also enabled the identification of misconceptions in children's knowledge. Accurately determining children's knowledge of internal biological processes is important for the development of health education programmes that target the negative physical health outcomes 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 the progression of dental treatment and can lead to limitations in the provision of dental care. Reaching a greater understanding of gagging in dental patients is, therefore, necessary. This study aims to provide a profile of a typical patient through an investigation of demographic and psychosocial factors. **Method:** Patients who attended 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 ($N=14$), which reflects current referral patterns. Onset was frequently linked to a previous traumatic dental experience. Patients commonly described 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 of being unable to breathe. Most participants 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 of gagging in dentistry 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.C. 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 EPP 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 who had conducted an EPP course that included SA attendees. Verbatim transcripts were qualitatively analysed using interpretative phenomenological analysis. **Findings:** Tutors' professional and voluntary work experiences catalysed their decisions to tutor. White tutors identified a need for cultural awareness training but felt only minor modifications would be required to tailor the course for SA attendees. White tutors are willing to work with interpreters if required and did not feel ethnicity-specific courses were appropriate. **Discussion:** These findings demonstrate the importance of past experience when EPP attendees decide to tutor. White tutors require additional training to address their cultural knowledge deficit. Phase II interviews with bilingual EPP

tutors from across the UK who have delivered EPP to SA attendees and Phase III interviews with members of the SA community, will enable identification of convergent views about the cultural appropriateness of EPP for SA attendees. This will allow a tailored EPP to be developed, if appropriate.

Exploring the self-regulation of health behaviour in male asthmatic adolescents

J. HITCHINS & N. COULSON, University of Derby.

Male adolescent asthmatics (MAA) experience exacerbated symptoms in comparison to their female peers (National Asthma Campaign Audit 2002). This study explored the experience and meaning of asthma amongst males at this stage of the lifespan using Leventhal's self-regulatory model (Leventhal, Diefenbach & Leventhal, 1992) as a framework of reference. Thematic analysis of data derived from semi-structured interviews with a small number of MAA ($N=5$), 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. For MAA sport appears to represent the point at which the sense of difference from others becomes apparent. In a second phase, 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 and also 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 pro-active, preventative approach with a strong focus upon self-care. Preliminary findings suggest that to meet the challenge of managing this chronic illness whilst seeking to preserve a masculine social identity, an avoidant coping style with a non-prophylactic treatment approach is employed, resulting in poor self-regulation of asthma.

An investigation of the Fear of Dental Pain Questionnaire: Reliability and validity

C.J. HO & H. BUCHANAN, University of Derby.

Background: Dental anxiety (DA) is distressing for both patients and dentists and can lead to avoidance of dental care. Fear of dental pain (FDP) may be a central contributing factor in the development and maintenance of DA, therefore, a specific tool to measure fear of dental pain 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 general fear of pain measure; or (3) an emotionally neutral questionnaire. In Study 2, 172 participants completed the E-FDPQ; to test validity 89 participants also completed two other measures of dental anxiety and completed the E-FDPQ again two weeks later (for test-retest reliability). In Study 3, 60 participants evaluated face validity. **Findings:** In Study 1 there were no significant differences in pre-post anxiety scores across the three conditions. Study 2 demonstrated a unifactorial 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 two validated dental anxiety measures ($r=0.65$, $p<0.01$ for both). In Study 3, face validity was generally supported with minor suggestions for optimum translation. **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. HORNE, D. SKELTON & 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 yrs) and 22 semi-structured interviews (mean age=64.91 yrs). Framework analysis was used for data classification.

Findings: Five themes emerged:

1. Perceptions of exercise and physical activity – meaning of/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 or become 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. Stressors unique to 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 across three occupational settings (NHS, Hospice, and Community).

Methods: 36 participants were recruited (volunteer $N=18$; professional $N=18$) for this between-groups designed study. Data were collected retrospectively by means of questionnaire which measured: Optimism, Self-Efficacy, Social Support, Generic Perceived Stress and Occupational Stress. Analysis included comparative t -test or ANOVAs in addition to inter-variable correlation analysis.

Findings: Differences in reported stress levels were found between settings, $F(2,30)=7.216$, $p<0.05$, and Salary Status, $t(31)=-3.20$, $p<0.05$. Differences in Job Category were found for perceived stress, $F(3,29)=10.59$, $p<0.001$, and occupational stress, $F(3,20)=2.99$, $p=0.055$. Optimism was more strongly and consistently associated with low levels of perceived stress ($r=-0.471$, $p<0.05$) than self-efficacy. Satisfaction with social support was highest among paid professional workers ($t(23.93)=7.81$, $p<0.001$), and in terms of buffering stress, appeared mediated by optimism.

Discussion: The results offer support to Lazarus and Folkman's transactional model of stress (1984); stress was influenced by both personal (appraisal and resource) variables and situational (environmental) variables. Worksite interventions targeting carer efficacy and optimism are recommended as a potential source of stress management within this population.

Role of doctor-patient communication in illness representations, and outcomes in irritable bowel syndrome (IBS)

C. JACOBS & R. SHEPHERD, University of Surrey.

Background: IBS affects 20 per cent of Western populations, but, literature on factors affecting prognosis is limited. For other chronic illnesses doctor-patient communication impacts on symptoms and this may be true for IBS.

Method: Quantitative, questionnaire based, cross-sectional study addressing: Patients' ($N=58$) and doctors' ($N=58$) perceptions of doctor-patient communication; effect of communication on illness perceptions, and relationship between perceptions and outcomes.

Findings: Doctors reported greater perceived efficacy of their communication on all four dimensions: alleviation of distress, consultation comfort, rapport and compliance to treatment (all $p<0.01$). Patients' scores on these variables were, however, were not related to illness perceptions. Illness perceptions significantly predicted psychological outcomes [R^2 adj 0.573, $p<0.0001$], specifically; representations [0.414 , $p<0.002$], and identity [-0.356 $p<0.001$], but the prediction of physical outcomes was only approaching statistical significance. Psychological factors also predicted physical outcomes [R^2 adj 0.194, $p<0.0001$].

Discussion: Doctors overestimate their communication efficacy, but this does not impact on illness perceptions. Negative illness representations are predictive of negative psychological outcomes, and the more additional illness symptoms believed to be part of IBS the lower psychological distress. Representation-based intervention studies should directly improve psychological, and indirectly improve physical illness outcomes.

The communication of social support within a computer-mediated food allergy support network

R.C. KNIBB & N.S. COULSON, University of Derby.

Background: Food allergy has been shown to severely affect quality of life of adults and children (Avery *et al.*, 2003; Sicherer *et al.*, 2001), however, specialist health service provision for food allergy is lacking (Eaton, 2004). In recent years, the rapid expansion in internet access and computer-mediated communication has fostered new opportunities for individuals with health-related concerns to participate in supportive communication within a network of individuals dealing with similar problems. The aim of this study was to examine the nature of socially supportive communication that took place within a computer-mediated discussion board for individuals affected by food allergy.

Methods: 940 posts to a computer-mediated discussion board were analysed using deductive (i.e. theory-driven) thematic analysis (using the guidelines set out by Boyatzis, 1998). This approach is particularly useful for describing and organising data in accordance with a pre-determined theoretical framework. In the present study, the data was examined using five categories of social support (Cutrona & Suhr, 1992): (1) emotional support; (2) esteem support; (3) information support; (4) network support; and (5) tangible assistance.

Findings: Examples of each type of support were found in the data, with the predominant theme being informational support, with group members frequently offering advice in coping with the challenges of food allergy. Feelings of companionship and belonging to a network of support were also important and there were numerous instances in which group members expressed empathy and understanding, particularly towards members who were struggling to contend with often distressing symptoms associated with food allergy. Members also offered compliments or volunteered to help other members in more tangible ways such as providing recipes or checking ingredients of foods.

Discussion: The network appeared to be a forum through which social support was a key function. The findings will be of use to those health professionals who work with allergy sufferers and

may serve to identify gaps in information, needs and priorities for support.

Poor psychological outcomes in adult women with Turner Syndrome

Y. KRUPNIK, P.M. CHADWICK, G.S. CONWAY & L.-M. LIAO, University College London Hospitals NHS Trust.

Background: Turner Syndrome (TS) results from X chromosome deletion during foetal development and occurs in women only. The condition is associated with specific learning difficulties and multiple physical health problems. Few studies have examined the long-term psychosocial outcomes of this population although anecdotal evidence suggests that needs are high. The standard of care following discharge from paediatric services 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: $r=-0.2$ to -3.0 , $p<0.05$) and was positively associated with depression ($r=0.24$, $p<0.14$) but not anxiety ($r=0.19$, $p<0.051$). Women with lower levels of education had poorer quality of life in the physical ($F4.36$, $df1,103$, $p=0.039$), psychological ($F9.45$, $df1,103$, $p=0.03$) and environmental domains ($F11.5$, $df1,104$, $p=0.001$) but not in the social domain ($F0.75$, $df1,104$, $p=0.785$). Less education was also associated with higher levels of anxiety ($F10.04$, $df1,102$, $p=0.02$) and depression ($F10.49$, $df1,101$, $p=0.02$).

Discussion: Women with TS are 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 finding that poorer 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's University College.

Background: Social problem-solving is a self-directed meta-cognitive paradigm (Nezu *et al.*, 1989) which emphasises the importance of addressing problems as they arise. This study expands 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 diabetic population via 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 ($F(2, 92)= 4.13$, $p<0.01$; Wilk's Lambda=0.77, Partial 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 instil enhanced protection against distress in a diabetic population.

Investigating the relationship between dispositional optimism, perceived cancer risk and breast/testicular self-examination

P.A.D. LIST, M. TRUEMAN, Keele University, M.P. JOHNSON, University of Newcastle, Australia & S.R. BAKER, University of Sheffield.

Background: Research indicates that dispositional optimism is positively associated with various adaptive health behaviours, including exercise, breast self-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 aimed to explore 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 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 (dispositional optimism: low, high) x 3 (perceived cancer risk: low, medium, 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 self-examinations than those with high perceived cancer risk but low dispositional optimism. **Findings:** Significant main effects of both dispositional optimism ($F_{1,125}=57.16, p<0.001$) 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 from the theory of 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-year follow-up, women who had attended breast screening had more positive attitude towards breast screening and stronger perceived control as assessed at baseline. Women who attended breast screening at three years also 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. Health education and promotion programmes 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 & V. STROWGER, Thames Valley University.

Background: Animal studies have found that early experience (including type of birth and maternal separation) have long-term effects on behaviour (Boksa & Elkhodor, 2003; O'Day & Kraemer, 1999). Biological systems have been implicated as mediating factors in these long-term changes, in particular the Hypothalamic-Pituitary-Adrenal (HPA) axis (Anisman & Meaney, 1998). Some studies have also 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 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 51 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 differences.

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

Discussion: The results indicate that maternal separation (separation after a stressful birth makes it more difficult to start tasks) and drugs administered during labour (a long labour without drugs makes more anxious adults) may have long-term effects on the personality of the child and it is possible that these effects are 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, YK. 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 hysterectomy.

Method: In a double-blind randomised clinical study, 100 women undergoing abdominal hysterectomy were allocated to either music or no music group during target-controlled infusion of propofol. Propofol concentration was adjusted gradually to achieve an observer's assessment of alertness/sedation score of three intra-operatively. The haemodynamic and bispectral 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 respiratory 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 ($p<0.025$) and less induction time ($p<0.05$) than the control group. No other differences were noted.

Discussion: The results 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 of concentration and level of anaesthesia requirements. If so, those with high levels of distress surrounding admission and surgery might benefit from psychological interventions such as music or other relaxation techniques.

A longitudinal study of clinical and psychological status in Ankylosing Spondylitis

J.H. MARTINDALE, J. SMITH, C. SUTTON, A. AZAD, D. SWINSON, D. GRENNAN & J.A. GOODACRE, Ashton, Wigan & Leigh Primary Care Trust, Wrightington, Wigan & Leigh NHS Trust, and Chronic Disease and Rehabilitation Research and Teaching Group, Faculties of Health and Science, University of Central Lancashire.

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 this condition. We repeatedly assessed a group of AS patients regularly attending Wrightington 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 correlations

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 >20 years and co-existent psoriasis. Subgroups with low internality had 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 have identified patient subgroups for which the strength of clinical/psychological associations has differed markedly. Thus interpretation of clinical scores may need to take psychological status 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 complex interplay of emotions and disease, and disclosure and health has a multiplicity of implications for the long term chronically ill. Research has shown that people in distress have a strong desire to be with other people. The group-based, Chronic Disease Self-Management (CDSM) intervention offers opportunities for people with a long-term health condition (LTHC) to share their experiences and feelings. The aim of this study was to investigate the role of emotional disclosure in the self-management of a LTHC from the perspective of lay-tutors.

Method: Transcriptions of semi-structured interviews provided the data, which was analysed using interpretive phenomenological analysis (IPA). Participants were 10 CDSM tutors, all diagnosed with a LTHC.

Analysis: Being diagnosed with a LTHC can be an isolating experience. Disclosure of participant's emotions is seen to open the route to the realisation that there are others experiencing comparable emotional episodes and the recognition that they are not alone. This insight creates a feeling of relief and helps to bring about the self-management of the symptoms, psychosocial consequences, and lifestyle changes necessary to live with a LTHC.

Discussion: For some, it is the first time that they have been able to express their feelings about life with a LTHC. The feeling of being understood by another person is fundamentally therapeutic, bridging the isolation of illness and helping to restore a sense of connectedness.

This study is unique in obtaining tutors' perspectives and will add to the potential of the CDSM intervention to enhance self-management techniques.

Recurrent aphthous stomatitis and perceived stress

I.M. McNALLY, Metropolitan Police Service, London.

