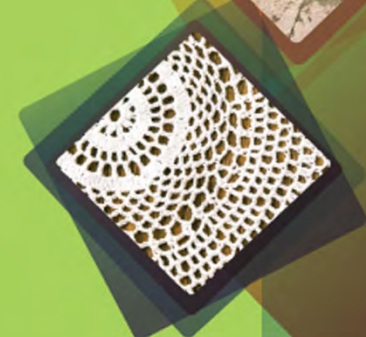




EHPS 2015
Limassol, Cyprus



Principles of Behaviour Change in Health & Illness

1-5 September 2015
Limassol - Cyprus

www.ehps2015.org

Conference Abstracts

Programme

Wednesday, 02 September 2015

Symposiums

09:00 – 10:40 | The increasing role of health technology assessment in behavior change interventions: what have we learned?

STD/HIV treatment & prevention: results of three multi-centre randomised-controlled trials

Psychosocial parameters and effects of Thalassemia

Health-related correlates of social support in intimate relationships

11:10 – 12:50 | Investigating health-related behaviour in daily life using ecological momentary assessment (EMA): new developments

Understanding usage of digital interventions

Fatigue and pain in long-term conditions across the life span

14:30 – 16:10 | Making sense of behaviour change theory: Problems, methods and applications

Innovative ways of understanding and measuring eating behaviour

Putting illness beliefs in context: new (uncommon) perspectives on the common sense model

Social relationships and health outcomes: benefits and challenges

Keynote Speech

18:00 – 19:00 | Pathways to health and longevity - Prof. Howard Friedman

Oral Presentation Times

09:00 – 09:20 | 09:20 – 09:40 | 09:40 – 10:00 | 10:00 – 10:20 | 10:20 – 10:40 | 11:10 – 11:30 | 11:30 – 11:50
11:50 – 12:10 | 12:10 – 12:30 | 12:30 – 12:50 | 14:30 – 14:50 | 14:50 – 15:10 | 15:10 – 15:30 | 15:30 – 15:50
15:50 – 16:10

Oral Presentation Sessions

09:00 – 10:40 | Disease risk, screening and genetic testing

Burnout, fatigue, and stress

Illness perceptions and illness-related outcomes

11:10 – 12:50 | Habits and health behaviours

└ Overview Talk

Interventions and applications in healthcare settings

Culture, health and services

Stress, social support and well-being

14:30 – 16:10 | eHealth/mHealth: prevention

Interventions and evaluations in primary care

The role of traits in health and illness

Poster Sessions

16:40 – 18:00 | eHealth/mHealth interventions for chronic conditions

Resilience and adaptation to illness and disability

Self-regulation: mediators and interventions

Emotion regulation and health

Psychosomatic issues

Interventions in chronic disease I

Children's and adolescents' health and well-being

Women's health: screening and prevention

Healthy lifestyle in chronic disease

Multiple health behavior change

Health behaviour change: diet and nutrition

Risk perception, communication and behaviour

Coping with stress in academic settings

Occupational health: individual and organizational issues

Development and validation of measures

Thursday, 03 September 2015

Symposiums

09:00 – 10:40 | 5th Methods in Health Psychology Symposium - Using n-of-1 methodology to study or change health-related behaviour

Alternative views on how self-control shapes health behaviour

Principles of implementation behaviour research in European health psychology: increasing the impact of health interventions

Psychosocial aspects of women's reproductive health-related issues around the world

14:30 – 16:10 | Changing the behaviour of health professionals: challenges in evidence-based approaches to implementation intervention research

The influence of coping and coping beliefs on smoking behaviors and urge to smoke

Keynote Speech

18:00 – 19:00 | Building the science of behaviour change - Prof. Susan Michie

Oral Presentation Times

09:00 – 09:20 | 09:20 – 09:40 | 09:40 – 10:00 | 10:00 – 10:20 | 10:20 – 10:40 | 11:10 – 11:30 | 11:30 – 11:50
11:50 – 12:10 | 12:10 – 12:30 | 12:30 – 12:50 | 14:30 – 14:50 | 14:50 – 15:10 | 15:10 – 15:30 | 15:30 – 15:50
15:50 – 16:10

Oral Presentation Sessions

09:00 – 10:40 | Doctors and patients

Caregiving from recipient and provider perspectives

Interventions in long-lasting health problems

11:10 – 12:50 | Methodological issues in study and intervention design, measurement and impact

Implicit processes in health behaviour change interventions

Issues in design and implementation of public health interventions

Psychological issues with physical and mental health

Well-being: the role of social and environmental factors

Risk behaviours

Parenthood, caregiving and illness

14:30 – 16:10 | Synthesising evidence within health behaviour change models

Interventions focusing on motivational determinants of health behaviour change

Positive outcomes in occupational health

Pain, fatigue and distress

14:30 – 16:10 | Roundtable and Debates

Poster Presentations

16:40 – 18:00 | Resilience resources, mental health and life stress

Coping with stress in different contexts over the life-span

Psychological wellbeing: predictors and impact

Behaviors and social relations in adolescence

Parents, children and illness

Exploring illness experience, beliefs and adherence

Psychology and chronic disease I

Interventions in chronic disease II

eHealth/mHealth: prevention

Eating habits and weight management

Alcohol consumption, smoking and substance abuse

Targeting physical activity

Healthcare professional – patient communication and interaction

Occupational stress in health care professionals

Design issues: methods, measures and analysis

Friday, 04 September 2015

Symposiums

09:00 – 10:40 | Fidelity of behaviour change interventions – challenges and future directions

Innovative approaches in eHealth interventions

Current challenges for alexithymia research: understand better explanatory factors and provide new paths for intervention

11:10 – 12:50 | Embracing mHealth technologies for health behaviour change

Psychological flexibility: examining its components and their relation to functioning in chronic pain

Exploring cultural differences in alcohol consumption in young people across Europe

14:30 – 16:10 | The varied roles of self-efficacy in health behaviour change

Computer-based health promotion to change health behaviours and to overcome health literacy challenges

Justification processes in self-regulation

Psychosocial risk factors in chronic pain

Keynote Speech

18:00 – 19:00 | You are greater than what you sense, think and feel: An Acceptance & Commitment Therapy application to Behaviour Medicine - Prof. JoAnne Dahl

Oral Presentation Times

09:00 – 09:20 | 09:20 – 09:40 | 09:40 – 10:00 | 10:00 – 10:20 | 10:20 – 10:40 | 11:10 – 11:30 | 11:30 – 11:50
11:50 – 12:10 | 12:10 – 12:30 | 12:30 – 12:50 | 14:30 – 14:50 | 14:50 – 15:10 | 15:10 – 15:30 | 15:30 – 15:50
15:50 – 16:10

Oral Presentation Sessions

09:00 – 10:40 | Applying health behaviour change models

The interplay between work and private life

Quality of life in illness contexts

Promoting physical activity and preventing obesity in children and adolescents

11:10 – 12:50 | Planning effective health behaviour change interventions

└ Overview Talk

Risk communication

Psychobiological mechanisms in physical and psychological health

Societal influences on sexual and reproductive health

14:30 – 16:10 | Health promotion interventions

Coping with disease and disability: resilience factors

Perceptions of ageing, physical activity and participation

Poster Presentations

16:40 – 18:00 | eHealth/mHealth: physical and psychological conditions

Coping with trauma

Illness perceptions, quality of life and health threats

Quality of life

Mental health

Psychology and chronic disease II

Ageing, health and well-being: becoming older and staying active

Parenthood, children and health

Sexual health and risk behaviours

Behaviour change, health, and well-being

Targeting smoking

Public health and health promotion

Care providers supporting clients

Hhealth and behaviors within social and cultural contexts

Saturday, 05 September 2015

Oral Presentation Times

09:30 – 09:50 | 09:50 – 10:10 | 10:10 – 10:30 | 10:30 – 10:50 | 10:50 – 11:10

Keynote Speech

11:30 – 12:30 | Health psychology and organ donation - Prof. Ronan O'Carroll

Oral Presentation Sessions

09:30 – 11:10 | Interventions focusing on volitional determinants of health behaviour change

eHealth/mHealth: existing conditions

Predicting adherence

Promoting family health and health behaviours

Testing models of health behaviour change

Psychological aspects of chronic disease

Symposium

The increasing role of health technology assessment in behavior change interventions: what have we learned?

S. Evers^{1, 2}, H. de Vries³, N. Berndt⁴, M. Hendriks^{5, 6}, K.L. Cheung⁶, R. Drost⁶

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⁶Dept of Public and Occupational Health, EMGO+ Institute for Health and Care Research, VU University Medical Center, Netherlands

Aims

Increase awareness of the need for conducting economic evaluations alongside behavior change intervention studies; alert to methodological challenges when conducting an economic evaluation; draw attention to ways to improve the quality and uniformity of the economic methodology to increase their value and uptake in the health promotion field.

Rationale

This symposium reviews the role of health technology assessment and economic evaluations in the health promotion sector. Evidence of cost-effectiveness is indispensable when making decisions about the reimbursement of behavior change interventions. Although economic evaluations are becoming more common in behavior change intervention studies, their applicability and uptake are still scarce. Studies including economic evaluations are not only considered to be more difficult to conduct but also more difficult to peer-review because the economic methodology for preventive interventions is less well defined. Methodological challenges relate, amongst others, to acceptable willingness-to-pay thresholds, limitations of the QALY paradigm, appropriate selection of the comparator, capturing all important costs and benefits, and extrapolation beyond the observation period.

Summary

Several types of economic evaluations that have been conducted alongside behavior change intervention studies will be presented to provide an overview of the current state of art of economic evaluation studies in health promotion and public health, their challenges and directions for future. The final discussion will focus on the need to integrate health technology assessment in the health promotion sector, and factors that determine the potential uptake of economic evaluations by stakeholders in the field of health promotion and public health. Ways to improve the quality and uniformity of the economic methodology will be discussed that may increase their value and uptake.

Symposium Abstracts

Cost-effectiveness of a lifestyle intervention improving physical activity and nutritional behaviour from different economic perspectives

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³Dept. of Health Promotion, School for Nutrition, Toxicology and Metabolism, Maastricht University, Netherlands

Background

Combined lifestyle interventions to improve physical activity and nutritional behaviour show positive health effects in adults with overweight and obesity. To reveal the impact of different perspectives in economic evaluations, we present the cost-effectiveness of two different intensities of a combined lifestyle intervention from both societal and healthcare perspective with a time horizon of 24 months.

Methods

In a clustered RCT (29 clusters, n=411) we studied the cost-effectiveness of a start-up program versus a more intensively supervised program. During two years every three months quality of life and costs (healthcare, productivity, patient and family) were assessed by means of self-administered questionnaires. Uncertainty was assessed by means of bootstrap and sensitivity analyses.

Findings

Baseline characteristics were comparable between the groups. After one year, the supervised program showed higher programme costs but less healthcare utilization resulting in only slightly higher total costs. Moreover the supervised program showed higher one-year and two-year QALYs compared to the start-up program.

Discussion

After 1 year the supervised program is cost-effective from a healthcare perspective, though other perspectives and different time horizons affect the outcomes.

Symposium Abstracts

Understanding the stakeholders' intention to use model-based economic evaluations: an EQUIPT study

K.L. Cheung¹, S. Evers², M. Hiligsmann², Z. Vokó³, S. Pokhrel⁴, T. Jones³, C. Muñoz⁵, S.B. Wolfenstetter⁶, J. Józwiak-Hagymásy⁷, H. de Vries⁷

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³Eotvos Lorand University, Hungary

⁴Brunel University, United Kingdom

⁵Pompeu Fabra University, Spain

⁶Helmholtz Zentrum Munchen – German Research Center for Environmental Health (GmbH), Member of the German Center for Lung Research (DZL), Germany

⁷Syreon Research Institute, Hungary

Background

Despite an increased number of economic evaluations of tobacco control interventions, the uptake by stakeholders continues to be limited. By applying the I-Change Model, this study aims to identify which factors determine potential uptake of (model-based) economic evaluations.

Methods

Stakeholders (decision makers, purchasers of services/pharma products, professionals/service providers, evidence generators and advocates of health promotion) were interviewed in five countries, using an I-Change based questionnaire. MANOVA's were conducted to assess differences between intenders and non- intenders regarding beliefs. Multiple regression analyses were conducted to identify the main predictors of intention to use a model-based tool.

Findings

Ninety-three stakeholders participated. Significant differences in beliefs were found between non-intenders and intenders: risk perception, and motivational factors towards using the tool. In addition, country, attitude, and social support were significant predictors of intention.

Discussion

This study is the first to provide a theoretical framework to understand differences in beliefs between stakeholders who do or do not intend to use (model-based) economic evaluations, and empirically corroborating the framework. This contributes to our understanding of the facilitators and barriers to the uptake of these studies.

Symposium Abstracts

Cost-effectiveness and inter-sectoral costs and benefits of case management for parents with a mental illness

R. Drost¹, H. Wansink², A. Paulus², D. Ruwaard², C. Hosman³, J. Janssens², S. Evers⁴

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²Context Parnassia Group, Netherlands

³Radboud University, Netherlands

⁴Maastricht University and Trimbos Institute, Netherlands Institute of Mental Health and Addiction, Utrecht, The Netherlands, Netherlands

Background

Children of Parents with a Mental Illness (COPMI) are at increased risk of developing costly behavioral disorders. A major risk factor is low parenting quality, which can be improved with preventive basic care management (PBCM). The aim of this study was to assess the cost-effectiveness of PBCM from an intersectoral (broad) and health care (narrow) perspective.

Methods

Data was used from the SOOPP study, an RCT in which families received PBCM (intervention condition) or consult groups (control condition). Costs were compared with a parenting quality outcome measure (HOME T-score) at 18-month follow-up. Sensitivity analyses included calculating incremental costeffectiveness ratios based on complete cases and excluding outliers.

Findings

Results show a change in cost-effectiveness of PBCM when changing perspective. However, from both perspectives PBCM is both more effective and costlier than consult groups. The results of the sensitivity analyses support these findings.

Discussion

The favorability of PBCM over consult groups depends on willingness to pay per improvement in the HOME T-score. Future studies are encouraged to assess the relation between the perspective chosen and the outcomes of its economic analysis.

Symposium Abstracts

Behaviour change interventions risk of bias in trial-based and model-based economic evaluations

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²Department of Health Services Research, Maastricht University, Maastricht, Netherlands

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⁴Department Quality of Health Services and Health Economics, National Institute for Public Health and the Environment (RIVM), Bilthoven, Netherlands

Objective

Several biases can occur when performing HTA/economic evaluations of Behaviour change intervention. It is therefore important for decision makers to be able to assess these biases and for researchers to minimize them. This presentation addresses selected types of bias in trial-based and model-based economic evaluations.

Methods

Narrative review discussing sources of bias in economic. Biases were identified through literature review and expert meetings and attached to the guideline chapters respectively. Articles that illustrate the different bias were also retrieved.

Results

We identified several biases and assigned them to a particular trial phase. A distinction is made between pre-trial biases, biases during the trial and biases that are relevant after the actual trial. Biases are discussed in detail with their influence on the economic evaluation outcomes.

Conclusion

In order to avoid bias in economic evaluations, one has to take notice of published guidelines. The development of a checklist addressing biases in economic evaluation might lead to a better understanding and quality of economic evaluation, from researchers as well as from policy-maker's perspective.

Symposium

STD/HIV treatment & prevention: results of three multi-centre randomised-controlled trials

M. de Bruin^{1, 2}, C. Abraham³, F. Mevissen⁴, E. Oberjé¹, R. Ruiters³

¹University of Aberdeen, United Kingdom

²University of Amsterdam, Netherlands

³University of Exeter, United Kingdom

⁴Maastricht University, Netherlands

Aims

This symposium reports on the development and evaluation of three behaviour change interventions: the Long Live Love sexual-education intervention for high-school students in the Netherlands ; the PREPARE HIV-prevention intervention targeting youth in South African schools; the AIMS-intervention to promote HIV-medication adherence among adult patients in the Netherlands. All interventions have been developed according to Intervention Mapping principles and have been evaluated in multi-site, randomised controlled trials. We will report the findings of these trials, including the lessons learned during development, implementation and process & effect evaluations.

Rationale

The theme of this year's conference is Principles of behaviour change in health and illness. All three behaviour change interventions have been systematically developed based on Intervention Mapping principles; they target healthy populations and people with a chronic illness; and they have recently been evaluated in large-scale, (cluster) randomised trials to examine (cost) effectiveness. Reporting on the intervention-development rationale, the results and lessons learned in these three sophisticated trials corresponds perfectly with the conference theme and would enable timely reporting of newly-available findings to EHPS delegates.

Summary

Presentation 1 introduces the principles of Intervention Mapping, before illustrating how these have been applied in the development of a sexual education program for high-school students in the Netherlands. The 2nd presentation will build on this and add the perspective of cultural relevance/sensitivity in developing and implementing an HIV-prevention for high-school students in South Africa. Presentation 3 and 4 will report on the development, implementation and evaluation of an HIV-treatment adherence intervention for ethnically diverse HIV-patients in the Netherlands. The outcome and process evaluations in the first 2 presentations focus on self-reported determinants and behaviour patterns, while the last 2 presentation will aim for changing objective clinical outcomes and establishing programme cost-effectiveness. Combined, these presentations will showcase the state-of-the-art in intervention development and evaluation.

Symposium Abstracts

Long Live Love: Development, implementation and evaluation of a Dutch school-based online sexual health program

F. Mevissen¹, S. VanLieshout¹, P. Vanempelen², G. VanBreukelen², G. Kok²

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²TNO innovation for life, Netherlands

Background

An online program to support sexual health (e.g. condom use, STI-testing) among school going adolescents in the Netherlands was developed and implemented using the Intervention Mapping protocol. A detailed effect and process evaluation was set up to test for program effectiveness and degree of implementation.

Methods

Effectiveness of the program was tested in a cluster RCT with pre and posttest measurements of (antecedents of) condom use and STI testing among 1001 students (47% girls). Semi-structured interviews with teachers (N = 16) and focus groups with students (N = 60) were used to collect data focusing on (factors influencing) completeness and fidelity of program implementation.

Findings

Multilevel analysis showed significant change on perceived susceptibility for STI ($p = .017$). No other significant effects of the program were found (p 's $> .14$). Interviews with teachers indicated low fidelity and completeness being mostly influenced by time constrains or assuming information was already known by students. Students stated they liked the interactive lessons. Discussion: Results of the RCT will be discussed in relation to level of evaluation and implementation of the program.

Symposium Abstracts

Evaluation of a culturally-situated, research-based HIV-prevention program in South African Schools

C. Abraham¹, H. Onya², L. Aaro³, J. Smith⁴, H. Devine-Wright⁵, A. Wubs⁶, S. Ramatsea⁷, M. Themane⁸, J. Mashamba⁶

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⁷Health Promotion Unit, School of Health Sciences, University of Limpopo, Polokwane, South Africa., South Africa

⁸Department of Education Studies, University of Limpopo, Polokwane, South Africa, South Africa

Background

This study evaluated the effects of a school-based intervention on cognitions and self-reported behaviours related to increased HIV risk amongst South African adolescents.

Methods

The (“PREPARE”) intervention was based on the Information, Motivation, Behavioural skills model and incorporated 12 key messages into pre-existing health promotion in schools. The intervention was delivered by teachers in five 3-hour units over 5 weeks. A cluster-randomised trial involving 24 schools and 2588 adolescents aged 13-14 years in Limpopo, South Africa was employed to evaluate the intervention. Targeted beliefs, attitudes, norms, culture-specific beliefs and self-reported behaviours (e.g. condom use) were assessed via researcher-administered questionnaires at baseline and two months follow up.

Findings

A series of targeted cognitions (e.g. condom use attitudes and self-efficacy) and self-reported condom use showed significant differences ($p < .05$) in favour of intervention participants. However, effect sizes were generally small (Cohen’s $d < .25$).

Discussion

A theory- and evidence- based intervention improved HIV-preventive education among South African adolescents.

Symposium Abstracts

Content and effectiveness of the Adherence Improving self-Management Strategy (AIMS) in HIV-care

M. de Bruin¹, E. Oberje², W. Viechtbauer³, H. Nobel⁴, J. Prins³

¹University of Aberdeen, United Kingdom

²University of Amsterdam, Netherlands

³Maastricht University, Netherlands

⁴Academic Medical Centre Amsterdam, Netherlands

Background

Few – if any – scalable interventions to promote adherence to Antiretroviral Therapy for HIV have demonstrated a meaningful impact on viral suppression. This presentation describes the development and early testing of the Adherence Improving self-Management Strategy (AIMS), and the results of a multi-centre trial examining its effectiveness, compared to treatment-as-usual..

Methods

AIMS is a theory-based intervention developed collaboratively with HIV-nurses and patients. A previous single-site RCT established that AIMS impacts on medication adherence. The current multi-centre RCT trial was powered to detect an effect of AIMS on clinical outcomes.

Findings

223 patients were randomized and 213 patients completed the trial, with a mean follow-up of 14.5 months. The primary intent-to-treat analyses using log-transformed viral loads showed that AIMS was effective ($F(1,199)=7.23$, $p=.008$). Secondary detectable-undetectable (OR:2.03, 95%CI 1.06-3.89) and treatmentfailure analyses (OR:3.09, 95%CI 1.18-7.94) corroborated this finding.

Discussion

This trial demonstrated that the AIMS-intervention is effective and has a relevant impact on viral load. Its cost-effectiveness and impact in other conditions remains to be explored.

Symposium Abstracts

Evaluating the cost-effectiveness of the Adherence Improving self-Management Strategy (AIMS) in HIV-care

E. Oberje¹, S. Evers², J. Prins³, H. Nobel², W. Viechtbauer¹, M. de Bruin⁴, T. AIMS Study Group⁵

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³Academic Medical Center Amsterdam, Netherlands

⁴University of Aberdeen, United Kingdom

⁵Collaborating HIV-clinics, Netherlands

Background

Non-adherence to combination Antiretroviral Therapy (cART) is common and can have substantial clinical and economic consequences. The theory- and evidence-based Adherence Improving self-Management Strategy (AIMS) has demonstrated the ability to improve adherence and clinical outcomes in earlier trials. However, its cost-effectiveness is not yet investigated.

Methods

We examined the cost-effectiveness of AIMS compared to treatment-as-usual from a societal perspective, with a time horizon of one year. Primary outcome measures were cost per reduction in log viral load (a health-related outcome) and cost per quality-adjusted life-year (QALY).

Findings

Twenty-one HIV-nurses in seven Dutch HIV-clinics randomized 223 patients (110 treatment-experienced and 113 treatment-initiating patients). The probability that AIMS is cost-effective using log viral load as outcome parameter was between 55% to 95%. For the analysis using QALYs as the outcome parameter, the cost-effectiveness probability was between 80% and 55%.

Discussion

The results from the cost-effectiveness analyses strongly indicate that the AIMS-intervention is cost-effective, even within the one-year trial period. A model-based economic evaluation with a longer time horizon should reveal how cost-effective AIMS is in the long run.

Symposium

Psychosocial parameters and effects of Thalassemia

C. Constantinou¹, C. Loizou¹, C. Phellas^{1, 2}, M. Stavrinaki³, M. Siamata², M. Karekla^{2, 4}, E. Karademas⁵

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³University of Cyprus, Cyprus

⁴Center for Cognitive Behavioral Psychology, Cyprus

⁵University of Crete, Greece

Thalassemia is a genetic blood disorder (similar to sickle cell anemia). It could be life threatening if individuals do not adhere to regular blood transfusions and iron chelation. Thalassemia is a condition with high prevalence in the Mediterranean region. Cyprus since the 1970s implemented a screening program and genetic counseling of gene carriers and as a result, new births of children with thalassemia have tremendously decreased. Today, there are about six hundred patients with Thalassemia in Cyprus. The papers in this symposium will present the psychosocial parameters associated with Thalassemia in Cyprus. Specifically, two qualitative, one quantitative and an intervention evaluation study will be presented. First, stigma experiences and perceptions of people living with Thalassemia and their spouses is explored. Next, the biographical disruption that these patients suffer is examined in a qualitative study. The third, quantitative study explored the relation between individual differences (e.g. experiential avoidance) and other psychological factors on QoL. Finally, the effectiveness of an ACT protocol for improving well-being in Thalassemia patients will be explored.

Symposium Abstracts

Living with Thalassaemia in Cyprus and the resulting biographical disruption

C. Constantinou¹

¹Universtiy of Nicosia Medical School, Cyprus

Through a screening programme implemented in the 1970s, Cyprus has managed to control the birth of children with Thalassaemia. In the 1990s the number of births of children with Thalassaemia dropped to zero, while today there are about six hundred patients with Thalassaemia who are under systematic blood transfusion and iron-chelation therapy. Based on in-depth interviews with ten patients and their partners, this paper explores what it means to live with Thalassaemia in Cyprus. The paper discusses how patients deal biographical disruption and balance between a demanding therapy schedule and a busy social life. The participants were selected from the registry of the Cyprus Thalassaemia Organisation, the interviews were audio recorded, transcribed and analysed through Atlas Ti software. This qualitative research is part of a larger study which explores the quality of life of patients with Thalassaemia in Cyprus and is co-funded by the Republic of Cyprus and the European Regional Development Fund. The study has been approved by the Cyprus National Bioethics Committee.

Symposium Abstracts

Which psychological aspects and individual difference factors affect quality of life of individuals with Thalassemia?

M. Paraskeva-Siamata¹, M. Stavrinaki¹, M. Karekla¹, C. Constantinou², C. Loizou³, C. Phellas², S. Christou⁴

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Thalassemia's chronic nature of treatments (e.g. iron chelation) undoubtedly affect patients' lives (Scalone et al., 2008). Studies suggest that individuals with thalassemia report lower quality of life (QoL) compared to nonpatient populations (Sobota et al, 2011). This study aimed to examine the relationship between individual differences and other psychological factors and QoL in order to investigate the factors that affect QoL in thalassemia patients. Eighty-seven individuals with thalassemia completed a set of questionnaires assessing QoL (SF-36) and individual difference factors (e.g. experiential avoidance). Results showed that individuals high in anxiety showed lower mental QoL compared to those low in anxiety. Individuals with low experiential avoidance showed higher QoL than those with high experiential avoidance. Also, concerns about treatment were found to be related to lower QoL. However, QoL was not related to gender, depression levels or perceived locus of control. These results show that several psychological factors affect the level of physical and mental QoL and it is important to take them into account when developing psychological interventions with the aim of improving QoL among patients with thalassemia.

Symposium Abstracts

Belief in just world, optimism and coping strategies used by parents of children with Thalassemia

R. Kausar¹, A. Zahra¹, F. Mushtaq¹

¹Institute of Applied Psychology, University of the Punjab, Lahore, Pakistan

The present research was conducted to examine the relationship between belief in just world, optimism and coping strategies used by parents of children with Thalassemia. The sample consisted of 100 parents including equal number of fathers and mothers and they were recruited through nongovernmental organizations in Lahore, Pakistan. The age range of the child was 2 - 16 years (M= 8.10 SD= 3.88) and mean age of parents was 38.47 years. Global Belief in Just World Scale, Life Orientation Test Revised and Coping Health Inventory for Parents were used for assessment. The data were analyzed using Pearson Product Moment Correlation, regression analysis and independent sample t- test. Results showed that there was significant positive relationship between belief in just world and optimism in parents. Belief in just world for self and others predicted parents' optimism. There was no significant difference in mothers and fathers in belief in just world, optimism and coping strategies used by the parents of children with thalassemia. Findings highlight the role of belief in just world and optimism in coping with their child's condition.

Symposium Abstracts

The effectiveness of an ACT protocol for improving well-being in Thalassaemia patients

M. Karekla¹, M. Stavrinaki¹, M. Paraskeva - Siamata¹, C. Constantinou², C. Loizou³, C. Phellas², S. Christou⁴

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Comorbid psychopathology, diminished QOL and poor illness adjustment have often been linked to genetic disorders. Needs assessment conducted on Thalassaemia patients in the Republic of Cyprus deduced that patients suffer reduced QOL and poor adherence to medication. Thalassaemia patients (N=25) took part in a brief ACT intervention (one two hour workshop, followed by two, weekly telephone calls). Telephone calls, aimed to provide personalised feedback, encourage the use of skills, and problem-solve difficulties in practising skills learnt during the workshop. The satisfaction with iron chelation therapy (SICT), acceptance and action questionnaire (AAQ-II), valued living questionnaire (VLQ), SF-36 measuring QOL, and satisfaction with intervention were used to measure the effectiveness of the intervention at pre and post intervention. Results suggest that brief psychological interventions for Thalassaemia patients may improve wellbeing and QOL through values based action and diminished EA. Implications, include the introduction of brief, costeffective evidence based treatments for thalassaemia patients.

Symposium

Health-related correlates of social support in intimate relationships

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Aims

This symposium aims to investigate conditions under which supportive actions in couples occur as well as how partners' support may affect health-related outcomes. Authors focus in particular on social support interactions in couples in distinct clinical and non-clinical settings. Contributions to this symposium underscore the importance of investigating interpersonal correlates of health behavior and disease management by using dyadic study designs.

Rationale

Investigating social support in intimate relationships is of high importance for adults' health promotion as the majority of adults are living in stable relationships and partners are often highly involved in each other's health practices. To date, only few studies examined conditions under which provision of supportive action is facilitated. Also, more studies with dyadic designs are needed to examine partner support as a correlate of health. This symposium takes up these issues and provides implications for practice and future research in this field.

Summary

First, Berli et al. are contrasting effects of dyadic and individual action control physical activity interventions on support exchange among overweight individuals and their partners. Keller et al. will then explore predictor domains of partner assistance in prostate cancer patients' dyadic planning of pelvic floor exercise. Third, Hohl et al. report findings on the interplay of partner support and patients' self-efficacy in the context of pelvic floor exercise following radical prostatectomy. Subsequently, analyzing data from multimorbid patients and their partners, Horn et al. are presenting actor and partner effects of emotion regulation strategies on adjustment to patients' symptoms. Finally, Aleksandra Luszczynska will discuss implications of the presented papers.

Symposium Abstracts

Effects of a dyadic action control intervention on daily levels of received social support

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Background

The role of social relationships for regulating health behavior has so far been rather neglected. Dyadic approaches to self-regulation may enhance positive social exchanges such as social support. Thus, this study investigated the effects of an individual and dyadic action control trial on daily levels of received social support in the context of physical activity.

Methods

117 overweight individuals and their partners were randomly allocated to one of four groups (dyadic vs. individual action control vs. two control). Participants completed end-of-day diaries on smartphones during 14 days of intervention and 14 days following intervention including measures of received practical and emotional social support from the partner.

Findings

Both experimental groups reported significantly higher daily levels of emotional and practical received social support than control groups. Moreover, after the intervention social support levels were only decreased in control but not in experimental groups.

Discussion

Overall, findings suggest that both an individual and dyadic action control intervention may encourage social support interactions in couples in the context of physical activity.

Symposium Abstracts

Predictors of dyadic planning of pelvic floor exercise: perspectives of prostate cancer survivors and partners

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Background

Dyadic planning refers to joint planning of a target person's behavior with the support of a partner. To date, studies have not yet focused on predictors of dyadic planning. By applying findings from literature on social support provision, we aimed to explore four predictor domains in the context of prostate cancer patients' dyadic planning of pelvic floor exercise (PFE) following radical prostatectomy.

Methods

Data from 175 prostate cancer patients and their partners were analyzed in a study with 4 postsurgery assessments, each 2 months apart. PFE-related dyadic planning, burden by incontinence, affective states, and relationship satisfaction were assessed from patients and partners. PFE-related intention, self-efficacy, and individual planning were measured using patient reports.

Findings

Findings from two-level models indicate that situational (burden due to incontinence), target person (positive affect, self-efficacy, and individual planning), and relationship factors (relationship satisfaction) were relevant predictors for dyadic planning. Planning partner factors played a minor role.

Discussion

Results of predictor domains are in line with other findings on social support provision. Further studies should examine dyadic planning's predictors in other health contexts.

Symposium Abstracts

Enabling or cultivating? The interplay of support and self-efficacy in the context of pelvic-floor exercise

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Background

To manage incontinence following tumor surgery, prostate cancer patients are advised to perform pelvic-floor exercise (PFE). Patients' self-efficacy and support from partners were shown to facilitate PFE. Whereas support may enhance self-efficacy (enabling hypothesis), self-efficacy may cultivate support (cultivation hypothesis). Thus, in this longitudinal study cross-lagged inter-relationships among self-efficacy, support, and PFE are investigated.

Methods

Post-surgery patient-reported received support, self-efficacy, PFE, and partner-reported provided support were assessed from 175 couples at 4 times. Autoregressive models tested interrelations among variables, either using patients' or partners' reports of support.

Findings

Models using patients' data revealed positive associations between self-efficacy and changes in received support, which predicted increases in PFE. Using partners' accounts of support provided, these associations were replicated. Furthermore, partner-provided support was related with increases in patients' self-efficacy.

Discussion

Patients' self-efficacy may cultivate partners' support provision for patients' PFE, whereas evidence of an enabling function of support as a predictor of self-efficacy was inconsistent.

Symposium Abstracts

Adjusting to multimorbidity: the role of interpersonal emotion regulation in couples

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Background

Multimorbid patients have two or more chronic diseases, and are not only themselves challenged by adjusting to this condition but so are their partners. This study aims at investigating the role of interpersonal emotion regulation in couples's adjustment to an acute crisis in multimorbid patients.

Methods

In this ongoing study, patients were recruited while staying at the clinic of internal medicine. So far, N=24 patients and their N=24 partners filled out questionnaires on interpersonal emotion regulation in the couple, adjustment disorder symptoms sensu ICD 11, and sleep problems..

Findings

Actor Partner Interdependence Models reveal that adaptive, as well as maladaptive interpersonal emotion regulation strategies predict adjustment problems in patients and their partners. Particularly partner effects from patient's regulation strategies on the partner's adjustment could be observed.

Discussion

Adjusting to chronic diseases is a challenging situation that requires resources not only in the patient but also in their romantic partners. This calls for an interpersonal view on disease management.

Symposium

Investigating health-related behaviour in daily life using ecological momentary assessment (EMA): new developments

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Aims

- Demonstrate new applications of EMA across a variety of health-related behaviours and determinants.
- Introduce novel real-time measures and combinations of real-time measures.
- Introduce new methods of analysis.
- Promote the continued development of EMA methods in Health Psychology.

Rationale

EMA, otherwise referred to as ambulatory assessment or the experience sampling method, is a method of collecting relatively-intensive repeated measures in daily life. Using EMA methods in research has several benefits, including data that: (1) maximise ecological validity; (2) are rich with information about context (where? doing? Who with? etc.); (3) minimise recall bias; (4) can combine real-time self-reports with continuous objective monitoring (activity, heart-rate, etc.); and (5) permit the exploration of underlying mechanisms and determinants of behaviour within-individuals, over time. EMA is becoming more popular, with new issues being examined and new methods of data collection and analysis utilised; this symposium will provide a timely opportunity to discuss how EMA is developing.

Summary

The symposium covers the use of EMA methods to investigate health-related behaviours in different populations, including clinical, non-clinical, and health professional samples. First, Cheryl Bell presents a study combining real-time self-reports (stress and work tasks), heart-rate, and observer-coded ward-round tasks to investigate a junior doctor's working day. Next, Gertraud Stadler talks about findings from an intensive longitudinal study of social support and physical activity that combines daily diaries with accelerometer counts. Martyn Jones then presents a study using multilevel structural equation modelling to examine the role of intentions and changes in intention on attendance at cardiac rehabilitation following acute cardiac syndrome. Fourth, Dan Powell talks about utilising the Go/NoGo paradigm to measure real-time executive function, and presents findings on relations between real-time executive function and sedentary behaviour using time-lagged analysis. Lastly, Daryl O'Connor leads a discussion on EMA methods in Health Psychology.

Symposium Abstracts

Quantifying a junior doctor's working day in real-time: tasks, stress, and physiological responses

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Background

Previous research investigating a junior doctor's (JD) working day has relied on retrospective methods and focuses on what happens on average. This study investigated the feasibility and acceptability of using real-time methods, with emphasis on what happens for individuals.

Methods

A series of 10 case studies in JDs were carried out at a UK hospital. Stress (UWIST tense arousal items) and work tasks (self-report clinical categorisation tool) were measured every 90 minutes throughout 2 shifts on an electronic diary. Heart-rate was measured continuously. In addition, ward-round work tasks were observer-coded. Feasibility and acceptability were established via JD feedback and completion rates.

Findings

All measures were deployed successfully and evaluated positively by participants. Self-report completion rates were high (79% of possible entries). Intra-individual variability in heart-rate, tasks and stress were observed in all participants and will be illustrated in case study examples.

Discussion

This study confirmed both the acceptability to JDs and the feasibility of using real-time measures throughout their clinical working day. These methods can now be implemented to investigate theoretical determinants of individuals' work stress in real time.

Symposium Abstracts

Combining diaries with accelerometers to understand within- and between person links between support and activity

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Background

Social support has been found to be a correlate of physical activity in cross-sectional studies, but the support-activity link has rarely been studied in daily experience studies. This intensive longitudinal study examined the link between daily social support and physical activity both between and within participants.

Methods

Participants (N = 68) wore accelerometers to capture daily activity and reported the amount of exercise-related social support in an online evening diary for 6 consecutive days.

Findings

Participants who received more social support on average and on a given day were more physically active. Individuals with higher levels of social support showed more physical activity on average (betweenperson support-activity link, $b = 858$ daily steps, $p = .02$). Within participants, on days when participants received more social support than usual they were more physically active (within-person support-activity link, $b = 652$ daily steps, $p = .01$).

Discussion

Social support and activity showed day-to-day fluctuations and evidence for a between-person and a within-person link, underscoring the importance of studying social processes and health behaviors in daily life.

Symposium Abstracts

Intention and change in intention predict attendance at Cardiac Rehabilitation

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Background

Cardiac rehabilitation (CR) is effective in promoting physical and psychological recovery following acute cardiac syndrome (ACS). Only 42% of eligible patients attend in the UK. This study examines determinants of attendance at Phase 3 CR in a cohort of ACS patients followed from discharge until the start of CR.

Methods

Of 488 eligible ACS patients (March 2012 to July 2013), 214 consented. Consecutive patients completed a questionnaire pre-discharge targeting age, diagnosis, social class and smoking history. A computerised weekly diary measured intention to attend thereafter. A multi-level structural equation model (aML software) combined a basic growth model for intention and logistic model for attendance. Intention was reflected and log transformed (intention reflected-log).

Findings

169 participants provided 5 weeks of diary entries on average. The intercept for intention reflected-log ($t=-2.92$, $p<.005$), and slope for intention reflected-log ($t=-2.08$, $p=.04$) predicted attendance. Control for demographic variables reduced the slope effect ($t=-1.57$, $p=.12$). The least deprived participants were more likely to attend than the most ($t=2.14$, $p<.03$).

Conclusions

High intention following discharge, and low decline in intention predicts attendance at CR.

Symposium Abstracts

Time-lagged associations between executive function and sedentary behaviour in daily life

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Background

Executive function (EF) is important in effortful behavioural regulation, so may play an important role in determining sedentary behaviour (SB) and physical activity. However, it is also the case that physical activity leads to improved cognitive (and particularly executive) functioning. We investigated within-person associations between EF and SB using an ecological momentary assessment design, with time-lagged analysis used to unravel any direction of causality.

Methods

65 adults (50f, M age = 38.9) wore a hip-mounted accelerometer (measuring SB) and completed repeated Go/NoGo tasks (measuring EF resources) on a wrist-mounted electronic device every waking hour over 7 consecutive days. SB was defined as the number of mins/hour where activity counts were <100. Statistical analysis used multilevel modelling.

Findings

Within individuals, increased SB in the prior hour was associated with poorer Go/NoGo task performance ($p < .05$). Poorer-than-usual Go/NoGo task performance was not associated with SB in the following hour ($p = .41$).

Discussion

Increased SB in daily life leads to an immediate reduction in EF, but we found no evidence that momentary declines in EF promote increased SB.

Symposium

Understanding usage of digital interventions

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Aims

The aim of this symposium is to inform the future design and implementation of digital interventions by considering analyses of how people use them. The symposium will consider how user characteristics such as education and health literacy level may affect attitudes, usage and outcomes. The symposium also illustrates novel techniques of carrying out detailed usage analyses that can reveal which elements of digital interventions are and are not used and how this relates to outcomes of the intervention.

Rationale

Usage analyses are vital for understanding engagement with digital interventions – in particular for investigating who are the people that dropout and why. They can also be valuable for identifying the effective ingredients of behaviour change interventions, as well as who benefits most from which ingredient.

Summary

Morrison commences by demonstrating how visualisation techniques can be used to explore and describe patterns of digital intervention usage in three different trials of a weight management intervention (POWeR), examining usage with and without human support, and with and without access to both website and app-based content. Reinwand also looks across multiple interventions, analysing factors predicting dropout across a range of interventions. Interestingly, her paper reports that people with a lower educational level appreciate digital interventions but nevertheless tend to drop out from them. Muller examines how people with differing levels of health literacy use and benefit from an interactive digital intervention, compared with traditional static text. Her paper analyses the effects on health literacy outcomes of behavioural change techniques such as motivational quizzes and planning. Yardley then describes the factors mediating and moderating outcomes of a hand-washing intervention, exploring which elements were used and which predicted attitudes, intentions and behaviour. Finally, Crutzen will lead a discussion of what lessons for intervention design and implementation we can learn from these analyses.