Recurrent aphthous stomatitis (RAS), often referred to as mouth ulcers, is a poorly understood clinical entity that causes significant oral pain in otherwise healthy individuals. It is estimated that RAS affects between 15 and 25 per cent of the population. Most of the literature on RAS assumes that stress has a causal role. However, there is scant empirical research to support the assumption of a psychological basis as most of the support comes from the psychodynamic field. What little empirical research there is appears to be locked in disagreement, either corroborating or contradicting the origins of RAS. This study aims to assist in the address of this discrepancy by simultaneously measuring, through a self-report questionnaire, current RAS and history of RAS with perceived stress (PS), and significant life events (SLEs), in a sample of respondents ($N=167$). It was hypothesised that there would be significant associations between PS and RAS, and SLEs and RAS. With the aid of bivariate analyses, and a series of one-way ANOVAs, the results indicated that there was a statistically significant relationship between the presence of aphthae and PS ($r=0.177$, $p<0.05$, and $F(1,167)=4.601$, $p=0.033$). However, no relationship was found between SLEs and RAS. A statistically significant relationship was also found for aphthae number and history of RAS ($r=0.200$, $p<0.005$), thus suggesting the chronic nature of long-term RAS. The implications along with possible treatments and therapies were considered with a view to alleviating the symptoms, and through understanding the development of aphthae eventually overcoming their trigger.

Does humour affect health? Some evidence for mid-term effects

C. MITSAKIS, D.R. RUTTER & K. HAMILTON-WEST, University of Kent.

Background: The aim of this study was to investigate the relationship between humour and health from the perspective of the 'specificity hypothesis'. This hypothesis proposes distinguishing between positive and negative styles and forms of humour and assumes salutary effects of the former and detrimental effects of the latter on health.

Methods: The study was prospective and conducted in three phases with a two-week interval between them. Self-report scales were used to assess trait negative and positive affectivity and dispositional optimism (phase 1), use of affiliative, self-enhancing, aggressive and self-defeating humour over the last 15 days (phase 2) and state anxiety, depression, physical symptoms, visits to doctors and perceived health status over the last 15 days (phase 3). The sample consisted of 171 undergraduate students (mean age=20.27, $SD=3.76$); 141 females and 30 males. The data were analysed with hierarchical multiple regressions.

Findings: After controlling for demographics and personality dispositions, affiliative humour was a

negative predictor of depression ($\beta=-0.22$, $p=0.01$) and aggressive humour was a positive predictor of number of visits to doctors ($\beta=0.23$, $p=0.011$). Self-enhancing humour was a marginal negative predictor of number of physical symptoms ($\beta=-0.16$, $p=0.063$).

Discussion: The findings provided some support for the specificity hypothesis. Research should identify the mechanisms by which the different humour styles affect health. The feasibility of interventions to modify a person's humour styles to benefit health should be investigated.

Spouse control beliefs and predicting recovery from stroke: General and specific control measures

G.J. MOLLOY, D.W. JOHNSTON, M. JOHNSTON, B. POLLARD, University of Aberdeen, V. MORRISON, University of Wales, Bangor, D. BONETTI, S. JOICE & R. MACWALTER, Ninewells Hospital and School of Medicine, University of Dundee.

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. There is little data demonstrating whether the specificity of control beliefs in spouses improves the prediction of health outcomes in patients. In this study we examine this hypothesis 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 completed ambulation scale of the Functional Limitations Profile.

Predictor variables: A single item was used to measure spouse's perception of 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 (residualised change).

Findings: The behaviour specific measure of spouse control beliefs was significantly correlated with patient 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 significantly related to stroke patient recovery over eight weeks while the spouse general control beliefs about recovery were not. Targeting specific control beliefs in spouses may 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 objectively through specific questionnaires but do not measure individual experiences or their subjective impact.

Methods: 97 people with Type 1 diabetes were recruited to an eight-week user informed programme of education and support. Twenty per cent of participants were interviewed 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.

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 programmes. These were highly significant experiences that 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 intervention programmes should be examined using objective (questionnaires) and subjective (diaries and interviews) measures.

Smoking and injury in Royal Marines' recruit training

K. MUNNOCH & R.S. BRIDGER, Institute of Naval Medicine.

Background: The Royal Marines (RM) 32-week training course is considered to be one of the most arduous military training regimes in the world. Given that 16 per cent become injured and are transferred to 'Hunter Company', and the average recovery time is 14 weeks; it is of interest to the management of Commando Training Centre Royal Marines (CTCRM) to identify predictors of injury, with a view to implementing interventions to reduce its occurrence. The aim of this study was to analyse data already available on a cohort of recruits, to investigate whether any of the variables were associated with injury. It was hypothesised that smoking may be related to the incidence of injury in RM training.

Methods: Smoking status of recruits on entry and injury data were collected for one year of training, from a medical database held at CTCRM. The data were analysed for differences between Hunter Company recruits and recruits who had completed mainstream training without suffering an injury sufficiently severe to warrant transfer to Hunter Company.

Findings: A significant difference (Chi-square=8.15, $p<0.01$) was found between the smoking status of recruits who became injured and those who did not (24 per cent of smokers became injured compared with 15 per cent of non-smokers). The proportion of recruits in Hunter Company who smoked more than 10 cigarettes a day was almost twice that of recruits not in Hunter Company with a similar habit. Of the psychological and demographic variables on which data are routinely collected, age, 'risk zone' and smoking explained four per cent of the variance.

Discussion: The findings of the current study support the hypothesis that smoking is a risk factor for injury. Possible interventions include reinforcing the association between smoking and injury to recruits prior to and throughout training and the collection of smoking status throughout training for use in future studies.

What should we tell the children? Development of a theory- and evidence-based programme to promote parent-child communication about relationships and sex

K. NEWBY, J. BAYLEY & L.M. WALLACE, Coventry University.

Background: The effectiveness of interventions aimed at improving parent-child communication in preventing or reducing adolescent sexual risk behaviour is unknown. Existing interventions have been criticised for their failure to be grounded in theory or research. The aim of this research was to develop a theory- and evidence-based programme to increase the quantity and quality of communication between parents and their children about relationships and sex.

Methods: Development of the programme was guided by Intervention Mapping procedure. Determinants of communication were identified through four focus groups with parents of children aged five to 14 years ($N=25$; analysed using content analysis) and a review of empirical evidence. Proximal programme objectives were identified from the determinants and then divided into theory-based learning and change objectives. Theory-based intervention methods and practical strategies were chosen on the basis of their appropriateness and evidence of effectiveness. Programme components and materials utilised communication theory and were developed

through collaboration with a team of specialists. **Findings:** Six proximal programme objectives were developed from 33 determinants of parent-child communication. Learning and change objectives, based upon attitudes, knowledge/skills and self-efficacy, identified the immediate focus for the programme. Development of intervention methods and practical strategies utilised theories of attitude change and formation, theories of learning and social learning theory. Programme 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 parent's portfolio, and a stand-alone leaflet. **Discussion:** Through employing experimental methods, providing clear descriptions of intervention techniques 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 programmes concerned physical exercise, a study programme to reduce stress during exams, and monitoring financial behaviour. **Findings:** Manipulation checks indicate exercise increased on average from one to six sessions per fortnight (for those in the physical activity programme), study time increased on average by 10 hours per week (for those 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; VIT) and self-reported regulatory behaviours. For example, students reported a decrease in impulsive spending. Health-related behaviours also improved. Students lost their temper less often, and reported decreased stress and emotional distress. Smoking, alcohol and caffeine consumption also decreased, whilst healthy dietary patterns increased. All controls remained stable. **Discussion:** The strength model of self-control offers the best fit to the experimental findings. These findings hold vast practical significance. Lifestyle factors are implicated in many areas of health and well being, from cardiovascular diseases to stress. Nearly every major personal and social problem has some degree of self-control failure. This research, however, demonstrates that with regular regulatory exertion, we can look forward to maintaining good health (physical and emotional), better stress management, and the attainment of academic and financial goals.

Post-media suppositions: Women's discursive constructions of pre-menstrual syndrome (PMS)

J. OSBORN & A. AUBEELUCK, University of Derby.

Background: Previous research by Levy and Chrisler (1990) has found that the media's portrayal of the pre-menstrual woman is negative and helps to maintain the stereotype of the maladapted woman. In addition, Swann and Ussher (1995) and Sweinsdottir *et al.* (2002) have identified that personal experiences of the menstrual cycle may be constructed by women with reference to stereotypical notions of pre-menstrual syndrome (PMS). Therefore, given that the media is said to influence women's beliefs (Weston & Ruggiero, 1985), this present study is a partial replication of Levy and Chrisler's (1990) study which aims to establish whether the media's portrayal of the menstrual cycle is still as negative today as it was 15 years ago. **Method:** 59 British media articles were analysed using content analysis (Morgan, 1993; Weber, 1990). The data was examined for positive, negative and neutral information alongside personal constructs of PMS (Sweinsdottir *et al.*,

2002) in order to identify any emerging themes within the text.

Findings: The majority of media articles were neutral and informative, presenting a variety of symptoms and treatments. Additionally, four themes emerged: 'Men: the victims of PMS', 'It's not really me, it's the PMS, or is it?', 'Legitimising treatments and Explaining PMS' and 'PMS—the Excuse'. **Discussion:** Findings demonstrate a general positive shift in the media's portrayal of PMS. However, personal constructions of PMS (Sweinsdottir *et al.*, 2002) were identifiable within the data suggesting the media influences PMS beliefs and, therefore, prevalence rates for PMS may be partly formed by post-media suppositions.

Understanding the patient's experience and meanings of chronic pain: A qualitative study

S.M. PEACOCK, P.J. WATSON, University of Leicester, S. KUMAR, University of Brighton & S. BONAS, University of Leicester.

Background: To investigate how patients experience chronic pain, and identify the meanings they attribute to this experience in order to inform improvements in pain management service provision.

Design: Qualitative analysis of in-depth interviews using the constant comparative method.

Setting: A large secondary referral pain clinic in Leicester.

Participants: 16 patients attending the chronic pain clinic: seven male, nine female, age range 29 to 79 years (mean 56.4 years), self-reported ethnicity, 11 White British, five South Asian. **Findings:** Four main categories emerged; the meaning of pain, uncertainty, social support and timeframe. This paper will focus on the meaning of pain, and eight sub-categories are described. The results from this aspect of the study show pain to be a phenomenon with complex social and emotional meanings, which are not fixed and for many are often ambiguous. The concept of pain encompasses individual's difficulties in explaining sensations that cannot be seen (i.e. making the invisible visible), socio-cultural aspects, mood, sensation and limitations to physical, 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 to examine the lived experience further 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 sufferers, 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 referring 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: Themes identified relate mainly to reproductive and appearance concerns. Where weight is addressed, the focus is primarily on appearance. Broader 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 conforming

to culturally acceptable appearance. This narrow focus may or may not reflect the concerns of women who read the magazines in question. It does however mean that an opportunity is being missed to educate women as to the broader health consequences of PCOS, and the availability of a range of interventions. A case is made for improved health education about PCOS, and for further research into the knowledge and representations of PCOS in women in the community.

Knowledge of stroke risk and symptoms, and willingness to seek emergency medical assistance: An exploratory study with members of the African Caribbean community in the West Midlands

C. PERCY & J. WILKINSON, Coventry University.

Background: Timely medical intervention for stroke is essential, both to preserve life and to limit lasting impairment. However, in many cases people suffering a stroke fail to access prompt medical attention. One explanation for delay may be the interaction of stroke knowledge with expectations about the use of emergency services. This study assessed stroke knowledge and anticipated responses to stroke in members of the African Caribbean community in the West Midlands.

Methods: A stroke knowledge questionnaire adapted from Parahoo *et al.* (2003) was completed by 23 people attending two community centres in a West Midlands city. Interviews and focus groups were conducted with 19 people attending the centres.

Findings: Compared to Parahoo *et al.*'s sample, participants in the current study were less able to identify the classic signs of stroke (sudden weakness on one side of the body, sudden loss of speech) but more likely to recognise less well known signs (such as sudden loss of vision in one eye). They also focused on a different range of risk factors for stroke. The most frequently anticipated response to a suspected stroke was to call the patient's General Practitioner, rather than summon an emergency ambulance. The qualitative data suggest that the reasons for this response were uncertainty about stroke symptoms and severity, and concern not to waste emergency services' time and resources.

Discussion: These findings suggest that theory on stroke knowledge and behaviour needs to recognise cultural variation in the meaning of stroke. Further research is needed to explore the meaning of stroke within the African Caribbean community, and to improve access to appropriate medical intervention.

An examination of psychological distress in chronic pain

C. PIRES, D. STEWART, University of Luton & S. JOTLINGHAM, NHS Hertfordshire.

Background: Utilising an earlier theoretical framework (Walker & Sofaer, 1988), this study considers some emotionally oriented factors that may account for psychological distress in participants attending an outpatient pain clinic.

Methods: This cross-sectional study used the Chronic Pain and Well-being Questionnaire (Walker *et al.*, 1989) – it assesses psychological distress, and subjective perceptions of pain – the latter includes measures of pain intensity, frequency, control as well as regrets about the past, feelings about the future, and issues surrounding personal relationships. ($N=45$, 14 males, 31 females, mean age=54 yrs).

Findings: Subjective perceptions of pain: a significant difference was found between men and women for factors regrets about the past ($t=2.209$, $df=43$, $p=0.033$); and blame for being in pain ($t=3.790$, $df=43$, $p<0.001$). Men reported higher levels for both. A further significant difference was found for blame for being in pain between age groups ($F=2.980$, $df=3$, $p=0.042$) – the older group blaming more. Regression analysis showed the main predictors of psychological distress (57.8 per cent of the variance) were description of pain, regrets about the past, and feelings about the future.

Discussion: The results provided support for the original theoretical model and emphasise the importance of variables description of pain, 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.

Barriers to recruitment in cancer clinical trials: Doctors' and patients' perceptions of suitability for trials

S. PULLEN, E. ALEXANDROU, H. FORD, M. YEADON, R. OWEN, L. EARLL, J. HAPESHI, A. ASHTON, M. GILES & H. BARR, Gloucestershire Hospitals NHS Foundation Trust.

Advances in cancer treatment require increasing levels of appropriate recruitment to clinical trials. Recruiting staff (trialists) make clinical judgements about the patients' suitability, however, patients' perceptions of clinical trials will influence their final decision concerning their participation. The aims of the research were to inform the planning and activities of those undertaking clinical trials, clarify the criteria by which experienced trialists evaluate the suitability of potential recruits and compare this with the perceptions of patients themselves. Clearer understanding of these processes should aid the delivery of future trials. The research was guided by the process of triangulation, combining qualitative and quantitative methods.

Phase 1 involved semi-structured interviews based on the theory of planned behaviour (Ajzen, 1985), with four trialists and 12 patients to establish perceived barriers to participation from their perspectives and the degree of match/mismatch between them. IPA (Smith, 1996) was used to analyse the data.