Symposium Abstracts

How does usage of a weight-management intervention vary by context? The story of POWeR

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Background

POWeR, a web-based weight management intervention, has been trialled in a range of implementation settings. We provide an in-depth comparison of previously unexplored usage patterns across these settings using new visualisation software.

Methods

A feasibility trial (N=179) and full RCT (N=834) compared the effect of POWeR with varying levels of nurse support. A community-based public health trial examined the role of brief telephone coaching (N=786). A workplace-based observational study examined usage of POWeR alongside a supplemental Smartphone app (N=942).

Findings

Visual analysis enabled comparison of usage patterns within and across each study. For example, a greater proportion of app users than web-only users in the workplace study accessed problem solving advice (33.33% vs. 9.30%), $\chi^2(1, N=942)=31.17$, $p<.001$, and optional content (18.33% vs. 4.08%), $\chi^2(1, N=942)=21.16$, $p<.001$.

Discussion

Comparison of usage patterns across and within different implementation settings can generate explanations for continued engagement or disengagement with health behaviour change interventions, thus helping to improve future implementation.

Symposium Abstracts

Impact of educational level on dropout and appreciation of eHealth interventions: example of seven RCTs

D. Reinwand^{1, 2}, R. Crutzen², I. Elfeddali^{2, 3}, F. Schneider³, D.N. Schulz³, E.S. Smit^{3, 4}, N.E. Stanczk⁴, V. Voncken-Brewster⁴, M.J.L. Walthouwer⁴, H. de Vries⁴

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Objective

High dropout rates are a major issue in computer-tailored (CT) eHealth interventions. The aim of this study is to assess if people with a low educational level dropout more frequently and to what extent this depends on appreciation of the program.

Method

Seven longitudinal CT eHealth intervention trials were used to investigate dropout rates among participants with different educational levels and to pool data regarding program appreciation. Regression analysis was used to assess whether program appreciation predicted dropout at follow-up.

Results

Among the seven studies, five found a higher dropout rate among participants with a lower educational level. In two studies, there was no significant difference with regard to dropout among different educated participants. Two of the seven studies showed that participants with a lower education appreciated the interventions significantly better than high educated participants. Appreciation of the interventions did not predict dropout at follow-up in any of the seven studies.

Conclusion

As appreciation does not seem to be related to high dropout rates, future research must try to identify alternative explanations.

Symposium Abstracts

An international trial of an interactive website designed for people with low health literacy

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⁴University of Dresden, Germany

⁵University College Dublin, Ireland

⁶Taipei Medical University, Taiwan

Background

This international study aimed to address how people with lower levels of health literacy engage with digital interventions by developing and testing a web-based intervention to promote physical activity in people with Type 2 diabetes. Our objective was to determine whether audio-visual presentation and interactivity could increase accessibility for people with varied health literacy levels.

Method

Participants from UK, Ireland, Germany, Austria, and Taiwan were randomised to either interactive or static web-materials. Measures included: intervention usage; health literacy; enablement; attitudes and intentions towards physical activity (based on Theory of Planned Behaviour).

Findings

To date, 791 people have taken part (trial ends March 2015). Initial analyses of UK data (n = 312) suggests that people with low health literacy spend significantly longer on the intervention, but there is no difference between participants with high and low health literacy in terms of satisfaction or enablement. These findings will be tested in the international data.

Discussion

Early data provides encouraging indications that it is possible to design a digital intervention that is valued by people with all health literacy levels.

Symposium Abstracts

How can a website change hand hygiene behaviour? Mediators of behaviour change in PRIMIT

L. Yardley¹, B. Ainsworth¹, M. Steele¹, B. Stuart¹, J. Joseph¹, P. Little¹

¹University of Southampton, United Kingdom

Background

The PRIMIT intervention succeeded in changing hand hygiene and reducing infection transmission in the home. The aims of these analyses were to describe what elements of the intervention were accessed most and to investigate mediators of behaviour change.

Methods

The PRIMIT intervention consisted of 4 weekly web-based sessions plus tailored feedback. 19501 users were randomised to intervention access or a no access control group. Usage was objectively recorded by the website, and a Theory of Planned Behaviour based questionnaire administered online to assess attitudes and intentions towards hand-washing and hand-washing behaviour at baseline and 4 month follow-up.

Findings

The intervention group reported greater increases in hand-washing, and also positive changes in attitudes and intentions towards hand hygiene. Visualisation analyses revealed variability in the usage of intervention components. Positive perceptions of the website were associated with greater usage and greater behaviour change.

Discussion

Our analyses provide encouraging confirmation that brief exposure to appropriate behaviour change techniques targeting key influences on behaviour can be sufficient to change even a habitual behaviour such as hand-washing.

Symposium

Fatigue and pain in long-term conditions across the life span

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Aims

The aim of this symposium is to illustrate some of the psychological processes that are related to symptom experience, focusing particularly on fatigue and pain, across a range of long term conditions (diabetes, multiple sclerosis and chronic fatigue syndrome), and in participants at different stages of the life span. Delegates attending the symposium will learn about the cognitions, behaviours and emotional factors that are thought to maintain symptoms of pain and fatigue across conditions, the process of developing a treatment model, and factors which are important in determining the effects of treatment.

Rationale

This symposium is distinctive in that it demonstrates how symptoms across a range of conditions can be understood in terms of common processes, which can in turn inform treatment models.

Summary

The symposium starts with a report of a prospective study (Chalder) which shows how cognitive and behavioural factors maintain fatigue in adolescents with chronic fatigue syndrome. The importance of fatigue related cognitions in the perpetuation of severe fatigue in diabetes is picked up in paper 2 (Menting), which also demonstrates the interrelations between pain and fatigue in this condition. Paper 3 (Moss-Morris) reports on the development of a model explaining pain in multiple sclerosis on the basis of cognitive, behavioural and emotional factors, and shows how this model has informed a self-help intervention. Paper 4 (Knoop) focuses on how interpersonal factors, particularly solicitous responding on the part of a significant other, may predict symptomatic response to treatment for fatigue in chronic fatigue syndrome. Finally, paper 5 (Wearden) reports on associations between sleep problems and fatigue in chronic fatigue syndrome, and shows how improvements in sleep partially mediate the effect of treatment on fatigue.

Symposium Abstracts

Unhelpful cognitive and behavioural responses are associated with symptoms in adolescents with chronic fatigue syndrome

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Background

Using a cognitive behavioural model of chronic fatigue syndrome the objective of this prospective study was to test the hypothesis that cognitive (i.e. symptom focusing, fear avoidance beliefs) and behavioural responses (i.e avoidance of activity, all or nothing behaviours) would be associated with fatigue and physical functioning in CFS participants.

Methods

Adolescents with CFS (N=85) completed self report measures at time 1 and outcomes of fatigue and physical functioning 8 weeks later (time 2).

Findings

Multiple regression analyses revealed that all or nothing behaviour was associated with fatigue and physical functioning at time 2. Negative beliefs about engaging in activity were also associated with physical functioning at time 2.

Discussion

This prospective study provides some evidence consistent with the hypothesis that cognitive and behavioural factors proposed as maintaining factors in a cognitive behavioural approach to CFS at time 1 were associated with fatigue and physical functioning eight weeks later. These should be specifically targeted in the context of cognitive behaviour therapy.

Symposium Abstracts

Long-term course and predictors of pain and severe fatigue in Type 1 Diabetes

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Background

Severe fatigue is a common symptom in patients with type 1 diabetes (T1D). A previous study found a prevalence rate of 40%. Little is known about the long-term course of fatigue in T1D.

Methods

This longitudinal study with two assessments investigated the long-term course and possible predictors of fatigue. At baseline 214 T1D patients participated. They filled in questionnaires regarding fatigue severity, pain and cognitive-behavioural factors known to be associated with fatigue. Three years later 190 patients participated again. Multiple regression analysis was used to determine predictors of fatigue.

Findings

The prevalence of fatigue was 40% at baseline and 42.5% at follow-up. About 75% of the patients, who were fatigued at baseline, were also severely fatigued at follow-up. Fatigue severity at follow-up was predicted by somatic complications and diabetes- and fatigue-related cognitions. Pain predicted fatigue at baseline, but not at follow-up.

Discussion

Severe fatigue is a highly prevalent and persistent symptom in T1D. Aside from somatic complications, cognitive-behavioural factors predict fatigue severity. This suggests that behavioural interventions may be of use in the management of T1D fatigue.

Symposium Abstracts

The development of Guided cognitive-behavioural self-management Treatment for multiple sclerosis pain (GIFT)

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Background

Pain is a common, disabling symptom in MS. This series of studies aimed to develop and preliminary evaluate a psychological intervention to support pain management for people with MS. Methods: 1) The development of a model of MS pain based on a systematic review of the literature (n=31) on psychological factors associated with MS pain 2) A cross sectional study (n=612) investigating whether cognitive, behavioural and emotional factors drawn from this model, explain significant amounts of variance in pain severity and interference after controlling for measures of disease severity and pain subtype. 3) A singlecase series of eight paMS undergoing an 8 week self-management CBT programme developed from the previous studies.

Findings

The MS pain model psychosocial factors explained 24% and 30% of the variance in pain severity and interference after controlling for disease variables. Results were similar across pain subtypes. The case series suggested CBT may be effective in improving pain outcomes in MS.

Discussion

Current MS pain management is medication focused. Integrating guided self-management into this routine care may improve pain outcomes in MS.

Symposium Abstracts

Role of partner and relationship satisfaction in treatment outcome of patients with chronic fatigue syndrome

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⁴Faculty of Clinical Psychological Science, Maastricht University, Netherlands

Background

Responses of partners of patients with chronic fatigue syndrome (CFS) can influence symptoms. Cognitive behaviour therapy (CBT) leads to a significant decrease of CFS symptoms. Objective of this study was to explore if partner's solicitous responses and patients' and partners' relationship satisfaction predicted treatment outcome.

Methods

Treatment outcome was studied in a cohort of 204 CFS-patients. At baseline, partner's solicitous responses, and partners' and CFS-patients' relationship satisfaction were assessed. Patients completed pre- and post treatment the Checklist Individual Strength, assessing fatigue, and the Sickness Impact Profile, assessing disability. Logistic regression analyses were conducted with clinical significant improvement on outcome measures as dependent measure and solicitous responses and relationship satisfaction as predictors.

Findings

More solicitous responses were associated with less clinical significant improvement in fatigue and disability. Partners reported more solicitous responses when they perceived CFS as a more severe condition. Patients' relationship dissatisfaction was negatively associated with improvement in fatigue.

Discussion

Partners' responses and relationship satisfaction affect outcome of CBT. The illness perceptions of the partner are related to their solicitous responses. These findings have implications for treatment.

Symposium Abstracts

The relationship between sleep problems and fatigue in chronic fatigue syndrome (CFS)

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Background

Sleep symptoms are common in chronic fatigue syndrome (CFS). We aimed to describe sleep symptoms and their relationship to fatigue, and to determine whether improvements in sleep mediated treatment effects on fatigue.

Methods

296 adult participants in a randomized controlled trial which compared pragmatic rehabilitation with treatment as usual for CFS completed questionnaire measures of sleep symptoms and fatigue at baseline, end of treatment (20 weeks) and 70 weeks follow up.

Findings

At baseline, 274 (93%) patients scored within the clinical range for at least one sleep symptom, with 260 (88%) reporting waking unrefreshed. Sleep symptoms and fatigue were weakly correlated ($r=.192$). Regression analyses, controlling for relevant baseline variables and treatment allocation, showed that the beneficial effect of pragmatic rehabilitation on fatigue at follow up was partially mediated (29%) by improvements in sleep at the end of treatment (effect size -0.94 , $SE= 0.44$, $P=.034$).

Discussion

Improvements in sleep may be one mechanism by which pragmatic rehabilitation improves fatigue. Future work will test multiple mediation models including sleep and previously described cognitive mediators of pragmatic rehabilitation.

Symposium

Making sense of behaviour change theory: Problems, methods and applications

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³Australian Catholic University, Australia

This symposium aims to (i) present a body of work analysing 83 theories (1725 constructs) of behaviour change identified in a cross-disciplinary review, (ii) describe the nature and overlap of these theories and explore the potential to create an overarching theoretical framework to enhance theory development and application, (iii) consider a method for better reporting of theory, (iv) present a methodology for linking theoretical mechanisms of action with behaviour change techniques, and (v) promote discussion about future work to advance theoretical development and application.

Theory seeks to summarise the accumulated knowledge about a particular area. It has an important role to play in guiding the development of interventions and in furthering our understanding of the mechanisms underlying effective interventions. There is a large number of behaviour change theories, but a lack of guidance as to how to apply theory to intervention development and evaluation. In order to facilitate theory selection, and reduce the variability with which theories are used and reported, we need to make sense of the array of behaviour change theories, which are both heterogeneous and overlapping.

This symposium will present four papers outlining methods for making sense of these behaviour change theories. Susan Michie will describe the potential to create an overarching framework that synthesises theory, by analysing similarity between constructs across 83 theories of behaviour change. Robert West will introduce a method for improving the reporting of theory. Rachel Carey will present a study identifying and categorising the 'mechanisms of action' most frequently cited in behaviour change theories. Lauren Connell will describe the methods and preliminary findings of a study linking behaviour change techniques to their underlying theoretical mechanisms of action, using evidence synthesis. The discussant, Ralf Schwarzer, will consider the potential for applying this work to the development, evaluation and reporting of behaviour change interventions.

Symposium Abstracts

Identifying overlap between theories of behaviour change

S. Michie¹, R. West¹, R. Carey¹, L. Connell¹, C. Godinho¹, K. Sheals¹

¹University College London, United Kingdom

Background

The aim of this study was to identify similarities between constructs used in different behaviour change theories, with a view to facilitating theory selection and creating an overarching, synthetic framework within which individual theories can be located.

Methods

Constructs were extracted from 83 theories of behaviour change identified in a multidisciplinary literature review. Construct definitions were generated from theory sources, dictionaries and expert consensus. These definitions were used to judge construct similarity across theories, and these similarities were recorded in a relational database. The five most frequently used theories were analysed in the first instance.

Findings

1725 constructs were identified, with a mean of 21 per theory and range of 5-84. The five most frequently used theories contained 67 constructs, of which 34 were deemed similar or indistinguishable. Each construct featured in, on average, 2 of the 5 theories (range 1 to 5).

Discussion

There are considerable similarities between constructs across different theories of behaviour change. This suggests a prospect for synthesising constructs to create a 'prototype' theory, which could form an overarching framework for other theories.

Symposium Abstracts

A template for describing behaviour change theories

R. West¹, S. Michie¹

¹University College London, United Kingdom

Background

The aim of this presentation is to propose, and prompt discussion on, a template to improve the reporting of behaviour change theories.

Methods

83 theories of behaviour change were analysed in terms of their clarity of exposition of key features and a draft template derived to provide a set of guidance for specifying theories that addressed limitations identified.

Findings

The draft template included headings of: Name, Brief summary (main propositions), Scope (in terms of phenomena/findings it seeks to explain), Target (individuals, populations or social structures), Type (statistical, realist, dynamic, narrative), Rationale (how it improves on what is already there), Constructs (key elements), Relationships between constructs, Provenance (what theories does it draw on), Similarity (what theories it is most like), Complementarity (what theories it works with), Operationalisation (how can constructs and relationships be measured or identified), Hypotheses (what hypotheses does it make and how do these differ from other theories), and Uses (what it can be used for).

Discussion

Theory development, testing and use may be improved by use of a template that promotes more complete and accurate description.

Symposium Abstracts

What do theories tell us about how behaviour changes?

R. Carey¹, R. West¹, L. Connell¹, C. Godinho¹, S. Michie¹

¹University College London, United Kingdom

Background

The aims of this study were (i) to identify frequently occurring mechanisms of action cited in behaviour change theories, and (ii) to describe these mechanisms in terms of what they change using the COM-B model: capability, opportunity, motivation and/or behaviour.

Methods

The constructs from 83 theories of behaviour change were classified according to whether they were mechanisms of action (mediators of behaviour change) and, if so, further classified according to the COM-B model of behaviour using a card-sort task..

Findings

1376 constructs representing mechanisms of action were identified following the exclusion of constructs that related to demographics/prior experience, were moderating factors (e.g. public policy), or had definitions that were too broad. The majority fell within the category of 'reflective motivation', and the fewest within 'physical capability'.

Discussion

The majority of mechanisms of action from behaviour change theories can be described in terms of reflective processes (involving plans/evaluations), while the fewest relate to physical capabilities/skills. By identifying the most frequently occurring mechanisms, this research may facilitate the selection of target constructs for interventions.

Symposium Abstracts

Linking behaviour change techniques with theory

L. Connell¹, R. Carey¹, M. Johnston², A. Rothman³, M. Kelly⁴, M. de Bruin¹, S. Michie⁴

¹University College London, United Kingdom

²University of Aberdeen, United Kingdom

³University of Minnesota, United States

⁴Cambridge University, United Kingdom

Background

This presentation reports the findings of a study to identify links between behaviour change techniques (BCTs) and their theoretical mechanisms of action.

Methods

A systematic review identified >700 behaviour change interventions reporting a theoretical basis and evidence of links between BCTs and theory. Interventions were coded for (i) BCTs using the 93-item taxonomy, (ii) theoretical domains from the Theoretical Domains Framework, and (iii) theoretical constructs proposed as mechanisms of action. The frequency and strength of links between BCTs and domains or constructs were calculated using non-parametric indices of association.

Findings

Few papers linked all intervention components to individual mechanisms of action, instead tending to link interventions more broadly to overarching theoretical frameworks. Where mechanisms were mentioned, BCT-mechanism links were not always clear or explicit.

Discussion

The links identified between behaviour change techniques and theory within the published literature facilitate our understanding of how interventions are proposed to have their effect. The resulting database of interventions and BCT-theory links will produce a resource for the behaviour change field of use for both researchers and intervention designers.

Symposium

Innovative ways of understanding and measuring eating behavior

G. Sproesser¹, M. Stok¹

¹University of Konstanz, Germany

Aims

This symposium aims, firstly, to present state-of-the-art research in the domain of understanding the complex behavior of food and drink intake, and, secondly, to provide health psychologists with an overview of innovative methods of capturing and measuring eating behavior.

Relevance

Unhealthy eating behavior contributes substantially to excess body weight. With the prevalence of overweight and obesity continually increasing, it is of crucial importance to find better ways to understand and assess the complex and multifaceted behavior of eating.

Overview

The first two presentations in this symposium describe new ways of understanding eating behavior. Marijn Stok (University of Konstanz) will present research from the European DEDIPAC project, in which the immense diversity of outcomes belonging to the fuzzy umbrella term of 'eating behavior' is captured. Second, Astrid Junghans (Utrecht University) will present results from a study on choice blindness, demonstrating a new way of investigating how people make decisions about the foods they want to eat. Presentations three and four demonstrate innovative methods of measuring eating behavior in the laboratory and real world. Gudrun Sproesser (University of Konstanz) will present findings on the food choices people make for themselves and others. These findings were obtained using a buffet of fake foods, a recently developed and highly promising new method of assessing eating behavior. The fourth presentation will show how new media can be used effectively both to measure, as well as to intervene on eating behavior. Jennifer Inauen (Columbia University) will present a study employing ecological momentary assessment to decrease unhealthy snacking. People were asked to keep a photo diary of the unhealthy snacks they consumed. Finally, Laura König (University of Konstanz) will show how different methods of assessing eating behavior result in the finding of different predicting variables.

Symposium Abstracts

Dietary behavior: Developing a taxonomy of outcomes related to diet, eating and nutrition

M. Stok¹, B. Renner¹

¹University of Konstanz, Germany

Background

“Dietary behavior” is a fuzzy umbrella term that can mean different things across scientific disciplines, hindering communication and mutual understanding. The current study involved drawing up a taxonomy of the different outcomes studied by a diverse and broad group of scholars investigating dietary behavior.

Methods

A four-phase Delphi method was conducted with 65 scholars involved the DEDIPAC project. Phase 1 consisted of an online mind mapping procedure. In Phase 2, the input was reduced and categorized into a taxonomy. In Step 3, this taxonomy was discussed among all scholars involved and adapted. In Step 4, the taxonomy was finalized.

Findings

More than 100 outcomes were initially specified. The final taxonomy that was agreed upon consisted of 3 main categories (Eating Behavior, Food Choice, and Dietary Intake/Nutrition) and 17 specific outcomes.

Discussion

The term “dietary behavior” covers a wide range of outcomes. Insight into this diversity is a prerequisite for successful cross-disciplinary obesity research. The current taxonomy can be used as a tool to facilitate discussion and understanding between researchers.

Symposium Abstracts

Do consumers look at ingredient information on food packaging? Using the Choice-Blindness-Paradigm to assess attention

A. Junghans¹, T. Cheung¹, G. Dijksterhuis², F. Kroese², P. Johansson³, L. Hall², D. De Ridder³

¹Utrecht University, Netherlands

²University College Roosevelt, Netherlands

³Lund University, Sweden

Background

Food manufacturers and policy makers have been tailoring food product ingredient information to consumers' self-reported preference for natural products and concerns over food additives. Yet, the influence of this ingredient information on consumers remains inconclusive.

Methods

The current study aimed at examining the first step in such influence, which is consumers' attention to ingredient information on food product packaging. Employing the choice-blindness paradigm we examined whether consumers detected covertly made changes to the naturalness of ingredient lists throughout a product evaluation procedure.

Findings

Results revealed that only few consumers detected the changes on the ingredient lists. Detection was improved when consumers were instructed to judge the naturalness of the product as compared to evaluating the product in general.

Discussion

These findings challenge consumers' self-reported use of ingredient lists as a source of information throughout product evaluations. While most consumers do not attend to ingredient information, this tendency can be slightly improved by prompting their consideration of naturalness. Future research should investigate the reasons for consumers' inattention to ingredient information and develop more effective strategies of conveying information to consumers..

Symposium Abstracts

I eat more healthily than you: Food choices for the self and for others

G. Sproesser¹, V. Kohlbrenner¹, H. Schupp¹, B. Renner¹

¹University of Konstanz, Germany

The present study investigated self-other biases in actual eating behavior based on the observation of behavioral standards for three different eating situations. To capture the complexity of real life food choices within a well-controlled setting, an ecologically valid fake food buffet with 72 different foods was employed. Sixty participants chose a healthy, a typical, and an unhealthy meal for themselves and for an average peer. We found that the typical behavioral standard for the self was more similar to the healthy than to the unhealthy behavioral standard. Moreover, there was evidence for asymmetrical behavioral standards for the self and peer: Participants chose more calories and more high-caloric food items for a peer than for themselves, indicating a self-other bias. This comparatively positive self-view is in stark contrast to epidemiological data indicating overall unhealthy eating habits and demands future examinations of its consequences for behaviour change.

Symposium Abstracts

Enhancing daily action control to promote healthy eating: An ecological momentary intervention

J. Inauen¹, U. Scholz²

¹Columbia University, United States

²University of Zurich, Switzerland

Background

Healthy eating is a major behavioural factor to prevent morbidity. Self-monitoring has been shown to effectively promote healthy eating. These effects may be enhanced by targeting further action control components: awareness of standards, and regulatory effort. This paper tested this for unhealthy snack consumption.

Methods

N=190 young adults were randomly allocated to a control condition or to one of two action control conditions: self-monitoring (photographic snack diary) vs. self-monitoring plus action control text messages. Unhealthy snack consumption and self-reported action control were assessed at baseline and at 1-week follow-up.

Findings

The results indicated a significant decrease in unhealthy snack consumption of self-monitoring compared to the control ($d=0.32$, $p=.044$). This effect was mediated by an increase in self-reported action control. Contrary to our hypotheses, however, targeting additional action control components by text messages did not increase the effects of self-monitoring.

Discussion

This study confirmed the beneficial effects of self-monitoring to promote healthy eating. Behaviour change occurred by increasing action control. Perhaps a longer period of enhancing momentary action control would add to the effects of the photographic diary.

Symposium Abstracts

Implicit and explicit attitudes differentially modulate food choice in hypothetical and real-choice environments

L. König¹, H. Giese¹, H. Schupp¹, B. Renner¹

¹University of Konstanz, Germany

Background

The present study examined the relationship between explicit and implicit attitudes and food choice. Specifically, it was tested whether choice environments differing in their complexity trigger different motivational signatures for confectionery choice.

Methods

For assessing explicit attitudes, 97 participants evaluated three confectioneries regarding valence, taste and appearance. Implicit attitudes were measured by a single category implicit association task. Confectionery choice was assessed using a hypothetical paired comparison task contrasting two food images and a food replica buffet from which participants were asked to serve themselves a meal they would normally eat for lunch.

Results

Path modeling revealed differences regarding the associations between explicit and implicit attitudes and confectionery choice in the two environments. While explicit attitudes were generally associated with confectionery choice ($\beta \geq .24$, $p \leq .01$), implicit attitudes were only related to confectionery self-served from the buffet ($\beta = .24$, $p = .01$).

Discussion

The choice environment moderates the relationship between implicit and explicit attitudes and food choice. Implicit attitudes towards confectionery significantly predict confectionery choice only when the choice environment provides a rich stimulus array and is experientially engaging.

Symposium

Putting illness beliefs in context: new (uncommon) perspectives on the common sense model

B. Schuez¹, S. Orbell², M. Hagger³, D. Chan², J. Mc Sharry⁴

¹University of Tasmania, Australia

²University of Essex, United Kingdom

³Curtin University, Australia

⁴National University of Ireland, Galway, Ireland

Rationale

The common-sense model of health and illness by Leventhal and colleagues has been widely used to understand individual attempts at coping with illness and illness-related stimuli. Research in the area has been greatly facilitated by the Illness Perception Questionnaire in different adaptations and revisions, but the application of the commonsense model beyond the measurement of established illness representation dimensions remains under-explored. The common-sense model of health and illness by Leventhal and colleagues has been widely used to understand individual attempts at coping with illness and illness-related stimuli. Research in the area has been greatly facilitated by the Illness Perception Questionnaire in different adaptations and revisions, but the application of the commonsense model beyond the measurement of established illness representation dimensions remains under-explored.

Aims of this symposium

- To provide new or uncommon perspectives on the common-sense model
- To explore the common sense model in context: the cultural context, the context of multiple illnesses, and the health care system context
- To explore mediators and external influences in common-sense model research
- To stimulate future research through the discussion of new perspectives on an established model.

Symposium Summary

Dr Derwin Chan will present how the common-sense model can be applied in a non-Western context (China), examining the effects of illness perceptions on health and illness outcomes. Dr Jenny Mc Sharry's contribution will present findings from a review on how people make sense of their illnesses in the context of multimorbidity. Prof Sheina Orbell's study examines how the seasonal context affects individual illness cognitions. Prof Martin Hagger's contribution will examine mediators in the context of the common-sense model, and Dr Benjamin Schuez shows how individual illness experience varies in the context of regional differences in health care supply. Through these contributions, we will highlight the need to consider new methods and perspectives, and to take individual contexts into account, when exploring the common-sense basis of health and illness experiences.

Symposium Abstracts

A longitudinal study of the common-sense model of illnesses among haematology patients in China

D.K.C. Chan¹, S.X. Yang^{2, 2}, L. Pan¹, M. Chen¹, M. Hagger²

¹Curtin University, Australia

²Sichuan University, China

Background

This study longitudinally examined the Illness Perception Questionnaire–Revised (IPQ–R) and the clinical outcomes among haematology patients.

Methods

Haematology patients (N = 206) from West China Hospital completed IPQ-R, World Health Organization Disability Assessment Schedule 2.0 (Proxy), and collection of blood sample (i.e., white blood cell, haemoglobin, platelet) in Week 1 (T1) and Week 8 (T2; response rate = 25.24%). We used the residual scores (Δ ; produced by regressing each variable in T2 on that of T1) of all the IPQ–R constructs to predicted that of each outcome variable (i.e., life difficulty, days affected by disability and blood samples) by linear multiple regression.

Findings

The results showed that Δ illness coherence was a negative predictor of Δ life difficulty and Δ days affected by disability. Δ causes–psychological factor was a positive predictor of Δ white blood cell and Δ haemoglobin. None of the Δ IPQ–R variables formed significant association with Δ platelet.

Discussion

Consistent with the common-sense model of illnesses, IPQ–R was shown to be predictive to the change of some clinical outcomes of haematology patients. Future studies should investigate the biological mechanisms underpinning the model.

Symposium Abstracts

Making sense of multiple illnesses: a systematic review and meta-synthesis of patient experiences of multimorbidity

J. Mc Sharry¹, G. Daker-White², L. McGowan¹, P. Bower¹, D. French¹

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²University of Manchester, United Kingdom

Background

Multimorbidity is becoming increasingly prevalent. The aim of this study is to explore how patients make sense of and manage multimorbidity through a systematic review and meta-synthesis of qualitative studies.

Methods

Electronic databases were searched using multiple condition and qualitative methodology search terms. Findings from included studies were synthesised using the meta-ethnographic approach described by Noblit and Hare.

Findings

Thirty four studies were identified for inclusion. A desire to “live a normal life” was a key focus identified across studies. Patients’ attempts to regulate health were hampered by escalating and interacting physical limitations, complex medicine regimes and difficulties in negotiating healthcare systems. Strategies to manage multimorbidity included adapting daily routines, engaging with life and, for older adults, framing multimorbidity as a normal part of the aging.

Discussion

As per the Common-Sense Model, patients’ experience of multimorbidity can be understood as the attempt to negotiate health threats and restore normal functioning. However, given the single condition focus in the literature to date, further work is required to extend the model for application in the context of multimorbidity.

Symposium Abstracts

Illness cognition in seasonal context

S. Orbell¹, C. Henderson¹, M. Hagger²

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²Curtin University, Australia

Background

Recent research has demonstrated that implicit models of illness are capable of activation by priming techniques. Purpose: To test the hypothesis that following a common cold prime, illness related schematic information would be more accessible when the illness in question is 'in season' than when it is 'out of season'.

Methods

A 2(common cold vs. neutral prime) X 2(in season vs. out of season) experimental design. Participants (N = 85) were primed prior to completing a modified colour Stroop task to assess accessibility of implicit illness related information.

Findings

Moderated linear regression of response latency to common cold words revealed the predicted main effect of prime ($B = .28$, $p = .009$) and significant 2-way interaction of prime with seasonality ($B = .26$, $p = .016$). Illness related information was more accessible in participants primed when the common cold was in season than when it was not in season.

Discussion

The social environment may make the activation of a specific illness schema more likely.

Symposium Abstracts

Coping as mediators of illness representations in the common sense model: a meta-analysis

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¹Curtin University, Australia

²Griffith University, Australia

³University of Essex, United Kingdom

Background

We tested a process model based on Leventhal et al.'s (1980) common-sense model in which the effects of illness representations on illness-related outcomes are mediated by coping strategies. The model reflects the generalized hypothesis that individuals who represent an illness as sufficiently threatening engage in coping procedures to manage the threat perceptions and coping procedures will likely affect illness outcomes including functioning and disease status.

Method

We conducted a database search of studies testing relations among illness representation dimensions, coping strategies, and illness outcomes from patient groups with chronic conditions or illnesses based on the common sense model. We then used meta-analytic techniques to derive corrected effect sizes among the three sets of variables that constitute the process model.

Results

Path analytic models based on the meta-analysed correlations yielded theoretically predictable patterns of effects among the representation, coping, and outcome variables. Importantly, there were significant indirect effects of representation dimensions on illness outcomes mediated by coping strategies.

Discussion

Results provide the first synthesised test of the key mechanism by which representations impact illness outcomes.

Symposium Abstracts

Health care supply and illness perceptions: contextual effects on individual Beliefs

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¹University of Tasmania, Australia

²German Centre of Gerontology, Germany

³Friedrich-Alexander University, Germany

Background

The common-sense model of health and illness assumes that illness perceptions guide how people respond to illness. It further proposes that illness perceptions are founded in a socio-cultural context, but this assumption is rarely tested. This study examines in how far the health care access affects individual illness perceptions. Access to primary health care is of particular relevance to older adults with multiple illnesses. This study therefore examines in how far district-level primary care supply affects individual illness perceptions, both directly and as a buffer of functional limitations.

Methods

Longitudinal study in 271 older adults with 6 months interval. Illness perceptions and functional limitations were assessed using the B-IPQ and SF-36. Multilevel analyses in which district-level primary care supply was matched to individual records were used to analyse data.

Findings

Primary care supply predicted and moderated the impact of functional limitations on illness perceptions, with better supply (GPs per 100,000 inhabitants/district) acting as buffer.

Discussion

Contextual variables affect individual illness perceptions, indicating that people consider their social and economical context in thinking about their illnesses.

Symposium

Social relationships and health outcomes: benefits and challenges

G. Stadler¹, U. Scholz², T. Revenson³

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²University of Zurich, Switzerland

³Hunter College & The Graduate Center, City University of New York, United States

Social interactions have been found to substantially influence health behavior and well-being, but not always in a positive way. This symposium aims at identifying when dyadic interactions result in beneficial and when in negative effects on different health outcomes. Thereby, different control strategies and social exchange processes such as social support and social control will be focused on.

Close social relationships play a major role in people's lives. Examining when and how social interactions are related to well-being and health behavior is of major relevance for health psychologists.

The four talks of this symposium focus on the effects of different individual and social control strategies and of different social exchange processes on well-being and health behavior. First, Kenzie Snyder examines the effects of preferences in self-reliance when receiving social support from close others on daily relationship processes and wellbeing. Nina Knoll then identifies mixed effects of compensatory control strategies on well-being of both partners in dyads where one partner recovers from surgery. Urte Scholz reports on differential effects of positive and negative social control on smoking and affective and behavioral outcomes in the context of smoking cessation. The fourth talk by Janina Luscher examines effectiveness of receiving and providing social support in couples with both partners trying to quit smoking on smoking behavior and affect. Finally, Tracey Revenson will discuss the findings of the four talks with regard to the existing literature of social relationships and health outcomes.

Symposium Abstracts

Preference for self-reliance in close relationships

K. Snyder¹, G. Stadler¹, S. Burns Campbell¹, N. Bolger¹

¹Columbia University, United States

Wanting space from a partner may be a more common desire than previously thought within the literature on close relationships. The current study aims to better understand individual differences in the preference for space within close relationships (i.e., in self-reliance). Participants (N = 194 in 97 couples) reported their dyadic support processes in questionnaires and 183 participants filled out daily diaries over 35 days. A subgroup of participants preferred self-reliance to a partner's active support attempts. Participants who preferred self-reliance to active support perceived less support from their partners and others, evaluated support as less beneficial when they received it, and sought less support than participants who did not report wanting space. This pattern held for both emotional and practical support in daily diaries. These results provide a new perspective on the interplay between self-regulation and support processes within close relationships in times of stress.

Symposium Abstracts

Good for one bad for the other: Cancer patients' compensatory control strategies and partners' well-being

N. Knoll¹, A. Wiedemann¹, J. Heckhausen²

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Background

Following tumor surgery, urinary incontinence can challenge prostate cancer patients' and their partners' goal pursuit and well-being. Patients' use of compensatory primary control (CPC) is proposed to help manage difficulties in goal pursuit by using technical aids and help, whereas use of compensatory secondary control (CSC) strategies is assumed to organize goal disengagement while protecting motivational resources. Patients' compensatory control strategies were examined as correlates of patients' and partners' well-being.

Methods

This study used a correlational design. Data on patients' use of compensatory control, severity of incontinence and patients' and partners' depressive symptoms (N=169 couples) were assessed at four times within seven months following patients' post-surgical onset of incontinence.

Findings

Patients' use of CPC strategies was associated with less depressive symptoms in patients and more depressive symptoms in partners. Conversely, patients' intense use of CSC was related with higher depressive symptoms in patients and lower depressive symptoms in partners.

Discussion

Potential of reverse causation and possible couple-level consequences arising from opposite effects of patients' use of compensatory control on both partners' well-being are discussed.

Symposium Abstracts

Social control after a quit attempt: Differential effects for positive and negative control

U. Scholz¹, G. Stadler², S. Ochsner², R. Hornung², N. Knoll³

¹University of Zurich, Switzerland

²Columbia University, United States

³Freie Universität Berlin, Germany

Background

Social control is assumed to be beneficial for health behavior change but to have emotional costs. Less is known about differences between positive (e.g., praise or compliment the target) and negative control (e.g., try to make target feel guilty). This was the aim of this study.

Methods

100 smokers (72 men, mean age = 40.48) completed daily diaries on positive and negative control received from their non-smoking partner, smoking, behavioral and affective outcomes for 21 days after a quitdate.

Findings

On days with more than usual positive, but not negative control less smoking was reported. Moreover, on days with more than usual negative control smokers felt worse and reported more reactance; with more than usual positive control they felt better. Both, more negative and positive control across the 21 days were related to more hiding smoking. Additionally, on days with more than usual negative control, more hiding, but on days with more than usual positive control less hiding was reported.

Discussion

Positive control seems to have more positive effects on smoking and behavioral and affective outcomes than negative control.

Symposium Abstracts

Preventive functions of provided and received social support: a daily diary study

J. Luscher¹, G. Stadler², U. Scholz²

¹University of Zurich, Switzerland

²Columbia University, United States

Background

Social support is expected to have preventive functions on health outcomes. In the context of smoking cessation smokers who reported high support showed higher quit success. However, participants supported by a smoker are less likely to achieve abstinence. So far, the focus was not on smoking couples. This study aimed at examining received and provided support in smoking couples applying a dyadic approach.

Methods

Overall, 85 dual-smoker couples reported in daily dairies their smoking behavior, positive affect, and received and provided support after a joint quit attempt.

Findings

Multilevel analysis revealed that on days with higher-than-average amount of received and provided emotional and instrumental support both couple's members smoked fewer cigarettes and reported more positive affect.

Discussion

Results do confirm benefits of daily received and provided support for smoking-smoking couples regarding a joint smoking cessation. Further research should pursue dyadic approaches in the context of smoking cessation.

Oral Presentation Abstracts

Informed Decision Making about prenatal screening: does it work?

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²UMC Utrecht Julius Center, Netherlands

Background

Pregnant women in the Netherlands can make use of prenatal screening for Down's Syndrome (combined test) and/ or other congenital disorders (ultrasound at 20 weeks). Women are supposed to make an informed decision about participation. However, it is not clear whether they do, especially not for women from ethnic minority groups, those with lower SES and young women under 23.

Methods

Focusgroup discussions, and face-to-face interviews with Turkish, Moroccan, low SES, and young pregnant women were held using IPA for analyses.

Findings

Women mentioned various reasons for (usually) not taking part in Down Syndrome screening. There were both valid: 'my risk is low since I am young', and less valid reasons: 'Down Syndrome does not occur in my family'. Emotions played an important role. The ultrasound at 20 weeks was considered standard care and taken as opportunity to learn about the baby's sex.

Conclusion

Pregnant women make a conscious, but not always informed, decision about taking part in Down Syndrome Screening, which is not covered by insurance companies. They do not reflect upon taking part in standard care

Oral Presentation Abstracts

Why do nurses get fatigued? Energy expended, stress or ego depletion?

D. Johnston¹, J. Allan¹, C. Bell¹, M. Johnston¹

¹University of Aberdeen, United Kingdom

Background

Fatigue increases throughout the working day and may lead to inefficiency and errors. Why do people become fatigued: because of the cumulative effects of energy expenditure (EE), the stress experienced or the accumulation of ego depleting demands? These questions were examined in nurses assessed in real time over two work shifts.

Methods

100 nurses completed electronic diaries which measured fatigue, tense arousal (stress) and work demand every 90 minutes. EE was measured continuously using the Actiheart system. The determinants of fatigue were tested in two ways by predicting fatigue from EE, stress and work demands: accumulated over a shift and for the previous two occasions (3 hours) using distributed lagged models with allowance for passage of time and concurrent values of determinants.

Findings

Neither EE nor work demand predicted fatigue in either statistical model. However the accumulation of tense arousal (Beta .035, $p < .002$) and current levels (Beta .147 $p < .001$) did.

Conclusion

Nurses do not get fatigued because of the energy they have expended nor the demands they have experienced but, in part, because, they have been stressed.

Oral Presentation Abstracts

Illness perception profiles and their association with 10-year survival following cardiac valve replacement

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²Guy's and St Thomas' NHS Foundation Trust, United Kingdom

Background

To evaluate whether profiles of illness perceptions are associated with 10-year survival following cardiac valve replacement surgery.

Methods

In a prospective design, illness perceptions were evaluated in 204 cardiac patients awaiting first time valve replacement and again one-year post-operatively using cluster analysis. All-cause mortality was recorded over a 10- year period. At one-year, 136 patients were grouped into one of four profiles (stable positive; stable negative; changed from positive to negative; changed from negative to positive).

Findings

The median follow-up was 3063 days (78 deaths). After controlling for clinical covariates including markers of function, and psychological distress, patients who changed illness perceptions from positive to negative beliefs one year post-surgery had an increased mortality risk (HR = 3.2, 95% CI: 1.2 – 8.3, $p = .02$) compared to patients who held positive stable perceptions.

Discussion

Following cardiac valve replacement the development of negative illness perceptions over the first postoperative year predicts long-term mortality. Early screening and intervention to alter this pattern of beliefs could be beneficial and improve outcome.

Oral Presentation Abstracts

Interest in genomic testing and risk communication preferences in women from BRCA1/2 negative families

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Scientific advances have allowed the development of multiplex gene panels in which many genes are assessed simultaneously in women who have tested negative for BRCA1/2. We examined correlates of interest in testing for genes that confer modest/moderate breast cancer risk and risk communication preferences. Women who were first-degree relatives of breast cancer patients who tested negative for BRCA1/2 mutations (n = 124) completed a survey assessing testing interest and risk communication preferences. Interest in genomic testing was high (71%) and even higher if results could guide risk-reducing behavior changes (81%). Participants preferred to receive risk communications from a variety of sources including: primary-care physicians (83%) printed materials (69%) and the Internet (60%). In multivariable analyses, factors that were independently associated with interest in genomic testing were: younger age ($p = 0.017$), moderate to high levels of cancer worry ($p = 0.003$), and fruit and vegetable intake ($p = 0.048$). Our findings provide guidance for health psychologists and researchers, who can help develop and test genomic risk communications, promote informed decision-making and customize behavioral interventions.

Oral Presentation Abstracts

Psychological structures of time in a stressful work context among nurses

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In occupational health psychology, the lived experience of time is mainly linked to stress and its related health problems (burnout, depression or muscular pain). However, time can also be perceived as a health protector under specific conditions as a fundamental dimension of nurses' professional activity through time constraints (complex situations; emergencies; responsibility of patients' lives). Semi-structured interviews were conducted with 16 female nurses from 28 to 50 years old in a 2-steps design to explore among others the lived experience of time. According to a phenomenological analysis of their discourses, we can assess three structures of time among nurses. First, the latitude of choice and the freedom to plan schedules is the most important positive factor developed in relation to family life and leisure. Second, working time is made both of slow and fast moments of activities that allow nurses to keep a protecting balance in their lived experience. Third, time is elaborated through the lenses of career and longterm personal evolution. These findings have implications for organisational management in terms of protecting and developing workers' self-control on working time.

Oral Presentation Abstracts

Illness perceptions as a marker for accelerated disease progression during predialysis care

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Background

Illness perceptions are associated with mortality in renal patients. However, no data is available regarding the relationship between illness perceptions and accelerated disease progression.

Methods

416 incident pre-dialysis patients participating in a prospective cohort (PREPARE-2) completed the Revised Illness Perception Questionnaire. Associations between illness perceptions, time until start of dialysis and change of kidney function (i.e. eGFR) over time, were investigated using Cox regression models and linear mixed modeling.

Findings

After adjustment for sociodemographic and clinical variables, dialysis started earlier and kidney function declined faster (ml/min/1.73m²/year) in patients with an increased belief that their disease is cyclical (HR=1.32 [95%CI 1.11;1.56]; additional change -0.64 [95%CI -1.16;-0.13]), has negative consequences (HR=1.47 [95%CI 1.18;1.85]; additional change -0.67 [95%CI -1.30;-0.04]) and causes negative feelings (HR=1.21 [95%CI 1.03;1.42]; additional change -0.65 [95%CI -1.13;-0.16]). Furthermore, kidney function declined faster in patients with an increased belief that their disease cannot be personally controlled (additional change -0.69 [95%CI -1.31;-0.09]) and understood their disease less well (additional change -0.53 [95%CI -1.05;-0.01]).

Discussion

Negative illness perceptions at the start of pre-dialysis care are a marker for accelerated disease progression

Oral Presentation Abstracts

Decisions about requesting secondary genomic findings: Intentions versus reality among patients undergoing diagnostic genomic sequencing

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Background

Next generation sequencing is increasingly used in clinical settings, prompting debate about returning secondary findings (SFs)—health-relevant information unrelated to the indication for sequencing. This study investigated intention to request SFs, actual requests, and their correlates among adult patients undergoing diagnostic genomic sequencing.

Methods

85 participants were randomly assigned to learn about six categories of non-medically actionable SFs after receiving their diagnostic results (versus participants receiving diagnostic results only). Next, they completed measures (intentions to request SFs, demographics, health literacy, numeracy, knowledge). Actual requests required a phone call and were tracked.

Results

78% of participants intended to request at least some SFs; only 35% actually requested them. Correlates of intentions (race/ethnicity, education, health literacy; $p < .05$) differed from correlates of requests (race/ethnicity; $p = .049$). Compared to participants who did not request SFs, those who requested them perceived higher benefits ($p = .02$) and lower risks ($p = .01$) for learning their SFs.

Discussion

This study design differentiated intentions and requests for SFs among patients undergoing diagnostic genomic sequencing and identified correlates of requests. Findings can help guide best practices for returning SFs in clinical settings.

Oral Presentation Abstracts

Stress and relief in pediatric cancer healthcare workers

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Background

The objective was to examine the impact of sources of stress and of relief in health professionals.

Methods

The subjects were 55 physicians and nurses in a pediatric cancer institute. They were administered questionnaires assessing Perceived stress (Sheldon Cohen), Compassion Fatigue (Figley), Burnout (Maslach and Melamed-Shirom), and sources of stress and actions providing relief for stress (Kreitler).

Findings

The results showed that the major sources of stress were related to work conditions, family, and daily arrangements rather than to medical or psychosocial issues of patients. Doctors and nurses did not differ in stress sources. The major relief factors were physical, social, entertainment, and emotional expression. Regression analyses showed that perceived stress was predicted significantly by both instigating and relief factors, more by lack of relief than by stress factors.

Discussion

The conclusions are that perceived stress is high in caretakers. It is due mainly to work and life conditions and may be reduced by relief factors. For reducing stress in health professionals it is recommended to improve work conditions and train them in applying stress relieving actions.

Oral Presentation Abstracts

Illness representations and coping predict the severity of atopic dermatitis: a 1-year follow-up

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Background

Illness representations and coping have been associated with disease-related impairment in patients suffering from different chronic diseases like COPD, tinnitus, psoriasis or atopic dermatitis (AD). However, this study is the first investigating whether illness representations and coping at the end of a rehabilitation clinic visit (T1) predict the severity of the disease 1 year later (T2) in AD-patients.

Methods

109 AD-patients filled in validated questionnaires to measure illness representations and coping at T1. At T2, all patients were asked to evaluate the severity of AD by means of the PO-SCORAD (response rate 55%).

Findings

18.4% of the AD-severity at T2 was explained by illness representations and coping ($p = 0.003$): The belief that the disease was caused by chance, that it will have a bad course as well as depressed reactions were positively associated with the disease severity at T2.

Discussion

This study indicates that illness representations and coping predict the severity of AD one year later. Future research should investigate the effects of cognitive restructuring on skin status in AD-patients.

Oral Presentation Abstracts

Family disease history and perceived risk for Type 2 diabetes, cardiovascular disease, cancer and depression

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Background

We compared relations between family disease history and perceived risk for Type 2 diabetes (T2D), cardiovascular disease (CVD), cancer and severe depression.

Methods

Participants were Finnish 25–74-year-olds (N=5024) from a population-based FINRISK 2007 study. Perceived absolute risks for diseases were measured as ordinal variables (1 to 5). Regression analyses were performed to examine the effect of family history (parents and siblings), demographics and behavioral risk factors (e.g. smoking) on perceived risks.

Findings

Family history was most prevalent for cancer (39%), least for depression (19%). Perceived risk was highest for CVD, lowest for depression. In regression analyses, relation between family history and perceived risk was strongest for T2D ($\beta=0.35$, $p<0.001$), weakest for depression ($\beta=0.18$, $p<0.001$). The association remained significant ($p<0.001$) for all diseases after adjusting for demographic and behavioral risk factors. For depression the association of family history and perceived risk was stronger for women than men ($p<0.001$).

Discussion

Relation between family history and perceived risk varies across diseases. Future studies should examine whether the effect of genetic risk information on perceived risk varies similarly across diseases.

Oral Presentation Abstracts

Burnout, is it just a case of immature defence styles?

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Two studies investigating burnout in Irish Psychologists (N=174) and female trauma therapists (N=35) support the idea that emotional exhaustion and depersonalisation are merely the consequence of using immature defence styles, as measured by Bond's Defence Style Questionnaire. In particular, minor image distorting defences are related to both the tendency to become emotionally exhausted and to develop a detached and cynical view of the client. These findings suggest that the unconscious deployment of defences in order to maintain self-esteem and to lower anxiety may be a key factor in the development of and maintenance of burnout in caring professions such as psychology and therapists. With this in mind, supervisors of carers need to focus on the possibility of distortion as a self protective but inevitably self-destructive work behaviour in psychologists and therapists. This relationship between defences and burnout needs to be further replicated and examined across other occupational groups.

Oral Presentation Abstracts

Illness perceptions or recurrence risk perceptions: what comes first? A longitudinal examination among cardiac patients

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Background

Previous research suggested that illness perceptions provide the basis for illness risk perceptions through an inductive reasoning process. The present study assessed the causal direction of relationships between illness and recurrence risk perceptions among cardiac patients.

Methods

A longitudinal study was conducted among 116 patients undergoing coronary angioplasty. Self-report questionnaires measured perceived recurrence risk and illness perceptions one day and one month after catheterization.

Findings

Cross-lagged Panel Model Analyses revealed that higher perceptions of timeline, consequences, cause (attributing the disease to aging), and emotional representations of illness at hospitalization led to higher risk perceptions one month later. Perceived personal control was the only illness perception with bi-directional causal effects: higher perceived personal control at hospitalization led to higher risk perceptions one month later; and higher risk perceptions at hospitalization led to lower personal control one month later.

Conclusion

The findings suggest that the associations between risk and illness perceptions can only partly be explained by inductive reasoning. Affective and defensive processes are suggested as complementary explanations for the observed associations between risk and illness perceptions.

Oral Presentation Abstracts

Perceived risk predicts Type 2 diabetes but not weight gain in a five year follow-up

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Higher perceived risk for certain disease should lead to actions that decrease the risk. Aim of this study is to examine does risk perception predict T2D in random sample of general population. Participants aged 45-74 years from the FINRISK study (n=1109) were invited to follow-up study 5 years later. 80% of the high risk group for T2D (n=432) and 84% of the other group (n=477) participated in the follow-up. Weight, height waist, hip, 2 hour fasting glucose test were measured in a health examination. Absolute perceived risk for T2D, selfefficacy, outcome beliefs and health behaviors were self-reported.

High risk group had higher perceived risk than other group but no difference in self-efficacy or beliefs. After five years, 34% of high risk group and 6% of other group were diagnosed as having T2D. Perceived risk did not predict weight or waist changes but those who had higher perceived risk were more likely to have T2D in both groups OR=1.78 (1.44-2.21). Perceived risk predict new T2D cases but not weight or waist increase in high and normal risk groups.

Oral Presentation Abstracts

Decision-coping styles of hospital nurses compared to their decisionmaking Performance

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The Melbourne Decision Making Questionnaire (MDMQ) is based on the assumption that use of different decision-coping styles, associated with different levels of stress, affects the quality of decision-making. The aim of the study was to assess the association between decision-coping styles and decision-making performance (DMP), measured both by self-ratings and supervisor ratings among hospital nurses. Data were collected in the Children's University Hospital Bratislava, Slovakia (N=105; 103 females; mean age 38.4yrs.; SD 8.9yrs.). Decision-coping styles were measured by the four dimensions of the MDMQ (self-report). Self-rated- and supervisor-rated DMP were measured by a visual analogue scale. The relationships were analysed using linear regression, adjusting for years of practice. Self-rated DMP was negatively associated with hypervigilance, buck-passing and procrastination ($\beta=-.22$, $-.27$ and $-.21$, respectively). Supervisor-rated DMP was not significantly related to any decision-coping style. The lack of any relationship of self-reported decision-coping styles to supervisor-rated DMP casts some doubts on the predictive validity of the measure.

Oral Presentation Abstracts

Illness representations, coping, and illness outcomes in people with cancer: systematic review and meta-analysis

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Background

Cancer is a leading cause of illness burden, with people with cancer at high risk for negative health and coping outcomes. The Common Sense Model (CSM) has been employed widely to understand individual responses to cancer. However, research is disparate, and a systematic review examining the associations of the CSM's illness representation dimensions with health and coping outcomes in people with cancer, had not yet been conducted.

Methods

A systematic literature search identified 51 relevant studies, with 36 providing sufficient data for metaanalysis. A narrative review of remaining studies was conducted.

Findings

Random-effects meta-analysis revealed, for example, small to moderate effects (Fischer's $Z = .267 - .287$) between personal control, problem-focused coping, and cognitive reappraisal, and moderate to large effects ($Z = .355 - .731$) between identity, consequences, emotional representations, and distress.

Discussion

This first systematic review and meta-analysis indicates how illness representations relate to illness outcomes in people with cancer. High heterogeneity suggests potential moderators of the relationships between illness representations and health and coping outcomes, including diagnostic, prognostic, and treatment related variables.

Oral Presentation Abstracts

Can it work? Barriers to delivering Problem-Solving Treatment in a low vision rehabilitation setting

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Background

Limited service uptake and availability frequently prevent the management of depression in vision impaired adults. The aim of this study was to identify barriers and enablers to the implementation of Problem-Solving Treatment (PST) in a national low vision rehabilitation setting, when delivered by rehabilitation staff over the telephone.

Methods

Twenty-two staff completed a semi-structured interview. Barriers and enablers were identified using inductive thematic analysis and were mapped to predefined themes. Themes were grouped under four key domains: individual (professional); individual (client); intervention; and environment/organisation factors.

Findings

Frequently reported barriers were a lack of role recognition (professional), poor understanding of PST (client), no face-to-face contact (intervention) and limited organisational awareness of PST (environment/organisation). Enablers included finding PST rewarding (professional), recognising benefits early in the treatment (client), a practical focus (intervention) and comprehensive PST staff training (environment/organisation).

Discussion

Offering PST in low vision services may be feasible with sufficient resources to ensure staff delivery is fully-supported, PST is effectively communicated and promoted and flexibility is offered around the mode of delivery.

Oral Presentation Abstracts

Self-management of diabetes in Chennai, India: What helps and what does not help

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Background

Diabetes self-management refers to the way in which patients adhere to their recommended regimen including diet, exercise, medication, and self-monitoring. Research indicates diabetes self-management is related to a range of psychological outcomes (e.g., distress, quality of life, coping). The present study aims to explore experiences of diabetes self-management among Indian patients.

Methods

Using semi-structured interviews, 50 patients with Type II diabetes were asked about their experiences of managing their illness, specifically focusing on what helped and did not help in successful self-management. The interviews were transcribed and analyzed using Interpretative Phenomenological Analysis.

Findings

Nine themes emerged from the analysis: (1) illness knowledge and discovery, (2) illness beliefs, (3) symptoms guide behaviour (4), using multiple strategies, (5) locus of control, (6) financial situation, (7) social support, (8) cultural perceptions, (9) patient-physician relationship.

Conclusion

The study findings suggest that diabetes self-management is related to a range of psychosocial and culturally specific variables. Further, these findings can guide the design of future self-management interventions in culturally diverse populations.

Oral Presentation Abstracts

Lonely hearts don't check their hearts: social support in cardiovascular risk Screening

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Background

Few studies have investigated what factors promote regular screening for cardiovascular risk. The aim of this study was to investigate the relationship between social support and adherence to hypertension and blood cholesterol screening.

Methods

We analyzed data from the Spanish National Health Survey—a cross-sectional representative survey conducted by the Spanish Ministry of Health in 2012 (N=21 007). Participants reported whether they had their blood pressure and cholesterol levels measured in the previous 12 months. Social support was measured with a validated scale. Multiple logistic regressions were conducted adjusted for socio-demographic variables and multiple health-related factors. The obtained results were replicated in a previous wave of the survey (2007, N=29 478).

Findings

Compared to individuals who reported sufficient social support, individuals who perceived a lack of social support were on average twice less likely to report participation in blood pressure and cholesterol screening.

Discussion

Increasing perceptions of social support can promote regular screening for cardiovascular risk. Future research should investigate what specific supportive behaviours most effectively increase screening participation among high risk populations.

Oral Presentation Abstracts

CaRe QoL Chronic Heart Failure: a care-specific QoL PROM based on patient's perspective

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Background

Many PROMs exist measuring care-outcomes as perceived by patients to optimizing care. However, the outcomes measured are mainly determined by healthcare professionals. Moreover, measuring long-term care outcomes often relies on QoL questionnaires that are not care-specific. We aimed to develop a PROM for chronic heart failure (CHF) starting from patient's perspective.

Methods

Mixed Methods using focusgroups exploring care-outcomes that are most important for people with chronic heart failure, using IPA for analysis; Literature review listing all relevant PROMs; Survey amongst 3,053 patients (RR 36%) validating the newly developed CaRe QoL CHF.

Findings

Care-outcomes that mattered most to patients were 'being part of society', and 'feeling watched over'. None of the existing PROMs fully met patient's perspective. The CaRe QoL CHF proved valid and reliable.

Conclusion

People with chronic heart failure found it hard to name care-outcomes directly related to the care received. However, they identified themselves with the new CaReQoL CHF, especially since it was framed to the language they use. In order to properly measure patient outcomes these should fully incorporate patient's perspective and use their language.

Oral Presentation Abstracts

Understanding immigrants' access to Child Health Surveillance Services in Portugal: a grounded-theory approach

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Barriers to adult immigrants' access of health services have been identified: communication problems; health services' bureaucracies; health-care providers' biases; low SES (e.g. Dias et al., 2009; Straub, 2012). Nevertheless, few studies have focused on immigrant children (Mendoza, 2009). This study developed a Grounded Theory (GT) on the determinants of immigrants' access to Child Health Surveillance Services (CHSS) in Portugal. 5 focus groups and 10 individual interviews were conducted, including: 17 Cape Verdean, 12 Brazilian and 7 Portuguese caregivers, from heterogeneous SES; allowing the identification of common and specific determinants of immigrant and Portuguese caregivers' access to CHSS. Data was analyzed using a GT methodology (Strauss & Corbin, 1990). (Not)Go to CHSS is the theory's nuclear concept. Its common main determinants were: perceptions of CHSS usefulness; consultation scheduling; vaccination as the perceived main activity of CHSS. Immigrants specific determinants of CHSS access were: degree of access to primary health care, related to (not)having social support and to immigrants' legal status in Portugal; (cultural)differences in health surveillance conceptions. These findings may contribute to improve immigrants' access to CHSS.

Oral Presentation Abstracts

Disease-related appraisals and perceived social support in patients with chronic obstructive pulmonary disease

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Background

Disease-related appraisals (DRAs) are subjective meanings that patients attribute to their disease (i.e. threat, profit, obstacle/loss, challenge, harm, value). Previous research has emphasized the significance of DRAs through demonstration of their links with indicators of adaptation to living with a chronic disease. The aim of this study was to test whether DRAs are linked to perceived social support in a sample of patients with chronic obstructive pulmonary disease (COPD).

Methods

142 patients with COPD completed measures of DRAs and social support and were assessed with respect to clinical and laboratory indices of disease severity.

Findings

Patients with different degrees of disease severity did not differ significantly on DRAs or social support. Higher levels of social support were correlated positively with positive meanings attributed to the disease (i.e. profit, challenge and value; $P < .001$) and one negative meaning (threat; $P < .05$). Other negative meanings (obstacle/loss and harm) did not correlate significantly with social support.

Discussion

Subjective DRAs may be unrelated to objective severity of COPD. Higher social support may be viewed as facilitating positive DRAs, however these relationships are most probably bidirectional.

Oral Presentation Abstracts

“Motivation gets you started, habit keeps you going”: Feasibility of a habit-based physical activity intervention

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Background

Habit formation is a proposed mechanism for behaviour maintenance. However, very few studies have adopted this framework for interventions. We tested feasibility for a theory-based behaviour change intervention encouraging women to embed exercise into daily life routines.

Methods

The EASY LiFE study recruited 13 women who completed performance-based (Short-Physical-Performance-Battery) and psychological self-report measures (intention, self-efficacy, planning, action control, habit strength, quality of life) at baseline and four-months follow-up. The intervention include 7 group sessions and 2 phone calls. We conducted t-tests and Wilcoxon signed rank tests to evaluate changes over time, and the Framework- Method to post-intervention interviews to evaluate program content, delivery and acceptability.

Findings

In total, 10 women completed the program and showed significant changes in their level of action control ($d=-1.2$), action planning ($d=-0.7$), habit strength ($d=-1.1$), and quality of life ($d=-0.6$). Participants valued the social support of the group, the behavioural practice with an exercise professional, and ‘education’ on habit formation.

Discussion

The theory-based framework showed feasibility for promoting life-style integrated balance and strength exercise habits.

Oral Presentation Abstracts

Health professionals' experiences of talking about weight management with overweight patients with knee osteoarthritis

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Background

By 2030, sixty per cent of the world's adult population could be obese. Overweight or obese is a risk factor for osteoarthritis, notably knee osteoarthritis (KO). Key guidelines recommend health professionals (HPs) provide weight management support and target weight loss in KO patients (2014) as this eases symptoms. However, little is known about weight management communication between HPs and KO patients. The aim was to understand HPs' experiences of talking about weight management with overweight patients with KO.

Methods

26 semi-structured interviews with a range of HPs who have contact with KO patients (Doctors, Physiotherapists, Nurses, Dieticians). Interviews were audio recorded, transcribed and analysed using thematic analysis.

Findings

Participants, regardless of discipline, received little or no training in behaviour change, including weight management. Initiating the topic was viewed as sensitive and HPs avoided or 'disguised' it. HPs regarded weight management as other people's responsibility and were pessimistic about their role.

Discussion

HPs have an important role in helping patients manage KO symptoms through weight management. However, they currently feel ill-equipped and are not adequately trained.

Oral Presentation Abstracts

'I feel useless and dependent on others': South Asian patient experiences of Haemodialysis

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Background

Owing to language barriers, less is known about how patients of South Asian origin cope with the haemodialysis (HD) treatment regimen, despite increased risk of end-stage renal disease. In the current study, focus groups were conducted with patients who communicate primarily in Gujarati, Punjabi or Urdu, with the aim of unearthing experiences of living with renal failure.

Methods

Seven focus groups facilitated by bilingual researchers, were held across four NHS Trusts. Twenty-eight patients participated (15 males and 13 females). Thematic Analysis was used to explore the data.

Findings

Six themes were identified; the instability of day-to-day life, social support as a double-edged sword, lifestyle restrictions, mood on dialysis, access to organs and communication with health professionals.

Discussion

There are commonalities in patient experiences across different cultural groups, signalling the challenges associated with HD and living with renal failure. For those with limited English, communication through other people poses a barrier to illness ownership. Depressive symptoms feature prominently in patient descriptions of mood on dialysis and warrant advances in culturally relevant screening and intervention.

Oral Presentation Abstracts

Perceived social support buffers negative health outcomes

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Health outcomes of women victims of domestic violence were studied on 300 women in Georgia. The proposed model is based on the buffering hypothesis: experience of domestic violence is moderated by perceived social support and these two variables together affect health outcomes. We studied different forms of perceived social support - peer and family support, and organizational support - measured by Sarason et al. social support questionnaire. Various forms of domestic violence were studied by Psychological Maltreatment of Women Inventory, Tolman. The dependent variables were depression and anxiety respectively measured by Center for Epidemiologic Studies Depression Scale, Radloff, and State-Trait Anxiety Inventory. We did not find any difference among the effects of various forms of violence on health outcomes. Multiple regression showed that social support together with experiencing violence explains variance in dependent variables - with 32% for depression, and 25% - for anxiety. As expected, perceived social support plays a role of a moderator between negative, stressful experiences and health outcomes.

Oral Presentation Abstracts

A qualitative data-prompted study of weight loss maintenance experiences using individual ecological data

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Background

This study aimed to advance understanding of psychological and contextual variables associated with weight loss maintenance (WLM).

Methods

Semi-structured, data prompted interviews were conducted with people who lost over 5% of their body weight in the previous year. For two months participants gathered WLM relevant data through ecological momentary assessment using online delivered surveys, WiFi connected activity monitors and scales, and through experience sampling. During the interview, participants were presented with reports based on their own data including weight and activity graphs; correlations of psychological factors; self-generated real time notes; and pictures. The data was analysed using the Framework method.

Findings

Twelve participants were interviewed after 2 months (mean age 50.58, SD=9.92; 3M, 9F). Five main themes associated with successful WLM emerged from the data: (1) change in motivation, (2) shift from effortful selfregulation towards (3) habit formation, (4) relying on plentiful cognitive resources, and (5) supportive environment.

Discussion

This study used mobile and wireless devices to obtain data that was used to stimulate narratives and to explore WLM.

Oral Presentation Abstracts

Where we are now and how we can improve ART adherence support in Romania

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Background

Improving adherence support (AS) to antiretroviral treatment (ART) is a priority in Romania and worldwide. Understanding current support provided in clinical practice in light of behavioral theory is essential for developing effective and sustainable interventions. We explored practitioners' experiences of AS to assess care capacity and needs.

Methods

Ten semistructured interviews were conducted with practitioners from 6 HIV centers in Romania on topics regarding adherence assessment, key determinants, interventions used, perceived influences on their AS capacity. Verbatim transcripts were analyzed via thematic analysis, using behavior change theory and evidence-based taxonomies of personal adherence determinants and intervention content.

Findings

There is solid foundation for AS in Romania; services are usually delivered by experienced psychologists within multidisciplinary teams, with a high degree of intervention tailoring. AS services would benefit from adopting a more structured and focused approach to patient profiling and intervention delivery, conceptualizing and recording active intervention content using precise and standardized terminology, and monitoring intervention effectiveness.environment.

Results

Our qualitative investigation provided valuable information on improving AS, and will guide the implementation of organizational changes and practitioner training programmes.

Oral Presentation Abstracts

UK Foodbank client experiences and their barriers to fruit and vegetable consumption: A qualitative investigation

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Background

UK Foodbanks have unmasked widespread food poverty. Lack of a cold chain means Foodbanks cannot provide fresh fruit and vegetables (F&V). Foodbank client's experiences and their ability to store and prepare fresh foods were explored.

Methods

Qualitative interviews with 18 Foodbank clients investigated what brought them to the service, how they coped with food insecurity, its impact on food choice, and their ability to store and cook fresh produce. Transcripts were analysed thematically.

Findings

Clients were grateful for the service, though some felt ashamed. Strategies to cope with lack of food included skipping meals or not using heating. School holidays were difficult for families without the benefit of free school meals. Those who were housed had greater ability to refrigerate and cook fresh foods than those who were homeless. F&V were deemed important, but an unaffordable luxury.environment.

Discussion

UK Foodbanks provide a valued nutritional safety-net and the inclusion of F&V provision would be welcomed. Assisting with winter fuel bills and meal provision outside the school day may alleviate some of the food poverty in this group.

Oral Presentation Abstracts

Importance of social support for mental health of Lithuanian emigrants

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Objective

This study was intended to evaluate relations between social support and mental health indicators in a sample of Lithuanians emigrants.

Methods

A cross-sectional survey using self-report questionnaire (with social networks' support questions and Mental Health Continuum-Short form) was carried out in group of Lithuanian emigrants from 25 countries. The total sample included 620 respondents (80.2 percent females; mean age 32.2 years).

Findings

All aspects of Lithuanian emigrants' mental health (emotional well-being, social well-being, and psychological well-being) were significantly predicted by emotional and instrumental support from social networks. Duration of emigration, size of social networks in the country of emigration as though as gender, age or having a paid work were not related to any aspect of mental health. Still predictive value of all independent variables for mental health were quite low.

Conclusion

The results confirm that social support related to social networks of emigrants is important factor for their mental health indicators, but other aspects of emigration should be taken into account in order to have full picture of emigrants' mental health.

Oral Presentation Abstracts

Moderation effect of BMI on unhealthy eating habits

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Background

Unhealthy eating habits are a barrier against diet. However, some people maintain a healthy body despite their habits. This study examined the difference of influences of unhealthy eating habits between people with BMI below and above healthy levels. Method: 368 female participants completed an online questionnaire including measures of snacking habit (SRHI), diet intention, unhealthy willingness (reactive motivation), behavioral control (internal and external control), and BMI. Two weeks later, subsequent consumption of snacks (FFQ) was measured.

Methods

The consumption of snacks was determined by unhealthy willingness, external control, and snacking habits. Diet intention and internal control had no effect on the consumption. Moreover, the process analysis indicated a moderated mediation effect of BMI and unhealthy willingness on the strength of habits. Unhealthy willingness mediated the influence of snacking habits only among people with BMI above healthy levels.

Discussion

People with a healthy body tend to eat snacks as a result of habitual routine. People who are overweight tend to eat snacks reactively to their habits. The study discussed the importance of tailored approach to dieting depending on BMI.

Oral Presentation Abstracts

Optimising acceptability and feasibility of a physical activity intervention for adults with Type 2 diabetes

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Background

To optimise a theory-based physical activity behaviour change intervention 'Movement as Medicine for Type 2 Diabetes (MaMT2D)' for use in routine primary care.

Methods

An open pilot study in two primary care practices. Six healthcare professionals were trained to deliver MaMT2D to adults with Type 2 diabetes (N=28). A qualitative process evaluation identified opportunities for intervention optimisation and barriers/enabling factors to implementation. Video recordings of consultations assessed fidelity of intervention delivery by professionals.

Findings

Barriers and enabling factors to patient acceptability were cognitive burden of intervention components and increased knowledge/positive beliefs about the impact of physical activity on glycaemic control respectively. Professionals reported few opportunities to practice delivery of behaviour change techniques (BCTs) and negative beliefs about their capabilities for intervention delivery. A key enabling factor was transferability of MaMT2D to other clinical populations. Fidelity of intervention delivery by professionals was satisfactory. Optimisation involved improved access to content on delivery of BCTs in professional training and reformatting of patient materials.

Discussion

An open pilot facilitated optimisation of MaMT2D to maximise acceptability and feasibility in primary care.

Oral Presentation Abstracts

Critiques of health behavior change programs in the Global South (and what they miss)

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Background

Critics have raised several concerns about health behavior change in public health programs. However, there has been very little reflection about behavior change critiques specific to the Global South and, in particular, what health psychology has come to mean within those critiques. The aim of this paper was threefold: to describe existing critiques of behavior change, to reflect on how health psychology has been written into those critiques, and to determine what theoretical resources critiques may overlook.

Methods

A critical review of the published English language health behavior change literature from 1990 to 2015 was conducted. Particular emphasis was placed on reviewing literature that was critical of behavior change in the Global South.

Findings

The paper presents four types of critiques (instrumental, social-collectivist, ethical and governance); argues that critiques, despite their critical orientation, tend to be highly 'psychologized'; and that critiques may overlook important theoretical resources from critical psychology such as discourse, class and globalization.

Discussion

It is hoped that this paper will stimulate further debate about the role of critique in health psychology in the Global South.

Oral Presentation Abstracts

Externalization of mental illness symptoms and economic crisis in order to predict perceived social support

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Background

An increasing psychological requests related to economic crisis has been recorded in the Italian population. Moreover “crisis-related” patients shows lower degree of perceived social support which could lead to psychological illness and suicidal ideation too.

Methods

Using an observational research design, the aim of the present study was to investigate – in a sample of patients (n=91) from the “Crisis and Psychopathology Observatory” – the relationship between the demand analysis (crisis-related vs. ordinary mental health care), the tendency for externalizing psychological problems (Cronbach's Alpha=.88) and perceived social support (Cronbach's Alpha=.81). In order to predict perceived social support ANOVA has been performed.

Analysis

The results showed an interaction between the tendency for externalizing psychological symptoms and the demand analysis: $F(1,90)=5.38$; $p=.02$. High psychological problems related to economic crisis combined to a low tendency of externalizing symptoms leads to a low perceived social support.environment.

Discussion

The present study gives prominence to psycho-social variables related to this new psychological complaint and suggest possible pathways in treating economic “crisis-related” patients.

Oral Presentation Abstracts

Self-determination theory and motivational interviewing in web-based physical activity promotion: long-term effects

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Background

This study assessed the long term effects of I Move, a web-based computer tailored physical activity (PA) intervention, based on self-determination theory (SDT) and motivational interviewing (MI).

Methods

A randomized controlled trial (n = 3165) was conducted, comparing three research conditions: 1) I Move; 2) an existing web-based computer tailored PA intervention, based on traditional health behavioral theories; 3) a control condition. PA behavior was assessed through self-report at baseline, 6 and 12 months. Intervention effects were evaluated using multilevel linear regression analyses.

Findings

At 12 months from baseline, I Move significantly increased weekly minutes of moderate to vigorous PA (ES = .13) compared to the control group, while the more traditional intervention did not achieve a significant effect on this outcome. The traditional intervention significantly increased weekly days with ≥ 30 minutes PA (ES = .11) compared to the control group, while I Move did not significantly influence this outcome.

Discussion

The results suggest that web-based computer tailored PA interventions might best include elements based on both SDT/MI and traditional health behavioral theories.

Oral Presentation Abstracts

Comparison of brief interventions in primary care on smoking and alcohol consumption in England

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Background

English clinical guidelines recommend regularly offering brief advice on smoking and alcohol consumption in primary care but incentives for doing so vary between the behaviours. This raises the question as to whether offering advice also varies between the behaviours.

Methods

Cross-sectional household surveys of 15252 adults in England during 2014. Recall of brief interventions on smoking and alcohol in the past year, socio-demographics, and smoking and alcohol consumption were assessed among smokers and excessive drinkers (AUDIT \geq 8) who visited their GP surgery in the past year.

Findings

Of 1775 smokers, 50.4% (95%CI=48.0-52.8) recalled having received brief advice on smoking. Smokers receiving advice were more likely to be older, female, to have a disability, more past-year quit attempts, greater nicotine dependence and post 16 qualifications. Of 1110 excessive drinkers, 6.5% (95%CI=5.1-7.9) recalled having received advice on their alcohol consumption. Those receiving advice had higher AUDIT scores and were more likely to be male.

Discussion

Whereas approximately half of smokers in England visiting their GP in the past year recall receiving advice on cessation, less than 10% of excessive drinkers recall receiving advice on alcohol consumption

Oral Presentation Abstracts

Expecting the best and the worst: co-occurrence and temporal stability of optimism/pessimism in breast cancer

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Dispositional optimism is a key personality resource of resiliency among women with breast cancer. We examined a) whether future outcomes expectancies potentially include independent and concurrent positive and negative dimensions, b) the temporal stability of dispositional optimism, c) the predictive impact of Optimism/Pessimism on emotional distress

Methods

Design: a prospective cohort study of 750 women with breast cancer initiated shortly after surgery and followed up for two years. Assessments: LOT-R, HADS, treatment-related and demographic variables. Analysis: Structural Equation Modelling including Confirmatory Factor Analysis, Latent Profile Analysis, and Latent Growth Curve modeling.

Results

A longitudinal invariant bi-dimensional structure of LOT-R was confirmed, as was the temporal stability of optimism/pessimism over two years. Three latent profiles labeled Optimists, Pessimists, and Ambiguous were discerned. Baseline optimism inversely predicted emotional distress two years later. Women with higher education displayed higher degrees of pessimism and anxiety.environment.

Discussion

The co-occurrence of positive and negative future expectancies may indicate a caution defensive coping effort among women with breast cancer. Stability of dispositional optimism/pessimism emphasizes the importance of systematic efforts to enhance this source of resiliency.

Oral Presentation Abstracts

Threat elicits a positive bias during health-related Internet search

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The Internet provides easy access to health information. Compared to traditional sources (e.g. doctors, brochures), information acquisition on the Internet is more self-guided. This gives room to biases. In general, subjective threat elicits preferential processing of positive information. Therefore, we predicted that health-related threat elicits a positive bias also during Internet searches about health issues. A two-wave longitudinal study with patients suffering from a chronic disease (N=208) and three experiments in which threat was induced (N=121) tested for long-term and immediate effects of threat on information acquisition during Internet search. The longitudinal study demonstrated that the stronger participants' health threat was, the stronger was their health self-esteem if they used the Internet frequently, but not if they used it rarely to acquire health information. The experiments showed that threat positively biases search term generation, link selection, memory, and evaluations of treatments after an Internet search. Thus, health-related Internet searches under threat might facilitate emotional coping with health threat, but they also contribute to biased perceptions of own health and potential treatments.

Oral Presentation Abstracts

Beliefs, attitudes and practices of general practitioners, nurses and dietitians towards obesity: a comparative study

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Background

Literature has been indicating a lack of comparative studies concerning the beliefs, attitudes and practices of GPs, nurses and dietitians about obesity in primary care setting.

Methods

A cross-sectional survey, developed for the purpose of this study, was completed by 207 general practitioners, 258 nurses and 163 dietitians, working in primary care setting in the North of Portugal. Descriptive analysis and one-way ANCOVA were conducted.

Findings

Attitudes towards obese patients are mainly negative or ambivalent. However, dietitians are significantly different, holding more negative attitudes. They also differ by reporting higher perceived efficacy, fewer difficulties, higher engagement and lower frustration. Dietitians also use more frequently adequate practices and strategies related to behavioral change. On the contrary, GPs and nurses are ambivalent or pessimistic about their feelings and efficiency concerning obesity treatment.

Discussion

Dietitians emerge as the best prepared group to deal with obesity treatment being, apparently, less influenced by their negative attitudes. Health policies should promote healthcare professionals education, the increase of available resources and encourage multidisciplinary collaboration. More research is need concerning professionals willing to cooperate with each other.

Oral Presentation Abstracts

Attachment orientation, adherence to treatment, and psychological adjustment in individuals with skin conditions

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Background

It has increasingly been recognised that attachment orientation is associated with adjustment to chronic health conditions. This study aimed to test the mediating role of coping in the link between attachment and adjustment (indicated by appearance concern and adherence to treatment), in people with skin conditions.

Methods

Attachment orientation (ECR), coping (Brief COPE), appearance concern (DAS 24) and adherence to treatment were assessed through a cross-sectional online survey in 207 adults with skin conditions. Moderated-mediation model was used to test the hypotheses.

Findings

Defeatism coping partially mediated the link between attachment and appearance concern; insecure attachment was associated with use of defeatism coping and greater appearance concern. Additionally, higher attachment avoidance was directly associated with greater appearance concern. High attachment avoidance was linked to lower adherence to treatment but this association was not mediated by coping.

Discussion

An insecure attachment orientation is linked to poorer adjustment to skin conditions which can be partially explained by the use of defeatism coping strategies. Future interventions to improve adjustment in skin conditions should focus on the needs of people with insecure attachment.

Oral Presentation Abstracts

The effects of a smartphone application intervention to stimulate fruit and vegetable intake

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Background

In a randomized controlled trial, we tested the efficacy of an intervention delivered via a smartphone application that communicated either textual or auditory persuasive health information.

Methods

After downloading the smartphone application, respondents were exposed to either text-based or audio-based tailored health information and feedback over a period of six months. In addition, a control condition was added in which respondents completed only the baseline and post-test measures. Within a community sample (N = 146), self-reported fruit and vegetable intake at six-month follow-up was our primary outcome measure.

Findings

A significantly higher fruit intake was found after exposure to the auditory information, especially in recipients with a poor perceived own health. In addition, a significantly higher vegetable intake was found for recipients with high health literacy after exposure to one of the interventions, whereas it was the highest in the control condition for low health literacy recipients.

Discussion

Auditory persuasive health information can lead to behavior change via our smartphone application. It is however worthwhile to investigate how recipients with low health literacy can benefit from persuasive health information.

Oral Presentation Abstracts

How do general practitioners make antibiotic prescribing decisions for patients with upper respiratory tract infection?

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Background

Over-prescribing of antibiotics is widespread and poses significant public health problems. Previous studies have identified generic factors involved in prescribing decision-making. This study used the 'Think-Aloud' method, where participants verbalise their thoughts while making decisions, to investigate how General Practitioners (GPs) make prescribing decisions.

Methods

In individual interviews, five GPs responded to seven patient scenarios by thinking aloud while making prescribing decisions. Scenarios were constructed to include features representative of real patients. Interview transcripts were coded for the information used in the decision process. An inductive approach identified further emergent themes.

Findings

Patient information used in the decision process included perceived illness severity, illness duration, and patient preferences. Duration was a key influence: when perceived as extended, decisions and associated justifications varied. Emergent themes included variation across GPs in a) interpretation of clinical features and corresponding guideline recommendations, and b) emphasis on the importance of shared decision-making.

Discussion

Over-prescribing of antibiotics may be linked to differing interpretations of patient information. Interventions aimed at improving prescribing may be more effective when tailored to take these differences into account.

Oral Presentation Abstracts

Can conscientiousness predict engagement with UK health behaviour guidelines?

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Background

There is growing evidence for a relationship between conscientiousness and health behaviours. However, it is unclear whether conscientious individuals meet health behaviour guidelines or are simply 'healthier' than their counterparts. Furthermore, a focus on individual health behaviours has led to a lesser understanding of conscientiousness and healthy lifestyles more generally. Therefore, this study examined conscientiousness alongside engagement with a number of important health behaviours.

Methods

879 adults completed an online questionnaire measuring conscientiousness, its lower order facets, and the behaviours smoking, alcohol intake and fruit and vegetable consumption.

Findings

Analyses revealed that total conscientiousness and its facets were positively associated with adherence to guidelines for each of the behaviours – and with an overall guideline adherence index. The results also identified the facet of industriousness as being the most important predictor of adherence.