Phase 2 consisted of two option-analysis questionnaires based upon the results of phase 1 and was distributed to 26 trialists and a sample of 120 patients: 68 who were not eligible for trial participation, 35 who had accepted trial participation, and 17 who had declined trial participation. Amongst the three patient groups responses did not vary markedly. The most significant areas of mismatch were found between the combined patient group and the trialists, showing that health professionals and patients have different perceptions about clinical trials. Findings implicate a need for future trial recruitment guidelines that incorporate patient perspectives.

Cancer and work: The effects of cancer on working lives

J. PRYCE, University of London, J. MORRELL, CancerBACUP, F. MUNIR, K. 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 and those working along side them (e.g. employers, line managers, co-workers and (Occupational) Health professionals). CancerBACUP distributed a questionnaire to cancer patients, 328 responses were received. The survey included items of cancer-specific and 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, the patterns of disclosure of cancer, the information and level of support surrounding work issues and the work adjustments received differ to those reported in other studies of 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-treatment 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 genetic-related epidemiological and behavioural studies with relatives of identified patients with common multifactorial 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 to be contacted directly by the researchers; 38 per cent (144/377) requested study materials be sent to them so that they could pass the materials to their 443 relatives personally. Two per cent (6/377) requested a mixture of the two methods and 25 per cent (94/377) failed to meet inclusion criteria.

Findings: Eligible responses were received from 80 per cent (296/368) of relatives contacted directly by the researchers, and 65 per cent (286/443) of those due to be contacted via their affected relative. Similarly high numbers in each group expressed interest in participating in the research (89 per cent (262/296) direct; 86 per cent (246/286) indirect).

Discussion: As predicted, direct contact maximised response rates. Concern has been expressed that direct contact 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 deny relatives 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) between subjects design. $N=232$ undergraduate students voluntarily completed standard measures of prototype perceptions and variables from the theory of planned behaviour (Ajzen, 1991) and the Prototype/Willingness Model (Gibbons & Gerrard, 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 among 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 the prototype of the non-drinker ($M_s=68.10$ 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 abstainer images for young people's health-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.M. TURNER-COBB, 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 outcome 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 depression during school transition predicted lower awakening cortisol and extroversion predicted higher awakening cortisol. Temperament characteristics of higher activity levels and extroversion/surgency were related to higher evening cortisol and higher reports of smiling and laughter and teacher reports of greater impaired physical development predicted a flatter cortisol slope. 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 and duration of a 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. Thus expectancy biases are likely to contaminant 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 for cardiovascular exercise were also assessed. The *Symptom Assessment-45* includes symptoms of depression among those of other psychological disorders and was presented as an inventory of 'distracting feelings 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 decreases depressive symptoms in both males and females ($\beta_s=-0.252$ and -0.219), as does global self-esteem ($\beta_s=-0.424$ and -0.210). However, physical activity level has no direct effect on depression ($\beta_s=-0.039$ and -0.001). Furthermore, task and scheduling efficacy are significant predictors of physical activity level, with physical activity level having only indirect effects on depressive 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

antidepressant effects, with its indirect effects arising from increased physical activity and consequent increases in self-esteem.

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

H. SANDHU, University of Warwick, J. FISHER, D. GILES, M. BARNETT, H. COOKE & J. DALE.

There is a growing interest in breaking bad news, but relatively little exploration into effects of physician gender on this process. A random subsample of 10 videotaped simulated consultations with hospital consultants (five male and five female) and actor patients were selected from a sample of pre-intervention videos collected from a project designed to develop and evaluate an educational programme to improve hospital consultants breaking bad news skills. Each consultation was coded using the Medical Interaction Process System (MIPS) (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 centeredness using a Likert scale within the MIPS.

Results showed male and female doctors differed in key elements of patient centred communication, with female physicians demonstrating more of these skills. There were also some key differences in body language, with females scoring higher on affective body language. However, in relation to data gathering there was no significant difference in the frequency of open and closed questions asked by both male and female doctors, although male doctors tended to focus more on medical issues and were less likely to address social/psychological issues. Results have clear implications for teaching communication skills, and highlights the varied use of the MIPS as a tool to identify differences in communication style.

The usefulness of the theory of planned behaviour in predicting physical activity in a population obliged to exercise

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 the prediction of physical activity behaviour, explaining 45.5 per cent variance in intentions and 27.4 per cent variance in behaviour for free-living populations. 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 (77.4 per cent male; age 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, for five different physical activity behaviours. One week later participants completed a questionnaire reporting the frequency of participation in each of the five activities. The predictive validity of the model was analysed using hierarchical multiple regression.

Findings: Traditional TPB variables explained 45.5 per cent of the variance in intention and 10.2 per cent variance in behaviour. Inclusion of past behaviour increased these values to 52.0 per cent and 11.7 per cent, respectively. The strongest predictor of intention for all behaviours was PBC, with affective attitudes making a significant contribution for some activities.

Discussion: For intention 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.

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 at least 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 throughout the day. Thus walking has become a major target of health promotion.

Methods: 138 RAF trainees (77 per cent male, aged 20.06±3.72 years) wore *New Lifestyles NL-2000* pedometers for seven days. Participants then completed a seven-day Physical Activity Recall interview (Sallis, Haskell & Wood, 1985), during which participants itemised all incidences of physical activity, over the last 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 ($r=0.069$, 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 ($\beta=0.263$, $p<0.001$), 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 (Ouellette & Wood, 1998) and thus cannot be accurately reported (Aarts & Dijkshuis, 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 & 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 (Broome & 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 imposes extensive behavioural demands and invades all aspects of young people's physical, psychological, social growth and development. Investigating and analysing children's own 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 (Prout & James, 1997). **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 analysed in line with the tenets of grounded theory, utilising the software package Atlas Ti.

Findings: Young people with diabetes are conscious of negotiating relationships dependent 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 catalytic rather than defining qualities. Notions of 'normality' and attainment were paramount.

Health professionals' views of clinical guidelines regarding communicating the care management plan to patients

N.K. SHERGILL & L. YARDLEY, University of Southampton.

Background: Clinical guidelines, such as those developed by NICE, have been disseminated to enhance clinical effectiveness. Research has shown that there is great variability in the application of clinical guidelines by health professionals. The theory of planned behaviour was used as a framework in this study to identify the reasons for implementing or failing to implement a NICE guideline recommending communication of the care plan to patients with heart failure.

Methods: Semi-structured interviews were conducted with 21 health professionals. Participants were asked about their views of guidelines regarding communicating care management plans to patients. Interviews were analysed by thematic analysis.

Findings: All health professionals reported having inadequate time to provide patients with information and stated that at times they had to prioritise other important clinical demands above communicating with patients. Health professionals were uncomfortable using the term 'heart failure' as it did not clearly portray the illness and they believed it might result in patient distress. They also felt that older patients tended to place 'faith and trust' in doctors, relying on doctors to make decisions. All health professionals perceived heart failure patients as lacking an understanding of their condition and its management.

Discussion: Heart failure patients need to be educated about their illness and its management. Any strategy designed to implement this guideline will have to take into consideration the barriers identified.

Enabling autonomy, participation and well-being in old age: Home as determinant for healthy ageing

J. SIXSMITH, Manchester Metropolitan University, A. SIXSMITH, Liverpool University, S. IWARSSON, C. NYGREN, Lund University, F. OSWALD, University of Heidelberg, H.W. WAHL, Z. SZEMAN, Hungarian Academy of Sciences & S. TOMSONE, Medical Academy of Latvia.

Background: The aim of the ongoing ENABLE-AGE project is to examine the home as a determinant for healthy ageing in very old age using a longitudinal perspective, involving five European countries (UK, Germany, Sweden, Latvia, Hungary).

Methods: This poster overviews current findings from the three methodological approaches comprising the project. Firstly, key results are presented from the ENABLE-AGE Survey Study involving home-visits with randomly sampled very old people ($N=1919$, 75- to 90-years-old) living alone in private urban homes. The longitudinal survey design comprises two measurement points with a one-year interval. Secondly, the qualitative ENABLE-AGE In-Depth Studies involved 189 semi-structured interviews completed with older men and women in their own homes. Finally, a macro level update on housing policies (the ENABLE-AGE Update Review) highlights housing provision and standards in the five participating countries.

Findings: Key findings from the data are outlined and implications drawn. Here, the relationship between the physical and the objective aspects of home is established and the ways in which accessibility of the home is important in terms of psychological well-being. Furthermore, qualitative data indicates the importance of personal/social autonomy and social/community participation in the older person's quality of life at home.

Discussion: Combining a macro level policy update with extensive quantitative as well as qualitative empirical data analysis has the potential to enhance knowledge on the relationship between housing and healthy ageing and to enable older persons to maintain independence at home for as long as possible.

How do participants experience neuroimaging procedures? Preliminary qualitative findings

H. SMYTH, R. COOKE, C. SENIOR, R.L. SHAW, & E. PEEL, Aston University.

Background: Neuroimaging procedures are increasingly used in experimental and clinical health settings. The focus of this study is on exploring experimental participants' attitudes towards, and perceptions about neuroimaging 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 participants' 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 and/or fMRI. 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 fMRI and/or MEG as 'interesting' and feel well informed about the procedures *per se*. Moreover, fMRI seems to be viewed more favourably than MEG – with the experience of fMRI being characterised as 'surprisingly relaxing'. Participants tend to provide descriptive accounts about the experience of being inside the scanning equipment, and the experimental procedure itself. Yet within the fMRI context in particular, participants report being sensitive to the behaviour of the experimenter. **Discussion:** Making sense of participants' experiences within the often 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 economic repercussions. The aim of this study was to explore the potential associations between a number of possible intrinsic risk factors, such as psychological ill health, chronic illness, medication 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, a drug information sheet, accident and injury records and a blood alcohol saliva testing device and analysed using non-parametric tests. Falls were the leading cause (74 per cent) of their accident. Analysis indicated 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 medication use [such as ACE inhibitors ($p=0.013$), benzodiazepines ($p=0.004$), H₂-receptor antagonists ($p=0.003$)]. The findings of this study highlight specific target groups and key risk 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. MOSES & J. HAMPSON, Cardiff University & Cardiff and Vale NHS Trust.

Background: This study explores the quantitative relationships between cause of pain (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' illness perceptions 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 in how information about 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 Southampton.

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 computer 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 plus visual form. This manipulation enabled separation of the informative value and aversive components of pain in real therapy (simulated by visual and auditory feedback respectively). Eighty-four student participants completed SE, OE, and mood questionnaires at baseline and five further points. Results showed that those in the visual condition recovered more than those in the auditory and combined conditions, as a result of the participants in the visual condition more closely following exercise instructions. Regressions showed more positive OE, SE and mood were associated with better adherence. It was concluded that in this simulation positive mood, aversive feedback and SE and OE were important to performance. This may have implications for patients undergoing physiotherapy in that it may be beneficial to manage early expectations and mood since aversive feedback (e.g. pain) influences performance.

Socio-cultural and demographic influences on eating attitudes and behaviours: A study of Turkish women in Istanbul

T. TOWELL, A. SEN, University of Westminster, D. BAKER & E. LAWRENCE, Institute of Psychiatry, London.

Background: Although there have been numerous studies examining eating attitudes and behaviours in different cultural groups, few have focussed on Turkish women living in Istanbul. Turkey is of particular interest as it has an unusual mix of Eastern and Western influences. The clash between Western ideals and traditionalism has been proposed as a possible aetiological factor for eating disorders. This is the first study exploring eating attitudes of women in Istanbul using the Eating Disorders Inventory (EDI-2). **Methods:** The (EDI-2) was translated and administered to 100 Turkish women in Istanbul. A cross-sectional design was used with five categories of education ($N=20$). Indices of Westernisation and traditionalism were also given. **Findings:** This sample scored in the eating disordered range on five EDI-2 subscales. In addition, those educated to postgraduate level had lower total EDI-2 scores than those whose formal education ceased after middle school. Less education and high BMI were significant predictors of EDI-2 score. **Discussion:** Education may protect against abnormal eating attitudes amongst Turkish women in Istanbul, however, it may also reflect factors such as family traditionalism. If conflict between two social worlds is a potential aetiological factor in unhealthy eating attitudes and behaviours, then developing strategies to mediate the impact of such 'culture clashes' may prove valuable.

Predictors of fatigue in rheumatoid arthritis: Perceptions of consequences as a mediator of the impact of employment status and functional disability

G.J. TREHARNE, University of Birmingham, A.C. LYONS, Massey University, C.E. GOODCHILD, D.A. BOOTH, University of Birmingham & G.D. KITAS, Dudley Group of Hospitals NHS Trust.

Background: In rheumatic diseases, fatigue is a commonly occurring but under-studied outcome in comparison to pain. We examined predictors of the course of fatigue experienced by rheumatoid arthritis (RA) patients grounded within Leventhal's self-regulatory model of illness perceptions. **Methods:** Data were collected on 134 RA patients (73 per cent women; mean age 56.34 years). Fatigue was measured on a visual analogue scale at baseline and one year later. Baseline reports were also taken of current employment, functional disability and illness perceptions. **Findings:** In hierarchical regression analyses, RA patients who were out of employment had higher fatigue after one year ($\beta=-0.28, p<0.05$). This effect was removed ($\beta=-0.10, n.s.$) by adding functional disability, which then predicted fatigue ($\beta=0.44, p<0.001$). Subsequently, this effect of functional disability was removed ($\beta=0.24, n.s.$) by adding perceptions of consequences which in turn predicted fatigue ($\beta=0.30, p<0.05$). The mediational relationships were complete as being out of employment related to greater functional disability ($\beta=-0.45, p<0.001$) and more severe perceptions of consequences ($\beta=-0.29, p<0.01$). Finally, functional disability related to perceptions of consequences ($\beta=0.68, p<0.001$) and removed the relationship of employment status with perceptions of consequences ($\beta=0.02, n.s.$). **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: The rates of 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 considerable research efforts, there is still uncertainty as to the most effective sex education interventions. The development of CD-ROM technology for the delivery of targeted sex education 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 $N=3334$ teenagers aged 13 to 16 years accessed in school classes. Within a larger survey covering other 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 this media were related to the presentation on information on an individual basis that was perceived as especially beneficial for embarrassing issues, the appeal of using technology to learn, less preparation and the advantage of being able to work without disturbance or distraction. Of those who reported that they wouldn't like CD-ROMs used, the most common reasons given were that their use might be at the expense of discussing issues with their peers, or be too 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 and indicate that young people would engage well with this media. It is recommended that this method of delivery should be part of 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 knowledge of depression (Charman & 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 that explained the concept in child-friendly terms, before continuing the interview. Interviews were audio-recorded, transcribed verbatim, and analysed using content analysis.