Discussion

Low conscientiousness individuals appear to be less likely to engage in recommended health behaviour guidelines and this cumulative effect may have a significant impact on their health. This suggests that those low in conscientiousness may be a vulnerable population and require further assistance to meet guidelines.

Oral Presentation Abstracts

SMS reminders to increase accelerometer wear-time: a within-trial RCT comparing persuasive messages

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Background

Increasing accelerometer wear-time enhances the reliability of outcomes in physical activity research. Literature on persuasion suggests increased compliance with requests supplemented by a rationale. This study tested whether providing a rationale raises accelerometer wear-time.

Methods

A within-trial RCT was conducted during baseline data collection in a school-based physical activity intervention trial. Of 186 total participants (mean age=18.6), 97 (52%) opted to receive daily SMS reminders to wear their accelerometers. These 97 participants were then randomised to receive either succinct reminders or reminders that additionally included a rationale.

Findings

No significant difference in wear days was observed between those receiving SMS reminders (M=4.9, SD=2.2) and those not (M=4.4, SD=2.5) ($p=0.67$). Mean wear days did not significantly differ between the succinct reminder group (M=4.8, SD=2.3) and the rationale group (M=5.0, SD=2.0) ($p=0.82$).

Discussion

Additional reasons may be unnecessary for participants already motivated to wear an accelerometer. Selection bias might explain why receiving reminders was not associated with increased wear time.

Oral Presentation Abstracts

A qualitative investigation exploring how health-promoting behaviours are discussed in general practice

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Background

General practice is an essential existing network where health professionals have a captive audience to discuss and encourage patient participation in health-promoting behaviours. Currently, little research has examined the extent to which these behaviours are discussed between health practitioners and patients, and the context and content of these discussions.

Methods

Health professionals (N=20) in general practice settings participated in semi-structured interviews. Data were analysed using thematic analysis.

Findings

Health-promoting behaviours are discussed at most consultations; however, they are often brief, ad hoc, and with no formal process to the discussions. Reactive health discussions (discussions occur through discovery of a new condition/treatment of a presenting concern) or proactive health discussions (discussions occur through the need to change some aspect of the patients' health profile to prevent future health concerns) form the context of these discussions. Information giving was the common technique used to help change patients' behaviour with little elaboration or follow-up on these health messages.

Discussion

Health practitioners are discussing health-prompting behaviours with their patients; however, advice and guidance on delivering effective behaviour-modification programs may be needed.

Oral Presentation Abstracts

The impact of resilience on adolescents' self-esteem in Norwegian adolescents

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Background

The present study investigates gender differences on resilience and self-esteem as well as the association between five resilience dimensions (personal competence, structured style, social competence, social resources, family cohesion) and self-esteem, controlled for age and perceived stress.

Methods

The cross-sectional sample consists of 1239 adolescents 13-18 years from Mid-Norway. The participants responded on the Rosenberg Self-esteem scale, The Adolescent Stress Questionnaire and The Resilience Scale for Adolescents.

Results

Boys reported significantly higher mean scores than girls on self-esteem and on all resilience dimensions except social competence. Girls had higher mean scores than boys on perceived stress. Stress was significantly negatively associated with self-esteem in both genders, especially in girls. All resilience dimensions were positively and significantly associated with self-esteem controlled for age and perceived stress for both genders. However, all associations were stronger for girls than for boys.

Discussion

The results support that resilience is an important resource in association with self-esteem in adolescents controlled for stress, especially for girls.

Oral Presentation Abstracts

Challenges in qualitative interviewing about user experience in eHealth: moving beyond the superficial user interview

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Background

Study aim: To explore users' experiences with a fully automated smoking cessation program that simulates a therapeutic conversation. Main research question: What are the users' constructions of the program and their interactions with it?

Methods

Qualitative, in-depth interviews with Constructivist Grounded Theory.

What went wrong

We did not get rich data illuminating our research questions. When participants said something relevant to the research questions, this was coincidental – not the result of a good interview guide.

Possible solutions

Participants may volunteer more relevant information if one takes care in framing the interview clearly. Vignettes that represent a range of possible experiences may make it easier for the participant to position herself. A detailed description of an occasion when the program was used might give additional insights. Accepting that both interviewer and participant are involved in the knowledge construction may be necessary both methodologically and epistemologically.

Conclusion

Gathering rich qualitative data on an unexpected aspect of a mundane experience proved challenging. However, by framing the interview clearly, using vignettes and requesting detailed descriptions the co-construction of knowledge might be facilitated.

Oral Presentation Abstracts

Post-training evaluation of healthcare practitioners' use of skills to support patients to make lifestyle changes

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Background

UK Department of Health advocates improving the public health capability of frontline staff by training them to “make every contact count”. This study aims to evaluate the effect of training in skills to support behaviour change on practitioners' consultations with patients.

Methods

Twenty practitioner-patient consultations were observed post-training (T1=11;T2=9), followed by audio-recorded reflective-feedback interviews. Training competencies and use of behaviour change techniques were assessed, and interview transcripts were thematically analysed.

Findings

Moderate-to-high levels of competence in skills' use were observed; this, and the use of BCTs, increased over time. Interpretation of emergent themes suggested that practitioner motivation to utilise the skills, reflect on their use, and identify barriers, facilitators and areas for improvement was underpinned by perceived value of the skills in supporting patients to make changes.

Discussion

Training which incorporates reflection skills and follow-up support facilitates the embedding of skills to support behaviour change into routine practice. This has implications for health psychologists working in public health who aim to equip frontline staff with skills to “make every contact count” and ultimately improve population health.

Oral Presentation Abstracts

The link between personality traits and health behaviour. Can we find it in IHD patients?

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Background

Individual persons' peculiarities encourage to use innovative treatment programs oriented to change unhealthy behaviour. Knowledge about patients' personality and its effect on rehabilitation outcomes would help optimize treatment techniques. The aim of this work is to find links between ischemic heart disease (IHD) patient's personality traits and health behaviour.

Methods

Eighty IHD patients from rehabilitation hospital participated in our study. Validation of patients' suitability for investigation was done looking at these criteria: disease, new arrivals, agreeableness. "Readiness to change questionnaire" was used to evaluate health behaviour and NEO-FFI – personality traits.

Findings

Statistically significant positive Spearman's correlations were found between neuroticism and physical activity ($r=0.377$), agreeableness and diet ($r=0.320$). Kruskal-Wallis criteria showed statistically significant difference in physical activity change stages ($p=0.022$) of neuroticism. Mann-Whitney revealed that these differences are between precontemplation and action ($p=0.025$), contemplation and action ($p=0.014$).

Discussion

Our study confirmed links between personality traits and health behaviour in IHD patients. These findings prove that patients character features are important factor for rehabilitation outcome.

Poster Presentation Abstracts

Internet-delivered cognitive behaviour therapy for depression comorbid with diabetes: preliminary findings

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Background

Although depression treatment for people living with depression comorbid with diabetes (DM) is critical to improving quality of life and DM self-management, depression remains under-recognised and under-treated. Internet-delivered Cognitive Behaviour Therapy (iCBT) provides a promising way to deliver a cost-effective and accessible depression treatment.

Aims

Explore outcomes of the iCBT program for people with comorbid Major Depressive Disorder (MDD) and DM (Treatment Group) compared to those who receive treatment as usual (Control). Hypotheses: relative to the control group, the treatment group will show (1) significant improvement on disorder specific measures; (2) decreased DM-related distress. We also examine: (1) effect of intervention on disability and general distress, and (2) the intervention feasibility. We hypothesise that disability and general distress will reduce, and intervention will be feasible

Methods

Recruit and randomly allocate 100 people with MDD comorbid with Type 1 (T1) or Type 2 (T2) DM to Treatment Group or Control. Measure pre- and post-intervention MDD severity, anxiety, DM-related distress, disability, HbA1c, lifestyle, and feasibility.

Results

Preliminary results will be presented.

Poster Presentation Abstracts

The use of web-based tailored lifestyle interventions for Type 2 diabetes patients

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Background

The Diabetes Interactive Educational Platform (DIEP) is a self-management tool for patients with diabetes, which includes optional computer tailored interventions on nutrition, smoking cessation, and physical activity. Although DIEP has been available for use since 2007, it is unclear who uses the program, and which tailored interventions are used. The aim of the current study therefore, was to assess the use of DIEP among diabetes type 2 patients.

Methods

From December 2011 till February 2015, data from 1073 DIEP website visits was collected, including demographics and use of the tailored interventions. Differences between those patients that used any of the tailored interventions will be compared with those who did not. Differences in physical activity level will be linked to the choice of the various interventions.

Expected results

Results will gain insight in the application of the DIEP tailored interventions by diabetes type 2 patients.

Current stage of work

Data collection is completed and cleaned; data analyses will commence shortly.

Discussion

The findings can serve as input for the further development of the computer tailored interventions.

Poster Presentation Abstracts

Development and evaluation of the feeling better online pain management programme: feasibility and effectiveness

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Information and communication technologies (ICT) may be used to meet the pain-management needs of pediatric chronic pain patients.

Background

Using integrated social-cognitive theory and intervention-mapping models, this research aims to develop and evaluate the effectiveness of an online version of the Feeling Better pain management programme for young children with chronic pain and their care-givers (McManus & McGuire, 2010).

Methods

A mixed-methods sequential design is used. Phase I involves a participatory study asking approximately 15 parent-child dyads their opinion of web and app-based programmes. A Pilot RCT design will then be used to evaluate the effectiveness of the programme for this population. This is the first integrated web-and app-based programme specifically designed to address the needs of young children with chronic pain and their caregivers.

Expected results

Phase I is expected to provide greater insight into the support needs of this population and the potential acceptability of technology-based treatment programmes. Current stage of work: Phase I research and prototype development is ongoing.

Discussion

Findings will have practical implications for the development and use of technology to support behaviour change interventions.

Poster Presentation Abstracts

A self-help online intervention to increase well-being in people with skin conditions: pilot evaluation

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Background

People with skin conditions can benefit from psychological interventions. Personal characteristic such as attachment orientation may influence the engagement with the intervention and outcomes. This study aimed to pilot online Compassion Focused self-help for people with skin conditions in those with insecure attachment.

Methods

Two sets of self-help materials were emailed to 9 participants 2 weeks apart. An evaluation form assessed experiences, perceived benefits and suggestions for improvement. Shame (OAS) and self-criticism (FSCRS) were measured at baseline and at 6 weeks follow-up. The reliable Change Index was used to examine change. In addition, a content analysis was used to examine feedback.

Findings

Five participants completed the follow-up survey of which 3 also returned the feedback form. Overall, participants reported benefit from taking part. Some aspects of the intervention were more difficult to engage in. Inclusion of further exercises and providing assistance to facilitate regular practise were among suggestions for improvement. Self-criticism decreased in 2 participants. Shame decreased in 2, but increased in other 2 individuals.

Discussion

Self-help intervention can be effective but barriers to participation need to be addressed.

Poster Presentation Abstracts

Kanker Nazorg Wijzer: supporting cancer survivors with psychosocial and lifestyle problems using an eHealth intervention

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Background

Many cancer survivors experience psychosocial and lifestyle problems after primary treatment. Since eHealth can provide easy accessible, personalized information for larger populations, we developed the 'Kanker Nazorg Wijzer' (KNW; Cancer Aftercare Guide), an online tailored intervention aimed at improving survivors' lifestyle and psychosocial wellbeing.

Methods

We used the Intervention Mapping protocol to systematically develop the KNW. We started with a needs assessment, consisting of focus group interviews (n = 33) and a survey study (n = 255). This provided input for the performance and change objectives, intervention methods and strategies, and program components.

Findings

Eight modules were developed: work, fatigue, mood, relationships, exercise, nutrition, smoking and residual symptoms. The modules were founded on the theoretical principles of problem solving and cognitive behavioural therapy. Tailored feedback ensured that only the most relevant information was provided. Pilot-data showed positive evaluations of the modules.

Discussion

Although Intervention Mapping is a time consuming process, it increases the chance of creating effective interventions. If effective, the KNW can serve as an easy accessible, first-step-in-stepped-care, online tool. Currently, an RCT is conducted.

Poster Presentation Abstracts

On the relationship between Type-D personality and cardiovascular health

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Background

The combination of high negative affectivity and high social inhibition designates a personality subtype (Type D) that has been associated with disparities in cardiovascular (CV) health. We investigated the relationship between Type D personality and CV risk factors, outcomes, and biomarkers in patients with acute coronary syndrome (ACS).

Methods

Ninety-nine patients completed a survey including a measure of Type D personality. Anthropometric measures and fasting blood samples were taken within three days after the cardiovascular event.

Findings

Patients with larger scores in Type D personality experienced a more severe ACS (i.e., they had more obstructed vessels and needed more stent implants). Type D personality was also related to a worse lipid profile (less high-density lipoprotein [HDL] cholesterol and more triglycerides) and more inflammation (more platelets) in patients with ACS. HDL cholesterol partially mediated the relationship between Type D personality and the number of obstructed arteries.

Discussion

The increase in risk in ACS patients with Type D personality could be at least partially due to preventable risk behaviors like healthy diet and exercise.

Poster Presentation Abstracts

Adolescents with Multiple Sclerosis: the moderating role of Resilience

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This study aims to investigate the impact of Multiple Sclerosis (MS) on quality of life of adolescents, exploring the moderating role of resilience. The major studies were focused on cognitive impairment, management of psychological distress for adolescents with MS remains understudied. The resilience construct offers insights to understand how these individuals can achieve optimal functioning. This study involves the use of the following measures: PedsQL (2004), Pediatric Quality of Life Inventory; BDI-II (2006), Beck-Depression Inventory II; STAI-Y (1989), State-Trait Anxiety Inventory; the CYRM-28, Child and Youth Resilience Measure (Ungar, Liebenberg, 2011). Participants are 53 adolescents with MS (21M 32F, age mean 21,08, s.d. 3) attending the University General Hospital. Data shows that resilience is a predictor of HRQoL ($p < .05$ $b = .315$); other predictor are depression ($b = -.526$ $p < .001$) and anxiety ($b = -.727$ $p < .001$). Furthermore, data shows that resilience competence has a moderating effect in the relationship between depression and QoL ($p < .001$ LLCI = -1.0593). Resilience may have a key role in the ability to manage affective disorders MS related.

Poster Presentation Abstracts

REsilience and COping Resources in type 1 Diabetes: a person-centered approach to emerging adult patients

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Emerging adults with type 1 diabetes have been recognized as a high risk group (Benchell et al., 2007) because of the delicate balance between adhering to diabetes management and addressing normative developmental tasks (Luyckx et al., 2008).

The ReCoRD study is a three times longitudinal research; the repeated observations took place after 8-10 months (T1) and 18-20 months (T2) since the first survey.

The study aims to explore the presence of both different psychosocial adjustment and resilience configurations moving from a person-centered approach.

ReCoRD study involved 49 Italian emerging adults with type 1 diabetes; they were divided into three groups according to the time elapsed from diagnosis.

The psychosocial adjustment measures were: Problem Area in Diabetes Scale, Audit of Diabetes Quality of Life, Diabetes Self-Care Scale. Resilience resources were: Self-empowerment Scale, General Self-efficacy Scale.

The contribution intends to present the results of the analysis concerning T0 and T1.

To understand this population may help diabetes researchers and clinicians to tailor their approach to these patients and to help the emerging adults to become active participants in their own diabetes management.

Poster Presentation Abstracts

Mindfulness and psychosocial functioning in visible skin conditions

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Background

Living with a visible skin condition can have implications for physical and psychological health with people being at risk of experiencing social distress and poor quality of life. Despite this, there are relatively few psychological interventions available. There is increasing interest in the use of mindfulness approaches for people experiencing chronic physical health difficulties with evidence suggesting that mindfulness interventions are effective in reducing symptoms associated with social anxiety. This study aimed to examine the relationship between mindfulness and psychosocial distress in people living with visible skin conditions.

Methods

Dermatology outpatients (n=120) completed questionnaires assessing social anxiety, depression, anxiety, skin shame, quality of life (DLQI), subjective severity of condition and mindfulness (FFMQ).

Findings

Regression analyses revealed that mindfulness explained between 6% and 38% of the variance in outcomes after controlling for age and subjective severity. Awareness emerged as the most consistent independent predictor.

Discussion

The findings provide support for using mindfulness interventions, particularly those focusing on awareness to reduce psychosocial distress in people living with visible skin conditions.

Poster Presentation Abstracts

Gender and age differences in reactions to disability among mobility impaired people

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Introduction

Previous studies suggest there might be gender and age differences in perceiving and expressing emotional reactions to disability but they provided controversial results and despite previous research there is lack of studies analyzing these differences. The aim of the study was to evaluate gender differences in reactions to disability among mobility impaired people.

Methods

The study included 104 men and 171 women with mobility disabilities, aged between 18 and 79. Individuals were divided into two groups of younger and older individuals. Reactions to disability were assessed using Reactions to Impairment and Disability Inventory, measuring five reactions: denial, depression, internalized anger, externalized hostility, acknowledgement and adjustment.

Findings

Younger individuals reported greater externalized hostility, acknowledgment and adjustment than older individuals. Younger men reported greater denial and greater acknowledgment than younger women. Older women reported greater acknowledgement and adjustment than older men. Gender differences in other reactions among younger and older individuals were not significant

Conclusions

These findings suggest there are gender and age differences among mobility impaired people but future studies might provide more information why these differences do exist.

Poster Presentation Abstracts

Is resilience the "bright side" of psychological distress?

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Background

Resilience, the dynamic competence to control positive affects as a function of environmental requests and operationalized in the German Resilience Scale (RS-13) of Wagnild and Young was investigated.

Methods

192 rehabilitation patients of two German clinics (107 OP-orthopedic, 61 NP-neurological, 24 PPpsychotherapy- patients) answered the RS-13 and several others (quality of life, work-life-balance, disease-specific complaints). Hypothesis supposed low levels of resilience in PP, and moderate ones in OP or NP, and a negative connection with psychological distress.

Findings

PP reported lower levels of resilience (M=53, SD=18) compared to OP (M=67, SD=13), and NP (M=70, SD=15) and to the normative German sample (M=70, SD=12). High levels of resilience were predicted by different aspects of low psychological distress in each group

Discussion

Beside the differences regarding the mean level of resilience between psychotherapy and physically ill patients, the main question could be carefully answered as "yes" – resilience could play an important role as the "bright side" of psychological distress. Longitudinal studies are necessary.

Poster Presentation Abstracts

Self-regulation in psychological and medical treatments, and health promotion: a 21-year longitudinal study

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Experiences of the author, a psychologist, regarding clinical depression and subsequent health promotion were analyzed to identify effective methods of self-regulation. The author was treated with CBT by a clinical psychologist in Period (P) I (1994-2000), pharmacotherapy by a psychosomatician in PII (2000-2005), and CBT and holistic medicine by another psychosomatician in PIII (2005-2015). The author's satisfaction level in personal and workplace areas increased from PI to PIII. Self-efficacy and self-evaluation scores for "Maintaining good personal relationships," and "Changing one's mood to cope with, or avoid stress" increased after 2013. These results indicate that the author became able to regulate her behavior and affect. After 2012, a health promotion program was added to the treatment. Calorie consumption assessed through activities, and walking time were not significantly different between sessions that attained preset goals and those that did not. It was concluded that more effort was necessary for goal setting and goal attainment. The applicability of these findings for promoting self-regulation in mental and physical health is suggested.

Poster Presentation Abstracts

Why do youth high in self-control exercise more? Motivation quality and selfregulatory skills as mediators

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Aims

Trait self-control (TSC) is associated with physical activity (PA), but less is known of the explanatory mechanisms. We examined whether (1) the TSC-PA relationship is mediated by autonomous motivation (AM) and self-regulatory skills (SRSs), and if (2) TSC moderates the associations between SRSs-PA or AM-PA.

Methods

411 adolescents (aged 17.8) answered a survey with validated measures of TSC, AM, SRSs and PA; PA was measured again after one month. A subsample validated self-reported PA using 7-day accelerometry.

Findings

TSC was positively associated with AM and SRSs (r 's=.26 to .38). TSC-PA was partially mediated by AM (CI 95% .004, .023), and Action Planning (CI 95% .144, .546); Coping Planning (CI 95% .198, .654); Self-monitoring (CI 95% .124, .529). TSC did not moderate the relationships between SRSs-PA or AM-PA.

Discussion

Although those with high TSC were likely to have higher AM and use more SRSs, the effect of the TSC on PA was mediated by SRTs rather than motivation. Improving motivation quality and imparting planning and selfmonitoring skills may be useful for increasing PA regardless level of TSC.

Poster Presentation Abstracts

The importance of perceived autonomy support and past behaviour for autonomous motivation in diabetes patients

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Background

Research in healthy population showed that past behaviour plays a significant role in forming further motivation for the behaviour. Self-determination theory states that autonomy support facilitate the process of internalization of autonomous motivation. The aim is to evaluate the predicting power of autonomy support for autonomous motivation for health behaviour, regarding past behavior patterns in a sample of patients with diabetes.

Methods

Cross-sectional study included 107 patients with diabetes. Autonomy support was measured by HCCQ for diabetes management. Treatment self-regulation style by TSRQ. Past behavior by using SDSCA measure. Cronbach α 's for each measure showed good internal consistency.

Findings

The more patients perceive autonomy support from practitioners the more autonomous is their motivation to engage in diabetes self-care behavior: blood sugar testing, diet and physical activity. Past adherence to the self-care behavior is related to higher autonomous motivation for blood sugar testing and diet, but not related to physical activity.

Discussion

Providing treatment recommendations practitioners should consider both behavioral experience and autonomy support which impacts motivation for self-determined behavior regulation.

Poster Presentation Abstracts

Influence of the cognitive style and personality features on dialysed patients' participation in treatment process

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A goal of this research was to find an answer to the question – How personality variables influence level of patients' involvement in treatment process? Patients with severe kidney failure treated with haemodialysis (N=58) participated in the research. Patients' involvement in a treatment process was observed in areas of cooperation with medical staff and active searching for alternative forms of treatment (transplantation). Psychological variables subjected to observation were: mindfulness, agreeableness, conscientiousness, sense of self-efficiency, coping.

Data regarding treatment process was collected from patients as well as from nurses and doctors. Results indicate that patients making an effort towards transplantation are more conscientious. Agreeableness, laticity and active style of coping with stress have significant influence on decision regarding type of transplantation.

Patients with higher level of sense of self-efficiency do not choose this type of activity. Patients' level of mindfulness affects quality of patient-medical staff cooperation.

Results of the research give important information that facilitates understanding patients' attitude towards acceptable forms of treatment. Research indicates as well that therapeutic work on cognitive plasticity can improve cooperation between patients and medical staff.

Poster Presentation Abstracts

Representations of control, coping strategies and subjective health in autoimmune diseases: RA, SLE and MS

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This study assessed the relation between patients' perceived personal and treatment control, coping strategies, subjective psychological and physical health. Based on Leventhal's model the contribution of individual representations to illness adjustment was examined in newly diagnosed patients with autoimmune diseases. 80 RA, 75 SLE, 50 MS patients were examined. Personal and treatment control were assessed with IPQ-R, anxiety and depression with HADS, physical functioning with RAND and coping with CHIP.

Significant differences were found on personal, not on treatment control, with SLE patients reporting higher levels of perceived control over their illness, followed by MS and RA. SLE patients reported higher levels of anxiety and depression, compared to the other groups. Bootstrapped indirect effects analysis revealed coping strategies, like palliative coping and dreaming, to mediate the relationship between illness control and subjective health in all groups. Coping styles and action plans play an important role in illness adjustment and should be taken into account in formulating intervention protocols. This ongoing study intends to further evaluate how illness perceptions change and interact with disease course and severity in a longitudinal framework.

Poster Presentation Abstracts

Expressive suppression and emotion regulation difficulties among individuals with hypertension

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The current study aimed to assess expressive suppression and emotion regulation difficulties in individuals with primary and secondary hypertension. Sample included 210 individuals with equal number of hypertensive patients and normal control recruited from public sector hospitals. Difficulties in Emotion Regulation Scale, Difficulty Describing Feelings Subscale of Toronto Alexithymia Scale and Expressive Suppression Subscale of Emotion Regulation Scale were used for assessment. Significant differences were found in hypertensive (primary and secondary) individuals and normal individuals on emotion regulation difficulties. Hypertensive patients reported significantly more emotion regulation difficulties, expression suppression and difficulties in describing emotions. These findings will be helpful for health psychologists as well as counselors in planning treatment for hypertensive patients.

Poster Presentation Abstracts

Adults' understanding of their emotions and emotion regulation role in everyday life

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There are many evidences that points that emotion dysregulation maintains a wide range of psychopathological diseases. It was also concluded that the deficits in emotion regulation are associated with maladaptive behavior and poor social functioning. However, the question remains open, as people who are not related to psychology and related fields subjectively aware their emotions, their role in the daily functioning, how they characterize their ability to regulate emotions. The purpose of this qualitative study is to investigate: 1. How adults characterize the role of emotions in everyday life? 2. How adults characterize their ability to regulate emotions in everyday life situations? The study comprised 20 male and 20 female adults, mean age was 31,7+/-0.8. The method of content analysis provided methodological background for this study. Data collection methods is semi-structured interview. Initial interviews show the tendency that in Latvian culture is not accepted to give value to the emotions, and that the main strategy of emotion regulation is suppression. Currently being processed data collected by interview. The results can help to educate people on these issues.

Poster Presentation Abstracts

Saving lives is a hard work: emotion regulation in the work of paramedics

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The role of emotions is to coordinate and regulate responses to stimuli of different complexity. Emotion regulation is a heterogeneous process, by which emotions themselves are regulated (Gross, Thompson, 2007). The aim of this qualitative study is to identify automatic or effortful conscious processes of emotion regulation at work in paramedics. Methods. Sample consisted of 13 paramedics aged between 33 and 57 years with minimum practice of 5 years, from different parts of Slovakia. There were 3 women and 11 men. Procedure. Individual retrospective semi-structured interviews based on Critical Decision Method (Hoffmann et al., 1998) were conducted and analyzed. Participants were asked to remember a particular non-routine critical incident. In-depth interviews focused on their decision strategies and emotion regulation strategies. Data collected were analyzed by Inductive Phenomenological Analysis (IPA). A model was developed in which different situational triggers provoked two sorts of emotions (wanted and unwanted) and strategies by which they were regulated. Discussion is based on Gross (1998) theory of emotion regulation. Based on this model, trainings of emotion regulation in paramedics have been prepared. (Supported by VEGA 2/0080/14)

Poster Presentation Abstracts

Differences in emotional expressivity according to stages of motivation to refuse alcohol in alcohol dependency

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Objective

The aim of this study was to evaluate differences in emotional expressivity according to the motivation to refuse alcohol in a sample of Lithuanian alcohol dependent patients.

Methods

The study sample consisted of 142 alcohol-dependent patients undergoing treatment in Lithuania. A self-administered questionnaire was used to identify the relationship between emotional expressivity (measured by Five Expressivity Facet Scale) and motivation to refuse alcohol (measured by The Stages of Change Readiness and Treatment Eagerness Scale).

Results

Highly motivated alcohol-dependent males express both more positive and negative emotions. They have significantly higher expressive confidence and higher emotional impulse intensity than those alcohol-dependent males with low motivation to refuse alcohol. Highly motivated alcohol-dependent females have higher emotional impulse intensity and they express more positive emotions comparing to low motivated females.

Discussion

Highly motivated alcohol-dependent patients have higher emotional expressivity. Therefore, it is important to enhance alcohol-related behavior reasoning as well as to identify and control emotional triggers in order to reach long-lasting changes of addictive behavior.

Poster Presentation Abstracts

Effect of attention regulation failure on an alcohol evaluative conditioning procedure

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Background

We aim to develop an evaluative conditioning procedure which bolster associative learning since implicit attitude are highly predictive of alcohol consumption. According to dual process theories of attitude learning, non-consciousness is one of the main component of implicit learning. To date, the most promising mechanism to explain associative learning is affect misattribution. Several research has shown that affect misattribution highly depends on allocation of attentional resources.

Methods

We used a 2 (attentional ego-depletion : depletion vs control) x2 (valence of the US : negative vs neutral) x2 (contingency awareness : inclusion vs exclusion) to assess the effect of depletion of attentional resources on evaluative conditioning and contingency awareness. Implicit, explicit attitudes toward alcohol and attentional performance were assessed.

Expected results

We predict more negative implicit attitudes as well as a stronger attitude parameter when participants have been depleted.

Current stage of Work

110 participants have already been recruited. A full sample is expected at mid-February 2015.

Discussion

Implication for the relevance of associative learning as a cognitive bias modification procedure will be discussed.

Poster Presentation Abstracts

Diminished Interoceptive Awareness in Fibromyalgia Syndrome

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The perception and processing of signals arising within the body has been ascribed crucial relevance in classical and modern theories of emotion. Accurate sensitivity to internal signals, i.e. interoceptive awareness, is associated with higher expressions of subjective and physiological indicators of emotional experience and benefits in affect regulation and emotion-related behaviors. This study investigated interoceptive awareness in fibromyalgia syndrome (FMS), a chronic condition of widespread pain accompanied by various affective symptoms. Interoceptive awareness was assessed in 45 FMS patients and 31 healthy individuals using a heartbeat perception task. In order to quantify symptom severity, patients completed the Fibromyalgia Impact Questionnaire. Patients exhibited a markedly lower heartbeat perception score than the control group and within the patient group an inverse relationship between heartbeat perception and symptom severity arose. In summation, the study revealed diminished interoceptive awareness in patients with FMS, which may be implicated in the affective pathology of the disease. Poor access to bodily signals may restrict the patients' ability to integrate these signals in emotional processing, which, by extension, may impede optimal emotional and behavioral self-regulation.

Poster Presentation Abstracts

Psychological well-being and lifestyle factors related to female fertility

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Introduction

The psychological well-being and lifestyle factors have generated a considerable amount of interest.

Methods

Cross-sectional study with 286 Hungarian women (195 infertile, 91 fertile) recruited online and in clinical setting. Participants completed self-administered measures (Beck Depression Inventory, Spielberger Anxiety Inventory, the Fertility Quality of Life) including socio-demographic and lifestyle factors. Calculated by independent ttests (M }SD), and biv

Findings

In comparison, infertile women were significantly ($p<0,05$) younger (34,25 }4,93 vs. 35,74 }5,73), their psychological status (BDI 14,04 }12,49 vs. 8,52 }9,99, STAI-T 48,63 }10,73 vs. 41,18 }11,26), were significantly ($p<0,005$) worse than their fertile counterparts. Core FertiQol score was significantly higher (68,78 }12,94 vs. 61,64 }17,26, $p<0,005$) in secondary than primary infertile group. The impact of lifestyle factors assessed that lower levels of fluid consumption (1,72 }0,64 vs. 1,96 }0,68) was significantly ($p<0,05$) associated with infertile women. Higher levels of fluid consumption affected the chance of 1,70 being in the fertile group (95% CI 2,49-1,16).

Discussion

This study identified differences of psychological and lifestyle factors between infertile and fertile women. Infertile women need psychological support and adequate detection of cause of female infertility.

Poster Presentation Abstracts

Non-medically diagnosed food intolerances in the Australian population

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Background

A substantial proportion of the Australian adult population associates negative physical and behavioural symptoms with food consumption. The aim of the present study was to investigate psychological factors potentially implicated in the noted discrepancy between reported and medically confirmed food hypersensitivity.

Methods

A randomly selected national sample of 946 adult respondents (58.9% female) to a postal survey reported on food intolerances, including symptoms and sources of diagnoses. Participants completed measures of health-related attitudes and behaviours, personality, and reasoning style.

Findings

Many participants (19.8%) reported intolerances, most commonly to lactose, gluten, wheat, dairy, and food additives. Non-diagnosed and complementary-medicine diagnosed but not medically diagnosed intolerances were consistently predicted by individual differences, particularly in health-related attitudes, health locus of control, somatosensory amplification, and neuroticism.

Discussion

The findings confirm the high prevalence of non-medically diagnosed food intolerances in the Australian population and identify psychological factors implicated in the attribution of adverse symptoms to the consumption of particular food substances. Public health implications of non-medically diagnosed food intolerances and comparisons with functional disorders are discussed.

Poster Presentation Abstracts

Biased attentional and emotional processing in Irritable Bowel Syndrome. A cross sectional, between subject study

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Background

Biases in attention are related to symptom maintenance in many mental health problems as well as illnesses involving pain. We hypothesise that hypervigilance for threat, maintained attention with threatening content and selfidentification with illness is related to symptom severity and quality of life in patients with irritable bowel syndrome (IBS).

Methods

In this between subjects design, we test 30 patients with IBS and 30 healthy individuals with well established measures of attention, the Dot-Probe and the IAT task. Mental health and symptom severity are assessed using questionnaires. Data will be analysed with ANCOVA and regression, looking at between group differences in attentional processes and symptoms, whilst controlling for the effect of psychological distress.

Expected results

We expect patients with IBS to show hypervigilance for illness related information, with more attentional resources dedicated to this type of information, and a closer link between threatening information and participants' identity.

Current stage of work

Data Collection.

Discussion

A clearer understanding of these attentional processes and their relationship to symptom severity will inform the design of effective and targeted psychological interventions for IBS.

Poster Presentation Abstracts

Integrating pain and self: processing biases for information relating to self, pain and reward

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Background

Preferential processing of certain types of information is a key mechanism underlying human behaviour. It is well established that processing is enhanced for content relating to ourselves, reward, or pain, but little is known about the relationship between these biases.

We used an association-learning task to address three crucial questions: (i) Do pain-, reward-, and self-biases differ in magnitude? (ii) What mechanisms underlie each bias? (iii) How do individual differences modulate the magnitude of these biases?

Methods

30 participants will perform a modified version of the novel-associations task (Sui, 2012), providing withinsubject reaction time and accuracy measures of reward-, pain- and self-biases. Between-subject factors such as fear of pain, catastrophising and pain experience will be assessed by questionnaires.

Expected Results

We expect the relationship between pain- and self-biases to differ depending on individual differences of pain experience and cognition. Analyses will include correlation, ANOVA and linear regression.

Current Stage of Work

Piloting.

Discussion

The relationship between pain experience, and pain- and self-biases may be relevant for clinical research on chronic pain or other patients with recurrent pain.

Poster Presentation Abstracts

Marital conflict as predictor of psychophysical health

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This study examined frequency of and proneness to marital conflict, and resolution strategies as predictors of psychophysical health. The sample consists of 127 participants aged 29-56 years. Psychophysical health was measured by the Family Health Status Inventory (FHSI; Norem, Malia and Garrison, 1992), which includes physical and emotional indicators of health. For conflict measures we used one-item scales of frequency of and proneness to conflict in marriage and the Conflict Resolution Style Inventory (CRSI; Kurdek, 1994). The factor analysis of CRSI revealed 3 conflict resolution styles: withdrawal, aggression and constructive problem solving. The results of the regression indicated the predictor variables explained 18.6% of the variance ($R^2=0.186$, $F(5, 116)=6.534$, $p<.001$). Proneness to conflict ($\beta=.371$, $p<.001$) and aggression as conflict resolution style ($\beta=.254$, $p<.05$) were found as significant predictors of psychophysical health. In conclusion, marital partners who perceive their marriage as more prone to conflict regardless of the frequency of the conflict and use aggression as resolution strategy have more health problems. This study is a part of the project no.179022, supported by Ministry of education, science and technological development.

Poster Presentation Abstracts

Relation of somatic and other behavior problems in children

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The aim of this study is to determine predictability of somatic problems in children based on other problems on Achenbach's check lists. The sample consists of 507 children aged 6-12 years from Serbia. Data was gathered using Teacher rating scales (TRF). Regression analysis was performed with somatic complaints as the criteria variable. This subscale includes symptoms like various aches (headache, stomachache), nausea, dizziness, tiredness. The set of predictor variables included anxious/depressed and withdrawn/depressed symptoms, social, thought and attention problems, rule-breaking and aggressive behavior and age. The results of the regression indicated the predictor variables explained 24.8% of the variance ($\text{adj.R}^2=.248$, $F(9,482)= 18.950$, $p<.01$). Following predictors were found as significant predictors of somatic problems: social problems ($\beta=.282$, $p<.001$), aggressive behavior ($\beta=-.203$, $p<.05$), anxious/depressed symptoms ($\beta=.200$, $p\leq.001$), thought problems ($\beta=.142$, $p<.05$), withdrawn/depressed symptoms ($\beta=-.123$, $p<.05$) and age ($\beta=.081$, $p<.05$). In conclusion, older children who experience social problems, anxiety, withdrawn and depressive symptoms, thought problems and whose behavior is less aggressive experience more somatic problems. This study is a part of the project no.179022 supported by Ministry of education, science and technological development.

Poster Presentation Abstracts

MINDOB: a computerized mindfulness-based intervention for obese individuals

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A growing interest is given to mindfulness-based interventions for healthy behaviours such as exercise and dietary. This study aims to test the efficacy of a mindfulness-based intervention among obese individuals. 120 outpatients, aged 18 to 55y, diagnosed with a binge-eating disorder, will be randomly assigned to one of the three following groups: mindfulness practice, sham meditation or wait-list. The tested intervention consists of a 1-year computerized mindfulness-based program. Mindfulness sessions are audio recordings that the patients are asked to listen to, 10 minutes every day. Questionnaires measuring impulsive eating, motivation to exercise, physical activity, mood, and mindfulness skills are filled in at baseline, 1, 6 and 12 months. Mindfulness, on the one hand as a de-automation element, and on the other as a moderator of motivation to exercise, can lead to the reduction of impulsive eating, and also to an increase of the level of physical activity. The aim of our study is to demonstrate the benefit of an self-monitored intervention as a complementary care for obese individuals with eating disorders.

Poster Presentation Abstracts

Effectiveness of a medication adherence service in primary care; an 8-month randomized controlled trial

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Nonadherence to chronic medication leads to poor disease control with reduced quality of life and a costly impact on health care systems. To warrant persistence, effective interventions during treatment initiation are needed. To address this, we developed an online service to assess a patient's nonadherence risk and a profile of barriers to adherence, and profile-based recommendations to health care professionals for tailored interventions. This study tests the effect of using this service on the adherence of starters with oral blood glucose lowering drugs or cardiovascular medication (N=1200 distributed across 25 pharmacies) in an 8-month randomized controlled trial. Participants' nonadherence risks and barriers to adherence are assessed and addressed by pharmacists and GPs. Drug persistence measured with pharmacy refill data will be compared between intervention and control (standard care) pharmacies using multilevel analysis.

We expect that using this service will lead to higher adherence scores and better management of adherence risks and barriers. The study is currently in the pilot stage. Its findings contribute to the design and implementation of effective adherence interventions in clinical practice

Poster Presentation Abstracts

Motivational interviewing: relevance in the treatment of Rheumatoid Arthritis?

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Background

Motivational interviewing (MI) is used to support patients in making behaviour changes. We developed an MI-based training course in psychosocial support for rheumatology practitioners. The aim was to increase remission rates in patients with rheumatoid arthritis (RA) and improve their quality of life (QoL) evaluated within a clinical trial – TITRATE.

Methods

The training course focuses on MI techniques e.g. developing trust/rapport, identifying potential barriers/facilitators for behaviour change and health psychology concepts e.g. illness perceptions and psychoeducation on RA. 199 patients will be recruited in the intervention arm and seen monthly for one year.

Expected results

48 Rheumatology practitioners from hospitals in England trained between February 2014 – February 2015. Sessions are audio-recorded to provide feedback and enable fidelity ratings. MI skills appear to be effectively used by practitioners with positive response from patients.

Current stage of work

Training/intervention delivery in progress.

Discussion

If findings suggest that MI-based psychosocial support training and provision is feasible and beneficial, it could be provided to further practitioners in Rheumatology to improve communication and patient outcomes.

Poster Presentation Abstracts

Evaluating a tailored message intervention for improving hypertension outcomes

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Background

Hypertension is a major health problem leading to high rates of mortality, morbidity and impaired quality of life; assisting patients to improve compliance with their self-care regimens can improve these poor outcomes. One tool to promote a culture of health is tailored communication, based on needs, preferences and personal characteristics of the target.

Methods

A theory-based tailored message intervention to improve lifestyle habits was developed and evaluated at one and six months post-intervention. One hundred fifty-two patients with hypertension (48% women; mean age=61.49, SD=10.1) were randomly assigned to one of two conditions: a) tailored print materials; b) general print materials. A series of t-test analysis were conducted in order to identify differences in patients' judgments about the materials.

Findings

At one and six months post-intervention, tailored materials were perceived significantly more personalized and clear compared to general materials.

Discussion

Tailored intervention has become an important strategy in promoting health. These results show that patients' judgments on tailored materials are positive; a larger randomized trial is still in progress to evaluate the effectiveness of this intervention in improving patients' lifestyle habits.

Poster Presentation Abstracts

Barriers to beginning a therapy among alcohol addicted women - a systematic literature review

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Background

Although there are more men than women with alcohol misuse, the alcohol addiction among women is a significant problem. There might be many reasons why women don't start an addiction therapy in spite of alcohol misuse consequences. It's important to identify those reasons, to know how to plan motivational sessions in counselling.

Methods

The systematic literature review was applied. The following key words were used: alcohol addiction, therapy, barriers etc. We analysed journal articles published between 1986 and 2014.

Findings

Two types of barriers to beginning a therapy among alcohol addicted women were identified: external and internal. For example: the feeling of guilt, shame, stereotypes, denial of alcohol problems, problems with taking care of children during therapy sessions.

Discussion

Recognition of barriers to beginning a therapy among alcohol addicted women helps a therapist to plan motivational session and interventions.

Poster Presentation Abstracts

Analyses of children fear reasons in the medical institutions

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Previously it was found that that 6% to 22% of children have dental fear. The aim of this study was to analyze factors which cause children's fear in different medical institutions. Study was provided in six medical institutions, data was obtained using quantitative research method - questionnaire and Vienna test system subtest for stress tolerance assessment. 223 parents with children aged 1 to 13 yrs, mean age 7.8 }2.8 yrs participated. The main group of respondents - parents with children aged from 2 till 4 yrs. Differences according children gender weren't stated. It was found that main factors for children fear in medical institutions are injections, pain and puzzlement, which directly connected with lack of information. The correlation between parents stresses tolerance level and their view about children's fear extent and reasons was stated. Future study is planned for comparing parent's subjective view and children view point.

Discussion

The results emphasized the importance of collaboration between parents, professionals and children before and after medical institution attendance. This is essential factor for improvement of paediatric medical care.

Poster Presentation Abstracts

The effect of marital conflicts on children's health: a MIMIC model

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Background

Our aim was testing the relationship of several aspects of marital conflicts and children's health in a complex model.

Methods

336 parent-child pair participated in this cross-sectional questionnaire study. Children (ages 9-12 years) completed Children's Perception of Interparental Conflict Scale, anxiety (STAI-C), depression (CDI) scales, Child Behavior Checklist whereas the parents completed Marital Stress Scale. We used structural equation modelling (MIMIC model).

Findings

The frequent, intense marital conflicts associate greater perceived threat, poor coping, greater self-blame, more internalizing, externalizing problems and more physical symptoms. Those younger children who blamed themselves for their parents' conflicts feel more threatened. Intense and poorly resolved conflicts and more marital stress predict the children's poor coping efficacy. The model fitted the data well ($\chi^2=53.59$, $df=46$, $p=.206$, $RMSEA=.022$, $RMSEA\ CI\ 90: .000-.044$, $CFI=.995$, $TLI=.984$). The model explained variances of internalization (43.9%), externalization (36.7%), somatic symptoms (17.3%), and attentional problems (27.8%).

Discussion

The model illustrates the effect of the marital conflict to the child's health enhancing the most significant aspects.

Poster Presentation Abstracts

The influence of parents-child relationships on child's inner health picture

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It is shown that a child's health depends on a family's climate. Inner health picture (IHP) is mental model of child's representation about him (her) self as a health human being. We have tried to analyze how the parents-child relationships influenced on this model. 56 children (8.5 and 71 parents (52 mother and 19 father, 34.4 level appreciation (Nikolaeva, 2013) and inventory for types of family education appreciation (Ademiller, Yusizkis, 1996) were used. Just 28% of parents use harmonic type of education. The more typical methods was hyperprotection one. We have found out that just harmonic type of parentschild relationships is connected with high level of child's IHP. The work is supported by RGNF № 14-16-48005a(p)

Poster Presentation Abstracts

Maternal Folic Acid supplementation during pregnancy and children's psychological wellbeing

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Objectives

Research suggests that folic acid supplements taken during the first trimester of pregnancy can have beneficial effects on children's brain development. Little is known if continued supplementation throughout pregnancy has any additional effect, particularly psychological effects.

Design

Randomised controlled trial of folic acid supplementation in pregnancy, with parental rating of psychological well-being.

Method:

Children aged 6 years whose mothers received folic acid through out pregnancy (n= 23) were compared to those whose mothers only receive the supplement during the first trimester (n=16) on parental ratings of resilience and emotional intelligence.

Results

Preliminary results showed children whose mothers received the supplement scored significantly higher on Emotional Intelligence (t=2.487, p<.01) and Resilience (t= 2.944, p<.01).

Conclusions

Folic acid supplementation continued throughout pregnancy may enhance aspects of psychological development in children.

Poster Presentation Abstracts

Stress tolerance features of children born by Caesarean section

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There is lots of contradictory information on the issue of development of children born by Caesarean section. That's why the goal of our research was to study the stress tolerance of pre-school children who was born by Caesarean section. Using Rosenzweig Picture-Frustration Study, Luscher Color Test, Anxiety Test (V. Amen, M. Dorca, R. Temml), Schtange Test and study of anamnesis 64 people (children born by Caesarean section and in a natural way) from Saint-Petersburg took part in this experiment. After comparing the results, we've made some observations. We found that there is no significant difference in children born by Caesarean section and children born naturally at the physiological level: children in the both groups have the same results in resistance to hypoxia, in energy body balance and amount of infectious diseases. But there are some differences on the psychological level: children born by Caesarean section have more unstable emotional sphere with a predominance of negative emotions, lower level of aggression and anxiety. Therefore we can suppose that way of birth shapes the psychological features of stress tolerance in children.

Poster Presentation Abstracts

Attitude or information: an intervention to increase cervical screening intentions in young women

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Background

Following up cross-sectional findings, this study investigated whether increasing information or encouraging positive attitude would more successfully strengthen screening intentions in women about to engage with the Irish National Cervical Screening Programme.

Methods

94 women aged 23 to 24 years were quasi-randomised into 4 groups who viewed a video that encouraged positive attitude, saw an informational video, received the script of the attitude video as reading material, or saw an unrelated video as a no-treatment control. Attitude and intention were measured at pre-test and follow-up, in addition to immediate-change measures of attitude and intention.

Results

Women reported strong intentions and positive attitude at pre-test. Although all groups reported stronger screening intentions and more positive attitude immediately after the intervention, there were no significant differences between the groups. Mixed ANOVA found no significant differences between groups at follow-up.

Conclusions

Our experiment was unable to identify a most successful intervention format. Methodological issues may account for this: we observed a ceiling effect in pre-test intention and small effects may be undetectable with our sample size.

Poster Presentation Abstracts

Implementation intention to improve HPV vaccination

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Background

Vaccination against Human PapillomaVirus is quite low in France (around 30%). The aim of this study is to test the effect of implementation intention to improve HPV vaccination with young girls.

Method

In a randomized control trial, participants will be allocated to a control group, or to an implementation intention group. Knowledge about HPV and intention about vaccination will be measured with self-report questionnaires. The students in first year at university of Grenoble, Metz, Clermont and Lyon (France) will participate to this study. We should have 200 participants by group, and we will measure the behavior of vaccination one month after implementation intention.

Expected results

We expect the participants in the implementation intention group will have significantly higher rate of HPV vaccination than participants in the control group.

Current stage of work

We have all the material ready and we are currently at the recruitment phase.

Discussion

Showing the effectiveness of implementation intention to improve HPV vaccination may be an easy way to increase the rate of vaccination for young girls.

Poster Presentation Abstracts

Tailoring the delivery mode of breast self-examination instructions to the individuals' preference

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Background

The cognitive theory of multimedia learning suggests that combining written text with illustrations or spoken text with visuals improves recall of information. However, research has not yet reached agreement on what mode of delivery is most effective for providing health instructions. As individuals differ in their preference for delivery modes, the effectiveness of health instructions might depend on the individuals' preference. The current study examines whether tailoring to mode preference is more effective than non-tailoring.

Methods

Breast self-examination (BSE) instructions were either tailored to participants' (N = 205) mode preference by offering mode choice (i.e., text, text with illustrations, or video) or non-tailored by randomly providing one of these modes. Outcome variables were recall of the instructions and intention to perform BSE.

Findings

Results showed that the intention to perform BSE was higher when instructions were tailored to participants' mode preference than when non-tailored. There was no effect of tailoring on recall.

Discussion

Tailoring to mode preference appears to increase women's intention to perform BSE. Mode tailoring thus provides a potentially fruitful way for advancing tailored health communication.

Poster Presentation Abstracts

The role of ultrasound in experience of pregnancy: importance of sociomaterial characteristics of institutional context

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Throughout the process of pregnancy women are faced with different health-related sources of worry and tension, and ultrasound may serve as an important resource in resolving their anxiety. The aim of this study was to examine different roles ultrasound technology might play in women's experience during pregnancy and to point out to some factors that might regulate these roles. Semi-structured in-depth interviews were conducted with first-time pregnant women (N=13; age range=26-49). The basic framework for data interpretation was interpretative phenomenological analysis. Analysis showed that the role of ultrasound is ambivalent: while it may resolve the uncertainty and stress, sometimes it also leads to inducing or deepening those feelings. It is further suggested that the specific role medical technology plays depends to a great extent on the characteristics of the local medical practice in which technology is embedded – doctors' behavior, prevailing norms/communication patterns and concrete way medical examination is staged – that is, both social and material aspects of institutional environment. Therefore, institutional situatedness of technology should be kept in mind when evaluating its potential psychological effects during pregnancy.

Poster Presentation Abstracts

Exclusive breastfeeding duration of Greek women: exploring psychosocial factors and infant feeding methods

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Background

As in the most developed countries, exclusive breastfeeding (EBF) rates are low in Greece. This study investigates whether psychosocial factors, such as perceived social support and negative feelings affect new mothers attitude, intentions and behavior to perform EBF using the Theory of Planned Behaviour (TPB) as a framework.

Methods

A repeated measures design was used. Eighty-nine primiparous women were tested on the third day before hospital discharge and eight weeks after. The dependent variable was the duration of EBF in days. Maternal attitude towards the infant feeding method choice was also explored.

Findings

The mean duration of the eight week EBF for these mothers was 38 days. Results show that Greek mothers have no confidence and no control over EBF although they acquire some knowledge regarding the benefits. Negative feelings and perceived social support had an impact on the duration of EBF.

Discussion

The evidence found suggests that both psychosocial factors and maternal attitude towards the feeding method play a significant role in the maternal decision to continue EBF. This study could be useful to inform future interventions.

Poster Presentation Abstracts

Changes in physical activity among coronary and hypertensive patients: a longitudinal investigation using the HAPA

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Background

Physical activity (PA) plays an important role in primary, secondary, and tertiary prevention of cardiovascular diseases (CVDs). This study aimed to use the Health Action Process Approach (HAPA) to investigate changes in PA in patients affected either by acute coronary syndrome (CPs) or essential arterial hypertension (HPs).

Methods

CPs (N=188) and HPs (N=169) completed a questionnaire at baseline, 6 months (T1) and 12 months (T2) after baseline. Repeated measures ANOVA and multisample path analysis were performed. Results: Both the populations improved their PA, but CPs showed greater changes than HPs, strongly improving their PA at T1 and then maintaining it at T2. Moreover, results indicated equivalence of the HAPA model for both patient populations.

Conclusions

Findings provide further evidence for the generalizability of the HAPA, which has never been employed to investigate PA on patients affected by hypertension. Moreover, the equivalence of the model for both the populations suggests that the process of change is almost identical for individuals who are at high risk for coronary event (HPs) and individuals who have already had the event (CPs).

Poster Presentation Abstracts

Prediction of intentions to be physically active in patients with diabetes

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Background

Theory of planned behavior (TPB) is known as a useful framework for studying physical activity (PA) behavior in general population. But generalizability of findings to clinical populations may be problematic and studies have shown mixed support of psychosocial factors within the TPB framework. The aim of this study is to examine expanded model of TPB for PA behaviour in patients with diabetes.

Methods

Longitudinal study included 285 patients with diabetes. PA was measured twice using PA scale from SDSCA measure. Variables within TPB were developed based on the recommendations made by Ajzen (2006). Cronbach alphas varied from .63 to .87.

Findings

Perceived behavioral control (PBC), injunctive and descriptive norms were the significant predictors of intentions ($p < .05$). Emotional and cognitive attitudes as well as past PA were not related to intentions to exercise ($p > .05$). PBC, but not intentions, predicted PA.

Discussion

Enhancing self-efficacy and strengthening positive relationships with members of the team involved in the treatment should be considered developing interventions aimed at increasing the motivation of patients with diabetes to regularly practice physical activities.

Poster Presentation Abstracts

Social cognitive factors and intention strongest correlates of healthy lifestyle behavior among early cancer survivors

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Background

While a healthy lifestyle is beneficial for cancer survivors, adherence to recommendations is low. We assessed the contribution of distal (socio-demographic, cancer-related, psychological), and proximal factors (attitude, social support, self-efficacy), and intention in explaining smoking, physical activity, alcohol, fruit, and vegetable consumption.

Methods

Cancer survivors (N = 255; 70.7% females; mean age 60.6 years) participated in this cross-sectional survey.

Findings

Higher fruit consumption was only correlated with a stronger intention (B=56; R2 = .574). Higher vegetable consumption was correlated with a stronger intention (B=37.22) and longer period after cancer treatment (B=1.06; R2 = .440). Adherence to fruit (54.8%) and vegetable (27.4%) recommendations was lowest of all behaviors and mutual correlation was weak (rs= .24, p < .001). Strongest correlates of other lifestyle behaviors were self-efficacy and attitude. Unhealthy behaviors were correlated with lower adherence to the fruit recommendation.

Discussion

Vegetable and fruit consumption are most urgent to change and should be considered as different behaviors. The proximal factors most strongly contributed to explain lifestyle behaviors among cancer survivors.

Poster Presentation Abstracts

Colorectal and prostate cancer survivors' physical activity experiences, barriers and intervention preferences: a qualitative study

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Background

Physical activity (PA) has proven to be beneficial both during and after treatment for prostate and colorectal cancer. A qualitative study was carried out to obtain information for the development of an eHealth PA intervention (OncoActive+) to increase and maintain PA in this population.

Methods

Semi-structured interviews with patients (N=29) and cancer professionals (N=15) were conducted to gain insight into the feasibility of, and experiences with PA during cancer, (physical) barriers, special considerations, information needs and preferences, PA determinants and important aspects of the intervention. Interviews were audiotaped and analyzed.

Findings

Interviews provided valuable input for the development of OncoActive+, such as specific PA benefits and (physical) difficulties that patients experienced. PA counseling with tailored advice, providing specific PA options and mentioning PA benefits were regarded as important elements. Additionally cancer professionals provided several practical suggestions.

Discussion

The current study provides insight in the specific PA needs and experiences of prostate and colorectal cancer patients during cancer treatment and recovery, which are relevant for the development of PA interventions (such as OncoActive+) for the target group.

Poster Presentation Abstracts

Predictors of physical activity adoption in a multiple health behavior change intervention with sedentary smokers

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Background

Smoking and low physical activity (PA) increase disease risk. Multiple health behavior change (MHBC) interventions simultaneously targeting these behaviors have large potential for impact. This study examined factors related to PA adoption in a PA promotion + smoking cessation intervention with high-risk, underserved smokers.

Methods

101 sedentary smokers were randomized to sequential MHBC counseling, or cessation-only counseling. Outcomes: achievement of >7,500 steps/day (7-day pp) by Week 4 quit day (measured by pedometer); mean 7-day pp vigorous intensity Metabolic Equivalent of Tasks (METs, measured by IPAQ). Multivariable models examined theoretically-relevant factors hypothesized to relate to PA adoption (e.g., self-efficacy). Other variables correlating with PA ($p < .20$) were covariates.

Findings

Sample characteristics included 51% male, 77% African American, age = 42.1 + 10.9; BMI = 29.9 + 7.4. Assignment to our MHBC intervention vs. control (OR 5.41, $p = .02$) and more physically active household members (OR 1.48, $p = .09$) contributed to daily steps goal achievement. Hyperactivity ($B = 87.19$, $p = .05$) and BMI ($B = -15.80$, $p = .09$) contributed to greater vigorous intensity METs.

Discussion

These results will guide improvements in future MHBC PA programming.

Poster Presentation Abstracts

The interplay between values and affective attitudes on health behaviors

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Background

Understanding the relationships between affective attitudes and values may contribute to health decision making models (Bardi & Schwartz, 2003). Present study investigates interrelations between values (health value/value of exciting life), affective attitudes (explicit/implicit) and risky/preventive behaviors among adolescents.

Methods

A cross sectional study was carried out for 50 adolescents each completed the Rokeach Value Survey, the Health Attitudes Questionnaire, the Implicit Associations Test and the Health Behaviors Questionnaire. The relationships between variables were assessed using correlation and mediation analysis.

Findings

Explicit attitudes mediated the relationship between health value and preventive behaviors (95% CI [.0989, .7544]) as well as the relationship between value of exciting life and risky behaviors (95% CI [.0255, .5120]). Implicit attitudes positively correlated with health value ($r = 0.437$, $p < 0.01$) and negatively with value of exciting life ($r = -0.433$, $p < 0.01$).

Discussion

Health value and value of exciting life are associated with attractiveness of preventive/risky behaviors. Affective attitudes play a mediating role for value-behaviors link. These findings may be applied to programs dealing with affective attitudes to promote healthy lifestyle among adolescents.

Poster Presentation Abstracts

Does smoking matter in the intentions towards healthy diet? Results of regression analysis

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The current study aimed at revealing the specifics of the intentions towards healthy diet in groups of smokers and non-smokers (smokers=35%). The theory of planned behavior (Ajzen, 1985, 1987) was tested by using a TPB questionnaire. Data from 202 respondents (male=48%) were collected. In the stepwise multiple regression, subjective norm was entered first for the group of smokers and explained 32% of the variance in the behavioral intention ($F(1, 67) = 32.824, p < 0.001$). Attitude towards healthy eating was entered second and explained a further 2% ($F(1, 66) = 4.127, p = 0.046$). For the group of non-smokers, attitude was entered first and explained 27% of the variance ($F(1, 123) = 47.035, p < 0.001$). Perceived behavioral control was entered second and explained 35% ($F(1, 122) = 16.062, p < 0.001$). Subjective norm was entered third and explained 38% of the variance in the intention ($F(1, 121) = 6.882, p = 0.010$). Greater intention for healthy eating was revealed for the group of non-smokers. The results suggest that smoking is a specific factor for healthy eating intentions.

Poster Presentation Abstracts

The Health Behavior Taxonomy: factors differentiating between clusters of health behaviors

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Background

The Health Behavior (HB) Taxonomy defines clusters of HBs based on lay perceptions. It includes two major domains, Physical and Psychosocial, composed of clusters and sub-clusters. The goal of the present study was to uncover differences between the clusters by comparing them across key constructs.

Methods

1956 participants judged HBs representing different clusters (12 overall) on 15 scales representing different constructs (e.g., perceived behavioral control, social support).

Findings

Significant differences were found between clusters and sub-clusters. For example, compared to psychosocial HBs, physical behaviors were judged as more influential and under control, requiring less effort and yielding fewer non-health rewards. In the psychosocial domain, the 'work' sub-cluster had lower perceived behavioural control and higher effort levels compared to the 'relationships' and 'enjoyment & meaning' sub-clusters. In the physical domain, 'nutrition' was judged as requiring more effort and providing more non-health rewards, but lower on habit and engagement intentions, compared to the 'avoiding risks' and 'health maintenance' clusters.

Discussion

The HB taxonomy depicts clusters that differ across constructs, thus validating the classification and indicating its underlying psychological reasoning.

Poster Presentation Abstracts

Lifestyle profiles in acute coronary syndrome: stability and change

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Healthy lifestyles are important in the secondary prevention of acute coronary syndrome (ACS). Behavioral change following ACS has been analyzed only considering separate behaviors at time. However, previous research on healthy population demonstrated that unhealthy behaviors tend to co-occur. Our aim was to identify lifestyle profiles of ACS patients and their pathways of change following the ACS by adopting a typological approach. Three hundred and fifty-six ACS patients were recruited. Healthy habits, depression, anxiety, illness perception and clinical outcomes were collected immediately after the ACS and 6 months later. The I-States of Objects of Analysis was performed to identify lifestyle clustering and to analyze its change over time. We also assessed associations of cluster membership with depression, anxiety, illness perception and clinical outcomes. We identified seven profiles, ranging from more maladaptive to healthier cluster. The results demonstrated a moderate individual and group stability of cluster membership. Healthier clusters displayed better psychological adjustment and less biomedical and anthropometric factor risks 6 months after the ACS. These results underline the importance of developing secondary prevention programs targeting multiple lifestyles at time.

Poster Presentation Abstracts

Phone attachment and compensatory health beliefs predicting the behavior of texting while driving (TWD)

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Background

Examine the associations between phone attachment, risk perception and compensatory health beliefs (CHB), on the one hand, and texting-while driving and compensatory behavior, on the other hand.

Methods

160 participants, aged 18-70, filled out an online survey tapping the above constructs.

Findings

Most of the sample reported they engaged in TWD (85%), with younger people reporting higher rates and no gender differences. The behavior of TWD was positively associated with phone attachment and compensatory health beliefs concerning TWD and negatively associated with risk perception. Phone attachment and CHBs interacted so that individuals high on both were the most likely to TWD. TWD and compensatory behavior related to TWD were closely associated ($r=.60$). Phone attachment best predicted TWD and compensatory behavior in a multivariate analysis and all the variables explained 57% of the variance in TWD.

Discussion

Attempts to reduce TWD should target directly phone attachment and compensatory behaviors.

Poster Presentation Abstracts

Persuasion in health: fact versus popular opinion

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The present study examines the effects of descriptive norms on changing indifferent attitudes towards organic food. Researchers hypothesized that reading a descriptive norm statement, which falsely states that a high percentage of people are now eating organic foods, will have a greater positive effect on changing indifferent attitudes than reading a factual-favorable statement (positive facts about organic food) or a food-unrelated statement (control). Another objective of the study is to discover correlations between people's health, lifestyle, and attitudes towards organic food. Data is continuously collected throughout Southeast Florida (to date n = 210). Those with a positive attitude toward organic food (n = 120) were asked to complete a health, lifestyle, and demographic questionnaire. Those who held indifferent attitudes towards organic food (n = 90) were randomly assigned to one of the three conditions. Data analyses have not been completed yet. Results from the original pilot study (n = 100) indicated that the descriptive norm condition had the predicted effect. Findings from this study can be used to offer advocates of organic food effective ways of promoting sustainable food.

Poster Presentation Abstracts

What food representation tells us about the attractiveness of food products

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Background

Unhealthy food is often preferred over healthy food as it is perceived as more attractive. Taking a grounded cognition perspective, this study examines whether simulations of consuming the food play a role in preferences for unhealthy foods. We assume rewarding consumption simulations to contribute to the attractiveness of unhealthy food especially.

Methods

In a feature listing task, 120 participants (data collection in progress) either received the instruction to produce typical features of healthy and unhealthy food, or features that would make them want to eat it. The features were systematically coded as consumption simulations if they referred to the sensory system, context, action, and immediate consequences. The data was analyzed in a repeated measures ANOVA.

Expected results

We predicted unhealthy foods to generate more features related to actual consumption than healthy foods. Additionally, focusing on the attractive features of food products was expected to increase consumption simulations.

Discussion

The study identifies important features that contribute to food products' attractiveness, and will help developing effective interventions to increase healthy eating by transferring these features to healthy food.

Poster Presentation Abstracts

Mindfulness and alimentation : comprehend differently emotions, food sensations and sensoriality

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Background

This explorative research aimed to determine if the practice of mindfulness could help patients, who were followed as part of this study by a diet medical center in France, to improve their relationship with food.

Methods

More specifically we examined if work on emotions, food sensations and the five senses concerning food could influence the relation with food for patients affected by obesity and / or eating disorders. 18 volunteer participants (17 women and 1 man) were part of both individual and group sessions on mindfulness, which were designed for the study in accordance with the center's functioning.

Findings

Explorative results revealed a relation between emotions and diet : negative feelings affect eating process. Furthermore, denial of food sensations could be linked to weight gain. Then, we observed that patients didn't take into account all their senses during eating process.

Discussion

Finally, the discussion highlighted that mindfulness can help patients to develop their relationship with food, particularly for patients presenting eating disorders.

Poster Presentation Abstracts

The advertising as a moderator of the relationship between the obesogenic environment and nutrition

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Background

The aim of the present study was to evaluate the association between accessibility of healthy and unhealthy foods, the advertising exposure, understanding the mechanisms of advertisements, nutrition, and body weight of children and adolescents.

Methods

The questionnaires were completed by 1,170 adolescents aged 12 -17 (M = 14.09, SD = 1.63).

Findings

The availability of unhealthy foods at home was related to more frequent consumption of sweetened beverages and lower levels of vegetable intake. This relationship was moderated by the exposure to food advertising. The availability of healthy foods at home was associated with more regular breakfast consumption. Again, this association was moderated by the exposure to food advertisement. The understanding of the mechanisms of advertisements and the subjective assessment of the impact of advertisements had limited direct impact on diet.

Discussion

The findings show the importance of exposure to advertisement as the factor moderating availability - food intake associations.

Poster Presentation Abstracts

Approach- vs. avoidance-oriented communication about healthy eating in mobile phone chat groups

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Background

Healthy eating comprises approach-oriented behaviours such as increasing fruits and vegetables (F&V) consumption, and avoidance-oriented behaviours such as eating fewer unhealthy snacks. Moreover, the use of m-health applications with group chat features to deliver health behaviour interventions is increasing. Our study investigated if the goal to increase F&V vs. the goal to reduce unhealthy snacking is related to more approach- or avoidanceorientated group communication respectively.

Methods

Participants were randomly assigned to a F&V (n=50) or a snack reduction (n=37) condition and participated in mobile phone chat groups to communicate about their eating behaviour for seven days. Qualitative analysis involved categorizing group communication deductively into approach- or avoidance-related communication and inductively to describe the data comprehensively.

Findings

In both conditions approach- and avoidance-oriented communication appeared. As expected, there was more approach-oriented group communication in the F&V and more avoidance-oriented group communication in the snack condition.

Discussion

People talked differently about their eating behaviour depending on the respective behavioural goal orientation. Future studies should analyse how these differences in communication may influence health behaviour change.

Poster Presentation Abstracts

Alcohol dependency as a predictor of self-reported risky driving in Lithuanian traffic offenders

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Objective

The aim of this study is to evaluate the relationship between alcohol dependency, objective and subjective driving aspects of risky driving in Lithuanian traffic offenders' sample.

Methods

A self-administered questionnaire measured alcohol dependency (AUDIT test) and self-reported risky driving (DBQ). Additional questions evaluated objective indicators of risky driving and demographic information. The sample of the study consist of traffic offenders, who lost driving license because of driving under the influence of alcohol (DUI) (N=363), driving and speeding (N=223) and because of other traffic violations (N=109)

Results

Higher scores of AUDIT are significantly related to higher number of driving errors and intentional traffic violations in all respondents groups. Higher scores of AUDIT test are related to increase of drink-driving rates and more frequent road accidents in those, who violated traffic rules because of DUI and driving and speeding (only higher drink-driving rates).

Conclusion

Traffic rules violations might be evaluated as the outcomes of problematic alcohol consumption. Therefore, changes in risky driving of traffic offenders could be achieved by interventions, which could be oriented to problematic alcohol consumption.

Poster Presentation Abstracts

Psychological correlates of the irrational use of medicine in a sample of middle aged Lithuanians

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Objective

This study was intended to evaluate importance of health status, drug use disorder symptoms and attitude towards advertisement of pharmacological products for the irrational use of medicine in a sample of 40-65 years old Lithuanians.

Methods

A cross-sectional survey using self-report questionnaire (with DUDIT, general health evaluation, attitudes towards advertisement of pharmacological products and irrational use of medicine) was carried out in a group of 40-65 years old Lithuanians. The total sample included 110 respondents (70.9 % females; mean age 50.0 years).

Results

Even though men were more critical towards advertisement of pharmacological products and had less symptoms of drug use disorder than women, but they were not more rational users of medicine. Also health status was important indicator of both rationality in medicine use and criticism towards pharmacological products advertising. Respondents with poor health were less critical and more irrational users of pharmacological products.

Conclusion

The results imply that more interventions of critical attitude formation towards advertising as though as rational use of medicine should be implemented in 40-65 years old age group of patients.

Poster Presentation Abstracts

Using mobile phone while driving: distinct risky behavior or a symptom of broader syndrome?

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Objective

Study aimed to evaluate relationships between drivers' phone use while driving, attitudes towards safety of using phone and other forms of risky driving behavior.

Methods

122 drivers (52.5% males, aged 30-59) answered questions about their attitudes towards phone use while driving and actual phone use behavior, and completed Driver Behavior Questionnaire (Reason et al., 1990).

Findings

Drivers who use phone while driving reported more fines for speed and other traffic rules' violations during past three years. They also reported higher casual driving speed in general. Drivers who had or nearly had a car accident while talking on phone also reported higher accident rates in general, and more frequent drunk driving. Regression analysis revealed that positive attitudes towards phone use while driving remained related to intentional rule violations when age, gender and driving experience were taken into account. Attitudes and actual use of phone while driving weren't related to unintentional driving lapses.

Discussion

Results support the idea that phone use while driving represents a form of intentional risky behavior and is closely related to other forms of risky driving.

Poster Presentation Abstracts

Reducing alcohol consumption: the influence of message frame, temporal context and autonomy

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Background

Health messages can be used to persuade people to follow behavioural recommendations. The framing of information in health messages needs to be carefully considered, however. This study examined how level of autonomy moderated the effect of gain- and loss-framed messages about the short- vs. long-term consequences of alcohol use.

Methods

At Time 1, participants (N = 335) completed demographic variables and a measure of autonomy. At Time 2, participants reported baseline alcohol use and read a gain-framed or loss-framed health message which highlighted either short-term or long-term outcomes. Alcohol consumption was reported 7-days later.

Findings

The results showed a significant three-way interaction between message framing, temporal framing, and autonomy. For low-autonomy individuals, the loss-framed health message was associated with lower levels of alcohol consumption than was the gain-framed message, but only if the short-term outcomes were conveyed.

Discussion

The interaction between message framing and temporal framing may depend on the recipient's level of autonomy, which has implications for health promotion and the construction of effective health communication.

Poster Presentation Abstracts

Links between novice drivers' subjectively assessed driving skills and the fear of driving independently

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Background

The number of people killed on the Lithuanian roads is one of the biggest in the EU. Driving after the acquisition of the driving licence is directly related to the road accidents (Simons-Morton, 2006). Taylor et al. (2007) opinion that the fear of driving is a possible reason of traffic events; others argue that if the novice drivers lack driving skills, they may experience fear (Schmidt-Daffy, 2013). Research on determination of the role of the driving skills concerning the manifestation of fear becomes necessary (Kleisen, 2013). The aim of the survey is to establish the links between the novice drivers' subjectively assessed driving skills and the fear of driving.

Methods

The DCQ (Taylor et al., 2007) questionnaire is used to evaluate the fear of driving. ADS scale (George et al., 2007) measuring the self-efficacy level in driving situations. The target group. 375 novice drivers.

Findings

As the fear of driving reduces, new drivers assess their driving skills better.

Discussion

Reduction of the driving fear is one of the methods to encourage novice drivers assess their driving skills better.

Poster Presentation Abstracts

The effects of message framing and self-other focus on HPV vaccination intentions

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Background

Effective communication of the human papillomavirus (HPV) vaccine may help improve vaccination acceptance. This study aims to investigate the impact of message frames (gain versus loss) and type of message focus (highlighting individual vs. collective consequences) on vaccination intentions.

Methods

The study employs a 2 (frame: gain vs. loss) x 3 (focus on effects for oneself vs. many other people vs. both) experimental design. A sample of 300 young adults will be randomly assigned to read one of the framed messages. Measures related to approach/avoidance orientation of participants and social-cognitive variables (perceived severity, effectiveness, risk, attitudes) relating to vaccination will be assessed. A series of ANOVA tests will be performed.

Expected results

We expect that messages focusing on collective loss might be more effective in raising vaccination intentions, but this relation might be moderated by vaccine risk perceptions and by the motivational orientation of respondents.

Current stage of work:

We are currently in the stage of data collection.

Discussion

Investigating the message strategies that can most effectively promote vaccination acceptance and uptake has important implications for health communication practices.

Poster Presentation Abstracts

Self-efficacy buffers daily stress on mental health: German, Russian and Chinese student samples

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The pathogenic impact of stress on mental health as a process is determined by positive resistance resources that may act as buffers. It is suggested that Bandura's self-efficacy expectations contribute to the prediction of the psychopathology of stress-related disorders. However, whether this stress buffer effect of self-efficacy occurs in different cultures is still completely unexplored. Data was gathered cross-sectionally from student samples in Germany (N≈1000), Russia (N≈1100) and China (N≈9400). Measures included the Brief Daily Stressor Screening, the General Self-Efficacy Scale and the Depression, Anxiety and Stress Scales. Bootstrapped mediation analyses suggested that daily hassles operated mediationaly through self-efficacy on depression, anxiety and stress in all countries. Standardized effect sizes differed between the cultures, largest were found in Germany. Thus, the evaluation of the own abilities to cope successfully reduces the effect of stress on psychopathological symptoms. This effect indeed occurred in each country, but there seem to be some cultural discrepancies. Considering implications for prevention, these findings provide the first evidence for a cross-cultural protective effect of self-efficacy on mental health.

Poster Presentation Abstracts

Mental health of elementary students at the Medical University Graz

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Background

Mental health and wellbeing are essential conditions for subjective quality of life as well as for productivity. Gruenbuch (2004) postulates that mental health, independent lifetime organisation and coping strategies encourage student's satisfaction and productivity. Recent studies showed that non-academic young adults have less emotional stress than medical students. The aim of the study was to investigate the mental health status of elementary students in the first semester.

Methods

The questionnaire "Mental Health of Students in Greifswald" measures parameters for mental health and wellbeing, such as physical health, motivation, social support, psychosomatic affections, skills for time management and self organisation as well as work load and stress due to studying. One-hundred-sixty students completed the questionnaire during the first semester.

Findings

The students are highly motivated and show high competences in coping strategies at the beginning of the first semester. Social support and self-organisation skills are related to coping strategies and motivation.

Discussion

Regarding this result, it has to be important to protect and improve the mental health status according the criteria from burn-out-prevention, time management and furthermore wellbeing.

Poster Presentation Abstracts

Biofeedback-assisted relaxation potential for improving ability to relax in Type A students

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Background

Type A individuals are believed to have higher psychophysiological reactivity to stressors and poorer relaxation skills. Biofeedback-assisted relaxation had been shown to be effective in enhancing ability to learn to control psychophysiology and relax. This study is aimed at assessing biofeedback-assisted relaxation potential for improving ability to relax in Type A students.

Methods

54 Type A students participated in a study. Participants of a study were randomly assigned into 2 different groups: 27 students received 4 weekly biofeedback-assisted relaxation training sessions and 27 participated in comparison group. Ability to relax was measured by evaluating a change of psychophysiological variables (skin conductance, skin temperature, heart rate and respiratory rate) at the beginning of a study, during and after relaxation training.

Expected results

It is expected that despite no change in perceived stress type A students have learnt to control their physiology and relax. Current stage of work: Preparation of the psychophysiological data for analysis.

Discussion

The use of biofeedback-assisted relaxation might be useful in improving ability to relax and prevent the negative outcomes of stress in type A individuals.

Poster Presentation Abstracts

The influence of age on the students' adaptation to the university education

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The purpose of the investigation was to compare the psychophysiological mechanisms of adaptation to the different educational load of different ages' students. All students (593 participants) were divided onto four groups differed the ages of students (from 20 till 50 years old). The methods were used: reaction time tasks (simple and complex variants), variability of cardio rhythm record, Strelau Temperament Inventory (STI), coping-strategies test and Ego defenses test (Plutchik et al., 1979). We showed that students of different ages adapt to the hard educational load with different methods. The younger student is the more probability he (she) adapts with using vegetative system regulation. The elder student is the more probability he (she) could adapt to the study changing their coping strategies and Ego defenses mechanisms.

Poster Presentation Abstracts

Substance use for coping with academic pressure and increasing performance

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Background

The aim of this study was to understand the use of cognitive enhancing drugs amongst university students in New Zealand to both cope with the demands of the academic environment and boost performance.

Methods

685 students participated in an online cross-sectional survey. They were asked about their lifetime and current use of cognitive enhancing drugs, their reasons for use, and their attitudes towards different substances. A further 20 participants were recruited for semi-structured interviews and review of social media posts in the run up to final examinations.

Findings

Caffeine (69%) and vitamins (31%) were the most commonly used substances, with 4% using prescription stimulants (mostly methylphenidate). Males, and those studying more competitive courses were more likely to use prescription stimulants. The qualitative results illustrate substance use in a broader context of strategies for coping with the pressures of academic environments.

Discussion

Students use multiple strategies to cope with university study and to enhance their academic performance. Risky behaviour was relatively uncommon, but better understanding the context in which this occurs and positive alternatives will guide future interventions.

Poster Presentation Abstracts

Coping strategies, hardiness and self-esteem in students of helping professions

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The purpose of the study was to investigate the predictors of constructive index of coping behavior in students trained to become specialists of helping professions (psychologists and teachers). The sample consisted of 80 students (aged 19-22). The data were collected via the Strategic Approach to Coping Scale (SACS) (Hobfoll), Hardiness test (Maddi), and Semantic Differential Scale (Osgood). The results of regression analysis showed that the predicting model of constructive index of coping behavior in students of helping professions includes a high level of such positive coping strategies as seeking social support, social joining and assertive action; a low level of aggressive action, avoidance and antisocial action; and a high level of hardiness. Such component of self-esteem, as power appears a predictor of hardiness, being a mediator of constructive index of students' coping behavior. We consider the received data to specify students of helping professions' coping behavior for its further optimization in the training program. The main limitations of the study are connected with a small sample, only two professions and two factors (hardiness and self-esteem) investigated.

Poster Presentation Abstracts

Emotion regulation and well-being at work: a cell-phone ecological momentary assessment study

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Background

Negative emotions pose a challenge to employees due to its impact on psychological well-being (PWB). The purpose of this study is to examine which categories of emotion regulation strategies (ERS) are related to successful down-regulation of negative emotions, thus PWB (psychopathology, perceived-stress, burn-out, workrelated strain).

Methods

100 white-collar complete self-report measures of PWB. By using experience sampling method, ER is assessed through participants' cell-phones on four occasions across five workdays (2000 surveys). In each survey, past hour peak and momentary intensity of negative emotions as well as strategies used to regulate those emotions are asked.

Findings

Successful/unsuccessful down-regulators will be identified through cluster analysis and compared in levels of PWB. Successors are expected to have better PWB outcomes. Further, adaptive ERS (acceptance, refocus on planning, reappraisal) are expected to predict successful down-regulation. As predicted from coping and emotional labor theories respectively, PWB is expected to be positively correlated with adaptive ERS and negatively correlated with maladaptive ERS (self/other blame, rumination, suppression).

Discussion

Given that ERS are related to PWB, prospective results can inform organizational training and stress prevention/management programs.

Poster Presentation Abstracts

Subjective and bodily manifestations of stress in crisis managers

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Directing disaster operations represents a major professional challenge. Despite its importance to health and professional performance, research on stress in crisis management remains scarce. The present study aimed to investigate subjective and bodily manifestations of stress in crisis managers. For this purpose, 30 crisis managers were compared with 30 managers from other disciplines, in terms of subjective stress, health status and psychophysiological reactivity to crisis-related and non-specific visual and acoustic aversive stimuli and cognitive challenge. Crisis managers reported lower stress levels, a more positive strain-recuperation-balance, greater social resources, reduced physical symptoms, as well as more physical exercise and less alcohol consumption. They exhibited diminished electrodermal and heart rate responses to crisis-related and non-specific stressors. The results indicate reduced stress and physical complaints, diminished psychophysiological stress reactivity, and a healthier lifestyle in crisis managers. Improved stress resistance may limit vulnerability to stress-related performance decline and facilitate preparedness for major incidents.

Poster Presentation Abstracts

Predicting the subjective health of employees working while ill

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Background

Presenteeism is the act of working while ill. There are concerns related to how this behavior affects employee health. The aim of this study was to investigate if presentees' subjective health could be predicted by work engagement and attendance pressure, which was interpreted as potential positive and negative motives toward presenteeism.

Methods

Cross-sectional survey data were collected measuring presenteeism days, subjective health, work engagement and four attendance pressure factors. The sample consisted of 205 Norwegian workers from different industries, who had had presenteeism during the last six months.

Findings

Multiple linear regression analysis showed that the number of presenteeism days ($\beta=-.27$, $p < .01$) and work engagement ($\beta=.24$, $p < .01$) predicted subjective health. None of the four attendance pressure factors predicted subjective health significantly.

Discussion

It seems like the motives for presenteeism do not necessarily relate to the consequences of the behavior. Work engagement may contribute to good health or vice versa, and could be a buffer against negative health effects from working while ill. For a deeper understanding and confirmation of these interpretations, longitudinal studies are needed.

Poster Presentation Abstracts

Evaluation of stress prevention by short exercises in the Federal Foreign Office's occupational health-management

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Background

As a part of the Federal Foreign Office's occupational health management the study evaluates a preventative measure that also reaches the staff abroad – with its specific stressors and resources.

Methods

The evaluation study is based on telephone-interviews of 89 participants in 2012 and additional 67 participants in 2014. A quantitative content analysis was used. It compares the results on different levels of transfer to the work-place in 2012 and 2014 – in relation to changes in course design and in organizational culture (perception of prevention at work).