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 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 referred to emotional expressions such as anger 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 personal experience of stress (74 per cent). 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 for 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: Despite the availability of effective treatment for hypertension it 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), reported adherence and beliefs about lifestyle recommendations (Lifestyle Advice Questionnaire).

Results: The findings showed that treatment beliefs were the most useful factor in explaining 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 indirectly. A hierarchical linear regression analysis confirmed the univariate results finding that treatment beliefs explained the most variance in reported adherence, followed by socio-demographic and clinical factors, and illness perceptions. Illness perceptions were inconsistently associated with reported adherence to lifestyle recommendations and beliefs about the coherence of that advice were 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. The weak relationship between illness perceptions and beliefs about the coherence of lifestyle advice, and reported adherence to lifestyle recommendations suggest that factors not included in the SRM are more important in determining this behaviour. An intervention to establish the causal relationship between treatment beliefs and reported adherence to anti-hypertensive medication is required.

Creating habits around healthy food products

M.F. WEEGELS, R.LION & E.H. ZANDSTRA, Unilever R&D 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 behaviours performed largely automatically). This study aims to provide insight in the factors determining habit formation around a single food product, as this is a gap in the health literature with its focus on total diets.

Method: Eight in-depth interviews were conducted with frequent users 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 was 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 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 (birthdays). Habits belong 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. breakfast).

Discussion: Based on this framework, we hypothesise that habits around healthy food products are more easily created and maintained 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 communicating probabilities, and service users understanding this information. However, cognitive psychology research has established that people have difficulty 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 (85.5 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), and were significantly more likely to correctly answer frequency scenarios than percentages scenarios. Other participants gave significantly fewer 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 more 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, 12 partners or companions, 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 showing heuristics, computation, and guessing. 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), computation by 50 participants (94.3 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).

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 from the perspective of individuals with multiple sclerosis

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

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

Method: The participants ($N=87$) 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 63 per cent were female. Mean anxiety and depression scores were 9.99 ($SD=3.72$) and 8.16 ($SD=3.30$) respectively. 74 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 ($p<0.01$), MS Impact and anxiety scores ($p<0.01$) and also between MS Impact and depression scores ($p<0.01$).

Discussion: The findings of this exploratory study demonstrate that individuals with MS are at risk of psychological distress. The findings also suggest that the individuals who perceive MS to have a greater impact on their lives have increased levels of anxiety and depression. It is proposed that people with MS may benefit from a self-management intervention to give them skills to manage their condition more effectively, which may then, in turn, lower the perceived impact of the condition and in turn improve their psychological well-being.

Experiences of living with multiple sclerosis: A qualitative study

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

Background: Multiple sclerosis (MS) is the most common neurological condition affecting young adults and around 85,000 people in the UK have MS. Prevalance among women is about twice that found in men. In MS, spasms, stiffness, pain and fatigue are typical symptoms. Furthermore, the disease course of MS is uncertain and at any point in the condition the course can shift and this uncertainty has been identified as one of the major problems for people with MS. Research has also shown that the incidence of depression is greater in individuals with MS. However, very little qualitative research has focused on the psycho-social well-being of people with MS and the impact the condition has on their quality of life.

Method: Semi-structured interviews were conducted with 20 members of the MS Society. Interviews were conducted over the telephone and transcribed verbatim. Data were analysed using thematic content analysis. The mean age of participants was 51 years ($SD 8.3$) and 14 of the participants were female.

Findings: Participants reported that they experienced a number of difficulties, in particular pain and fatigue which placed limits on their daily lives. A number of participants reported that their MS limited their social activities and three participants reported that they had given up work due to their MS. Participants reported that this social isolation in particular lead to feelings of depression and anxiety about their futures.

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 consideration for 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 severity and the conditions 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 transcribed verbatim. The data were analysed using thematic content analysis. The median age of participants was 59.5 years (range 35-80) and seven of the participants were male. Many participants reported co-morbid conditions including HIV, hepatitis C and rheumatoid arthritis.

Findings: Living with haemophilia involved pain, surgery, complex treatment regimes and the added 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 the individuals' lives. Three broad themes emerged when exploring the experiences and difficulties associated with living with haemophilia these were: communication difficulties and lack of understanding by 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. 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. Ambulation 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 wide range. Furthermore, the difficulty of each item is located along the disability scale and correlates significantly with the FLP item weights ($r=0.45$, $p<0.01$).

Discussion: IRT has identified useful FLP items for this population. It, therefore, offers a solution to the scoring problems and suggests a logical way of reducing the number of items without losing discrimination power, thereby reducing burden especially for chronically or acutely ill patients.

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

A. WINTERBOTTOM, H.L. 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 were 'decision 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 for statistical 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 data, but patients hold different beliefs about involvement in treatment choices.

Decision making cognitions - few studies assessed patient's reasons for treatment choices; reasoning about transplant choices appears to involve different attributes to cognitions about dialysis.

Study rigour - research quality was poor; two studies assessed decision making and two employed validated measures (SF 36; Decisional Self Efficacy Scale; Spitzer QOL Index); six were informed by theory.

Conclusion: There is a dearth of evidence describing patients' choices about treatment, and interventions that may facilitate involvement in illness management. As ESRF patients face 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 & P. 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, 100 'frequent' cannabis users (two to seven days/week) and 90 'less-frequent' cannabis users (not exceeding four days per month) were recruited from cities, towns and rural locations throughout central and southern England by survey. Later, a subset of 30 frequent users, and 30 less-frequent users were interviewed to obtain in-depth information about 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 ($N=17$), physical and mental health concerns ($N=11$), and reduced enjoyment ($N=11$). Changes in circumstances in both cases primarily related to leaving home/university, financial fluctuations, and changes in personal relationships. It was also a common reason for cannabis abstinence ($N=37$), although changes in this context related less to lifestyle patterns and more to short-term events (e.g. hospitalisation, holiday). In conclusion, motivations and inhibitions for escalation in patterns of cannabis use were predominantly 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.

Postgraduate Occupational Psychology Conference

Postgraduate Occupational Psychology Conference,
University of Nottingham, 12–13 September 2005.

INDIVIDUAL PAPERS

(ordered alphabetically by author)

Emotional Intelligence: Old wine in a new bottle?

K. BHINDI, University of Nottingham.

Background: The current investigation is unique in that it investigates the relationship between trait emotional intelligence (EI) and the Big Five personality traits on the performance of sales consultants and whether trait EI will predict job performance over and above personality traits. The idea that people differ in their emotional skills is a recently emerging topic in the field of occupational psychology. Those who are emotionally intelligent are likely to be able to think clearly and logically when faced with a situation, produce win-win relationships and outcomes, be able to control and manage their emotions and perceive quickly the emotions of those around them. In contrast, people with low emotional intelligence are likely to allow emotions to inhibit logical thought processes and are less likely to perceive other people's emotions. Research in this area has mainly focused on the relationship between the EI of senior managers and performance. The findings of previous research states those with high emotional intelligence are likely to perform better in jobs where high interpersonal skill is required.

There are many models and consequently many measures of EI. These can be divided into ability and trait measures. Ability measures of EI pertain primarily to the realm of cognitive ability whereas trait EI is emotional-related self perceptions and pertain primarily to the realm of personality and is measured using self-reports.

Since the emergence of the five factor model in assessing personality, there has been overwhelming support for the notion that personality, namely conscientiousness and emotional stability, are good predictors of job performance. However, it is still unclear whether EI is a unique construct which adds value over and above measures of personality or whether it is simply a reconstruction of some of the Big Five personality factors.

This study aims to investigate the relationship between EI and personality on the performance of sales consultants and whether EI predicts sales performance over and above measures of personality.

Method: This study will be cross-sectional in design drawn from a sample of adults working as sales consultants, up to and including senior consultants, for a recruitment agency. The consultants will complete the Trait Emotional Intelligence Questionnaire (Furnham & Petrides, 2000) and the BF1-44 personality questionnaire. The supervisors of the consultants will complete a bespoke job performance measure which will be used to assess the overall performance of the sales consultants. The data will be analysed using correlation and hierarchical regression examining increases in explained variance as a result of entering EI over the Big Five personality traits.

Discussion: The implication of this research within occupational psychology practice are two fold. First, in an era where customer service and interpersonal skills are important for building relationships with clients and ensuring repeat business, understanding EI, or aspects of it, may help to increase productivity in a sales environment. Second, if indeed EI predicts sales performance, it can be used in assessment practice to predict future job performance of potential sales candidates.

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-life research is conducted in economically 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 sense 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 qualitative data from semi-structured individual interviews and focus groups. Thirty undergraduate and postgraduate students (aged 21 to 28) from universities in the Manchester area were recruited following a call for participants posted on career centre websites. Fifteen male and female British students and 15 male and female students from Asia were interviewed. Asian students were from China, India, Indonesia, Malaysia, Singapore, and Thailand. Four focus groups were conducted with participants drawn from the interviews. All interviews and focus groups were audio-recorded and transcribed. Thematic analysis based on grounded theory is in progress to draw out relevant themes.

Some of the initial themes that emerged from the preliminary analysis include:

4. Exploring and negotiating personal definition of WPLI;
5. WPLI is an important concern, but for the future;
6. Social comparisons shape 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 organisational justice, 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 include 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 competition for talent (Lievens, Van Dam & Anderson, 2002; O'Leary, 2002; Herriot & Anderson, 1997; Cascio, 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 future 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 these 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 on an organisation's ability 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 analyses?

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 specific paper-based 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 conditions are controlled how will factors influencing hiring decisions affect choice of selection approach?

Methods: The study is an exploratory, cross-sectional investigation of selection practices 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 Spearman Rho correlations, with partial correlations subsequently being used to control for variables of external market factors.

Findings: The data were analysed using SPSS Spearman Rho Correlations between market factors and use of paper based selection techniques revealed significance $p < 0.05$, of 'complex technology' with the use of cognitive ability test (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', 'person-org fit' and 'person-team fit' are good indicators of which selection technique the organisation will utilise.

Discussion: There are a number of implications for the above findings. How would findings for example, impact the ability of Occupational Psychologists to make a business case of using systematic, standardised selection systems to companies in the developing world? If choice of selection technique is influenced by market factors, how will the discipline/researchers/practitioners embark on marketing standardised selection tools? Will providing empirical evidence and reiterating best practice be enough? If understanding the dynamics of choice and constraints on decisions have such a potential impact, could collaborative research and practice with social psychologists help 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 life both, in and out, of work. This research has shown that these difficulties can be overcome by adopting and practising appropriate selection, training and support policies.

There has been a call recently for an expansion on the samples used in expatriation research, so new insights can be offered. There has been no empirical research previously published that investigates cultural adjustment among expatriate football players. This is alarming given the nature of the modern football environment means that the aforementioned policies cannot be adopted. 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 15 expatriate professional football players. After contacting the Professional Footballer's Association, the national trade union for professional football players 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 contacted, with the aim of having two clubs 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 PLO's are responsible for assisting new players settle in and are especially responsible for expatriate players, whom they assist with practical matters, such as making accommodation and financial arrangements. There is little attention paid to the psychological effects of the move and a culture appears to exist where it is a taboo to discuss psychological distress, which all three PLO's admitted does appear to 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 never been investigated before, 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 organisations keen to bolster numbers of senior women have duly tried to facilitate the emergence of such developmental agents. Rationales and explorations of the process of 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 selected and 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 development of an individual's self-concept (Super, 1980). However, the idea of stability of self-concept in later career stages has been increasingly challenged, especially for women (e.g. Levinson, 1996; Melamed, 1996). Continuing self-concept malleability is also supported by the concept of 'possible selves' (Cross & Markus, 1991; Ibarra, 1999). Both sources argue for a continuing locus 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 uses the technique of the repertory grid to elicit constructs of role models from women at different career stages.

Methodology: This is a qualitative study using data from interviews with women from a professional services organisation. Ten women, grouped into 'early', 'middle' and 'later' 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 rate each of the six 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 constructs elicited 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 similarities or affect). Moreover, more senior women are expected to have a clearer notion of how a role model differs from other developmental agents.

Implications: It is hoped 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 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 developmental network 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

F.J. GAVIN & M.J. DAVIDSON, University of Manchester.

The global workforce currently consists of almost equal numbers of men and women, a situation that has emerged due to the continuing influx of women to the workplace since the 1970s (Wirth, 2001). However, despite this increased participation, women are still 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 women dominating lower 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 unique character of this organisation derives from the specific yet extensive nature of the cultural diversity within its workforce. As such, it presents a hitherto 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 promotion. 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 has remained. Initial analysis indicates that in accordance with Catalyst (1998), the most significant career barriers for women in this organisation may be:

1. An absence of career planning or structure.
2. Negative assumptions about the commitment and managerial abilities of women.
3. Non-participation in existing informal career networks.
4. Forms of 'cultural discouragement' such as rewarding long-hours rather than results.
5. Traditional performance evaluation that has not been updated to reflect more recently introduced flexible working patterns.

An additional issue is the possible lack of 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 structure. This reflects an interesting situation in which the organisation's commitment to national diversity conflicts with other organisational needs, 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 and management, with particular contributions to the debate on the role of gender within a multi-national organisation. There will also be 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 diverse human resource processes (Whiddett & Hollyforde, 1999). 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 expectations of 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 'a job for life'. 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 reflects the predicted increase in 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 address 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 interviewing was chosen as the method. Those respondents who felt unable to participate in a telephone interview were encouraged to respond to the same questions through an e-mailed questionnaire.

A mixture of free response and closed questions was applied, covering topics such as definitions of the concepts, experiences of the use of competencies in career development, perceived advantages and disadvantages of such proceedings, etc. Each interview lasted approximately one hour. Qualitative content analysis (Mayring, 2000) was used to analyse free

response questions in order to identify common issues and problems perceived by participants. **Findings:** It was found that there is no general agreement with regard to the definition of competencies or career development. However, competencies appear to be frequently used in different career development interventions, mainly focussing on the assessment of current performance effectiveness and potential, gap analysis and the subsequent design of individual development plans. Even though participants mentioned a range of advantages of the use of competencies, e.g. providing 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 aspired 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 if the use of competencies is to be 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 burgeoning costs of many expatriate assignments, it is important (both to the organisation and the employee) that the assignments be successful. Unfortunately, however, this is often not the case and it is estimated that up to 40 per cent of expatriate assignments fail, i.e. return home early. Some surprising statistics include the costs associated with expatriate failure, often reaching \$1 million or more for each individual failure. This has been converted into total losses for US firms in excess of \$2 billion per year. One of the most cited obstacles to expatriate adjustment is the phenomenon referred to as 'culture shock'. Culture shock has been defined as the 'stress induced by all the behavioural expectation differences and the accompanying uncertainty with which the individual must cope'. So the things that an employee may take for granted, like the car in front being a Toyota, sadly may not be the case. This often results in various levels of frustration that simply build up until he or she feels as though they have to leave the country. A review of the literature identifies that one of the main factors in determining whether an expatriate will successfully adapt to the new environment is personality, in particular, multicultural personality. Other factors have also been shown to have a significant affect upon expatriate culture shock and adaptation; these include organisational support, training, demographics, etc. Therefore, the present paper hypothesises that by using these additional factors along with personality it will increase the probability of predicting whether an expatriate will be successful on their overseas assignment (i.e. not returning home early) than just using personality alone.

Methods: Quantitative data will be collected in the present study via a questionnaire assessing various factors together with personality. The questionnaire has been distributed to a large sample of individuals from various sources, all of whom have had experience of an overseas posting(s).

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 overseas posting) or unsuccessful (returned home early). Regression Analysis will then be used to determine any relationships between the factors and 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 submitted.

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-Cultural Personality Questionnaire) together with other factors to add to a theoretical model of the factors that affect expatriate adaptation. Overall, the paper will provide useful evidence for 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. SPRIGG, 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, Dickter & Sin, 2004). Although research examining the effects of customer verbal abuse on call centre staff is sparse, the research that has been conducted has demonstrated the adverse psychological and behavioural consequences that caller verbal aggression can have. Stress and emotional exhaustion are amongst the complaints reported by call centre workers frequently exposed to hostile callers (Holman, 2002; Grandey *et al.*, 2004).

The current research examined the consequences of caller verbal aggression upon emergency control room staff. This is a context in which the effect of verbally aggressive callers has not yet been explored. However, it was considered a valuable context to examine, as it was anticipated that the heightened sense of urgency in emergency control rooms would have the potential to exacerbate the issue of caller verbal aggression to an even higher level than in other call centres.

A study by Grandey, Dickter and Sin (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 extended version of their proposed model of customer verbal aggression within the emergency control room context. A selection of Grandey *et al.*'s original hypotheses were retested to ascertain whether similar results could be obtained in an emergency control room setting.

The current research also extended the boundaries of Grandey *et al.*'s (2004) research by examining a number of variables not included within their original model. This included a more detailed examination of the consequences of caller verbal aggression on burnout, job satisfaction and alcohol consumption. Also examined were the potential moderating roles of social 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 a NHS Ambulance Control Room. Data is currently being collected in two stages. Stage 1 (which is the point at which this abstract finds the research) involved the distribution of a questionnaire to all call-taking staff within the emergency control room. The questionnaire included measures of all the aforementioned variables, alongside a number of demographic variables. Stage 2 will consist of a number of semi-structured interviews with a small volunteer sample of participants 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 implication of the study's findings would 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, University of Nottingham.

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 not only are psychological stress/strain levels often elevated (Gulian *et al.*, 1990; Novaco, Stokols & Milanese, 1990), but also there may be some detrimental physiological effects. Evans *et al.* (2002) in a study identified a relationship between rail travel stress and elevated salivary cortisol. Additionally Singer *et al.* (1978) noted possible links between rail travel and raised adrenaline levels. One of the main causes of travel stress relates to impedance. Kluger (1998) identifies impedance as any 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's perception is more applicable to rail users, especially journey distance or duration (Singer *et al.*, 1978). Factors relating to time urgency also appear to be extremely important in the commuting literature. Singer *et al.* (1978) suggest that infrequent travellers are more likely to experience acute stress. While 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 extraneous factors (e.g. Gulian, 1990). 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, passengers travelling for personal reasons will report lower stress levels than passengers travelling for work purposes. The effects of well-being will also be considered during analyses, as individuals with poor general well-being might have inflated stress levels. Questionnaires were distributed to 136 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 reduced efficiency, reduced productivity, absenteeism and lateness (Koslowsky, Kluger & Reich, 1995; Gulian *et al.*, 1990). This study assesses the stress caused by impedance and other extraneous 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 advance understanding of the practicalities and usefulness of presentations in selection. In addition, it was intended to further our knowledge of selecting for innovation implementers. This was original work, 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 idea implementation. Although there are selection tools that measure divergent

thinking styles and personality traits associated with innovation, these can be criticised for only measuring the idea generation 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 selection tools, bespoke research is needed to identify the behaviours that are typical of innovation in that specific organisation.

Methodology: Previous work done at Nestlé had already produced 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 innovators by their managers. The interviews provided an understanding of project and product management at Nestlé during the innovation process and formed 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 have high face validity and positive feedback was received from Nestlé employees. This validation exercise was also conducted to ensure the tool differentiated between 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. The trend is that those 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 created for the same purpose. The 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. McLEAN, City University.

Background: Corporate Social Responsibility (CSR) and employee engagement are well-used and popular terms in business and the world of work. However, research in these domains 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 stakeholders across a range of issues from pollution to fairness and ethics. From an organisational perspective, the drivers of CSR policy are diverse and may be rooted in a range of motivations such as altruism, enhancing or promoting the 'employer brand', compliance, or as a lever to improve business performance via one of the key stakeholder groups – motivated employees (Harter, Schmit & Hayes, 2002).

Employee engagement can be defined as a positive attitude held by the individual towards the organisation and its values (Robinson, Perryman & Hayday, 2004). Literature suggests engagement represents the final step in a three-stage process where the antecedents are satisfaction with, and commitment to, the organisation. Moreover, the strongest driver is the employee's sense of being valued and involved (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 engage the employee, who in turn has 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 significance attached to experiences (Francella *et al.*, (2004). Rep Grid practice has traditionally relied on utilising individuals as elements. As a result, the importance of 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 the collaborating organisation, elements comprising generic CSR activities were supplied. Constructs were elicited using triads and the outcome rated by participants on a scale of 1 to 5. The resulting grids were analysed qualitatively (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 participates 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 the first phase of a larger, 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 extent of bullying amongst police officers. Specifically, three key questions are asked:

- What forms does bullying amongst police officers take?
- How big a problem is it?
- Which aspects (forms) of bullying have the most adverse impact upon police officer well-being?

Several recent media expositions have suggested 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 often organisational factors rather than the dangerous and acute nature of some of the tasks that police officers sometimes have to undertake (Brown & 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:** The data to be presented are based upon a stress audit conducted in a UK police force. A questionnaire was compiled using information gathered from a preceding series of 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 385 female (six did not stipulate); 1268 full-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 overall stressor item bank used revealed nine stressor factors for police officers. Factor analysis of the specific bullying items resulted in a two-factor solution, 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 criticism of one's work effort or quality. Subsequent multiple linear regression analyses showed that bullying in the form of persistent work criticism was a significant predictor of self-reported well being, job satisfaction, organisational commitment and intention to quit (as measured by proven off-the-shelf measures). While it is only a minority of officers who report such 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 as a preventative measure or to be made more alert to the types bullying. Future research may wish to investigate any differences in the nature of this 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 structured application of mental imagery and its effectiveness on an individual's performance and motivation. Mental imagery refers to imagining the successful performance of a task before it is actually completed. This technique is known as visualisation and is commonly used by athletes to enhance their performance and rehearse certain moves/sequences of action. Research in sports psychology has demonstrated 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.

Visualisations are often divided into two techniques: rehearsal and end point visualisation. Rehearsal visualisations focus on actual tasks, end point visualisations refer to the outcome of a process. The main research question is whether participants would report higher level of motivation and performance on professional goals aided by the use of visualisation techniques (VTs) as opposed to those unaided by VTs.

Three hypotheses will be tested:

1. Participants will report a higher level of performance and motivation in achieving goals aided by the use of VT's compared to an unaided goal.
2. Participants will report an increase in their imaginary ability over the experimental period.
3. Participants with the more vivid images will report higher level of usefulness and a more overall positive impact on their goals.

Methodology: A minimum of 15 participants were recruited from a list of candidates who attended a motivational training programme which had VTs as one of its core components. Participants were asked to complete an initial assessment form on their average use and quality of VTs. Furthermore, they were asked to set themselves goals for the next two weeks. Two professional goals, one aided by VTs, one not, and a optional personal goal. Participants were then asked to keep a visualisation diary over two weeks. Finally, they were asked to complete a final assessment form on their current use and quality of visualisation techniques and how it impacted on their goals.

First hypothesis: IVs: goals 1, 2, 3,

DVs: self-rating on motivation, performance, usefulness on a nine-point Likert scale. Using non-parametric Kruskal-Wallis test. Rational: look for significant difference between DVs categorised by goals.

Second hypothesis:

IVs: pre-trial average rating on detail, uninterrupted/fragmented, vividness and ease to evoke of VIs.

DVs: self-rating 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 VT, use of script, high or low vividness, 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 basis 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 motivation and performance.

As far as the author is aware, this is the first study of its kind in the UK. Visualisation techniques have so far only been empirically tested in sports, clinical, and counselling psychology.

Overcoming 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 may also be felt in one's working life.

Doctoral research of the present author examines marginality rooted in, and arising out of, the terms of an individual's employment contract and considers implications for the work-nonwork relationship. Others have shown that marginalisation in the work context can occur as a corollary of non-normative – e.g. part-time (Lawren & Corbin, 2003) or temporary (Henson, 1996) – contractual arrangements. In this research project rotating shift workers (RSWs) similarly report feeling marginalised at work vis-à-vis non-shift working colleagues and managers. Furthermore, findings suggest the (negative) spillover effects of work-induced marginalisation into the nonwork lives of this cohort are considerable because irregular, 'anti-social' work schedules prohibit full participation in social and familial activities governed by regular, diurnal temporal norms.

This study was designed to examine: (a) RSWs' efforts to overcome social alienation through attempted ingress into established social groups; (b) existing group members' responses to newcomer efforts; and (c) collaborative efforts in relation to newcomer identification with the group. The individual's and others' efforts were operationalised in terms of the 'membership claiming' and 'membership granting' strategies proposed by Bartel and Dutton (2001). Data were analysed: (i) to assess the generalisability of these strategies to non-work organisational contexts; and (ii) to further understanding of the temporal progression of organisational identification processes. Eleven one-to-one critical-incident based semi-structured interviews were conducted. Participants, six men and five women, aged between 24 to 47 years, were employed in either the manufacturing industry or nursing care work. Interviews, lasting between 40 minutes and 80 minutes, were audio-taped and later transcribed. Data collected were analysed by means of systematic data reduction and data display, enabling credible conclusions to be drawn and subsequently verified (Miles & Huberman, 1994). Findings show that 'claiming' and 'granting' strategies as a means to establish group membership generalise to nonwork 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) engendered 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 (existing members not willing to embrace a newcomer who wants to belong) were associated with weak organisational identification. Continuity in group attendance was found to facilitate inclusive reciprocity; whilst lack of continuity was sufficient to forestall newcomer ingress – even where reciprocated efforts were strongly inclusive.

This study underscores the synergic impact of individual and group efforts for organisational identification as a process – one 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 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 thus a topical issue for UK employers. The research aims to investigate whether there are age-related differences in attributional patterns similar to the differences shown for gender (Silvester, 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 employing 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 selected as a useful and unobtrusive method for assessing age-related differences in social constructions that may be affecting selection outcomes. This technique extracts spoken reflections 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 attributions can then be 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, if so, how selectors' patterns of attribution relate to selection outcomes.

Method: 20 participant applicants (10 older and 10 younger) will be interviewed by the researcher at the beginning and end of the selection process. The researcher will be blind to selection outcomes while coding the transcripts of these interviews. At the end of each applicant's selection process, the selection interviewer will also be interviewed by the researcher and their attributions for each applicant's performance during the selection process will also be analysed. The Leeds Attributional Coding System will be used to code all interview transcripts. The following relationships will be assessed using correlational analysis between:

- applicants' attribution patterns and their age;
- applicants' attribution patterns and selection outcomes;
- selection interviewers' attribution patterns and selection outcomes.

Results: The research is currently being conducted as part of an MSc research project within the

Royal Bank of Scotland's insurance businesses. Initial results will be available by the end of August.

Discussion: The research will extend existing social constructionist research on applicants' and selectors' attributions during selection and assessment by investigating age-related differences. The findings will be used by the sponsoring organisation to inform future training activities for selection interviewers. It is intended to follow this research with longitudinal research into attributions about subsequent on-the-job performance of those successful older applicants in a 'young' age-typed role in their call centre environment.

The effects personality and emotional intelligence exert towards employee satisfaction and well-being levels at the workplace

M. SINGH, University of Nottingham.

This paper focuses on personality and emotional intelligence (EI). Personality is the unique and relatively stable factor that determines individual's behaviour in almost all settings and has said to be a great predictor of dimensions related to working life. EI is one of the newest branches of industrial psychology and is gaining increasing relevance in the field. Multinationals are now realising that EI and personality are equally important as intelligence in enhancing corporate performance and overall development of organisations. Research in this area indicates a direct link between the two.

This research, therefore, aims to study the effects of both the Big Five personality factors and EI on employee satisfaction and well being levels. Using personality and EI, I hope to be able to predict the levels of satisfaction and well being experienced by the employees. Learning about employee's level of satisfaction gives us an insight to the nature of the future work and productivity levels of the people. The turbulent development of the working life today has had a significant impact on the employee well-being levels. Well-being and satisfaction level of employees is vital predicting individuals over all performance at work, which then trickles down to the larger performance of the organisation, affecting the system as a whole. The main hypothesis of this research thus tests the link between personality and EI and goes beyond to test if EI makes further contributions over and above that of the Big Five personality factors in predicting employee satisfaction and well-being. Keeping this interest in mind the study is based on quantitative research methods, using questionnaires. A sample of 120 participants from the working Indian population gathered from two organisations namely ABN-AMRO (an international bank) and Modi entertainment (a media television house) participated in the study. Each participant completed off the shelf short versions of the trait EI scale, Big Five personality inventory, SIMP-R, job satisfaction and well being scales.