Findings

The analysis finds improvements concerning the happiness with the course itself and the transfer to the workplace in 2014 compared to 2012. Also changes in the organization's perception of preventive measure were found.

Discussion

Conclusions are that changes in course design lead to improved transfer to the workplace in addition the more positive perception of preventive measures at the workplace throughout the organization seems to be another driver of transfer. Recently another study to evaluate a computer based version of this training was launched.

Poster Presentation Abstracts

Stress and the quality of vocal emission

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I am going to present the results of the research into the influence of stress on the vocal organ of a teacher. Over 200 people participated in the research, 100 of them being teachers and the rest constituting a control group. All of them completed the Voice Handicap Index test (measuring the handicap level of the voice) as well as the PSS10 test (measuring the level of the stress being felt); in addition, they took part in a professional research into vocal emission where particular spheres of their voice were evaluated (motorics of the articulatory apparatus, the way resonators work, the breathing track, speech quality, vocal fatigue level etc.); also, they went through spirometer checkups. The results of the research show which parameters are dependent the most on the level of stress felt at a particular moment in time. What is more, thanks to the analysis of the results in the study and control groups, it was possible to answer the question whether the obtained relations are specific only to teachers as a group.

Poster Presentation Abstracts

Patient Uncertainty Questionnaire-Rheumatology (PUQ-R-R): development and validation of a new self-report instrument using modern psychometrics

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The objective of this study was to develop and evaluate a new instrument for patient uncertainty in systemic lupus erythematosus (SLE) and rheumatoid arthritis (RA). Cognitive debriefing was used to pre-test the initial items generated on the basis of the preliminary qualitative exploration. Two field tests were conducted across five UK hospitals to evaluate the measurement properties of the new instrument using the modern psychometric technique of Rasch Measurement Theory (RMT). Traditional psychometric techniques were also used to complement and further assess the construct validity. Pre-testing supported the relevance, acceptability and comprehensibility of the initial items. Findings indicated that the new PUQR instrument fulfilled the expectations of RMT to a large extent and comprises five scales; symptoms and flares, medication, trust in doctor, self-management and impact which further displayed excellent measurement properties as assessed against the traditional psychometric criteria (including Cronbach's alpha 0.82 – 0.93). Preliminary construct validity analyses indicated patient uncertainty is associated with treatment-adherence, mood and aspect of quality of life but not disease activity. By quantifying uncertainty, the PUQ-R can support evidence-based management programmes and research.

Poster Presentation Abstracts

Patient-Reported Outcomes: a systematic review on how items are generated using a qualitative research approach

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Background

There is a growing interest in qualitative methods to be used in the development of Patient-Reported Outcomes (PROs). To the best of our knowledge, the literature does not refer to any systematic review that specifically clarifies subject input through focus groups or interviews or any methodology for the collection of discourse data.

Methods

We adopted the PRISMA Statement as a basis for our reporting systematic review. Keywords: qualitative AND (scale OR test construction OR questionnaire development) AND items Records identified through PUBMED searching: 745 Records screening for relevance: 293

Expected results

We wish to identify the current practices in qualitative research used in the construction of PRO items. Current stage of work An analysis grid has been developed to capture the qualitative methodology used. All records will be scrutinized by the end of April 2015. Different qualitative methods used to generate items will be listed

Discussion

The results of this study will provide guidelines to generate a sample of items from a content analysis. The contribution of health psychology to the field of PRO questionnaire development is essential.

Poster Presentation Abstracts

A comparison of German questionnaires measuring Sense of Coherence

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Background

Research suggests that Sense of Coherence (SoC) positively affects quality of life and health. It consists of three theoretically derived dimensions: comprehensibility, manageability, and meaningfulness. Our goal is to compare different German-language SoC-measures and to test their psychometric properties, particularly regarding their factorial validity.

Methods

We measured SoC by the German version of the Life-Orientation-Scale (SOC-29, Antonovsky; short version: SOC-13) and more recent scales (SOC-HD, Schmidt-Rathjens et al.; SOC-B, Born et al.). Reliability and factorial structure were analyzed in a sample of 635 participants. Structures within the data were explored by confirmatory factor analysis using maximum-likelihood estimation.

Results

The total scores of all four questionnaires had high internal consistencies (SOC-29: Cronbach's $\alpha = .90$; SOC-13: $\alpha = .85$; SOC-HD: $\alpha = .88$; SOC-B: $\alpha = .91$), but for none of them the postulated factorial structure could be replicated. All tested models didn't reach acceptable fit indices.

Discussion

The results indicate that all four questionnaires don't reproduce the theoretical structure of the construct. There seems to be evidence for a lack of differentiation between the dimensions "comprehensibility" and "manageability".

Poster Presentation Abstracts

Validating a measure to provide nutritional analysis of children's lunchtime food consumption using digital photography

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Background

To assess children's eating patterns we have to measure individual children's consumption directly. However, gold-standard weight measures are time consuming and impractical in busy school dining environments.

Methods

We measured school lunches of 90 children (Years 1, 3, and 5 in one primary school) in the naturalistic dining environment, considering both school dinners and packed lunches. Children's food was weighed and also photographed before and after lunchtime over three separate days.

Expected Results

There will be good correspondence between weight estimates based on photographs and direct measurement across different food types. We will be able to accurately record the nutritional content of children's food consumption using digital photography.

Current Stage of Work

Data collection has been completed on two of the three planned measurement dates.

Discussion

The measure is expected to provide a valid nutritional assessment of children's consumption suited to busy dining environments. We next plan to use it to establish whether increase in fruit and vegetable consumption results in displacement of foods high in fat, salt and sugar following a healthy eating intervention (the Food Dudes).

Poster Presentation Abstracts

Biopsychosocial model: a new perspective in the development of a clinical personality test

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Mental and personality disorders are linked to different functioning disabilities. Objective was to develop such a clinical personality test, which would merge psychopathology and functioning into one integrative model. Based on the DSM-V criteria and ICF domains: Body functions; Activities & Participation and Environmental factors an initial item pool were developed.

A content validity of more than 786 initial items were evaluated by 11 experts and 710 items were selected to the further analysis in the clinical group (N = 400) and non-clinical group (N = 400). After signing an informed consent form participants filled out a set of 5 other measures (M.I.N.I., WHODAS, DASS, demographical questionnaire), which will be used for the analysis of the criterion validity of the new test. Now we are in the middle of the data gathering process.

It is expected that based on the same item pool it is possible to develop DSM-V based scales and psychometrically based functional scales linked with the ICF. A combined analysis of psychopathology and functioning is promising and will be useful in many assessment contexts.

Poster Presentation Abstracts

Psychometric quality of the Extended CaSUN- NL, information needs from the cancer aftercare guide study

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Background

Unmet information needs increase emotional distress for cancer survivors and subsequently hamper patients' adjustment to their illness. The Cancer Survivor Unmet Needs measure (CaSUN) is a self-reported instrument by Hodgkinson et al. to assess survivors' reported care needs. The Extended CaSUN-NL entailed the original items plus items related to work and lifestyle. Validity of both will be described.

Methods

Survivors (N=255, aged >18; mean age 60.6 years, female 69%; breast cancer 59%) came from 8 hospitals. CaSUNNL was applied twice (six-week interval, 92.9% retest response) and cross-sectional analyses (e.g. factor analyses, associations with MAC, HADS, QLQ-C30) were conducted.

Findings

Respondents reported 8 (5 unmet/3 met) needs on average. Factor analyses revealed 5 factors. Total needs related significantly with MAC $r=.50$, HADS anxiety $r=.55$, HADS depression $r=.52$, global health (QoL) $r=-.54$ and age $r=-.25$. Test-retest correlations were low ($<.15$); internal consistency values were high ($\alpha's >.93$).

Discussion

The CaSUN-NL appears a useful tool to investigate information needs among cancer survivors.

Poster Presentation Abstracts

Adaptation and validation of the Tunisian version of the Brief COPE Scale

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Introduction

The coping strategies used by an individual to control, reduce or tolerate aversive situations are fundamental in understanding the psychological functioning.

Objective

To translate and validate into Arabic the Brief Cope (Carver, 1989; Muller & Spitz, 2003) to Tunisian Arabic population.

Methodology

We applied to Brief Cope the translation/ back translation procedure that was carried out by bilingual professional translators. Then a committee of experts reviewed the translations to make the necessary cultural adaptations.

For pre-testing, a sample of n=34 completed the questionnaire in order to test for misunderstanding and acceptability of questions. For divergent validity, we used the WHOQOL-Brief (Baumann & col, 2009).

Results

Factor analysis with Varimax rotation revealed that the translated and adapted scale has satisfactory psychometric qualities. The internal consistency of the 14 dimensions assessed by Cronbach's alpha coefficient were between $\alpha = .63$ and $\alpha = .94$. Expected divergent validity results suggested good construct validity.

Conclusion

The preliminary Arabic version of the Brief cope presents satisfactory psychometric qualities. Other studies are underway for creating new dimensions as dramatization and rumination.

Symposium

Using N-of-1 methodology to study or change health-related behaviour

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²Columbia University, United States

Aim

N-of-1 methodology can be used to investigate intra-individual changes in health-related behaviour. This symposium aims to bring together individuals with an interest in N-of-1 methodology to share experiences of applying N-of-1 methods to study or change health-related behaviour. The symposium aims to discuss some of the key issues pertinent to N-of-1 methodology including different N-of-1 designs and methods of analysis. The symposium aims to encourage the application of N-of-1 methodology in health psychology research and the discussion will inform the future conduct and analysis of N-of-1 studies.

Rationale

N-of-1 methodology is increasingly attracting attention among researchers and is emerging as a viable research method in health psychology research. There are several advantages of using N-of-1 methodology: N-of-1 studies can help to advance our knowledge and understanding about the process of behaviour change within individuals. Also, N-of-1 studies can identify the predictors of behaviour unique to the individual and this information can be used to develop highly personalised behaviour change interventions which may be more effective. Despite interest in the methodology there remains some uncertainty in regards to issues including, but not limited to, appropriate statistical analysis techniques and generalisability.

Summary

The symposium will highlight the key features and advantages of N-of-1 methodology and will include examples of empirical studies. The findings from observational and experimental N-of-1 studies (i.e. AB design, RCT design) which have tested behavioural theory and interventions within individuals will be presented. The presentations will cover a range of methods of analysis. Discussion will focus on areas which currently lack clarity and consensus in regards to the application of N-of-1 methodology in health psychology research.

Symposium Abstracts

Addressing new health psychology research questions using idiographic Methods

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Background

Idiographic methods (n-of-1) like Time Series Analysis (TSA) focus on time-dependent variation within single subjects or units. Idiographic Methods can address research questions that nomothetic, or grouplevel methods, cannot. However, both content researchers and methodologists often focus on the types of research questions and the interpretation of results that reflect the focus of nomothetic methods.

Methods

This paper will describe five alternative areas of research. (a) TSA provides an estimate of the autocorrelation and autocorrelations can answer important questions about the dependent variable generating function. (b) Ignoring the autocorrelation structure can result in inaccurate tests of significance and effect size estimates. (c) TSA can provide critical information about the pattern of change over time. (d) Each person or unit represents a separate study which shifts the focus to replication across units. (e) The focus of generalization is to other contexts or occasions rather than to general populations.

Findings

Published examples will be provided that illustrate each of the five areas.

Discussion

Idiographic methods can address new research questions and return the focus to the individual rather than the group.

Symposium Abstracts

Changes in physical activity patterns after retirement within individuals: a series of n-of-1 natural experiments

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²University of Cambridge, United Kingdom

Background

Physical activity (PA) trajectories after retirement, and the determinants thereof, are likely to differ considerably between individuals.

Methods

A series of n-of-1 studies were conducted with 7 participants approaching retirement. PA, measured by tri-axial accelerometry, and ecological momentary assessments of sleep, mood, tiredness, time pressure, stress, pain, as well as theory-based measures including intention, perceived control and priority for engaging in PA, were collected daily for a period of 4-6 months. The study period included time before and after a participant's retirement date. Additional personalised variables were included as potential predictors of PA. Data were analysed using time series ARIMA models.

Findings

PA trajectories differed considerably between participants; a significant increase or decrease in PA level after retirement was seen in some participants but no change in others. The predictors of daily PA differed between participants.

Conclusions

The direction, magnitude and predictors of PA change vary considerably between individuals. Nof-1 methods can further understanding about individual patterns of behaviour. The predictors of behaviour unique to the individual can be identified which can help to inform personalised behaviour change interventions.

Symposium Abstracts

Predicting walking in osteoarthritis: a series of n-of-1 studies with individually-tailored interventions

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Background

This study compares a biomedical, a psychological, and an integrated model of activity and activity limitations to predict walking within individuals with osteoarthritis. The effectiveness of a walking intervention is also tested.

Methods

Diary methods were used to assess impairment (pain, pain-on-movement, joint stiffness), cognitions (intention, self-efficacy, perceived controllability) and walking (pedometer stepcount) in four individuals with osteoarthritis twice-daily over 12 weeks. An AB intervention design was used with an individually-tailored walking intervention delivered at six weeks. Simulation modelling analysis tested cross-correlations and differences between baseline and intervention phase means. Multiple regression analyses examined the predictive ability of models.

Findings

Cognitions were better, more consistent within-individual predictors of walking than impairment. The intervention did not increase walking in any participant. The integrated and psychological models, which recognise a role for cognitions in predicting behaviour, accounted for substantially more variance in walking than the biomedical model.

Discussion

Despite lack of evidence for the intervention, data suggest that interventions in osteoarthritis that address cognitions are likely to be more effective than those that address impairment only. Further withinindividual investigation is warranted.

Symposium Abstracts

Differential responses to interventions targeting physical activity compared to sedentary time: a randomized n-of-1 design

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Background

Physical activity and time spent being sedentary predict glucose control in type 2 diabetes. This study aimed to investigate how individuals respond to interventions targeting reduced sedentary time (ST) or increased bouts of physical activity (PA).

Methods

Using an n-of-1 RCT design, seven participants wore an accelerometer measuring PA for 6 months that delivered randomly-allocated prompts on alternate days; either to improve PA, reduce ST or no prompt. The design facilitated testing differential intervention effects within each individual. No prompts were delivered on days subsequent to receiving either PA or ST prompts, to examine carry-over effects. Bootstrapped time series analyses were used to assess the within-participant effect of each type of prompt over time, and to explore carry-over effects.

Findings

Each participants varied in response to the PA and ST interventions. Carry-over effects were observed across all participants after both types of interventions.

Discussion

Distinct within-participant responses to PA and ST interventions further highlights the need to understand how best to tailor behaviour change interventions. N-of-1 RCTs provide a robust means to explore tailoring, though carry-over effects pose challenges.

Symposium

Alternative views on how self-control shapes health behavior

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²UNSW Australia, Australia

³Curtin University, Australia

Aims

The symposium aims to bring together recent research that addresses how self-control affects health behaviour and health outcomes. Drawing on different theoretical approaches and investigating different health issues, the presentations offer novel insights into the working mechanisms of self-control. The symposium is expected to further stimulate the lively scholarly debate about this topical issue, with a specific focus on advancing a health psychology perspective.

Rationale

A large body of research confirms that self-control is an important predictor of people's health and wellbeing. While there is much evidence of the beneficial impacts of self-control on health behavior, the underlying mechanisms are less well understood and researched. Recently more research is being undertaken testing established and novel theorizing. Importantly, while effortful control over one's behavior has long been regarded as the key to achieving self-regulatory success, emerging insights suggest that successful self-control can also be achieved through effortless strategies that make it easier to deal with temptations. Bringing together different pieces of the intriguing 'self-control puzzle' will contribute importantly to our understanding of health behavior change.

Summary

The symposium encompasses four presentations, followed by an expert-led discussion, each scrutinizing and/or challenging traditional views on how self-control influences behavior. Specifically, the symposium included presentations of studies showing that a) the relation between self-control and health behavior performance is mediated by high self-control individuals' lower aversion toward these behaviors. Relatedly, intriguing work employing advanced mouse-tracking technology shows that b) people with high self-control experience less conflict when confronted with temptations. In addition to these insights into high self-control, research is presented that c) demonstrates how states of low self-control can be used to facilitate health behavior. A study of the prospective impact of self-control finds that, contrary to conventional theorizing, d) self-control reflects rather than shapes motivation and volition.

Symposium Abstracts

Easier done than said: people with high self-control feel less aversive to health behaviors

F. Kroese¹, M. Gillebaart¹

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Background

Individuals with high self-control are healthier, happier, and generally more successful in life. It is typically implied that these people perform better (e.g., eating fruits instead of chocolate, studying instead of partying) because of their ability to inhibit hedonic impulses. Offering an alternative view, we propose that people with high self-control may perform better on goal-directed behaviors simply because they feel less aversive toward these behaviors than people with low self-control.

Methods

Trait self-control, aversion toward healthy eating and study behavior, and performance of these behaviors were assessed in a cross-sectional study (N = 116). Mediation analyses were performed using bootstrapping.

Findings

Self-control was positively related to healthy eating and studying. Both relationships were mediated by respondents' aversion toward the respective behaviors: individuals with high self-control reported less aversion, which was in turn related to better performance.

Discussion

Findings contribute to emerging novel perspectives on self-control, suggesting that self-control success may not merely be explained by effortful inhibition of impulses, but rather be supported by effortless self-regulation processes that make it easier to behave in line with long-term goals.

Symposium Abstracts

Trait self-control and healthy/unhealthy food choices: the role of response Conflict

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Background

Self-control refers to inhibiting impulsive, unhealthy behaviors and initiating healthy, desired behaviors. While self-control is essential in health and well-being, self-control success remains somewhat of a mystery. Differences in response conflict (e.g., candy vs. health) could be how high trait self-controllers achieve self-control success.

Methods

Self-control was assessed through self-report. Study 1 (N=140 online participants) consisted of self-reports of conflict about healthy and unhealthy foods. Study 2 (N=115 university students) employed an implicit measure of response conflict. While participants moved healthy/unhealthy food pictures to positive/negative categories, their computer mouse movements were recorded. These movements reflected extent and course of the response conflict.

Finding

High trait self-controllers self-reported less conflict about healthy and unhealthy foods. Study 2 revealed that although response conflict was present for both high and low trait self-controllers, high self-controllers identified and resolved conflicts faster than low self-controllers.

Discussion

Trait self-control is not associated with differences in the presence or size of the response conflict per se, but the process of solving the response conflict is more efficient for high trait self-controllers.

Symposium Abstracts

When less is more – Using scarcity heuristics to promote healthy choices when self-control is low

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Background

Working with the increased tendency for heuristic-based thinking in low SC conditions, we predict a supply scarcity heuristic would be effective in promoting healthy choices for individuals low in SC, and that a demand scarcity heuristic would be even more influential.

Methods

While participants made trade-off choices from healthy-unhealthy food product pairs, a scarcity heuristic was introduced to promote the healthy options. In Study 1, 67 participants self-reported SC levels and chose from product pairs with (vs. without) a supply scarcity heuristic. Study 2 (N = 165) experimentally manipulated SC (high vs. low), and compared the effects of supply scarcity vs. demand scarcity.

Findings

While a supply scarcity heuristic successfully promoted more healthy choices for participants low in SC (Study 1), a demand scarcity showcased to be most effective (Study 2).

Discussion

Contrasting the traditional view that low SC as a vice, current research demonstrates that SC could facilitate health behavior. The finding that a demand scarcity heuristic was more influential also suggests that low SC may involve both an enhanced reward-orientation and an increased tendency to conform to descriptive norms.

Symposium Abstracts

How does self-control shape health behaviour? Disentangling the interplay with motivational and volitional processes

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Background

An emerging body of research addresses how dispositional self-control promotes individuals' health. This study examines if general and specific self-control are independent of, engender, mediate or moderate motivational and volitional processes related to condom use.

Methods

A three-wave online study was conducted among 400 gay men. Time-lag logistic regression analyses were undertaken to predict condom use at wave 3. General self-control (Tangney et al., 2004; 10 items, $\alpha=.74$), sexual self-control (Exner et al., 1992; 9 items, $\alpha=.77$), intention (4 items, $\alpha=.89$), willingness (22 items, $\alpha=.95$), habit (10 items, $\alpha=.94$), and planning (4 items, $\alpha=.86$) measured at wave 1 or 2 were included, as appropriate to test particular hypotheses.

Findings

General self-control did not influence condom use or its associations with motivational or volitional processes. Sexual self-control promoted condom use and mediated associations with motivational and volitional processes.

Discussion

We found no effects of general self-control and effects of sexual self-control did not support theorizing of self-control as enabling resource. Findings underscore the importance of prospective population studies investigating how self-control influences health behaviours.

Symposium

Principles of implementation behavior research in European health psychology: increasing the impact of health interventions

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²TNO innovation for life, Netherlands

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Update on research in implementation of health interventions

Make European Health Psychologist aware of importance of implementation research

Build up network of European Health Psychologists dealing with implementation issues

Provide tools to perform implementation research

Research in European Health Psychology mainly focuses on the principles of individual health behavior and health interventions. However, the even so important research on principles of actual implementation of these health interventions is running far behind as compared to the work of our colleagues in the USA. With this symposium, we add to the principles of behavior change theme of the conference by focusing on implementation behavior to further increase the impact on health.

Although many health promotion interventions have been developed, only a fraction is implemented in practice as intended. Since this also accounts for interventions that proved efficacious, it is fair to conclude that proven effectiveness is a necessary but insufficient condition for reaching any public health impact. Research on processes of health education implementation is thus very important but often lacking in the planning of these innovations. With this symposium we want to pay attention to this issue by presenting research on the implementation of innovations in a range of different settings (schools, youth care, community, public health), using different methods (quantitative and qualitative). VanLieshout presents work showing how implementation research adds to interpretation of an outcome evaluation in the field of youth care. Gugglberger follows with a study on the antecedents of school health promotion implementation. VanderKleij shows that determinants of the implementation of a child obesity reduction intervention differ at different community levels. Guldbbrandsson's work focuses on higher order processes of decision making about the adoption and implementation in public health policy making. In the end, Paulussen will present an evidencebased framework for evaluating implementation of innovations.

Symposium Abstracts

Make a Move: Implementation of a Dutch sexual offending prevention program in residential youth care

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Background

A program to prevent sexual harassment among boys in residential youth care was developed and implemented by trainers of a Dutch sexual health organization. A detailed effect and process evaluation was set up to test for program effectiveness as well as degree of implementation.

Methods

Effectiveness of the program was tested in a cluster RCT with pre and posttest measurements of (antecedents of) sexual offensive behavior among 177 boys. Diaries and semi-structured interviews with trainers (N = 7) were used to collect data focusing on (factors influencing) completeness and fidelity of program implementation.

Findings

Multilevel analysis with Bonferroni correction showed no significant effects of the program on outcome measures (p 's > .03). Program content, organizational constraints, the boys' problematic behavior and the trainers' lack of skills all contributed to a low level of completeness and fidelity in program implementation.

Discussion

Data collected on program implementation greatly contributed to the interpretation of the research findings and provided a rich body of information on how to improve future implementation of health programs in youth care.

Symposium Abstracts

Investigating implementation and implementation practices of school health promotion in Austria

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Background

Implementation of health psychology and health promotion interventions is a complex process, influenced by a multitude of factors, which we still know little about. This presentation will introduce a multiplecase study within the field of school health promotion, which investigated how (and why) schools implement health promotion – focussing specifically on hindering and supporting factors during implementation.

Methods

Set within a mixed method case-study design, this presentation draws on findings from in-depth interviews (n=22), 9 group discussions (n=49), and 14 overt observations conducted in three schools. Data was analysed thematically and hermeneutically.

Findings

The presentation will focus on factors that can support or hinder implementation of health interventions in schools on two levels: 1) Intervention level: e.g., providers of the intervention, number of people involved, duration and frequency of the intervention; 2) organisation level: e.g., culture, leadership, participation.

Discussion

Paying attention to the process of implementation helps to see different reasons why schools implement interventions differently than expected. Implementation research is an important perspective with great added value for studies of health interventions.

Symposium Abstracts

Implementing complex community interventions targeting childhood obesity: importance of tailoring and an ecological system approach

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Background

The aetiology of childhood obesity is embedded in the interaction between the child and the social and physical context. Numerous Complex Community Interventions to address Childhood Obesity (CCIOs) have been developed. So far, insight into the critical conditions for implementation of such programmes is scarce.

Methods

We conducted a longitudinal, mixed-method multiple case study on the implementation of a CCIO in the Netherlands. Not only degree and determinants of programme implementation were assessed, but also processes of intersectoral collaboration and network development that were expected to be important for preserving a sustainable change in the prevention of childhood obesity.

Findings

Determinants operating at distinct system levels appeared to affect programme implementation and appeared to a great extent specific per sector and the stage of innovation. Also degree of collaboration and network development appeared to affect programme implementation.

Discussion

In order to anticipate implementation failures of CCIOs, strategies should account for a diversity of determinants and should be tailored to specific sectors and stages of innovation.

Symposium Abstracts

The DECIDE framework – a tool for implementation adapted to the public health field in Sweden

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Background

The DECIDE (Developing and Evaluating Communication Strategies to Support Informed Decisions and Practice Based on Evidence) framework aims to facilitate decision making and to improve dissemination and implementation of recommendations in the health care and public health sector. The aim of this study was to investigate if the DECIDE framework is applicable in the public health field in Sweden.

Methods

The DECIDE framework was presented and discussed in interviews with stakeholders and governmental organisations and tested in stakeholder panels. Content analyses were performed.

Findings

The informants were positive to the DECIDE framework. However, two criteria regarding individual autonomy and method sustainability were felt to be missing. Importance of the composition of the DECIDE stakeholder panel was highlighted, as was the significant role of the chair.

Discussion

The international DECIDE health system and public health evidence to recommendation framework might be useful as a tool for dissemination and implementation of recommendations in the public health field in Sweden. Important questions for further research are whether these findings are suitable for other public health topics and in other public health settings.

Symposium Abstracts

Measuring Instrument for Determinants of Innovations (MIDI)

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²Utrecht University, Netherlands

Background

From 2002, TNO developed a list of 60 potential relevant determinants of innovation implementation. These factors were based on a review of empirical studies, Delphi studies among experts and some original empirical studies in the Netherlands.

Methods

Meta-analyses of 8 empirical studies on the implementation of preventive innovations in Dutch youth health care and schools. Each study was based on the initial framework of 60 determinants. Data were combined into one set. Missings were replaced by plausible values using multiple imputation. Reduction and operationalization of constructs was reached by univariate and multivariate statistics and by consultation of 22 experts.

Findings

The final MIDI consists of 29 self-report determinants, which can be clustered as characteristics of (a) the innovation, (b) the intended user, (c) the organisation, and (d) the social-political context. Preferred operationalization and manual are present.

Discussion

Can we progress in program implementation planning by the application of a generic assessment tool like MIDI? Is it desirable and feasible to disseminate MIDI in a way that researchers share data for meta-analyses in order to gradually improve and validate the instrument?

Symposium

Psychosocial aspects of women's reproductive health-related issues around the world

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Aim

This symposium highlights the importance of studying how women cope with and regulate different reproductive health matters, within their sociocultural context. We wish to present how women's cultural background and personal dispositions affect the way they deal with these health issues and show how different complementary research methods help better understand women's perceptions, emotions and choices regarding their and their daughters' reproductive health.

Rationale

Reproductive health matters such as infertility, cervical cancer and childbirth concern women across the globe. The decision-making processes and their subjective experience of these matters could affect their physical and emotional health in the short and long term. These issues could have significant social, financial, policy making implications and lead to health disparities.

Summary

Growing evidence suggests that a special focus on women's health psychology is needed. In addition to differences in general health issues, women deal with challenges emerging from the specifics of their bodies and the construction of their gendered social roles. The symposium will present five studies that demonstrate how the sociocultural and personal levels relate to the way women cope with reproductive health matters. The first study used focus groups of Malaysian mothers to better understand what could help promote use of the HPV vaccine. The second study used quantitative and qualitative research methods to explore Romanian women's perceptions related to participation in cervical cancer prevention programs. The third study was a quantitative longitudinal study that researched how normalization helps Israeli women undergoing infertility treatments maintain their quality of life. The fourth study used qualitative techniques to analyze discourses around new reproductive technologies in online Bulgarian sources. The fifth study was a quantitative prospective study that explored how basic beliefs about childbirth and fear of childbirth relate to planned and unplanned modes of delivery in Israeli parturients.

Symposium Abstracts

Factors which influence decision making about HPV vaccination: A study of Malaysian mothers

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¹Perdana University, Malaysia

Background

The objective of this study was to examine the structural, cultural and psychosocial factors which influence decision making in relation to HPV vaccination among Malaysian mothers.

Methods

Four focus group discussions involving a total of 25 mothers were conducted. The three main Malaysian ethnic groups were represented (Malay, Chinese and Indian) as were mothers of daughters who had and had not been vaccinated. Data was transcribed and translated and analyzed using NVivo.

Findings

Results revealed that mothers actively seek additional information about vaccination and that they are the primary decision makers (fathers and daughters themselves are rarely consulted). A major theme which emerged was questioning of the age at which to vaccinate and possible long term side-effects. Free provision of the vaccination in public schools was important.

Discussion

While the majority of mothers actively seek information about HPV vaccination and consent for their daughters to be vaccinated through the schools programme they have concerns about this. Providing an otherwise expensive vaccination free through the schools causes many mothers to override their concerns.

Symposium Abstracts

Understanding sub-optimal cervical cancer prevention programs uptake of Romanian women

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Background

Participation in cervical cancer prevention programs, including Pap and HPV screening and HPV vaccine acceptance, is crucial for reducing the incidence of cervical cancer. This paper aims to describe the structural, cultural, social and individual barriers to cervical cancer prevention among Romanian women.

Methods

A mixed method design was used: in-depth interviews, focus-groups, discussion forums, media reports, and quantitative surveys to assess knowledge, beliefs, attitudes, and behavior related to Pap test and HPV vaccine. Content and thematic analysis was performed on qualitative data, and regression analysis was used to identify predictors of screening intention and behavior.

Results have revealed limited knowledge or confusion over the efficiency of Pap test and HPV vaccine, fears of side effects, reduced cervical cancer risk perception. Systemic barriers have a direct influence on the screening behaviour and this is partially mediated by perceived control and social norms.

Discussion

Findings suggest a need to increase public health literacy in relation to primary and secondary cervical cancer prevention, as well as structural changes to insure equal access of all women to prevention programs.

Symposium Abstracts

Normalization as a strategy for maintaining quality of life among women undergoing infertility treatments

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Background

We aimed to develop the concept and a measure of normalization (maintaining normal routine and feeling 'normal') in the context of a long-lasting medical condition and investigate infertility patients' efforts to achieve normalization and their associations with quality of life (QoL).

Methods

At the clinic, 180 women undergoing infertility treatment filled in questionnaires assessing normalization-related coping strategies, QoL, and psychological adjustment (distress, wellbeing). Eight months later, 55 women conceived; 55 women who had not conceived completed a second questionnaire.

Findings

At baseline, normalization was related to higher QoL and better adjustment. Structural equations modeling showed that QoL was impaired mainly among women who felt different than others, compared and blamed themselves. Over time, normalization was overall unrelated to conception or to changes in adjustment yet was protective against increases in distress among women who already had a child.

Discussion

Infertility is highly stressful in a pronatal culture like Israel. It requires treatment yet is not disabling. Patients who manage to maintain normal routines and not feel different than other people their age may experience better QoL and psychological adjustment.

Symposium Abstracts

New reproductive technologies and women's identities in infertility: Analysis of on-line sources in Bulgaria

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Background

This paper aims to highlight local discourses of new reproductive technologies (NRT) and practices, implemented by women in Bulgaria, and their relevance to women's identity construction.

Methods

Data includes personal stories of NRT treatments provided on public on-line discussions of infertility. Data is downloaded from the period of 2010-2015 from selected forums and analyzed through a discourse analytic approach using Atlas.ti software.

Findings

We identify the following discourses regarding NRTs and women's identity in the context of infertility: Infertility as a biological deviation easily corrected by technology; Women as proactive and informed consumers; Success through hope, persistence and not giving up; Women sharing their experience openly in order to help others; Adoration of the "baby doctors".

Discussion

When compared with discourses identified in our work from 2000-2010, we see shifts in discourses surrounding infertility, technology and consumerism of infertility treatments. The wide accessibility and insurance coverage of NRTs has shifted meanings and discourses of infertility for Bulgarian women from those associated with stigma, shame and an identity of defectiveness, to a proactive and pragmatic identity empowered by technology.

Symposium Abstracts

Perceptions of birth and planned and unplanned modes of delivery

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²Maccabi Health services, Israel

Background

In the modern world women's perceptions of birth are shaped by culture, myths and abundant information. Although birth has been medicalized, women can take part in the decision-making process regarding how and where to birth. The current study investigates how perceptions of birth relate to birth choices and mode of delivery.

Method

850 Israeli parturients were asked to fill in questionnaires measuring beliefs about birth as a medical or natural process, fear of birth (FoB) and planned birth choices. 6 weeks postpartum actual mode of delivery and birth satisfaction were assessed.

Findings

Stronger beliefs about birth as a natural process were related to less FoB and more natural birth choices, such as homebirth and analgesia-free birth. Stronger beliefs about birth as a medical process were related to more FoB, more medical birth choices, such as use of epidural and more unplanned modes of delivery such as assisted vaginal delivery and emergency cesarean section.

Discussion

Perceptions of birth are the basic building blocks that shape women's birth choices. Understanding them could improve psychological and medical interventions and outcomes.

Symposium

Changing the behaviour of health professionals: challenges in evidence-based approaches to implementation intervention research

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Rationale

Implementation interventions are designed to change clinical practice behaviour and improve the uptake of evidence into practice (French et al., 2012). To date, implementation interventions targeting health professional behaviour change have had limited and varied effects. Challenges abound with this type of research. This year's EHPS conference, focusing on 'Principles of Behaviour Change in Health and Illness', provides a timely opportunity to reflect on challenges in this area of research and flag priority issues to improve future research quality.

Aims

- To showcase, and share lessons learned from, research across Europe targeting health professional behaviour change at varying stages of intervention development and testing
- To identify key challenges of implementing evidence-based approaches to target health professional behaviour change
- To outline methodological considerations and future directions in implementation intervention research

Summary

The symposium will consist of four oral presentations outlining implementation intervention research at different stages of the process: Gerry Molloy's presentation which focuses on understanding general practitioners' views about prescribing contraception; Molly Byrne's presentation will focus on moving from an understanding of provision of sexual counselling as a component of hospital cardiac rehabilitation to intervention development; Natalie Gould's presentation will focus on the challenge of specifying the 'who' in a multi-level clinical context, using the example of audit and feedback of blood transfusion practice. Marie Johnston will focus on the evidence of current behaviours and cognitions that justify implementation of a theory and evidence-based intervention being trialled to improve clinicians' management of diabetes. Ronan O Carroll will pull together common threads from the presentations to discuss some shared methodological considerations and highlight future directions for research.

Symposium Abstracts

General practitioners support of adherence to and uptake of prescription contraception: An exploratory study

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Background

Improving adherence to contraception requires an understanding of general practitioners (GPs) views of adherence and uptake. In this study we explored GPs perspectives on this aspect of prescription contraception.

Method

A qualitative study was carried out, which involved individual interviews with 18 purposively sampled GPs. Data were analysed using thematic analysis.

Findings

GPs believed that adherence to the contraceptive pill (OCP) was good for most across the life course. This assumption was often based on the notion of `individual responsibility`, and minimum interaction between the GP and service user on the issues of adherence, post first consultation. GPs were more familiar with prescribing the OCP than the long acting reversible methods (LARCs) and therefore continue to prescribe the OCP more frequently. Barriers to supporting adherence included awareness of the problem, time constraints and costs to the practice for prescribing LARCs. Furthermore, not all GPs provided LARCs due to inadequate training and potential deskilling.

Discussion

It is necessary to address GP awareness, contraception training, skill maintenance, costs and time constraints to support adherence to and uptake of prescription contraception.

Symposium Abstracts

From evidence base to intervention specification: Example of a sexual counselling intervention in cardiac rehabilitation

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Background

There are few published examples of studies which have taken a systematic approach to developing implementation interventions. We present the development of the CHARMS [Cardiac Health and Relationship Management Study] intervention to improve provision of sexual assessment and counselling in hospital cardiac rehabilitation.

Methods

Sixty general practitioners, 61 cardiac rehabilitation staff and 382 cardiac patients were surveyed about provision of sexual counselling in health services. We conducted one-to-one and focus group interviews with key stakeholders [cardiac rehabilitation staff (n=14), patients/service users (n=13) and general practitioners (n=9)] to model intervention components.

Findings

Staff reported lacking awareness, knowledge and confidence in addressing sexual issues and wanted more training and specific guidelines. Patients reported that they would like more opportunity to discuss sexual issues with health professionals, but were reluctant to initiate discussions. Intervention components include: (1) staff training on current clinical guidelines, (2) structured patient sexual assessment and counselling session during cardiac rehabilitation, (3) organisational measures in cardiac rehabilitation to raise awareness of sexual issues.

Discussion

Our intervention development work was informed by a comprehensive theoretical assessment of the behavioural problem.

Symposium Abstracts

Specifying the 'who' in multi-level clinical contexts: potential challenges for intervention development

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Background

Designing behaviour change interventions requires clear specification of the target action and target person (i.e. whose behaviour needs to change). This study aims to illustrate the challenge of achieving this when developing organisational level interventions, such as audit and feedback, for complex clinical contexts.

Methods

Semi-structured interviews with healthcare professionals (HCPs) involved in blood transfusion explored current feedback processes within four purposively sampled hospitals. Data were extracted on the different types of HCPs involved in transfusion, their role in responding to feedback, and pathways for disseminating feedback in hospitals.

Findings

25 HCPs were interviewed. In all hospitals, responding to feedback involved HCPs at multiple organisational levels. The hospital transfusion team were the core group at the first point of responding to feedback. Pathways for disseminating feedback through organisational levels (nurses, managers, consultants, junior doctors) varied across hospitals.

Discussion

The target people were part of complex, multi-level networks within hospitals, posing challenges for designing interventions. Findings suggest that interventions to support change in transfusion practice should be tailored to organisational levels.

Symposium Abstracts

Theory and evidence for an intervention to improve clinicians' diabetes care: the IDEA trial

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Background

Evidence suggests that care delivered to patients with diabetes might be improved by intervention to change the behaviour of physicians and nurses. Prior to trialling a dual process theory- and evidence-based intervention, this study aimed to identify whether clinician behaviours and theoretical predictors show room for improvement.

Methods

Questionnaires were sent to clinicians in 44 primary care practices, addressing performance of six separate clinician behaviours involving prescribing, advising and examining for diabetes management, and cognitions about these behaviours.

Findings

Questionnaires were completed by 219 clinicians (67% response rate). For all six behaviours, clinicians reported performance was less than 100% of patients (range 54.9% for prescribing to 82.3% for foot examination). All except foot examination had mean scores < 5 (7-point scale) for self-efficacy, coping-planning or automaticity.

Discussion

There was room for improvement in all behaviours and all cognitions theorised to determine the behaviours (especially self-efficacy, coping-planning and automaticity). Therefore an intervention designed to change these behaviours by targeting the investigated predictors has the potential to be effective and is currently being evaluated.

Symposium

The influence of coping and coping beliefs on smoking behaviors and urge to Smoke

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Aims

Dr. Harilaos Papachristou examined whether test anxiety, coping with stress, and their interactions predicted smoking quantity in students and found that test anxiety predicted more smoking during exams when combined with specific maladaptive coping styles. Dr. Bradley Collins examined the moderating effect of gender on the relationship between laboratory-induced negative affect (frustration) and smoking urges and found that frustration appears to increase smoking urges more among men than women. Ms. Elena Charalambous assessed the factor structure of the Greek version of the Smoking Consequences Questionnaire (SCQ) and its association with coping styles in an effort to identify the degree to which young smokers use cigarettes as a means of coping. Dr. Jason Robinson will introduce the Coping with the Urge to Smoke Inventory (CUSI), a novel measure of coping with smoking urges that better predicts smoking cessation outcome than simply measuring smoking urges.

Rationale

Smoking is the leading preventable cause of premature adult mortality in developed countries. Negative affect and craving have strong influences on smoking behavior. Understanding how smokers cope with negative affect and craving may lead to targeted interventions that reduce smoking behavior in individuals with poor coping skills and maladaptive coping beliefs.

Summary

This symposium will demonstrate that the ability to cope with negative affect and craving, the beliefs one has about nicotine's effects on coping, and one's gender may be more influential on smoking behavior than affective state alone.

Symposium Abstracts

Associations between test anxiety and smoking during exam stress

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This longitudinal study, examined whether Test Anxiety (TA), coping, and their interactions predict smoking quantity. University of Cyprus students were assessed at two time points separated by 3 months, Time 1 (T1, N 166) and Time 2 (T2, N=117). T1 was an exam-free period, while T2 occurred during finals. At T1, participants were administered the Revised Test Anxiety Scale and the Brief-COPE. Number of cigarettes smoked on a typical day was measured at both times. At T1, coping through Expression of Negative Feelings and Denial were positively and negatively associated with cigarettes smoked, respectively. At both times, there was a significant interaction between TA and Behavioural Disengagement coping: For people high in Behavioral Disengagement, higher TA was associated with more cigarettes. At T2, TA additionally interacted with Support coping: Among participants low in Support seeking, higher TA was linked to heavier smoking than lower TA. It appears that TA alone does not increase risk for heavier smoking during exam stress among students. However, TA predicts more smoking during exams when combined with specific maladaptive coping styles.