All ethical considerations have been provided for and measures taken to ensure participant anonymity along with data confidentiality. The expected results seem to suggest that there be a direct link between EI and the Big Five personality. A strong correlation is expected between EI, neuroticism, extroversion and to a lesser sense of conscientiousness in the Big Five model.

Reviving career anchors: A normative approach

C.A. STEELE & J. FRANCIS-SMYTHE, University College Worcester.

The concept of career anchors was developed in the 1970s by Edgar Schein and is still in use today. Most general textbooks on careers will refer to career anchors as they have proved to be a popular concept; despite there being limited empirical evidence to support their development. Schein's original work was based on a longitudinal study of MIT graduates from which he proposed that there were five anchors. Since then a number of studies have suggested different numbers of anchors ranging from the original five up to nine (Crepeau, Crook, Goslar & McMurtrey, 1992; Custodio, 2000; De Long, 1982; Feldman & Bolino, 1996), this confusion has led to inevitable criticisms.

Schein developed a weighted questionnaire called the Career Orientation Inventory to assess an individual's career anchor. This questionnaire was designed to distinguish between the generally agreed number of eight career anchors. The questionnaire is weighted to determine an individual's primary career anchor, as Schein proposed that each individual has only one. The questionnaire has been criticised as the weighting process greatly reduces the reliability and validity of the measure (Brindle & Whapham, 2003b), so much so that it has been suggested this step is removed and the whole profile of career anchors is considered instead.

Despite its faults the concept of career anchors is particularly relevant today. It's major strength is its consideration of lifestyle factors such as work life balance and need for stability (Arnold, 2004), which is largely unaccounted for by other career models, such as Holland's theory 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 general norms available for the instrument, however (Brindle & Whapham, 2003a) suggest that using both a normative and ideographic approach to interpreting 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 and to develop norms for the instrument. This will make analysis and interpretation of an individuals' results clearer as it will be possible to determine what constitutes a high or low score. Finally it will be used to look for trends in career anchors as (Schein, 1996) felt that there would be a shift in the pattern of career anchors seen over time due to changes in the world of work. This data will be available in time for the conference.

This study is part of a larger project examining career development for police staff. Career anchors will be used alongside the Police Integrated Competency Framework to implement a system of 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 cognitive concepts, and theories that attempt to better understand the strategy formation processes. (Hodgkinson, 2001). This has been due to the pace of 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, Pisano and Shuen (1997) as the firm's ability to integrate, build and reconfigure internal and external competences to address 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 experiences (Hambrick & Mason, 1984). It, therefore, appears that an organisation's culture and individuals' values may have an effect on the development of strategy and that a gap may exist between the value of the individual and the culture of the organisation. In order for strategy to succeed there needs to be a harmony between these.

Aims of the research: From the literature there is a need to assess whether thinking styles, organisational culture and individual values do have an effect of the strategic planning process. Therefore, there is a need to identify strategic thinking competencies within strategic decision

makers (generally Senior Managers) and assess whether thinking styles are in line with the strategic aims of the organisation. Research will also be required as to whether the organisations' culture and individual values and beliefs fit with those of the strategic aims of the organisation, and what effects this may have on the organisation.

Methods: The study will include both quantitative and qualitative methods. Strategic aims of three organisations (two voluntary and one commercial, for comparison) will be identified through analysis of company documentation. Thinking styles of Senior Managers within these organisations will be assessed, using psychometrics. From this analysis strategic thinking competencies will emerge which can be tested for alignment to the organisational strategy. Senior Managers individual values and beliefs will be assessed along with the organisations culture in order to ascertain whether the values and beliefs of individuals fit with those of the organisation.

Discussion: The research will contribute in the broader sense to the discipline of Occupational Psychology by adding to the knowledge of individual thinking styles. It will provide findings into how values and beliefs of individuals may have an affect on decision making processes within both the voluntary and commercial centre. Recommendations will be made from case studies to able disparate organisations to deal with individual differences and organisational culture at senior decision making levels. The use of situational judgment techniques will also be developed to enable the assessment of individuals' strategic decision making abilities.

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. WHYMARK, University of Nottingham.

Background: City institutions such as stock brokers, accountants, investment firms, and law firms have for many years preferred to employ high performing graduates of the country's best universities onto their in-house 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 seats (areas). 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 a specific area of practice upon successful completion of training. It is not guaranteed that a trainee will get their choice of practice area once they are qualified (PQE).

According to the legal media such as the Chambers Student Guide, many newly-qualified solicitors feel a deep sense of disappointment if they are not accepted into their area of choice. 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 commitment to an organisation reflected the psychological ties between an employee and the organisation resulting in more favourable work-related behaviours such as increased job performance. This conference presentation will report on a project designed to look at perceived support from the organisation and supervisors. The project also looks at how tenure and perceived organisational and supervisor support influences other factors such as job satisfaction, motivation, self-esteem, and organisational commitment.
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. Trainees 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 and who trained within the firm in which they are currently employed. Therefore, there will be four cohorts (first and second year trainees and first and second year post-qualified solicitors).

Design

The cross sectional design will examine correlations between the various constructs within each cohort. It will also look for differences between the four cohorts.

Measures

To examine satisfaction with social rewards the Social Rewards Satisfaction Questionnaire by Seashore, Lawler, Mirvis and Cammann (1982) will be used. To examine the extent to which individuals experience positive feelings when performing well, the Internal Work Motivation Questionnaire by Hackman and Oldman (1975) will be used. Job satisfaction will be measured using the Single Item Questionnaire on Job Satisfaction by Nagy (2002). The relationship between these measure and measure of perceived support will be examined. Perceived support will be measured using the Perceived Supervisor Support Questionnaire adapted by Bishop, Scot and Burroughs (2000). Perceptions of support from the organisation will be measured using the Perceived Organisational Support Questionnaire by Eisenberger, Huntington, Hutchinson and Sowa (1986). Correlations will be examined between the measures and differences will be examined between the cohorts.

Ideally, it would be possible to randomly allocate participants to study groups. However, in the reality of this specific study, this is not possible. Therefore, it will be a cross-sectional study in which participants shall be distributed across the four cohorts *post hoc*.

Results: Results are not yet available.

Discussion/Implications: Many organisations employ high performing graduates. Some of them put their graduate recruits through a lengthy, expensive training and socialisation programme. This research will assist organisations in identifying career progression points where people may experience a lack of support. Should a significant link between support, motivation and job satisfaction be demonstrated then this would indicate an area in which organisations need to increase their awareness. Many graduate training programmes focus on training individuals in the relevant processes needed for a particular career. More broadly, this kind of research approach highlights an incentive for organisations to become more aware of how supportive they are perceived to be throughout an individuals working life. Moreover, it can prove to be a useful diagnostic tool for identifying areas where supervisors and managers may need additional training in how to provide more support.

Social support at work: What counts?

L. WILLIAMS & G.M. MULCAHY, University of Nottingham.

Social support is an important factor promoting health and well-being at work (Beehr, 1995; House, 1981). Research shows that it is the support available from within the organisation, rather than that from outside, that it is particularly efficacious (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 upon the nature of the problem or stressor upon which it is sought to bear. Logically, support from within the organisation is best place to help solve any problems that might be encountered within the workplace.

What is lacking in the research to date is precise knowledge of the behavioural indicators of social support. Put simply, what it is that colleagues and managers need to do in order for them to be seen as supportive? This is precisely the question that is explored in this paper.

The evidence presented here is drawn from a stress audit conducted for a UK police force. This audit utilised both qualitative (focus group) and quantitative (force wide questionnaire) methodologies. Included in the questionnaire and based on the evidence of the focus groups were:

1. 20 items detailing the precise elements and characteristics of social support (indicators);

2. An overall judgement of the perceived support available from both line managers and colleagues.

All of these items were presented as Likert scales. Based upon the questionnaires returned by 1354 police constables, the results of three sets of statistical analyses will be presented in this paper.

1. A principle components analysis to determine any underpinning structure to the indicators of support.
2. Multiple linear regression analyses to determine the strength of the relationship between the factors underpinning the indicators of support and four important outcomes (general well-being, job satisfaction, organisational commitment and intention to quit).
3. Multiple linear regression analyses to determine which of the indicators are most important in predicting overall judgements of supportiveness.

The results show that two factors were found to underpin the indicators of support, one pertaining to colleagues the other to line managers. In terms of predicting work attitudes and well-being, these two factors accounted for between five and 16 per cent of the variance in outcomes. Examination of their respective beta weights shows that it is the line manager's actions which are most important. Supportiveness, listening, reassurance and practical help were found to be the key behavioural indicators of support for both colleagues and line managers alike.

These results are in keeping with the literature which suggests that social support at work factors on the basis of source rather than type and also that which suggests that it is support from the line manager which is critical in promoting and supporting well-being at work (Leather *et al.*, 1998). The identification of the precise behavioural indicators of support provides a framework to inform the training, development and appraisal of colleagues and managers at work.

POSTERS

Effect of environment on well-being: Resident-friendly environments

A. AHMED, University of Nottingham.

Background: The aim of this study is to investigate the effect of environment on residents' moods and well-being before and after changes to spaces in a residential care home. Previous research has found that patients and residents specify issues regarding the effect of the environment on feelings of mood and well-being. Patients have specified the need for ample lighting, greenery indoors, stimulating pictures/scenery and furniture available to suit the patient's needs. Further studies have found that the environment of hospitals has an effect on the patient's well-being and mental processes; the aim of this study is to try and replicate these findings in residential home environment.

Method:

Design: An exploratory study of resident's feelings based on qualitative semi-structured interviews. The interview schedule has been outlined by the organisation to include particular questions that they would like answering.

Participants: Eleven participants took part from a residential care home; interviews were carried out before and after changes to the living environment of the same residential from the care home. The relevant staff administered the changes in the environment.

Analysis: Thematic analysis will be carried out on the transcripts produced to identify emerging themes and issues as reported by the participants.

Findings: Results in progress – completion date 20 August 2005.

Discussion: Results in progress – completion date 20 August 2005.

It is expected the findings from this study would replicate those of studies carried out previously. These findings would have both practical and theoretical implications for both residents and the organisation, if it is known that changes made to the living environment will improve the physical and psychological well-being of the participants then psychology has a duty to make such findings well known.

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. Laterally, it has become the subject of scientific enquiry in what differentiates people in their emotional skills. It is not without its drawbacks, however, and there remains some controversy over EI's psychometric properties and validation (Austin, Saklofske & Egan, 2005). EI is deemed to be an ability to process emotional 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 that could have wide implications for organisations. The central issue is whether personality or EI is the greater predictor of workplace performance, or whether a combination of the two may be more predictive of superior workplace success. Within the organisational context, EI is purported to have more predictive 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 South Africa which show correlations of 0.80, 0.78, 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: Determine personality types that has predictive value for above 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.

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 bright side personality and participants will be assessed by occupational scales of the HPI; namely service orientation, stress tolerance, reliability, clerical potential, sales potential, and managerial potential. Participants will complete these questionnaires by pencil and paper method. Bar-On's EQ-I will measure emotional intelligence on five standard scales, e.g. self-awareness and self-expression, social awareness and interpersonal relationship, emotional management and regulation, change management, and self-motivation. Within these scales are fifteen sub-scales. This is a 133-item inventory and will be administered online.

Data analysis: Correlational analysis will assess scores on each dimension of the HPI considering scale and sub-scale level associations with the EQ-I. Additionally, a multiple regression will assess personality dimensions that have greater predictive value for EQ-I dimensions.

Discussion – Work in Progress: The aim of the research is provision of data on personality and EI that may assist the selection and retention process.

While personality tests, ability tests and cognitive tests are commonplace in assessing candidates' attributes, there is little use made of emotional intelligence tests. To assess a candidate's overall ability to perform, issues of empathy, dutifulness, self-expression, and social responsibility are fundamental to willingness, responsiveness and motivation at work. While recent research correlates EI with work performance, there has been little done to correlate personality types and EI.

Power to the (resourceful) people!

E.R. NASH, University of Nottingham.

Background: Research indicates that an empowered workforce is essential for the survival of modern organisations. An understanding of the driving forces of employee empowerment is, therefore, critical. However there is a gap between current research and the practice in organisations. Empowerment initiatives have been described as the emperor's new clothes as they have failed to deliver individual and organisational benefits. (Argyris, 1998)

This project is based on the concept that in order for empowerment initiatives to succeed, employees must themselves choose to be empowered.

Spreitzer (1995, 1996) has developed a multidimensional conceptualisation of psychological empowerment, based on four cognitions: meaning, competence, self-determination and impact. Psychological empowerment is characterised by increased intrinsic work motivation and a proactive approach towards a work role. (Thomas & Velthouse, 1990)

There is currently insufficient research examining the moderators of the relationship between empowerment and organisational commitment. (Janssen, 2004) This project will analyse the moderating effect of Access to Resources on the relationship between empowerment and organisational commitment. In her study of the social structural characteristics of psychological empowerment, Spreitzer (1996) failed to find a significant relationship between Access to Resources and Psychological Empowerment, and emphasised the need for future research in the topic.

Methods: The project is based on a quantitative analysis using the following measures:

- Psychological Empowerment: 12-item empowerment questionnaire developed and validated by Spreitzer (1995, 1996). The four empowerment are each assessed with three items. All items based on a seven-point Likert scale, ranging from Strongly disagree (1) to Strongly agree (7)
- Organisational Commitment: Nine-item questionnaire developed and validated by Mowday, Steers and Porter (1979). All items based on a seven-point Likert scale, ranging from Strongly disagree (1) to Strongly agree (7)
- Access to Resources: Items adapted from Spreitzer's (1996) measures of Access to Resources. Spreitzer (1996) has suggested that for future research, the type of resources should be made explicit in the items. The items have been developed based on the organisation's documentation. All items based on a seven-point Likert scale, ranging from Strongly disagree (1) to Strongly agree (7)

Sample: Research is being conducted at three Aerospace Industrial Plants. Approximately 400 participants. Moderator regression analyses will be used in order to test the two-way interaction effect of psychological empowerment and access to resources on organisational commitment. This will involve a hierarchical analysis of the main effects of psychological empowerment and access to resources in Step One and their interaction in Step Two. It is hypothesised that the addition of the interaction term in Step Two will result in a significant increase in explained variance (R²).

Findings: Data will be collected in July 2005.

Discussion: It is intended that the findings be used to contribute to a nomological network of empowerment in the workplace based on the antecedents and consequences of psychological empowerment (Spreitzer & Doneson, 2005) The research can potentially be used by organisations to understand what types of resources can facilitate the successful implementation of psychological empowerment.

Gender, age and ethnic group difference on personality inventories used in personnel selection.

V. SU, Nottingham University.

Personality instruments are increasingly entering the wider toolkit in hiring for a broad spectrum of jobs. When choosing test instruments, in addition to criterion-related validity and construct validity, it is essential for employers to consider adverse impact, consequences for workplace diversity and potential litigation. The present requirement for personnel screening and selection methods is that they offer 'equal employment opportunity' to job candidates. Although a finding of adverse impact itself is not in itself proof of direct and indirect discrimination, it signifies an important aspect for the employer needing to exhibit that their selection method is 'valid, job-related, and fair'. Therefore, it is crucial to discover whether personality measures used in selection and recruitment display different mean scores in

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 group 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 files 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 the effect size statistic *d*. The *d* statistic is commonly used and considered the most appropriate means of comparing group differences in test scores. 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 occupational groups or relate to certain performance criteria. These findings clearly show the potential for personality to predict job performance. However, one of the key criticisms levelled against the traditional approaches to measuring the Big Five personality traits is that they lack a specific context. With this in mind, Woods (2004) linked each of the Big Five factors to specific meta-perceptive contexts and showed that the addition of meta-perceptions (how people think they are seen by others) to 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 with 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. **Methods:** This study will involve administering 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 relationships between Big 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 terms of how 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

Wessex & Wight Branch Workplace Bullying Conference, Portsmouth Business School, 14–15 September 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 SESSION LECTURES

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 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 (health care), a large police force and a Government agency. The study was carried out by means of a four-stages strategy:

(1) examining the experience of 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 the results from our previous nationwide study on bullying in Great Britain (Hoel & Cooper, 2000), our primary target was supervisors and middle managers. Three interventions were carried out with a focus on policy communication, negative behaviour awareness and stress management. The study was funded by 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 outcomes of a grassroots 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 organisational level, take into consideration 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 aggression and bullying and other 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 everything 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 number of categories 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 at all levels of seniority. 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 Royds 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. FFIELD, 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 the membership 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 a national 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 describe 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 in schools, and discuss how these can be used to benefit the workplace as a whole. The skills children are now learning to counter 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 with us to share both 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 is not tolerated. Achieving this will have wider implications for school discipline and also society as a whole, since the young people of today inevitably become 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.

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, from Roffey Park Institute, will explore the impact that external forces may have on behaviour and responses towards others. The session will begin with light-hearted 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 business objectives 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, for a number of years, policies and processes (with additional support) on dealing with harassment and bullying together with values on the behaviour BT expects from its people. This has also been supported by a number of initiatives to raise awareness and support the values and policy. This presentation will expand on BT's journey to 'cut out' harassment and bullying behaviour and the 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 comment on the 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 effects of support at work 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 three different governmental institutions. They were directorate of health, directorate of education and directorate of security. The questionnaires were brought them by the researchers in closed envelopes and filled out by themselves anonymously. All scales (except Hospital Anxiety and Depression Scale) were formerly translated from English into Turkish and were evaluated by the academic staff of Uluda University (Faculty of Education, Division of Foreign Languages, 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 & Staines, 1979) and the propensity to leave scale (Cammann *et al.*, 1979). The Hospital Anxiety and Depression Scale was translated into Turkish in 1977 and its reliability was found as 0.85 cronbach 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 (Bosna *et al.*, 1997): 0.89, Job satisfaction scale (Quinn & Staines, 1979): 0.86, The propensity to leave scale (Cammann *et al.*, 1979): 0.75.

Results: Some 944 employees returned questionnaires – a response rate of 77 per cent. We excluded some of the returned 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 likely to be by a manager. About 60 per cent of the victims had tried to take action when bullying occurred, but most were dissatisfied with the outcome. We found statistical significant differences between bullied and not bullied employees in terms of anxiety, depression, job induced stress and support at work.

Conclusions: Mobbing (bullying) is a serious problem and underestimated. It has severe physiological and psychological consequences. Support at work can reduce the damage and setting 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 with the high unemployment rate in Turkey.

The most seen type of bullying was work overload, followed by destabilisation and threat to professional status. The common bully was the manager. Support at work may be able to protect people from some of the damaging effects of bullying. Employers should have policies and procedures that compressively address the issue of workplace bullying.

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 of organisational 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 their role in 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 to determine the role of various risk factors within this process. The results suggest that task, team and organisational factors can cause mobbing through frustrations, 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 factors. This 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 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. Preventative strategies often concentrate on condemning unacceptable behaviour without encouraging more positive behaviour. This paper reports an initiative, 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 combination 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 behaviours that contribute to a climate in which antisocial behaviours are tolerated;
- promote acceptance of strategies that might be used to retrieve problem situations;
- help to produce a supportive culture where bullying and harassment are unlikely to occur;
- be relevant for teams at all levels of an organisation.

Feedback from focus groups and small-scale pilot studies with operational 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 where used.

Leadership and bullying at the workplace

M.B. NIELSEN, S. BERGE MATTHIESEN & S. EINARSEN, University of Bergen.

The aim of the study was two-folded: 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 superiors. The leadership styles were measured by the inventory Constructive and Destructive Leadership Behaviour (CDLB; Einarsen, Skogstad, Aasland & Bakken-Løseth, 2002), asking the respondent to describe the behaviour of their immediate leader. The subscales included are: Constructive; tyrannical; popular but disloyal; and derailed leadership. The inventory was supplemented with the index laissez-faire leadership (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 derailed 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 more that 82 per cent of the respondents experienced symptoms of post-traumatic stress above the recommended cut-off values for the disorder. After mutual control between the leadership styles, tyrannical leadership was the only 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.

The discernment of bullying in the workplace: An ethnicity classification problem using the classification and ranking belief simplex technique

D. LEWIS, University of Glamorgan & M. BEYNON, Cardiff University.

The antecedents that may define a person as a victim of bullying are inherently subjective and varied. This study undertakes a novel investigation of the depth of presence of these bullying antecedents, as perceived by individuals from different ethnicities, starting with the binary classification of them being either white or from an ethnic group. The antecedents considered, through a series of negative activity questions (NAQs), include self-identified behavioural and experience indicators of individuals in the workplace. The discernment of these antecedents is further investigated through what level of person is initiating the action, namely colleague or line-manager.

The dominant technique utilised here is the nascent classification and ranking belief simplex system (CaRBS). The rudiments of CaRBS are based on the Dempster-Shafer theory of evidence, hence is positioned in the analysis area of uncertain reasoning. This confers the support from each NAQ to discern the ethnicity of a respondent includes a level of ignorance, as well as levels of belief on being white or ethnic. Throughout the analysis emphasis is placed on the graphical presentation of results, using the simplex plot representation of data embedded in CaRBS.

The ethnicity relevance of each antecedent is exposed, and further understood when discerned with a number of respondents' demographics. The findings indicate a level of disparity in the noticeable antecedents from colleagues and line managers, but mutually prevalent issues included; hostility towards them and ignored/excluded in the workplace. The further prevalence of a victim facing being singled out by colleagues but not so much an issue when line managers are considered demonstrates the different bully-oriented experiences from the different levels of the workplace hierarchy.

Experiences of workplace bullying among 'non-traditional' students: Cause for concern for both business and education?

C. MCGUCKIN, Dublin Business School, J.E. HOUSTON, C.A. LEWIS & M. SHEVLIN, University of Ulster at Magee College.

Background: Are experiences of workplace bullying a contributing factor in the decision 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 assess 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 (Bjorkqvist & Osterman, 1992a, b, c, d) alongside the Work and Life Attitudes Survey (Warr, Cook & Wall, 1979).

Results: Overall, 32.4 per cent ($N=93$) of the respondents had been bullied in the previous six months (38.3 per cent, $N=31$ full-time; 30.3 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; 39.7 per cent, $N=81$ 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), business 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 (Dunkeld-Turnbull, Heaslip & McLeod, 2000), and bullying of overweight children in school is commonplace (Moran, 1999). Attempts to seek redress for workplace discrimination on the basis of obesity have been pursued in the US for some time, but such cases are rare in the UK. However, UK research has indicated that obese people do experience a pay penalty in the job market in that employment or promotion may be denied and that wages may be lower (Sargeant & Blanchflower, 1994; Harper, 2000). This paper will discuss these issues and explore the potential for discrimination and harassment on the basis of obesity in UK organisations, and the possible implications for organisations and obese employees. It draws on qualitative data collected from interviews with key personnel in organisations in the south east 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 'Managerial grid' (1968). 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. From this model, four 'extreme' variations of leadership behaviour can be outlined, namely: 'Constructive', 'Tyrannical', 'Derailed' and 'Popular, but disloyal' leadership behaviour. These types of leadership behaviour are 'extreme' because they are situated towards the extremities of the model, in either a positive or a negative direction. The study was based on a survey with 250 part-time students with a full employment status and a mean age of 35 years.

Leadership behaviour were measured by the inventory *Constructive and Destructive Leadership Behaviour* (revised edition) (Einarsen et al., 2002), where participants were asked to describe the behaviour of their immediate superior using a questionnaire with 42 items. Destructive and constructive leadership behaviour was also measured by four vignettes and corresponding descriptions of the four leadership styles (Aasland & Løseth, 2002).

An exploratory factor analysis revealed the existence of four leadership styles; constructive, tyrannical, derailed, and the popular but disloyal leadership behaviour. Perceiving ones immediate superior as a tyrant or a derailed leader correlated with low job satisfaction and with a negative evaluation of ones leader-member exchange. Having a disloyal but popular superior did not correlate with these criteria. Constructive leadership behaviour correlated positively high with both job satisfaction and leader-member exchange. A confirmatory factor analysis also supported the proposed model. Hence, the proposed conceptual model of leadership behaviour, including both constructive and destructive elements, received substantial empirical support in this study.

A quantitative study of task, team and organisational risk factors for workplace bullying in Flemish organisations containing over 100 full-time equivalents (FTE)

E. BAILLIEN, H. DE WITTE, K. VANOIRBEEK & C. DEWOLF, KU Leuven.

The Belgian law on workplace bullying explicitly orders employers to prevent these unwanted behaviours by working on organizational risk factors. This study wants to discover which risk factors at the task, team and organisational level cause, prevent, sustain or discontinue mobbing. For this aim we spread 10,473 questionnaires within 20 organisations, selected on the basis of the NACE Code. Each sector was presented at least once within each province of Flanders. The questionnaire measures all kinds of task, team and organisational risk factors, detected in previous qualitative research, as well as workplace bullying. This moment data collection and data input has been finished. We counted 5139 respondents (response rate: 49 per cent). The quantitative results will be presented at the conference.

'Don't shoot the messenger' – A case study on whistleblowing and workplace bullying

B. BJORKELO & W. RYBERG, University of Bergen.

The present paper is a case study on whistleblowing. The informant blew the whistle on illegal practices at a health organisation in Norway. The whistleblower repeatedly tried to discuss and stop the illegal practice applied in the treatment of severely ill patients. He approached

his employer on several occasions. The informant experienced a number of retaliatory acts, he developed health deterioration, and the process culminated in an expulsion from the workplace. The whistleblower argued the basis of the expulsion through the judicial system and lost. This case study investigates the triggering event that instigated the whistleblowing, explores the decision-making process and looks at how the informant appraised the possibility of retaliation. Previous research has reported how devastating personal consequences may follow after whistleblowing and workplace bullying. This case study considers if retaliatory acts are somewhat similar to negative acts, as known from workplace bullying. A tentative process model is proposed. A method triangulation consisting of a research interview, the MMPI-2, and the PDS are applied. Results from this case study indicate that retaliatory acts after blowing the whistle are somewhat similar to negative acts and bullying as described in research on workplace bullying. Long-term health deterioration was reported. Future research might explore whether research on the consequences of workplace bullying may compliment research on whistleblowing.

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 have little information about the devastating impact bullying has upon a person's life. Previous research has used questionnaires to gather information about the extent of 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 themselves and on their families. 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 lasting. 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 are similar across 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 may never work again, two of the five have made several attempts to end their lives, three have 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. GLASØ, S. BERGE MATTHIESEN, M. BIRKELAND NIELSEN & S. EINARSEN, University of Bergen.

The aim of this 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 emerged between victims and non-victims on two out of five personality dimensions. Victims tended to be more neurotic and less conscientious than non-victims. 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.

Attachment theory and bullying

V.C. LYNCH, Thames Valley University.

Hazan 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 adult 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 being bullied and being a bully. The Experience in Close Relationships Scale (Brennan, Clark & Shaver, 1998), 15FQ+ (Psychometrics Ltd., 2002) and The Negative Acts Questionnaire (Einarsen & Hoel, 2002) are used in 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 ([stat]). The interaction of a secure adult attachment style with the characteristics of emotional stability 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 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 a leader's resilience in the face of threat (1994). The third finding converges with Popper's use of attachment theory to explain machiavellianism and self serving charisma, in lieu of leadership (2002). The findings of this study suggest the application of attachment theory as a fresh research slant on workplace bullying. Further studies into individual differences in 'work styles' with regard to adult business relations in respect of bullying is recommended. A possible inclusion within the literature using attachment theory to explain the psychology of leadership is also suggested.

Bullying as retaliatory acts of whistleblowing

S.B. MATTHIESEN, 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 illegal, immoral, 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 constituted in 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 bullying at work (N=221). The findings revealed that three in four (74 per cent) confirmed that they were whistleblowers, in addition to being victims of bullying. The wrongdoing behaviour they most often interfered with was unethical favoritism, colleagues being humiliated or affronted, destructive leadership, violation of safety procedures and unethical practice towards customers or clients. In a list of 40 possible causes to why they were bullied, the respondents saw whistleblowing as the second most important reason for them being a target of bullying at work. A high proportion of the sample reported that their mental and physical health had deteriorated (respectively 85 per cent and 74 per cent) after they blew the whistle, because of the sanctions they were confronted with. Most typically, they felt ignored, frozen out, or isolated. They were also met with an increased level of negative feedback from their surroundings at work. Bullying can in many instances be regarded as subsequent retaliatory acts after the employee has blown the whistle after illegal or unethical acts is taken place at the workplace. Methodological weaknesses of the study, and some implications, are discussed.