Symposium Abstracts

Differential gender effects on state frustration and urge to smoke among college regular smokers

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Smoking craving is impacted by the presence of environmental, social and internal cues associated with smoking (Cepeda-Benito & Tiffany, 1996). Research experiments usually enrolling adults as part of smoking cessation studies (Britt et al., 2001, Morissette et al., 2005), present both self-reported and physiological increases in craving when confronted with smoking related cues such as laboratory induced stress (Niaura et al., 2002, Conklin & Tiffany, 2001). This study aimed to examine the impact of a laboratory induced negative affective task (PASAT task) on smoking cravings among a sample of college student smokers and examined the possible moderating role of gender on state frustration and urge to smoke. Forty-three participants (M age = 21.03, SD = 1.67; 32 female) underwent a stress and frustration induction procedure (PASAT, Lejuez, Kahler & Brown, 2003) while their physiological reactions (e.g. skin conductance, heart rate) and subjective responses (e.g. SUDS ratings, Questionnaire of Smoking Urges, PANAS) were monitored. Results suggest that even though women report higher frustration with the task, frustration appears to be a more important catalyst to smoking urge among men than women.

Symposium Abstracts

Smoking expectancies: psychometric properties of the Greek SCQ and its relation to coping strategies

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This study examined the factor structure of the Greek version of a short form of Smoking Consequences Questionnaire (SCQ-19 items) and the relationship between smoking outcome expectancies and coping with negative affect. 217 smokers from a community sample in Cyprus (126 women; age range: 17-41 years old) completed a set of questionnaires including the SCQ, Brief COPE, Anxiety Sensitivity Index, Acceptance and Action Questionnaire and Fagerstrom Test of Nicotine Dependence. Results of factor analysis provided support for the four-factor structure (Negative Reinforcement, Negative Consequences, Positive Reinforcement, and Appetite Control) of SCQ, indicating good internal reliability within each factor. Significant positive correlations were found between the factors: Negative Reinforcement, Appetite Control and Positive Reinforcement. Multiple regression analyses indicated that expectancies of negative consequences from smoking were the only significant predictor of nicotine dependence level, while anxiety sensitivity and avoidant coping significantly predicted expectancies of negative reinforcement from smoking. These results provide additional evidence to further research on the function of smoking as a negative reinforcer, specifically as a way to cope with negative affective states (e.g. stress and anxiety).

Symposium Abstracts

Measuring coping with smoking urges better predicts smoking cessation outcome than measuring smoking urges alone

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Background

Despite the ubiquity of this nicotine withdrawal symptom, the urge to smoke is poorly associated with smoking behavior. Measuring success at coping with smoking urges may be more informative. Here, we developed the Coping with the Urge to Smoke Inventory (CUSI) and validated it on smoking and withdrawal behavior.

Methods

We collected CUSI, smoking behavior, and withdrawal data from adult smokers (n=1016) enrolled in smoking cessation randomized clinical trials. We used factor analytic techniques to construct the CUSI, and validated it on measures of smoking behavior and withdrawal collected out to 1 year after quitting.

Findings

Psychometric analysis of the CUSI indicated a 2-factor model, which we named the Resolve and Resign scales. The CUSI scales demonstrated construct validity when compared with measures of smoking urge, nicotine dependence, and affect. In terms of predictive validity, the CUSI Resign scale better predicted relapse than did a measure of smoking urges.

Discussion

The CUSI is a valid and reliable measure of coping with smoking urges that better predicts smoking cessation outcome than simply measuring smoking urges.

Oral Presentation Abstracts

Substance abuse among youth: knowledge and attitudes among medical Professionals

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Background

Substance abuse at a younger age can have serious health consequences in later adulthood. The main aims of this Swiss study were to provide an overview of substance abuse among children and youth up till the age of 16 and to collect assessments of medical professionals regarding the prevalence of these problems in a medical context and their willingness and ability for intervention.

Methods

The study comprised an online questionnaire survey of 1'200 Swiss medical professionals, 916 medical doctors and 284 nurses. Role security and therapeutic commitment were measured using an adjusted version of the SAAPPQ.

Findings

Substance abuse is most frequently reported of by school physicians and pediatricians, less by General Practitioners. Regression analysis suggests that both role security and therapeutic commitment are influenced by frequency of contact ($B = 1.79$, $p < .001$), and medical context (pediatric vs. non-pediatric) ($B = 1.11$, $p < .05$).

Conclusion

Medical professionals feel responsible but could benefit from different kinds of support including postgraduate training to identify risk groups, to use special instruments and to apply systematic procedures.

Oral Presentation Abstracts

Motivations to care and health motivations: a qualitative study exploring the experience of family caregivers

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Background

The COM-B system adapted to family caregivers analyses health capability through capabilities, opportunities, and motivations. Focusing on motivations, this study investigated the motivations to be a family caregiver and the motivations to maintain one's own health.

Methods

Semi-structured interviews were conducted with 14 caregivers of stroke victims (France: n=8; Luxembourg:n=6; 50% male; age 63.6 resources to attain optimal health. Verbatims about their motivations to care for their relative and their motivation to maintain their own health were opencoded. Items were built and validated by consensus with an expert group.

Findings

Motivations to care for a relative included the sense of duty, fear of guilt or deception, perceived need and feelings like love. The motivations to maintain personal health were intrinsic (self-; family-oriented), related to caregiving, and extrinsic (induced by relatives and material needs) and encompass amotivation.

Conclusion

It is relevant to integrate feelings, anticipated regret, moral norms and health value to the COM-B system adapted to family caregivers. Identifying their contribution to health capability will help orient psycho-educational interventions implementation.

Oral Presentation Abstracts

Improving self-regulation of patients with chronic diseases: A Common Sense Model-based intervention

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Background

With the aim of providing medical information tailored to patients' specific information needs, we developed a CSM-based intervention that targeted patients' perceptions about illness and treatment and individual coping behaviors and their appraisal.

Methods

Following the development of measures (1) and refinement of the intervention concept in expert groups (2) the intervention was implemented and evaluated in four rehabilitation centers (3). Formative evaluation was based on a sample of N=105 patients and N=58 health professionals and used a combined qualitative and quantitative approach.

Findings

The evaluation provided evidence on the feasibility and acceptance of the intervention. The results indicated good treatment integrity and both patients and clinicians evaluated the intervention as positive in terms of promoting a patient-centered treatment. However, in-depth review of the implementation process also revealed significant barriers to implementation.

Conclusion

Corresponding to a current emphasis in health psychology, the intervention implements a strong patient-oriented approach. As the results also indicate potential for further development (e.g. consideration of implementation barriers), refining the intervention is still an objective for future research.

Oral Presentation Abstracts

Planning to be routine: automaticity as a mediator of the planning-behaviour relationship in healthcare professionals

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Background

Clinicians often have strong intentions to provide evidence-based care to people with type 2 diabetes. Intentions are an important predictor of behaviour, but do not guarantee enactment. Action planning (AP) and coping planning (CP) can help with intention enactment by creating cue-response links that promote automaticity. This study aimed to investigate whether the relationship between AP or CP and clinician behaviour operates indirectly through measures of automaticity.

Methods

Prospective correlational design with six nested sub-studies. Physicians and nurses (n = 427 from 99 UK practices) completed measures of AP, CP, and automaticity at baseline and self-reported their enactment of guideline-recommended advising, prescribing and examining behaviours 12 months later. We used bootstrapped mediation analyses.

Findings

Eleven of the 12 analyses showed either a full or partial mediation effect. AP operated indirectly on behaviour via automaticity for five of the six behaviours and CP for all six clinician behaviours.

Conclusion

The mechanism of automaticity creation inherent to planning was supported across six different behaviours and suggests that planning may be an effective strategy for promoting habitual behaviour in clinicians.

Oral Presentation Abstracts

Implications of stroke for caregiver outcomes: findings from the ASPIRE-S study

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Background

Informal caregivers are vital to long-term care of stroke survivors. However, caregivers may not receive supports they require from hospitals and community health services, with implications for carer outcomes. This study examined caregiver well-being and satisfaction with services in the context of stroke.

Methods

Data was collected as part of the ASPIRE-S study, a prospective study of secondary prevention and rehabilitation 6-months post-stroke. Carer assessment included measuring demographics, satisfaction with care, psychological distress and vulnerability, using established measures. Logistic regression analyses were performed using STATA 12.

Findings

Analyses from 162 carers showed dissatisfaction (37.9%) with community and hospital services, and notable levels of anxiety (31.3%) and depressive symptoms (18.8%). Caregiver anxiety was predicted by stroke survivor anxiety (OR=3.47, 95% CI 1.35-8.93), depression (OR=5.17, 95% CI 1.83-14.58) and cognitive impairment (OR 2.35, 95% CI 1.00-5.31). Caregiver depression was predicted by stroke survivor anxiety (OR=4.41, 95% CI 1.53-12.72), and depression (OR=6.91, 95% CI 2.26-21.17).

Conclusion

Findings indicate that caregiver and stroke survivor well-being are interdependent. Implementation of early interventions directed at psychological factors are likely to reduce risk of negative outcomes.

Oral Presentation Abstracts

Development of a CHW-led intervention for non-western immigrants in the Netherlands with cardiometabolic risk

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Background

A Community Health Worker (CHW)-led intervention was developed aimed at improving life-style behaviours of non-western immigrants in the Netherlands with a high risk for cardiometabolic disease. Methods: An intervention mapping approach was applied to develop the intervention. This included (1) meta-analyses extracting effective modes of delivery and content of existing CHW-led interventions, (2) qualitative research assessing personal, cultural, and environmental determinants of healthy lifestyles, (3) expert- and target group meetings discussing the intervention content and delivery mode. Program (performance) objectives were matched with behaviour change techniques (BCTs).

Methods

Findings resulted in a CHW-led intervention consisting of a home visit to explore life- and health goals and to map social support, telephone coaching, and four group sessions that especially focused on skills-related BCTs, such as goal setting, barrier identification, self-monitoring, and mobilizing social support. The content included surface and deep structure strategies to address culture-specific needs.

Results

Findings resulted in a CHW-led intervention consisting of a home visit to explore life- and health goals and to map social support, telephone coaching, and four group sessions that especially focused on skills-related BCTs, such as goal setting, barrier identification, self-monitoring, and mobilizing social support. The content included surface and deep structure strategies to address culture-specific needs.

Discussion

Intervention Mapping provided a useful framework to design a culturally sensitive CHW-led intervention for non-western immigrants in the Netherlands.

Oral Presentation Abstracts

Does acculturation orientation relate with doctor-immigrant patient relationships and immigrant health literacy?

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Background

Immigrants often have worse health than non-immigrants. Acculturation orientation (AO) - adaptation to a new culture or maintenance of a previous culture - can have an impact on immigrants' interactions with healthcare professionals, and their health literacy, both of which are important for the immigrant's health.

Methods

N=170 immigrant patients (M=54.38 years, SD=17.94, Range=23-96, 74.3% female) recruited from a hospital in Canada, participated in a paper & pencil questionnaire assessing AOs, different aspects of health literacy, and quality of life. Analyses were performed using SPSS 20.

Findings

AOs were associated with patients' perceived expectations of their doctor ($r=.56/.24/.32$). AO was associated with health literacy: adaptation was positively associated with stage of change of physical activity ($F(5,62)=2.945$ $p<0.05$), as well as physical activity and nutrition motivation self-efficacy ($r=.20/.17$); and less adaptation was negatively associated with physical activity motivation and maintenance self-efficacy ($r=.19/.18$). Improved integration was associated with increased quality of life ($r=.21$).

Conclusion

AOs should be considered when investigating ways to improve immigrant health, and when designing interventions to improve doctor-immigrant patient relationships and immigrant health literacy.

Oral Presentation Abstracts

Loneliness predicts dementia-caregiver burden better than extent, nature and length of caregiving or support service-use

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Background

Caring for a spouse with dementia can lead to high levels of burden and stress, which may ultimately compromise caregivers' psychological health and quality of life. We examined contributing factors to caregiver burden to inform the development of targeted caregiver interventions.

Methods

226 spousal dementia caregivers completed standardised psychological (depression, anxiety, self-efficacy), social (loneliness, social isolation), caregiving (length and extent of caregiving, support service-use) and burden measures, as well as measures of care-recipient symptom severity and disability, as part of a longitudinal study on caregiver cognitive functioning.

Findings

Burden was not related to length, nature or extent of caregiving, or support service-use. Depression, self-efficacy for symptom management, and symptom-related distress significantly explained 55% of the variation in caregiver burden; however, emotional loneliness and social isolation made additional unique contributions ($\Delta R^2=.03$).

Conclusion

Higher levels of burden are primarily related to caregivers' psychological wellbeing, social isolation and loneliness, rather than level of disability, length or extent of caregiving. Interventions need to address the impact of dementia care on loneliness and social isolation to protect caregivers from the stresses associated with caring.

Oral Presentation Abstracts

Quality of life and self-efficacy: a meta-analysis and systematic review of cardiac interventions

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Background

The aim of the study was to meta-analyse the associations between quality of life (QoL) and self-efficacy (SE) among cardiovascular patients and to review the effects of cardiac rehabilitation interventions on QoL and SE

Methods

Using methodology of systematic review we retrieved 26 studies which met the inclusion criteria. Original trials included 4390 participants. Studies which provided information about the associations between QoL and SE (n= 9) were included into meta-analysis and 17 studies reporting on cardiac rehabilitation interventions were systematically reviewed.

Findings

Results of meta-analysis indicated significant moderate association between QoL and SE. 29% out of 17 interventions referred to cardiac rehabilitation and education, 24% to self-efficacy for exercise, and 47% to selfmanagement for self-care. In 9 trials significant improvement for QoL and SE was found, whereas in 8 trials the effect occurred only for either SE or QOL indicators.

Conclusion

Enhancing SE may improve QoL among cardiac patients. Cardiac interventions directed at improving SE for exercise and self-management for self-care were effective at increasing either QoL or SE.

Oral Presentation Abstracts

Grief reactions and impact of patient death on pediatric oncologists

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Background

To examine pediatric oncologists' grief reactions to patient death, and the impact patient death has on their personal and professional lives.

Methods

The grounded theory method was used. Twenty-one Canadian pediatric oncologists at different stages of their career were recruited and interviewed about their experiences with patient death.

Findings

Oncologists reported a range of reactions to patient death including sadness, crying, sleep loss, exhaustion, and a sense of personal loss. They also reported self-questioning, guilt, feelings of failure and helplessness. The impact of these deaths had consequences that ranged from irritability at home, feeling disconnected from family members and friends, and becoming more desensitized towards death, to gaining a greater and more appreciative perspective on life. Professional impacts included concern about turnover or burnout at work and improving holistic care as a result of patient deaths.

Conclusion

Grief over patient death is a robust part of the pediatric oncology workplace and has an impacts on pediatric oncologist's personal and professional lives. Interventions that focus on how to help oncologists deal with these reactions are needed

Oral Presentation Abstracts

The impact of carer stress on institutionalisation of care recipients: systematic review and meta-analysis

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Background

In the caregiving literature there is a belief that higher levels of carer stress could undermine the sustainability of homecare. However, this has not been systematically analysed. Therefore we systematically reviewed and meta-analysed the prospective association between carer stress and subsequent institutionalisation of older carerecipients.

Methods

Systematic literature search of prospective studies measuring carer stress at baseline and institutionalisation at follow-up. The standardised mean difference between stressed and non-stressed carers was the primary measure of effect.

Findings

The search yielded 6,963 articles. After exclusions 54 papers were analysed. The meta-analysis found that carer stress has a negligible effect on institutionalisation of care recipients (SMD=.05, 95%CI=.04-.07; I²=79.2%; p<.001). The sensitivity analysis found that estimates reduce over time, with larger and better quality studies.

Conclusion

It appears that over time larger and better quality studies found less of an effect of carer stress on institutionalisation. The results suggest a need to re-examine the belief that higher levels of carer stress could undermine the sustainability of homecare.

Oral Presentation Abstracts

Systematic adaptation of an evidence-based, computer-tailored physical activity intervention for cancer patients using Intervention Mapping

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Background

Despite positive effects of physical activity (PA) for colorectal and prostate cancer patients, most do not meet PA guidelines and report a need for information and counseling. An evidence-based computer-tailored PA intervention for older adults is systematically adapted to fit the patients' needs.

Methods

Adaptations were made using Intervention Mapping, a protocol for developing and adapting evidence-based programs. Interviews with patients (N=29) and cancer professionals (N=15), a pretest of new materials (29 patients, 10 professionals) and a small-scale pilot (N=18) were conducted.

Findings

Interviews provided input for change objectives, intervention methods, program components and delivery channel. New materials were valued 5.6 to 7.7 (scale 1-10). Professionals reviewed the advice safe and feasible. Materials were further adapted according to patients' and professionals' suggestions. Pilot participants increased their PA days from 4.1 to 5.6 ($p=.018$) and appreciated OncoActive+ with an 8.6 (SD=.924).

Conclusion

The systematic adaptation of an evidence-based intervention, with involvement of patients and professionals, resulted in a suitable intervention for the new population. Currently, a randomized-controlled effectiveness trial is conducted.

Oral Presentation Abstracts

Do patients and physicians think the same about communication in cancer care?

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Health communication needs to lead patients' needs and expectancies. This research gives the floor to patients with severe cancer and to their physicians. It aims to define the ingredients of effective doctor–patient communication.

Semi-structured interviews were conducted with 15 patients with severe cancer (Mean age = 54.25 years, SD = 15.25, 62.5% female) and 15 physicians (Mean age = 48.4 years, SD = 11.72, 60% female). We conducted content analyses with IramuteqR software.

Results indicate that patients expected basic and interpersonal abilities from their physician. For patients it seems important to recognize their individual specificities and to build a relationship as a partnership. The patients seemed to privilege concrete behaviors, which could be viewed as an indirect source of support. Physicians expressed their difficulty to give clear and comprehensive information, to identify patients' needs and to build a relationship in a consultation. The organizational constraints and personal resources were highlighted to explain those difficulties.

The different expectations and experiences so far collected suggested how a physician, according to the patients, can pursue a specific communicative in cancer care.

Oral Presentation Abstracts

Emotional connection to help couples cope with cancer: the role of verbal and nonverbal exchanges

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Background

Cancer is a significant stressful situation that could lead to emotional disruption for patient and its partner. Intimacy, defined as a process in which one person expresses feelings to another and results of the other's response to this revelation (Reis & Shaver, 1988), has identified as a potentially factor of psychological adjustment to cancer (Manne et al., 2004). The quality of couple interactions (e.g. self-disclosure, physical proximity) could improve intimacy and determine their adjustment to cancer. This research aims to determine the impact of emotional connection between partners on their 1) perception of intimacy and 2) adjustment to digestive cancer.

Methods

Twenty couples interacted about an emotionally significant time during the course of cancer after completing self-report questionnaires (intimacy, couples adjustment) and behavioural analysis of emotional connection was conducted

Findings

Preliminary results indicate that indices of emotional connection (gaze, posture, touch, verbal exchanges) have a positive impact on intimacy and partners' adjustment to cancer.

Discussio

Results may have clinical implications for couple's intervention in order to improve relationship closeness and couples' quality of life during the disease.

Oral Presentation Abstracts

Play seriously: systematic review of effectiveness of active video games in physical rehabilitation

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Background

“Gamification” in health promotion has obvious potential for development. The study aim was to assess physical functioning, adherence to treatment and the use of empirically-based behavioral change strategies in serious gaming for physical rehabilitation.

Methods

A literature search was performed on ISI WOS, PubMed, PsychInfo, Cochrane, and Health Game Research Portal. The criteria for inclusion were: age >18; physical rehabilitation (following stroke/injury/other impairing incident, targeting limb and/or muscle training), met at least two games features, measures of adherence were present. The primary outcome were measures of mobility-related physical functioning. Game contents were coded following the health behavior change taxonomy. Secondary outcomes included adherence and satisfaction with treatment.

Findings

The results were inconclusive regarding long-term efficiency (also in terms of adherence) of serious games in physical rehabilitation, due to variability of quality and outcomes of studies. Most of them are not empirically or theoretically driven so there is little insight on the change mechanisms incurred by active gaming.

Discussion

Serious games may be promising outlets for interventions if they are based on solid empirical research and change mechanisms are pinpointed.

Oral Presentation Abstracts

'Do no harm': has 30 years of health psychology helped or hindered the nations' health?

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Background

Health Psychology aims to improve patient health outcomes through research and practice.

Methods

This paper will present a bibliometric analysis of a number of data bases (media data, academic journals, citation indices, NHS data) to explore the association between 4 research areas in health psychology and key health outcomes. In particular, it will focus on research exploring help seeking and early warning signs, adherence to medication, the doctor patient relationship and behaviour change.

Results

The paper will argue that although we aim to promote health, many of our research perspectives may do harm by flooding the health care system with the worried well (who are seeking help for trivial problems), creating side effects to medication (by promoting adherence to drugs with poor NNTs), eradicating the placebo effect (by encouraging patient centred care) and not changing behaviour (by creating a one size fixes all approach).

Discussion

It will conclude that health psychology researchers need to maintain a critical eye on the wider context of health care in order to avoid violating the first ethical principle of 'do no harm'.

Oral Presentation Abstracts

What is in a nudge: putting the psychology back in nudges

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Background

Nudges are broadly defined as subtle rearrangements of a choice context that gently suggest the preferred choice. Their increasing popularity has attracted attention from researchers, policy makers, and practitioners alike. However, many debates have been raised, principally regarding the ethics of using nudges in the public health domain and regarding the clarity of the original definition, with multiple amendments and types of categorizations suggested. Moreover, most suggestions have mainly focused on the ethical aspects of nudges and ignored its psychological components.

Discussion

Elaborating on the original definition, we provide a blueprint of six elements that can be used to define, categorize, and design nudging interventions: (1) a deliberate intention to influence, (2) exploiting an automatic and non-conscious processing, (3) freedom of choice, (4) goal dependence and motivation independence, (5) approach orientation, and (6) choice specificity. This empirical and psychological definition of nudges has important implications for researchers and practitioners, and also provides insights into many debates surrounding nudges, like ethical appropriateness, effectiveness, and public approval.

Oral Presentation Abstracts

Failure of vaccination messages: how mothers perceive vaccination messages and make decisions about child vaccination

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Background

In 2014 Nyhan et al. tested effectiveness of messages designed to reduce vaccine misperceptions and increase vaccination rates for measles-mumps-rubella (MMR) and found that none of four interventions increased parental intent to vaccinate future child. Objective of present study was to apply qualitative methods to explore how parents perceive such messages.

Methods

8 Focus Groups with students and mothers of small children (N=76). Participants were presented with interventions used in original study. They were asked to assign values of trustworthiness to those messages and provide reasons, followed by group discussion. Data were transcribed, coded and analyzed using Thematic Analysis.

Findings

Findings of original study were confirmed: attempts to persuade parents to vaccinate their children were not considered trustworthy. We argue that personal narratives and persuasive texts work differently when delivered by anti-vaccination promoters and by authorities.

Discussion

Vaccination messages delivered from position of authority lack persuasive power. When authorities try to emulate persuasive techniques employed by alternative and social media effect may be counterproductive. New approaches to vaccination messages are needed to offset effective anti-vaccination narratives. (VEGA Grant 2/0154/13)

Oral Presentation Abstracts

A new way to explore illness experience: the case of an uncertain illness

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The aim of this presentation is to illustrate a new way to use qualitative methods in order to explore illness experiences, to differentiate among them, and to propose personalized interventions. A study of an uncertain illness, in this case, eye floaters, is presented as an exemplification. Patients suffering from eye floaters perceive flashes and spots in their perceptive field, but they do not necessary have a pathology of the eye. Eye examination and echography, individual semi-structured interviews, and dependency grids were carried out with 11 Italian patients. A grounded theory analysis showed that the illness experience depended on the perception of the disease, the personal explanation, the solutions tried, the trust placed in medicine, self-construction, and the dispersion of dependency. On the basis of these categories, cases that had similar experiences were grouped, and four ways of experiencing illness were identified: possibility, focus on illness, denial and guilt. To each experience corresponded a different health status and a different intervention possibility. Further studies using the same methodology highlighted the usefulness of the presented method in rethinking illness experience.

Oral Presentation Abstracts

Capital & province quality of life: social support and psychological well-being Predictors

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Background

The objective of this study was to investigate the relationship among Perceived Social Support, Psychological Well-being and QoL sub-domains in capital and province inhabitants. The aim was to explore the dimensions predicting QoL in the two populations, looking for differences.

Methods

A between groups questionnaire design was used. The sample consisted of 109 healthy Greek adults from Eastern Central Greece. The groups were divided into Capital and Province, with age range 19-81. The measures employed included World Health Organization Brief Quality of Life Assessment Scale, Depression Anxiety Stress Scale and Multidimensional Scale of Perceived Social Support.

Findings

Multiple Regression analyses revealed that for the Capital group, Significant Others predict total QoL and Stress predicts the Psychological & Physiological domains. For the Province group, Significant Others & Family predict Social Relations and Depression predicts the Psychological & Physiological domains as well as Overall Health & total QoL.

Discussion:

The findings revealed community size differences involved in QoL. These suggest the need for further research and tailored interventions, targeted at particular groups even when considered to belong to the same population.

Oral Presentation Abstracts

Uniqueness seeking leads to greater risk-taking

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Background

Previous studies have found a correlation between risk-taking and need for uniqueness (NFU). However, there is currently no experimental evidence for such a relation. We report two studies showing that NFU leads to greater risk-taking.

Methods

In both studies we measured need for uniqueness. Participants were confronted with a risk-taking task (Slovic, 1966). Prior to the risk-taking task, they were randomly assigned to three experimental conditions where the risk-taking norm (low, moderate, high) was manipulated by giving false information about the majority's decision. In study 2, prior to the risk-taking task participants received fictitious test feedback labeling them as either different vs. similar to the majority of previous participants.

Findings

Study 1 (N = 299) showed that NFU predicts a significant increase in willingness to take more risk than the induced norm (controlled for sensation seeking). Study 2 (N = 295) replicated this result and showed that induced similarity to others increases risk-taking by participants with high NFU.

Discussion:

This study provides the first experimental evidence for a causal link between need for uniqueness and risk-taking.

Oral Presentation Abstracts

Does prenatal stress increase the risk for childhood asthma?

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The prevalence of childhood asthma has dramatically risen in the past decade and already exceeds 10% in many western countries. Several studies have linked prenatal maternal stress to the development of asthma in children. Yet, these studies are correlational, confounded, do not limit the time of stress to the prenatal period and thus cannot prove causality.

The 2006 conflict between Hezbollah and Israel created a unique natural experiment that neutralized most of the potential confounding parameters and confined the time of experienced stress. In a moderately sized study (n=92), we have found that the prevalence of asthma more than tripled in children whose mothers were pregnant and lived under massive missile attack during the war (high-stress group) as compared to children whose mothers were pregnant a year before/after the war or lived in areas not under missile attack (2*2 design). In addition, birth weight, a potential mediator, was more than 300 gr lower in the high-stress group. These findings stress the importance of psychological interventions during pregnancy as prophylactic measures for asthma

Oral Presentation Abstracts

Selecting BCTs for intervention in acute coronary syndrome delay: combining systematic review and Delphi Methods

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Background

Evidence from behaviour change technique (BCT) based systematic reviews is often limited in size, homogeneity or quality. We present an example of supplementing the best available published evidence with Delphi methods to select the most promising BCTs for an intervention to reduce delay in Acute Coronary Syndrome.

Methods

Systematic review of interventions targeting pre-hospital delay in acute conditions to identify effective BCTs. Delphi consensus methods asking 11 BCT experts to rate essential techniques from BCTTv1 for intervention inclusion and to identify the theoretical mode of action.

Findings

Thirty-three identified studies were too heterogeneous to quantitatively link the 23 identified BCTs to effectiveness. Most frequently identified BCTs were 'information provision' (n=28), 'instruction provision' (n=24) and 'action planning' (n=17). BCT experts rated 'action planning', 'salience of consequences' and 'problem solving' as essential. Mapping of BCTs to theoretical constructs further informed BCT selection and theoretical coherence.

Discussion:

The specified methods overcome limitations of inconclusive review findings by combining best available evidence from the literature with theory and expert consensus evidence to ensure a systematic and transparent intervention development process.

Oral Presentation Abstracts

A fuzzy nudge for fizzy drinks

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Background

The present empirical studies test the effectiveness of a nudge aimed to reduce soda consumption. Based on the center stage effect, we hypothesized that people would choose smaller cups of soda when the small cup size was presented in the middle of a choice set (medium-small-large) rather than at the edge (small-medium-large). Additionally, health goals were taken into account, and it was expected that the nudge would only be effective for people who have the goal to be healthy.

Methods

In 2 studies participants were randomized into a nudge or a control condition and asked to select a soda cup. Health goals were assessed before participants came into the lab. Logistic regression analyses were performed to analyze the results.

Findings

Participants in the nudge conditions were significantly more likely to choose the small cup compared to those in the control conditions. The effect tended to be stronger for people with stronger health goals.

Discussion:

Simple adjustments in the presentation order of cup sizes can significantly affect unhealthy soda consumption. The influence of personal goals on effectiveness will be discussed.

Oral Presentation Abstracts

Acceptability of financial incentives for breastfeeding: thematic analysis of comments to UK online news reports

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Background

Financial incentive interventions to encourage healthy behaviours are increasingly common. Previous literature lacks an empirical grounding on whether or not incentives are acceptable and why. We sought to gain an insight into the factors related to acceptability of financial incentive interventions for health behaviours and to understand preferred formats for financial incentives.

Methods

Eight focus groups were conducted with 74 members of the UK public. Audio recordings were transcribed verbatim with thematic analysis to identify key themes.

Findings

Five themes were identified: the nature of fair exchange; effectiveness and cost-effectiveness; impact on individuals and wider society; acceptable recipients; and 'other issues'.

Discussion:

Participants were distrusting of financial incentive interventions. However, they were more likely to be deemed acceptable if they were fair to recipients, if they were closely monitored and evaluated, if they were shown to be effective and cost-effective, and if health education is also provided. Participants preferred positive rewards, and those in the format of shopping vouchers rather than cash incentives. These results highlight clear suggestions for how to design acceptable health promoting financial incentives.

Oral Presentation Abstracts

Executive functioning and working memory differences between insomnia patients and normally sleeping persons

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Background

Insomnia patients often report cognitive impairment. Diagnostic criteria for insomnia also imply the presence of neuropsychological deficits. Research, however, remains equivocal regarding this matter. The objective of this study was to investigate neuropsychological functioning in insomnia.

Methods

Thirty-six participants diagnosed with insomnia were closely matched for gender, age, years of education, and ethnicity to a control group of 36 normally sleeping community contacts. All participants completed a valid, reliable and standardized insomnia questionnaire and a neuropsychological testing battery, which included measures of executive functioning (WCST, color-word and trails subtests of the DKEFS) and working memory (Letter Number Sequencing and Digit Span subtests of the WAIS-IV).

Findings

Results pointed toward a mild executive functioning and working memory deficit in insomnia patients.

Discussion:

Results can be interpreted within the framework of “compensatory effort” and increased “mental load”. Tasks of increased “mental load” may be more suitable for revealing cognitive difficulties in insomnia. Clinical implications include establishing more refined diagnostic criteria for insomnia and offering appropriate treatment for patients in high-risk occupations, where impairment may lead to accidents and lower work productivity.

Oral Presentation Abstracts

Fatigue and associated clinical, psychological and social factors in paediatric multiple sclerosis: a systematic review

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Background

This review aimed to investigate and evaluate the evidence for associations between fatigue and clinical, psychological and social factors in children and adolescents with MS

Methods

Empirical studies that examined fatigue in relation to at least one clinical, psychological or social factor in paediatric MS were included. Studies were identified by searching online databases, hand-searching reference lists, and requesting unpublished literature from key authors. Nine studies are presented in a narrative synthesis.

Findings

Clinical factors appeared to be largely unrelated to fatigue, whereas associations between fatigue and tests of neurocognitive functioning were mixed. Findings relating to fatigue and psychiatric disorders were also mixed. However, fatigue and depressed mood consistently correlated. A small number of studies indicated an association between fatigue and reduced quality of life and school performance.

Discussion:

Fatigue is a concerning symptom of paediatric MS, yet the evidence to date does not adequately explain its causes or impact. Future research should endeavour to identify clinical and psychosocial factors associated with fatigue in paediatric MS, so that interventions targeting potentially modifiable factors of fatigue may be developed.

Oral Presentation Abstracts

Identification of behaviour change techniques (BCTs) applied in chronic illness self-management intervention: challenges and solutions

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Background

A cross-behaviour taxonomy of 93 BCTs (taxonomy v1) has been developed, providing a systematic method for specifying intervention components. This study aims to explore its applicability to chronic illness management (CIM) interventions.

Methods

Sixteen experts in CIM participated in an online survey, rating each of the 93 BCTs from taxonomy v1 in terms of perceived relevance to CIM interventions (response options: not relevant, of little relevance, moderately relevant, very relevant, don't know). A subsequent consensus panel meeting was held to discuss the applicability of taxonomy v1 to CIM.

Findings

Consensus regarding the relevance of BCTs from taxonomy v1 to CIM was not reached for 44% of BCTs. Numerous issues relating to this were raised (e.g. definitions of BCTs are directive but CIM techniques are often more collaborative, CIM techniques often target behaviour change via emotional adjustment to illness) and potential ways forward to increase relevance identified (e.g. agree CIM definition, adapt the taxonomy for CIM).

Discussion:

The development of a guide to increase the relevance of BCTs in taxonomy v1 for CIM may improve its applicability to CIM interventions.

Oral Presentation Abstracts

Affect misattribution as a learning mechanism in evaluative conditioning on alcohol cognition and intention to drink

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Alcohol cognition are acquired via two distinct but partially overlapping systems: a conscious deliberative system (reflexive) and an non-conscious associative system (impulsive). In this view, alcohol consumption is due to a failure in regulating impulses toward alcohol. Our objective is to develop an evaluative conditioning procedure impacting specifically the impulsive system, by bolstering affect misattribution.

Participants (n=137) went through a 2 (contingency awareness: inclusion vs exclusion) x2 (stimulus presentation: simultaneous vs sequential) x2 (valence of US : neutral vs negative). Implicit and explicit attitudes and behavioral intentions have been assessed after and one week after the protocol. Since affect misattribution depend on source confusability, simultaneous presentation will have a stronger effect on implicit attitudes and lead to less contingency awareness.

Results show that negative conditioning in the simultaneous condition have a stronger impact on implicit but not on explicit measures and on behavioral intention at one week. A stronger attitude parameter in the simultaneous condition has been obtained.

Relevance of dual-process models and the effectiveness of conditioning in alcohol use will be discussed.

Oral Presentation Abstracts

Introduction of 'opt-out' smoking cessation referrals in pregnancy: a qualitative evaluation of staff views

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To evaluate staff views on the implementation of an intervention involving routine carbon monoxide (CO) testing for pregnant women and 'opt-out' (whether requested or not) referrals to stop smoking services (SSS) with CO>4ppm. Interviews (n=17) with six antenatal clinic staff involved in 'opt-out' referrals at two times - before and during implementation; and five SSS staff, six-months afterwards. Data were analysed using framework analysis. Three main themes were identified: implementation; impact of referrals; future directions. Generally, staff felt referrals were less arduous to implement and better received than expected. The majority believed the intervention helped engage women motivated to quit and offered a unique chance to impart smoking cessation knowledge to hard-to-reach women, who might not otherwise contact SSS. Some improvements to the intervention were suggested. Results indicate that, with training and support, routine CO testing and 'opt-out' referrals can be successfully incorporated into the workload of antenatal and SSS staff. 'Opt-out' referrals could potentially help SSS engage hard-to-reach women and deliver consistent message about dangers of smoking in pregnancy.

Oral Presentation Abstracts

Coping mediates the relationship between personality traits and life satisfaction in patients with rheumatic diseases

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Objective

Based on Bolger and Zuckerman's (1995) framework for studying personality in the stress process, this study investigated the influence of personality on life satisfaction and the mediating role of coping in chronic patients.

Method

In a cross-sectional design, 158 patients with rheumatic diseases completed questionnaires assessing the Big-5 personality traits (BFI-10), coping (EFK) and life satisfaction (HSWBS). Data were analyzed by a complex multiple mediation analysis with the Big-5 personality traits as predictors, coping strategies as mediators and life satisfaction as outcome.

Results

The analysis revealed no direct, but a number of indirect effects of the personality traits on life satisfaction through coping. Neuroticism had a negative indirect effect on life satisfaction through less problem oriented coping and more depressive coping. Additionally, extraversion, conscientiousness and agreeableness had positive indirect effects on life satisfaction through more problem oriented coping, less depressive coping and/or seeking more social integration

Implications

Patients scoring high on neuroticism are most likely to benefit from self-management trainings as they are prone to use dysfunctional coping strategies too often and functional coping strategies too seldom.

Oral Presentation Abstracts

Psychological well-being and social status in China and Germany: testing the local-ladder effect

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Social status can be conceptualized as socioeconomic status (e.g., income, education level) or sociometric status (e.g., social network, respect, support among friends). Both forms predict subjective well-being. In the present study, the relative strength of the subjective well-being – social status relation in a sample from China and Germany is investigated.

In a Chinese (N = 313) and a German sample (N = 1,307) status (socioeconomic, sociometric), perceived living standard, and subjective well-being was assessed via self-reports.

In both samples, sociometric status was more strongly related to life satisfaction, positive affect, sense of purpose and perceived living standard than socioeconomic status. In addition, perceived living standard partly mediated the relation between sociometric status and well-being.

Overall, in both samples individuals' sociometric status matters more to their well-being than does their socioeconomic status, supporting the notion of a local-ladder effect.

Oral Presentation Abstracts

Self-determination measures as predictors of condom use self-efficacy among young South African women

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Background

Practicing safe sex remains a problem for women in South Africa and is often associated with low confidence levels to use condoms. This paper identifies correlates of condom use self-efficacy

Methods

Baseline data from a cross-sectional study conducted among young women (n = 238) from the Eastern Cape, South Africa were used. Bivariate correlations and multivariate linear regression analyses were conducted to determine the associations of self-determination theory and gender variables with self-efficacy towards condom use in general and risky situations.

Results

Findings showed positive associations for gender equality beliefs and HIV knowledge with self-efficacy in both situations. General self-efficacy was also positively associated with power balance attitudes, negative intimate partner violence beliefs, and positive growth perspective while the association with hopeless personal perspective was negative. Surprisingly, perceived social support was negatively associated with self-efficacy to use a condom in risky situations.

Conclusion

Self-determination and gender variables seem to be important sources of young women's confidence to practice safe sex. The implications of these findings for future interventions will be discussed.

Oral Presentation Abstracts

Not seeing eye-to-eye: differential reporting of chronic pain by children and their parents (PRIME C)

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Background

The Prime C study investigated the prevalence, impact and cost of chronic pain among 5 – 12 year olds in Ireland, using child self-report and parental report. Data suggests parents may underestimate and under-report extent and impact of chronic pain for their children.

Methods

A quantitative survey was used to assess location, quality and intensity of pain.

Findings

Data collected from 3113 children (54.23% female). Among parents, 4% (n=64) reported that one or more of their children had chronic pain compared to 10% of children's self-reported pain. Only 23% of children who selfreported chronic pain had a confirmatory parental report. Similarly, when parents stated that their child had chronic pain this was not reported by the child themselves in 20% of cases. Majority of these children were reported (by teachers and parents) as living with chronic, painful conditions, yet the children did not report any associated chronic pain.

Discussion

There are significant inconsistencies between children's self-report and parental reports of pain, indicating a need to further understand this mismatch of views.

Oral Presentation Abstracts

Implicit processing of symptom and illness-related information in chronic fatigue syndrome: a systematic review

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Background

Cognitive behavioural models propose that the way in which people with Chronic Fatigue Syndrome (CFS) process information, specifically how they attend to and interpret illness related information, may play an important role in symptom maintenance. This systematic review investigates whether people with CFS have implicit biases in how they process information.

Methods

Electronic databases were searched using CFS and experimental methodology search terms. Twelve studies measured attention and interpretative bias for illness related information in CFS.

Findings

The evidence for implicit biases was dependant on the methodology employed as well as the type and duration of the stimuli presented. There was preliminary evidence to suggest that people with CFS have illness related top down processing biases which affects how information is interpreted and attended to.

Discussion

A clinical implication of these findings is that such processing biases may maintain negative illness beliefs and symptoms in people with CFS. This review highlights methodological issues in experimental design and makes recommendations for future research to forge a consistent approach in implicit processing research.