A quantitative study of task, team and organisational risk factors for mobbing at work in small- and medium-sized enterprises (SMEs)

I. NEYENS, K. VANOIRBEEK, C. DEWOLF & H. DE WITTE, KU Leuven.

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 help address the question so what? – 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 anyone 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.

Educational Psychologists in Scotland Annual Conference

Educational Psychologists in Scotland Annual Conference, Heriot Watt University, Edinburgh, 29–30 September 2005.

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 carried out for the Learning and Skills Development Agency. Before presenting the findings, I shall explain in some detail the processes undergone to ensure 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 some threats that are currently facing the profession. Our ability to respond effectively will have a profound impact on the future shape and direction of educational psychology services in the next decade. In this presentation this presentation will consider some of these opportunities and challenges 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 experience 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 workforce reform that are taking place in England. Throughout this presentation will draw on developments in the UK and overseas. This presentation will conclude with a discussion of an alternative model for educational 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

G. WILLIAMS & R. WHITOME, W3 Insights.

W3 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 learner climate. Its directors have more than 30 years of experience working as applied educational psychologists in local education authorities. Their flagship products and methods have received awards for research through the Learning Skills Council and recognition for innovation by both PricewaterhouseCoopers and Natwest.

P.A.S.S. – Innovations in self-evaluation to promote inclusion, raise standards and increase pupil achievement

In proposing a revised, community-oriented inspection framework, OfSTED now assigns considerable importance to self-evaluation and the measurement of pupils' attitudes. The key role that students' attitudes may play in school improvement is clearly being recognised. Such recommendations are in line with a broad body of findings suggesting that student attitudes and self-image can be critically important intervening variables in predicting attainment across specific curriculum areas, ongoing readiness to access lifelong learning opportunity, emotional

well-being and the effectiveness of inclusive intervention.

A 50-item rating scale, P.A.S.S. (Pupil Attitudes to Self and School) was developed to robustly assess student attitudes, motivations and self-concept. Respondent data was independently item analysed by Exeter University and the measure adjusted to reduce the risk of carryover effects. A further factor analysis revealed nine distinct factors underpinning students' subtest responses to the scale. Emergent factors related to attendance, confidence/self-esteem, general and specific work ethic and perceptions of self-efficacy and metacognitive skill.

Results indicated that, while student attitudes may be fluctuating and dynamic throughout their school careers there are also clear age-related consistencies. Transfer to secondary education and transition across key stage changes to the curriculum appear to be times when the self-concepts of young people in education can be particularly vulnerable and attitudes most negative.

Survey evaluation data indicate both high reliability and validity. As a measure of attitudes, P.A.S.S. is sensitive to individual pupil differences and collated data can be used to reveal important organisational and systemic school issues. Pupil attitudes which relate to self-regard, confidence, work ethic and metacognitive self-efficacy all correlate highly with academic attainment and organisational added-value measures. The P.A.S.S. measure of pupils' attitude to attendance was found to be highly predictive of actual attendance. The applicability of P.A.S.S. in educational settings is wide, especially in ICT enabled forms, where its reliability, validity, power, sensitivity and ease of administration are all most readily apparent. At a casework level, P.A.S.S. is sensitive to individual student attitude profiles and can transparently inform intervention strategies. At a whole organisational level P.A.S.S. can swiftly identify young people's perceptions of an institution's climate and, thus, indicate a route-plan for institutional improvement.

WORKSHOPS

Post-school transition

W. ALLISON, A. MALLINSON & S. STEWART, PDP Group.

This conference presentation sets out to describe some of the work carried out by the 2004/2005 PDP subgroup on ASN and post-school transitions. Presenters will discuss the following topics: The outcomes of a literature review of Scottish policy, reports and legislation leading to reflections on the Education (Additional Support for Learning) (Scotland) Act 2004 and post-school transition. The potential contribution of EPs in shaping further policy, practice and research in developing, and maximising PSPS – especially for the NEET population (not in employment, education or training). Some Scottish and international perspectives about transitions from school to post school life including work, vocational work, vocational training and FE college. 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 terminology around transitions and the 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 in raising attainment 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:

- Linked to current curriculum guidelines;
- 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 developed as differential 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, comment on the evaluation, and identify possible next steps.

Restorative Interventions in Highland

P. BARBER, Highland Psychological Service.

Restorative Interventions are a means of resolving conflict in a blame-free environment. There is a continuum of approaches ranging from informal restorative conversations to full formal restorative conferences. Highland Council is one of three Scottish local authorities involved in piloting the development of restorative practices in schools. This national project is funded through SEED and being evaluated by Moray House/University of Edinburgh. The session will provide an outline description of restorative practices and then describe the approach taken within Highland. The Highland project involves 11 pilot primary and secondary schools in urban and rural environments. This presentation will focus on the role of the co-ordinator in developing a council-wide project, highlighting areas of difficulty as well as areas of success. There will be discussion of the strategic planning and the on-going evaluation process. The session will also relate the management aspects of introducing restorative practices into groups of schools, aiming to ensure on-going school development and the sustainability of the programmes.

Sustainable change: The power of research

L. BINNIE, E. GAJJAR, L. ADAMS & L. CURRIE, West Lothian Psychological service.

Dear Psychologists, can we have some research in our schools? 'Giving away psychology' was the mantra of the 70s, convincing others that we are not the 'experts' was the result in the 80s, so where do we go from here? We would suggest that research and the application of psychological theory will be the life blood of services in the future and, our 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 EP (Currie, 2002). 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 principles of the Learning Organisation (Senge, 1990). We will then show how this initiative has allowed the EP Service to work collaboratively with schools in evidenced 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 avoid practising those very skills that they need in order to progress. This applies to a significant number of children.

This project aimed 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 spelling. Post-project questionnaires were issued to pupils, teachers, and parents and results indicated that parents and especially the 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 a framework for understanding the appraisals and coping strategies used by the victims of bullying (Hunter & Boyle, 2002, 2004; Hunter *et al.*, 2004). The second is the participant role approach (Salmivalli, 1999), which views school bullying as a social phenomenon in which the participant roles taken by those other than the bully and victim are central to the problem and to its management.

We will examine why appraisals are important, and will present data 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 focusing on positive change and outcomes rather than dwelling on negative outcomes and past harm. Finally, we will present evidence from an intervention study, which utilised 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 the CPD process as it is carried out 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 system 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 structure of additional support and any other new guidelines;
 - must be consistent with the ideas and principles of an inclusive approach to addressing all pupils' needs; and above all must ensure that assessment for, and production of, any pupil plan (IEP, CSP, etc.) articulates with, and is not separate from, the planning framework;
 - must make sense to those that are using it and be manageable in the ordinary life of a school.
- In this context this seminar will consider the ways in which service delivery changed in the establishment of these structures and framework. This allowed an approach to develop where local needs relating to National Priorities were identified and an effective service response to school systems was established.

*Nationally these are more commonly known as Community Schools.

A social constructionist approach to building a collaborative learning intervention framework

W. DOUGLAS & A. CRAWFORD, Glasgow Psychological Service.

The formation of a New Learning Community this year provided the opportunity for all partners including mainstream teachers in all the sectors, community-based learning support teachers and the psychological service, to bring a new collaborative development perspective to assessment and intervention in children's learning.

The workshop will involve participants in an evaluation of the process and products of this practical development project, viewed as a collaborative change management process based on social constructionist principles. The workshop will evaluate the implementation of the idea that professional development of teachers should be school-based and embedded in teacher's work, and provide opportunities for teachers to create new meaning through interacting with their peers. The workshop will also offer opportunities for participants to examine the work of Argyris (1999) as a potential source of practical strategies that seek to move from single loop learning processes, in which any change produced is in the immediate action context, to double loop learning which offers the opportunity for a learning community as a whole to engage in a process of questioning basic values and assumptions in the learning process.

Could this be a key performance indicator that a learning community, viewed as a system, might be moving towards becoming a genuine 'learning organisation'?

Influencing practice in the Early Years: Reflections on PDP

A. DUNCAN, A. LITTLEFAIR & M. TAYLOR, PDP Group.

This workshop will reflect on the process of PDP 2004-2005 in relation to the Early Years. This involved exploring the challenge presented to

the profession when involved closely in a task for the Scottish Executive.

Two local authority experiences post-PDP will be described.

The workshop is for those who have not yet made a start to A&L Implementation in the Early Years and also to those who have and would like to share with others.

Running a social skills group for youngsters with Asperger's Syndrome

E. GRIFFITH, L. GOODALL & A. ALLAN, Murray Psychological service.

This workshop aims to share with colleagues our experience of running a social skills group for four children with Asperger's Syndrome. We started off with two 10/11-year-old boys and a girl, and one 13-year-old girl. Half-way through the group, the older girl left and another 10-year-old boy joined us. The group is running for 16 weeks.

The idea for the group came initially from the educational psychologist (Eileen Griffith). The planning was a collaborative venture with the psychologist, a social worker, a speech and language therapist and a parent. The group was run by the educational psychologist, social worker and a teacher with expertise in autism spectrum disorders. An educational psychologist in training joined us for some sessions. She conducted parental interviews before the group started and is planning to carry out post group evaluations when the group has finished in mid June. She also made some video recordings.

During the workshop we will share with colleagues our experience of setting up and running the group, some of the difficulties we encountered, what we learned from the experience and changes we would make if we were planning to repeat the exercise.

Developing Post-School Psychological Services – what is the strategic focus of PSPS adding to the profession?

C. HELLIER & R. CRICHTON, Midlothian Psychological Service.

This presentation will provide an overview of Strategic Officer working, challenges and opportunities giving examples of working, e.g. the communication strategy for the and training. It will also be an opportunity to consult profession on their views about the future of this initiative and to discuss the likely progression for the profession of PSPS.

It will be of interest to those colleagues who are interested in the PSPS developments, either as member of Pathfinder or non-Pathfinder services

Mediation, dispute resolution and ASN Tribunal

C. KIDD, L. OLIVER, N. SMILEY & J. PUGH, PDP Group.

The Education (Additional Support for Learning) (Scotland) Act 2004 directs local authorities to resolve disagreements over assessment and provision for children and young people with additional support needs.

The Act makes provision both for mediation and arrangements for dispute resolution. It also provides parents and young people with rights to refer particular matters to an Additional Support Needs Tribunal.

This presentation aims to support educational psychologists in terms of raising awareness of the new structures being introduced and possible implications for our role and responsibilities.

Positive psychology: Implications for Educational Psychology

E. KING, J. TOLAND & F. WATERS, South Lanarkshire Psychological Service.

The term 'positive psychology' has started to gain currency in recent years within the UK (e.g. Carr, 2004). To date there has been little discussion in the literature of what this developing field might mean for educational psychology.

This workshop aims to examine the main concepts and principles involved and to draw out the main implications for educational psychology, relating these to existing frameworks such as the Currie Report (2002).

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.

Baker 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 the transition needs of 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 all 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 perceptions of barriers and facilitators to the inclusion of lesbian and gay pupils in school. Themes from the survey were further explored in interviews.

Quantitative analysis indicated that 10 per cent of schools explicitly mentioned sexual orientation in policy. The majority of headteachers believed that the needs of LGB pupils could be subsumed in general policy. Whilst the term 'gay' was reported as a common put-down in schools, it was perceived that incidents of homophobic bullying occurred infrequently (from 0 to 2 incidents per year).

Qualitative analysis suggested:

1. contradictions/ambiguities in teachers' discourses;
2. the suggestion that teachers did not have the language to discuss LGB issues;
3. feelings of anxiety about discussing the subject of homosexuality in the classroom;
4. a need for guidance and support from local authorities on such sensitive matters.

It is intended that participants will have the opportunity to discuss what implications these findings might have for the implementation of a social justice agenda-for-change, resulting in equality for LGB pupils. There will also be an opportunity to hear about initiatives currently operating both in the UK and US.

Resolving conflict – a skills-based approach

I. McIVER, J. KERR & C. FLETCHER, PDP Group.

The focus of this presentation is to raise awareness of preventative measures to avoid, negotiate and resolve potential areas of conflict. In any situation where hard decisions have to be made there is the potential for conflict. The role of the psychologists should be to use these situations constructively. For a strategy to work all parties in a conflict must be committed to its resolution, and determined to maintain a healthy ongoing relationship between the participants. Negotiation, mediation and consensus decision making should all be roles that come naturally to psychologists 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 areas of honest disagreement. It should also be accepted by all sides that the common end should be to the benefit of the client.

The 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 it is envisaged that young people will 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 and provide 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 psychology 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 avoiding an over emphasis upon 'within child' factors and alternatively emphasising the role of education and other children's services in supporting these 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 within an authority 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 on this subject is limited. Some local experience in Scotland and research indicates that children with such behaviours, once identified, are least likely to present problematic sexual behaviours in school and the experience of being in school in fact has a beneficial effect through the natural processes of social inclusion, experiences of success, gainful activity and relationship building that occurs in schools. This process is far from complete but reflects the authority's commitment to consider issues of social inclusion at all levels.

As part of the workshop, participants will be asked to contribute by offering suggestions as to how teaching staff might be supported to engage in and to identify the issues and potential challenges that this process might meet.

Developing Psychological Services for Looked After and Accommodated young people

J. TOLAND & D. CARRIGAN, South Lanarkshire Psychological Service.

Looking at the experiences of looked after young people who display educational resilience does much to explain firstly why some young people do well in school, socially, emotionally and/or academically and secondly why others become merely statistics within the dismal educational achievement records of the majority of young people 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 units.

Discussions 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 school 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 within services for children (Education (Additional Support for Learning) (Scotland) Act 2004). This poster explores ways of using creative communication with children to provide a catalyst for change.

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.

NOTES

The British Psychological Society
St Andrews House
48 Princess Road East
LEICESTER LE1 7DR

Tel: 0116 254 9568 ● E-mail: mail@bps.org.uk ● www.bps.org.uk