Oral Presentation Abstracts

Do negative emotions affect eating? A meta-analysis

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Despite many empirical studies on emotional eating (eating in response to negative emotions), the very basic question of whether negative emotions affect eating, and in whom, remains unclear. The current meta-analysis assessed the state of knowledge concerning the effect of negative emotions on eating in the non-eating disordered population. To this end, published reports on experimental studies that investigated the causal effect of negative emotions on eating behavior in non-eating disordered participants were included ($k = 20$). The moderating impact of individual differences in restrained eaters ($k = 10$), unrestrained eaters ($k = 9$), and obese individuals ($k = 5$) was assessed. Results revealed that the general main effect of negative emotions on food intake was not significant ($d = .068$). Additionally, there was no significant effect for restrained/unrestrained eaters ($d = .219 / d = .168$), or obese participants ($d = -.101$). These findings indicate that negative emotions do not affect eating patterns in non-eating disordered samples. However, qualitatively good studies are called for in order to achieve more homogeneous effect sizes for the individual difference measures.

Oral Presentation Abstracts

An Interpretative Phenomenological Analysis on smokers' reasons for discontinued use of the e-cigarette

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Background

E-cigarette use has risen substantially in the UK in the last 10 years. Thus far, e-cigarettes have been shown to be less harmful than traditional cigarettes and initial research has shown that smokers use e-cigarettes for many reasons, though there is limited research on reasons for discontinued use. The purpose of this study was to explore smokers' experiences of using e-cigarettes including the reasons for use and discontinued use to better understand the factors that may hinder the conversion from smoking to 'vaping'.

Methods

Semi-structured interviews were conducted with six participants and the transcripts were subject to interpretative phenomenological analysis.

Findings

Findings suggest participants have internal struggles which may hinder the conversion from smoking to 'vaping'. These struggles were focused around areas such as 'Identity Conflict'; 'Low quitting self-efficacy'; 'Conflicting attitudes towards cigarettes and e-cigarettes'.

Discussion

Smokers seem to have difficulty resolving their thoughts and feelings about cigarettes and e-cigarettes which may have an impact on their continued use of the e-cigarette and thus their quitting success.

Oral Presentation Abstracts

Lifestyle factors, resources and barriers for return-to-work after time-limited pension for reduced earning capacity

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Background

Return-to-work (RTW) rates are low in people who draw a time-limited pension for reduced earning capacity (PREC) due to health issues. Studies point out that RTW intentions do not automatically result in problemsolving behavior, especially in subjects with mental disorders. This study aimed at identifying RTW-related expectations and barriers in people with physical and/or psychological challenges.

Methods

Structured, computer-assisted telephone interviews were conducted with 452 individuals receiving a PREC for on average 42 months, including questions on symptoms, social-cognitive resources, barriers, lifestyle factors and RTW-aims.

Results

Participants with predominantly psychological complaints (PSY) did not differ from participants with mostly physical illnesses (PHY) regarding their plans for RTW or social support. However, PSY were younger at PREC onset, less likely to have participated in medical rehabilitation, and reported lower work-related self-efficacy and poorer self-regulation (all $p < .01$). Both groups exhibited high lifestyle risks like physical inactivity and a high body mass index.

Discussion

Our results suggest that mental (co)morbidity is associated with fewer work-related psychological resources and different RTW expectations. These factors should be considered in RTW interventions.

Oral Presentation Abstracts

Understanding adolescent adjustment to maternal cancer

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Background

The objective of this study was to understand adolescent adjustment to maternal cancer. It also includes the maternal perspective on the adolescent's experience, an area that has received scant attention to date.

Methods

In this qualitative study ten adolescents between 14 and 19 years of age and ten mothers with cancer diagnosis in the previous two years participated in semi-structured interviews. Interviews were transcribed and analysed using thematic analysis.

Findings

Adolescent interviews identified that the experience for adolescents is not a linear process but is linked to phases of maternal illness: adjustment, treatment and after treatment. Use of varied coping strategies, conflict and role changes and benefit finding featured in the themes. Maternal interviews identified themes which included a process/developmental account of adolescent adjustment, disclosure and conserving the family.

Discussion

This study provides an important insight into adolescent adjustment to maternal cancer including difficulties, challenges and positive growth. Maternal and adolescents perspectives allow identification of similarities and discrepancies in the experience which provides information that may be used to enhance the adjustment of adolescents and their families.

Oral Presentation Abstracts

Statistical non-significance vs. practical relevance in intervention evaluation of sexuality education programs

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Measuring effectiveness of sexuality education for high-risk target populations using quantitative measures is difficult. The lack of significant results erroneously indicate a lack of effectiveness. Reasons for lack of significant results are paramount, and include participants' trouble with self-report questionnaires, scarcity of risk-behavior, and a difference between intervention-as-intended and intervention-as-realized.

In an attempt to supplement promising (yet non-significant) results of a quantitative evaluation, in-depth interviews were held with 13 participants of an group counseling intervention for girls with high-risk for sexual abuse, disease, and forced prostitution ('loverboys').

Participants who joined the group counseling voluntarily differed from those who participated involuntarily in reported effects on knowledge, intention and behavior, in that voluntary participants attributed changes in determinants and behavior to the group sessions, whereas involuntary participants did not. Involuntary participants did report changes, however.

With the results from the interviews, the effectiveness of the intervention can be better valued than with the quantitative results alone. This adds to the discussion of the use of qualitative research in effectiveness evaluation studies.

Oral Presentation Abstracts

Inhibitory self-control moderates the effect of modified implicit food evaluations on snack intake

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Background

This study examined whether inhibitory self-control moderated the effects of a modified implicit association test (IAT) on implicit evaluations of unhealthy snack food and subsequent consumption.

Methods

148 women completed a 2 (intervention condition: positive, negative) x 2 (time: pre-, post-training assessment) mixed factorial design experiment. The intervention trained participants to pair unhealthy food stimuli with either positive or negative stimuli. Measures included IATs assessing implicit unhealthy food evaluations, a tastetest assessing unhealthy snack consumption, and an inhibitory self-control scale.

Findings

Implicit evaluations of unhealthy food became more negative following the food negative pairing intervention; however, there was no corresponding change in the food positive condition. The effect of training on snack consumption was moderated by inhibitory self-control: only participants low in inhibitory self-control showed lower snack intake following the food negative training.

Discussion

Findings are consistent with dual-process models, which predict that self-control capacity renders impulses less influential on behaviour. Furthermore, they suggest that retraining implicit food evaluations could reduce unhealthy eating, particularly among individuals with low inhibitory self-control.

Oral Presentation Abstracts

Exploring factors important for a cognitive ‘turning point’ necessary for weight loss in obese adults

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Background

Weight loss is desired by many overweight and obese individuals but is very difficult to achieve and maintain. Many remain overweight or obese for years, however, medical records show that a small percentage of people in this group do achieve substantive weight loss. This study sought to explore the cognitive factors important for reaching this ‘turning point’ and achieving successful and substantial weight loss.

Methods

An explorative design was followed, using semi-structured interviews for the data collection. The sample consisted of fifteen obese NHS patients and thematic analysis was used to analyse the data.

Findings

Factors reported as important to leading to this cognitive turning point included psychological aspects particular to the individual (will power), receiving negative health news from their GP, and the meaning this information held for them (deteriorating health, possible death, and loss of control over their health).

Discussion

These results show that using shock tactics by the health professional may be helpful for some obese people in creating the cognitive shift or ‘turning point’ necessary to encourage people successfully adherence to a weight loss programme.

Oral Presentation Abstracts

The effects of laughter yoga on glycemic control in diabetes patients: a randomized controlled trial

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Background

Previous studies have shown that laughter is associated with psychological and physical health status. However, the effects of laughter yoga on psychological and physical health benefits are not elucidated. We sought to examine the effects of laughter yoga program on glycemic control and anthropometric measurements in diabetes patients.

Methods

A convenience sample of 42 patients with type 2 diabetes mellitus was randomized into laughter yoga program and control groups. The primary outcomes were changes in hemoglobin A1c (HbA1c) levels, body weight, and waist circumference between baseline and week 12 in this randomized controlled trial.

Results

Over 12 weeks, HbA1c levels improved in the laughter yoga group, but not in the control group. The mean HbA1c levels changed from 7.12% to 6.86% for the laughter yoga group ($p < 0.01$) and from 7.23% to 7.11% for the control group ($p = 0.84$). Waist circumference also tended to improve in the laughter yoga group but there were no changes in body weight in the both group.

Conclusion

Twelve weeks laughter yoga program for patients with diabetes mellitus may result in improved glycemic control.

Oral Presentation Abstracts

Commuting and psychological wellbeing in London: to walk or drive?

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The study explored the relationship between commuting modes and psychological wellbeing (PW) in 2,756 London commuters from wave two of the UK Household Longitudinal Study (2010/2011). Independent-samples t-test revealed significantly higher PW scores in outer- (M = 6.96, SD = 8.80) than inner-Londoners, M = 4.23, SD = 9.83; $t(2754) = -7.67$, $p < .001$. Chi-square tests for independence indicated significant commute differences. Comparatively, inner-Londoners reported more active ($\chi^2 [1, n = 2,756] = 31.94$, $p < .001$) and public transport ($\chi^2 [1, n = 2,756] = 52.43$, $p < .001$) travel, and lesser car use ($\chi^2 [1, n = 2,756] = 141.88$, $p < .001$). Multiple hierarchical regressions revealed that active commute (R² change = .006, F change (1, 1050) = 7.04, $p < .01$) in inner London was positively associated with PW, whilst the same is true for driving (R² change = .004, F change (1, 1524) = 6.08, $p < .05$) and public transport (R² change = .005, F change (1, 1524) = 7.24, $p < .01$) commute in out London. These findings suggest that commuters' PW could potentially be improved through commuting modifications.

Oral Presentation Abstracts

Understanding interpersonal communication: conversational valence, peer popularity, peer preference, self-persuasion, other-persuasion, and binge drinking determinants

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Background

Although research has shown that interpersonal communication about health issues influences health campaign effects, little is known about aspects that may influence these effects. In the context of binge drinking, this study investigates conversational valence, peer popularity, peer preference, self-persuasion, and other-persuasion in interpersonal communication and their effects on variables identified in the theory of planned behavior (TPB).

Methods

Undergraduate students (N = 115) participated in a two-wave study. TPB variables and peer popularity were assessed at the first wave. One month later, participants, in dyads, discussed alcohol consumption followed by an assessment of conversational valence, peer preference, and again TPB variables.

Findings

Individuals' TPB variables were influenced in line with conversational valence. For example, a positive conversational valence resulted into more positive binge drinking attitudes. It was also demonstrated that participants were not only influenced by others but also by themselves. An interaction effect between peer popularity and conversation valence was revealed. Peer preference yielded no significant effects.

Discussion

These findings suggest that conversational valence, other-persuasion, self-persuasion, and peer popularity are relevant aspects of interpersonal communication.

Oral Presentation Abstracts

How can siblings of chronically ill or disabled children be supported?

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Background

Burdens and resources of healthy siblings of chronically ill/ disabled children have been rarely investigated; results show a decreased quality of life and a higher risk for developing mental health/ behaviour problems. The study aims to grasp the need for and what kind of support should be offered.

Methods

20 participants (10 actually adult siblings and 10 experts) were asked by using semi-structured interviews with regard to burdens and resources as well as whether and how primary-prevention interventions should be offered. Interviews were analyzed using qualitative content analysis.

Findings

Siblings reported (positive/ negative) impacts the ill child had on their lives and expressed that a group-offer would have been good at that time. It is consistently estimated that providing support is important. The experts described similar burdens, but also resources. Child-friendly teaching of coping strategies and resource-activation were described as important elements of support.

Discussion:

Results of the interviews showed that it is important to implement support for siblings of chronically ill / disabled children to offer age-appropriate education and to strengthen life skills.

Oral Presentation Abstracts

How large should a pilot study be?

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Background

Pilot studies are used to identify unforeseen problems or flaws in the procedures and instruments to be used in a subsequent larger trial. But how many participants have to be included in a pilot study in order to be reasonably sure that important problems and flaws will be detected? The aim of this paper is to present a method for sample size calculations in pilot studies.

Methods

A formula has been worked out to calculate the sample size needed to be able to identify, with a chosen level of confidence, problems that may arise with a given probability.

Findings

A simple formula that can be used to calculate the sample size needed for a pilot study. For example, if a problem exists with 5% probability in a potential study participant, the problem will almost certainly be identified (with 95% confidence) in a pilot study including 59 participants.

Discussion:

This method can be used to determine the necessary sample size so that the problem is likely to be observed at least once during the course of the pilot study.

Oral Presentation Abstracts

Identifying techniques for modifying impulsive influences on eating behaviour: a systematic review

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Background

This systematic review aimed to identify and summarise the evidence base for impulse management techniques currently being used to modify eating behaviour in both laboratory and intervention studies.

Methods

Searches were conducted in MEDLINE, PsycINFO, CINAHL, AMED, Web of Science in September 2014 for studies published in English since 1993, evaluating an intervention or technique specifically designed to manage eating-related impulses, and reporting an eating-related outcome, such as craving, weight, or food consumption.

Results

From 4623 citations identified, 94 studies were included. The range of techniques identified were categorised into post-impulse, pre- or peri-impulse, and unclear. There was evidence from RCTs, crossover, and mixed factorial studies that impulse management techniques, including inhibition training, implementation intentions, and mindfulness techniques, reduced post-treatment craving and food-intake in the short term. Evidence for maintenance of effects, and impacts on weight loss, was limited due to a lack of studies.

Conclusions

This review highlights a range of techniques for supporting changes in eating behaviour through impulse management and summarises the evidence base that may inform different intervention options.

Oral Presentation Abstracts

Is a tan worth a thousand words? Holidaymakers' perceptions and experiences about sun-protection

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Background

Little is known about how people perceive sun-protection and sun-exposure during holidays and how sun-protection messages are experienced. This study aimed to investigate perceptions of sun-related experiences and the determinants of sun-protection behaviours during holidays.

Methods

Semi-structured interviews based on the Theoretical Domains Framework were conducted with 17 respondents. Data were analysed using thematic analysis. Holidaymakers' intentions and perceptions about barriers and facilitators for sun-protection were assessed.

Findings

Respondents showed a desire to tan and attributed a high value to acquiring a tanned appearance. Harming effects of sun-exposure were universally recognized. Most respondents knew how to sun-protect, but several key barriers were identified: impact on holiday experiences, fear of social consequences, inconvenience of sun-protection and lack of environmental resources. Some self-regulatory strategies were identified by participants as facilitators (e.g. coping and facilitation planning).

Conclusions

The importance attributed to a tanned appearance seemed a strong motivator for sun-exposure amongst the holidaymakers interviewed. Suggested public health messages include highlighting the harmful effects of sunlight on appearance and the need to use other ways of achieving a tanning appearance (e.g. self-tanning).

Oral Presentation Abstracts

Why medication or tobacco consumption enhance the life satisfaction of cardiovascular patients?

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Background

While life satisfaction (LS) promotes the health of cardiovascular patients, LS may be affected by a range of primary and secondary determinants. We analysed LS and its relationships with cardiovascular risk factors and unhealthy behaviours.

Methods

In 2013, 3,632 survivors who underwent coronary angiography in 2008-2009 at the Luxembourgish National Institute of Cardiac Surgery and Cardiological Intervention (INCCI), living at home were asked to estimate, five years after, their LS [1-10] and other health-related variables. Data were analysed via multiple regression models including interaction effects.

Findings

LS of the 1,289 participants (age: 69.2 workers, had secondary education and a 36,000€ or more/year income. The interactions between hypercholesterolemia and hypertension (regression coefficient= 0.628) and with smoking (rc= 0.941) were positively related with LS, but physical inactivity was negatively associated (rc= -0.630).

Discussion:

Taking medications or maintaining tobacco consumption produces better LS than being ambivalent towards physical activity. Further research is needed to evaluate the efficacy of health interventions eliciting and promoting the behaviour change wheel based on capabilities, opportunities, and motivations.

Oral Presentation Abstracts

Health Care Climate, Posttraumatic Stress Disorder and its implications on Mothers' Attachment to their Baby

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Only a few studies focused on posttraumatic stress disorder (PTSD) following childbirth and its effect on mother-baby attachment. Existing data evidence a negative influence in mother-baby bond, resulting on inferior attachment levels in women meeting full/partial criteria for PTSD (Davies, Slade, Wright, & Stewart, 2008) and avoidant or anxious attachments (Ayers, Eagle, & Waring, 2006). The objective is to analyze the relation between perceived health care climate, mother's childbirth PTSD and post-natal attachment. In this cross-sectional study 219 mothers aged from 18-47, mostly married, with a 1-12 months child, answered PPQ-Perinatal Posttraumatic Questionnaire, MHCCQ Modified Health Care Climate Questionnaire and MPAS-Maternal Post-natal Attachment Scale. Results showed that education and health care climate predict PTSD symptoms. Age, PTSD symptoms and climate predicts mothers' attachment. We conclude that PTSD symptoms have a negative effect on mother-baby relationship, particularly for younger mothers. Due to its relevance on mother-baby future bond, further research should address other contextual and individual variables which may increase or have a buffering effect on mothers' vulnerability to PTSD.

Oral Presentation Abstracts

What can modern psychometric techniques add to health psychology research methods?

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Traditional psychometric methods have provided a useful and conventional framework of developing and evaluating self-report instruments. Nevertheless, the Classical Test Theory (CTT) underpinning traditional psychometrics is a theoretical non-testable theory comprising assumptions that are usually easily met by scale data. Therefore, utilising the CTT could potentially lead to weak conclusions regarding the psychometric properties of instruments used in patient research and subsequently contribute to type 1 and type 2 errors. Modern psychometric techniques such as the Rasch Measurement Theory (RMT) addresses all limitations of traditional psychometrics. Firstly, the RMT paradigm offers a testable model that can be utilised to verify the measurement properties of scales rigorously. Secondly, the RMT enables the development of linear interval-level measurement on the basis of ordinal-level raw data. Thirdly, within the RMT, item and person location estimates can be provided and this can lead to adaptive testing through the use of item subsets to reach measurement and fourthly, RMT enables individual-level measurement. Psychometric evaluation examples of questionnaire-based patient data are reviewed to designate the advantages of using both traditional and modern psychometric techniques.

Oral Presentation Abstracts

The effect of approach bias and inhibitory control training on behavioural food choice: an intervention

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Background

Previous studies have effectively reduced unhealthy eating by re-training either approach biases or inhibitory control. This study aimed to determine whether the combined effect of approach bias and inhibitory control training is more effective than either intervention alone.

Methods

Undergraduate women (N = 78, 18-27 years) were randomised to the conditions of a 2 (Approach bias: training, control) x 2 (Inhibitory control: training, control) experimental design. Food choice was assessed by a Behavioural Choice Task. Trait impulsivity was also measured, via self-report.

Findings

Participants in the approach bias training group showed an avoidance bias for unhealthy food, while the control group showed an approach bias. This training was more effective when combined with inhibitory control training, and training effects were more pronounced for individuals high on trait impulsivity. Training effects also translated into healthy eating behaviour, with the approach bias training group making healthier food choices when presented with healthy and unhealthy foods.

Discussion:

Results support dual-process models of health behaviour and suggest the need for a combined intervention aimed at encouraging healthy food intake.

Oral Presentation Abstracts

Generalised avoidance of lifestyle physical activity in overweight pedestrians: a review of stair usage

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Objective

Increased stair climbing is a public health target yet the overweight avoid stairs by choosing the escalator more than healthy weight pedestrians. These studies tested for generalised avoidance of stairs by overweight pedestrians.

Methods

Following inconclusive evidence in previous workplace studies, new observational data were obtained. Stair and lift choices were coded in seven buildings (N=26,941), when a lift was the alternative to stairs outdoors (N=7,433) and in two further outdoor sites where the alternative was a ramp (N=17,664).

Results

In studies reporting effects of demographics (N=197,769), the only study coding weight-status found more stair avoidance by the overweight. In follow-up observational studies, the overweight avoided both stair climbing and descent more frequently than those of healthy weight. Avoidance of stairs generalised to a choice between stairs and a ramp to ascend. In addition, female pedestrians and those carrying large bags avoided stairs more than their comparators.

Conclusions:

A generalised avoidance of stair usage occurs in overweight pedestrians when an escalator, a lift or a ramp provides an alternative.

Oral Presentation Abstracts

Gender differences in common mental disorders in Pakistan

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Aim

The study aimed at exploring the Gender Difference in Common Mental Disorders in Pakistan. Design: Within Group Research Design was used.

Method

Data was collected from 219 (M=35, F=184) participants experiencing mild and transitory medical conditions. Symptom Checklist-R (Rahman, Dawood, Rehman, Mansoor, & Ali, 2009) and GHQ-28 (Goldberg, 1978) were administered on them to identify Common Mental Disorders.

Results

Results revealed the presence of significant Gender Differences with females scoring significantly higher on the scales of Depression, Somatization, Anxiety and Low Frustration Tolerance. Overall Psychological Distress was also found to be higher in women in comparison to men. This signified that women tend to experience more Common Mental Disorders than males. In addition, men's mental well-being was significantly better than that of women. Overall this research signified a need of General Practitioners to realize and understand that Common Mental Disorders are common in individuals presenting in primary health clinics. Also there is need for timely identification of such at risk individuals so that interventions could be implemented accordingly

Key Words

Common Mental Disorders, Gender Differences

Oral Presentation Abstracts

Beneficial effects of dance in natural environments as a function of objectively measured physical engagement

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Psychological benefits of jogging or walking in natural environments have been well documented. Effects of dancing outdoors still require evidence. Using different environments, we tested how engagement in this social and accompanied by music form of activity may lead to emotional restoration. Sixty-six regular dancers participated in a salsa-solo session either indoors (dance room) or outdoors (park). Their level of restoration was assessed with selfreports of emotions and stress before and after the session. Additionally, physical engagement was measured with accelerometers. The dancers in the park felt more relaxed and calm after the salsa session, but no differences were observed in the perceived physical fatigue in two groups. However, an objectively measured engagement was much higher among the dancers in the park. Moreover, the engagement fully mediated the beneficial effect of outdoor environment on the level of restoration. Although dance is usually performed indoors, natural environments seem to amplify its merits for psychological restoration. The results encourage further research on the physical engagement as a mediator of the effect of restorative environments on people's well-being.

Oral Presentation Abstracts

Testing the effects of an alcohol and a safe sex prime on perceptions and Behaviour

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Background

Experimental manipulation of an alcohol and a safe sex prime tested for the possibility that the indirect experience of salient alcohol-related cues would influence related perceptions and behaviour without actual alcohol consumption.

Methods

A 2 (alcohol prime: alcohol words vs. no alcohol words) X 2 (safe sex-related prime: safe sex message vs. no message) between participants design was employed. Participants were 80 university students - sexually-active alcohol users. Measures included the AUDIT-C; CARE-R; sex-related alcohol expectancies; perceptions of: sexuality, sexual intent, attraction, and behaviour, and disinhibition; and a behavioural measure of proximity.

Findings

Participants exposed to only a safe sex prime rated an experimental stooge as being significantly more inhibited than participants in conditions with an alcohol prime or no prime. Results of a behavioural measure of proximity found that participants primed with an alcohol and/or a safe sex cue sat significantly closer to a potential partner than participants exposed to no prime.

Discussion

Perceptions and behaviours of sexually-active alcohol users may be influenced by alcohol and safe sex environmental stimuli.

Oral Presentation Abstracts

Early parental loss, grief counseling and maladaptive coping in adulthood

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The stress of early parental loss (loss) may increase the risk of depression, anxiety and health-related problems in adulthood. However, few studies have investigated coping in adults who have experiencing loss and utilized grief counseling (counseling). This study compares adult maladaptive coping strategies according to loss and counseling. We identified persons above 18 years, who had lost a parent before age 30, and who had received counseling at one of four major counseling centers in Denmark. Two registry-based comparisons groups were identified: bereaved adults who had not received counseling and non-bereaved adults. All participants (N=2426) completed a questionnaire including coping measured by the Brief COPE. Multivariate regression analyses adjusted for gender, age at loss, gender of parent lost, education and perceived family support were performed. Bereaved adults reported significantly higher substance use, behavioral disengagement and emotional eating compared to non-bereaved adults. Counseling participants reported significantly higher substance use and self-blame than non-participants. This study suggests higher maladaptive coping in adults who have experienced early loss, even after counseling, providing ground for further research.

Oral Presentation Abstracts

The Hospital Anxiety and Depression Scale (HADS): structurally unsound and unfixable

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The Hospital Anxiety and Depression Scale (HADS) is a widely used self-report measure for screening and assessing medical patients for anxiety and depressive symptoms. Recently, doubts were raised about highly variable factor structure, discrepant cutpoints, and inability to distinguish between anxiety and depression. To salvage large amounts of published studies and unpublished data, proposals are being made to reconceptualize the HADS as a unidimensional measure of general distress. We demonstrate that problems are intrinsic and unresolvable, due to decisions made by the original developers. The HADS was constructed with concerns about avoiding careless responding and acquiescence. Developers found a self-defeating solution in presenting respondents with overwhelming cognitive demands, posed by items that shifted from anxiety versus depression, as well as the direction and content of both items and response keys from each item to the next. These problems are hiding in plain sight. Discrepancies in structure, cutpoints, and discriminant validity reflect a high level of respondent confusion and misresponse. Much can be learned from problems of the HADS for designing valid and reliable measures consistent with more clearly defined purposes.

Oral Presentation Abstracts

Neurofeedback against subclinical binge eating in women: a randomized controlled trial with two control groups

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Background

Binge eating episodes are common phenomena among women, posing a vulnerability factor for the development of obesity and associated health problems. Especially stress and food cue confrontation elicit binge eating. Based on these factors and associated neurophysiological patterns, a cue-exposure neurofeedback (NF) protocol was developed as an intervention to reduce bingeing. Effectiveness of the ten-session NF was evaluated in comparison to a mental imagery treatment (MI) and a waitlist group (WL).

Methods

Female participants (N=75) were randomly assigned to NF, MI, or WL, reporting binge eating episodes, stress, dietary and somatic self-efficacy before and after the treatment or waiting period. Completer data (NF/MI: each n=18; WL: n=21) were analyzed with ANCOVAs and post-hoc tests.

Findings

Only NF resulted in a significant reduction of bingeing and an enhancement of dietary self-efficacy compared to the WL ($g_s > .65$). Still, both interventions yielded beneficial effects on perceived stress and somatic self-efficacy, accompanied by high acceptance ratings.

Discussion

Due to specific effectiveness, neurofeedback may serve as a promising approach to reduce bingeing and prevent negative health effects associated with this eating disturbance.

Oral Presentation Abstracts

Centering Pregnancy group care or individual care? Examining factors of prenatal care decision

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Background

CenteringPregnancy (CP) is interactive group-based prenatal care that had positive effects on perinatal outcomes. However, some women decide to quit or refuse to participate in CP. This study examines factors important in deciding to participate, reject or quit CP.

Methods

The sample consisted of 196 pregnant women that were invited to participate in CP. At 28-weeks pregnancy they were asked whether they participated and reasons for non-participation. At 12-weeks pregnancy, demographic, psychosocial, and lifestyle factors were asked.

Results

At 28-weeks pregnancy 33% started CP and 67% did not. Of CP-participants, 6 women quitted. Compared to CP-rejecters, stress was higher among both CP-participants and CP-quitters (respectively, $p = .031$; $p = .026$). Active and problem focused coping was stronger among CP-participants than CP-rejecters (respectively, $p = .013$, $p = .029$). Reasons for non-participation differed between CP-rejecters and CP-quitters ($p = .011$). CP-rejecters often disliked a group (39%), while CP-quitters were more varied.

Conclusion

Coping behavior and exposure to stress appear to be important in the decision regarding CP-participation and need attention when motivating pregnant women in starting with CP.

Oral Presentation Abstracts

Menopausal symptoms, vitality, body image, exercise behaviour and wellbeing: a mixed methods study

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Background

The aim was to examine the relationships between menopausal symptoms, appearance evaluation, exercise behaviour, and wellbeing (subjective vitality, life satisfaction and self-esteem) using a mixed methods approach.

Methods

A nationwide survey was carried out with women experiencing the menopausal transition (n=271; mean age=53) analysed using Structural Equation Modeling. A selection (n=12) were then interviewed about their experiences, which were analysed in context of the model.

Findings

Menopausal symptoms were directly associated with appearance but not exercise. However, as hypothesised, when mediated by subjective vitality, menopausal symptoms were related to both appearance and exercise. Exercise was associated with appearance but was not directly related to self-esteem or life satisfaction. However, there was an indirect effect as appearance was associated with self-esteem and life satisfaction.

Discussion

The qualitative findings provided contextual detail into the relationships, and other factors that may influence the associations in the model. In addition to the variables included in the model, perceived control, ability to cope, and motivations to exercise may be important to consider. Therefore we recommend that these constructs are included to further develop this model.

Oral Presentation Abstracts

Dyadic adjustment, psychological distress and parenting alliance during transition to parenthood

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Background

Transition to parenthood is a developmental period of the family life cycle that strongly impacts marital relationship. The purpose of this investigation was to study marital change during transition to parenthood and to examine the role of antenatal psychological distress and parenting alliance.

Methods

56 participants (28 couples) completed questionnaires on 3rd trimester of pregnancy and two months after childbirth, measuring: dyadic (marital) adjustment, psychological distress and parenting alliance.

Findings

In our sample, dyadic adjustment improved throughout transition to parenthood ($t=-3.11$; $p=.003$). Linear regression showed that antenatal dyadic adjustment ($\beta=.66$, $p<.001$) and psychological distress ($\beta=-.22$; $p=.027$) had an important effect on postnatal dyadic adjustment ($R^2_{\text{adjust}}=.55$).

Furthermore, parenting alliance was a mediator in the relation between antenatal and postnatal dyadic adjustment. Therefore, the more developed the parenting alliance, the higher is the dyadic adjustment after childbirth.

Discussion

Antenatal dyadic adjustment had an important impact on marital relationship and parenting after childbirth. Understanding the factors underlying marital change would allow to adequately support couples throughout transition to parenthood, promoting family health.

Oral Presentation Abstracts

Improving health promotion related to fetal alcohol spectrum disorder (FASD), the need for a framework

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Background

Alcohol use during pregnancy is one of the leading preventable causes of intellectual or developmental disability. This situation clearly warrants intervention. The complexity of intervention development concerning FASD is overlooked in health promotion. Evidence-based health promotion intervention aimed at the field of FASD is a complex process. The field of FASD needs to use systematic approaches for adapting evidence based behavioural interventions (Bartholomew, et al. 2011). Intervention Mapping provides planners with a systematic method for designing interventions.

Methods

The IM framework is a six step systematic approach for designing, implementing and evaluating health promotion programmes. This framework was used in the present study.

Results

The needs assessment or situation analysis of the problem concerning FASD will be presented.

Conclusion

Alcohol use during pregnancy is an important health problem. The Intervention Mapping framework is useful as a blueprint for designing, implementing, and evaluating an intervention model for FASD. The first step in this process showed that current data remains insufficient of the existence of the problem and what it entails.

Oral Presentation Abstracts

Improving comprehension in informed consent for medical procedures through dynamic testing

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Multimedia presentations have been developed in an effort to standardize informed consent for surgical procedures and to reduce the burden on health care systems and providers. The goal of this proof-of concept study was to determine whether dynamic testing of a patient education video on thyroidectomy would lead to greater knowledge. Students at a New York City university were recruited to participate. The 20-minute video was divided into four segments of 5 minutes each. Participants (n=120) were randomly assigned to one of three conditions: 1) dynamic testing (after the segment) + feedback (correct vs. incorrect answers); 2) dynamic testing only; and 3) control (no dynamic testing). At the completion of all four segments, participants completed a knowledge posttest. Participants in the testing + feedback group scored higher on the posttest compared with those in the testing only or control group ($p < .01$). Controls found the experience more mentally taxing than the testing + feedback group ($p < .05$). Providing dynamic feedback with educational health videos can reduce mental fatigue and enhance short-term retention of risk information.

Oral Presentation Abstracts

The protective properties of self-concept organisation in response to discrimination and general life stress

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Extensive evidence shows that discrimination can negatively affect health, however less is known about the factors which may ameliorate this effect. As discrimination is a stressor, resiliency research from the general stress literature can inform our understanding of these factors. This study sought to replicate findings that self-concept organisation buffers the effects of general life stress on wellbeing and to test whether the same would be observed for discrimination-related stress. A cross-sectional design (n = 229) was used to assess the relationships between discrimination, general stress, depression and self-organisation variables (self-complexity, compartmentalisation, differential importance, self-concept clarity). Regression analyses showed two moderation effects, with high self-clarity reducing the negative effects of both forms of stress on depression and low compartmentalisation reducing the negative effects of general life stress. Compartmentalisation was associated with more depression regardless of stress level. The potential of self-organisation to inform behaviour change in therapeutic interventions will be discussed using an Acceptance and Commitment Therapy perspective. This will include the use of values-based exercises to help foster self-clarity and acceptance-based strategies to reduce compartmentalisation.

Oral Presentation Abstracts

Sexual risk reduction interventions in young people: a systematic review

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Background

Young people are at high risk of contracting STIs. In order to identify effective in-service interventions for this group, a systematic review of RCTs of waiting-room-delivered, self-delivered and brief-healthcare providerdelivered interventions was conducted.

Methods

MEDLINE, PsycInfo, EMBASE, CINAHL and Cochrane databases (including CENTRAL and DARE) were searched from January 2000 to October 2014

Findings

17,916 articles were screened. 22 RCTs met our inclusion criteria, were quality appraised independently by two reviewers using the Cochrane Risk of Bias tool, and were found to be of generally high quality. Increased effectiveness for reducing risky sexual behaviour compared to control was found in 4 out of 6 RCTs for interactive digital interventions, 1 out of 6 RCTs for one-to-one counselling, and 3 out of 5 RCTs of interventions involving video. Significant improvements in STI events compared to control were found in 5 RCTs of interventions that contained either video (both with and without counselling), brief one-to-one counselling or a STI home test kit.

Discussion

These potential effective interventions can be used to guide development of in-service STI preventive interventions for young people.

Oral Presentation Abstracts

Anticipated regret and health behavior: a meta-analysis

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Objective

Regret is a cognitive emotion that is unique to decisions and that people seek to avoid. We sought to understand anticipated regret's role in motivating health behaviors.

Methods

We systematically searched electronic databases for studies of anticipated regret and behavioral intentions or health behavior. We used random effects meta-analysis to synthesize effect sizes from 81 studies (n=45,618).

Findings

Anticipated regret was associated with both intentions ($r = .50$, $p < .001$) and health behavior ($r = .29$, $p < .001$), such that greater anticipated inaction regret predicted stronger intentions and behavior, while anticipated action regret showed the opposite association. Anticipated regret generally was a stronger predictor of intentions and behavior than other anticipated negative emotions and risk appraisals.

Discussion:

Anticipated inaction regret has a stronger and more stable association with health behavior than previously thought. The field should give greater attention to understanding how anticipated regret differs from similar constructs, its role in health behavior theory, and its potential use in health behavior interventions.

Oral Presentation Abstracts

A pilot trial of three very brief interventions for physical activity in primary care

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Background

Very brief interventions (<5 minutes) for physical activity have substantial public health potential but there is uncertainty about their potential effectiveness and cost. Our pilot trial assessed these for three promising interventions as part of preventative health checks.

Methods

394 adults (mean (SD)=53 (9.1) years, 59% female) were randomized to a Motivational (n=83), Pedometer (n=74), or Combined (n=80) intervention following the health check, or Control (n=157). At 4-week follow-up we assessed physical activity by accelerometers and self-report, beliefs about increasing activity, and cost.

Findings

We found no significant differences in objective or self-reported activity across groups. Probability of a positive effect on physical activity was higher for the Motivational and Pedometer interventions. Participants in all intervention groups reported stronger intentions to increase activity compared to Control. Average cost of the interventions varied between £6.83 and £20.98 per patient.

Discussion

Very brief interventions for physical activity in primary care are inexpensive and can potentially increase physical activity. A fully-powered trial is assessing cost-effectiveness and estimated public health impact of the Pedometer intervention.

Oral Presentation Abstracts

Longitudinal profiles of personal work goals associate with work engagement in a six-year study

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Background

The research addresses the impact of personal work goals on work engagement among managers. Goals were investigated with a four-wave longitudinal data (2006-2012) and were classified on the basis of contents into categories of competence, progression, well-being, job change, job security, organisation, and financial goals (Hyvonen et al., 2009).

Methods

The study was conducted among 276 young Finnish managers who were all under 36 years in 2006. Patterns of goal contents were examined using the latent class analysis (LCA). After deciding the best LCA solution, differences in work engagement between the patterns were investigated with ANCOVA.

Results

Three longitudinal goal profiles were identified: Development and success (n = 114), Career progression (n = 114), Well-being and stability (n = 68). The profile of Development and success related to significantly higher work engagement at the last measurement. In turn, the profile of Well-being and stability related to the lowest work engagement. Promoting personal work goals related to the professional development and success of employees can have beneficial implication on employees' occupational health in the long term.

Oral Presentation Abstracts

Pediatric pain program outcomes: differences and similarities between discrete primary clinical diagnoses of chronic pain

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Background

Although treatment studies often include multiple types of pain, researchers call for examination of discrete conditions (Palermo, 2012). We hypothesized patients with differing types of pain would show improvement following participation in our pain program.

Methods

Adolescents (N=213) in a 3-week interdisciplinary pain program with a diagnosis of generalized pain (GP; N=58), abdominal pain (AP; N=67), or headaches (HP; N=88) were included in the pre/post treatment design.

Measures included

Functional Disability Inventory (FDI), Pain Catastrophizing Scale (PCS), Center for Epidemiologic Studies Depression Scale (CESD), and Multidimensional Anxiety Scale for Children (MASC-2).

Findings

Differences on the FDI, PCS subscales, and self-reported pain level were evident at admission and discharge between conditions ($p < .05$). All conditions showed significant improvements in FDI, PCS, CESD, and MASC-2 ($p < .01$) except for PCS Magnification in GP and PCS Helplessness in AP ($p > .05$).

Discussion

Psychological adjustment, functional disability and response to an interdisciplinary pain treatment program differ between youth in discrete conditions. These findings help us understand youth with chronic pain and their response to treatment.

Oral Presentation Abstracts

Effects of an oral hygiene skills training on self-efficacy and decisional balance

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Background

Self-efficacy and decisional balance are related to self-reported and clinical oral health, but the effect of oral hygiene skills training on these psychological parameters is rarely examined. This study assessed the effect of an oral hygiene skills training on these two parameters.

Methods

In a randomized controlled study 76 participants with fixed dentures received training either only on basics of toothbrushing or additionally on the Fones- or Bass-technique. Self-efficacy, decisional balance, oral hygiene skills (plaque after toothbrushing) and oral health (gingival bleeding) were assessed at baseline and 12 weeks after training.

Findings

Self-efficacy and decisional balance were not related to oral hygiene skills at baseline. Groups differed in pros of toothbrushing ($p < 0.05$) after 12 weeks; best values in the Fones group.

Discussion

These results showed that self-efficacy and decisional balance should be assessed in oral hygiene skills training as well. Additionally, findings of our working-group indicated that the influence of the training on the assessed parameters varied between different kinds of samples. This should be considered in further trainings.

Oral Presentation Abstracts

Applying the Extended Theory of Planned Behavior to health behaviors: metaanalysis and empirical test

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The Extended Theory of Planned Behavior (eTPB) includes sub-components of attitudes (instrumental/affective), norms (injunctive/descriptive) and perceived behavioral control (self-efficacy/perceived control) to predict intentions and action. A meta-analysis (Study 1) and empirical test of the eTPB (Study 2) in relation to health behaviors are reported. In relation to intentions, Study 1 showed self-efficacy and affective attitudes had large, while other constructs had small-medium sized correlations; regressions showed all constructs except perceived control were significant predictors. In Study 2, regressions controlling for past behavior, showed similar patterns. In relation to action, Study 1 showed intentions, self-efficacy and affective attitudes had medium-large, while other constructs had small-medium sized correlations; regressions showed intentions, self-efficacy, affective attitudes and descriptive norms were significant predictors. In Study 2, regressions controlling for past behavior showed intentions, affective attitudes, injunctive norms and descriptive norms (protection behaviors), or intentions, self-efficacy, affective attitude and descriptive norms (risk behaviors), were significant predictors of action. eTPB has utility in predicting health behaviors and suggests novel relationships informing intervention studies.

Oral Presentation Abstracts

The effects of stage-matched and stage-mismatched interventions on cervical cancer screening

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Background

The study investigated the effects stage-matched and stage-mismatched interventions for women in the motivation phase (pros and cons) and volitional phase (cues to action). Additionally, we tested if matching the interventions to age-specific pros and cons would increase the effectiveness of behavior change interventions.

Methods

A longitudinal experimental design study was used (6 experimental groups and 1 control group). Women (N = 1936) reported their behavior, beliefs and intentions to attend cervical cancer screening (CCS).

Findings

Results indicated that the stage-matched and stage-mismatched interventions performed equally well in terms of their effects on intention and behavior. Similar effects of age-matched and age-mismatched interventions were obtained.

Discussion

Brief interventions may have similar, small effects, on intention and self-reported behaviors, regardless their stage-matching status.

Oral Presentation Abstracts

Predicting meaning of work and organizational commitment across age groups

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Background

This study examines the predictive value of job demands and resources on Meaning of work and Organizational commitment across three different age groups; young workers (< 30 years), middle aged workers (30-49 years) and older workers (> 50 years).

Methods

Data was collected from a survey of employees at a Norwegian university (N= 5637). Hierarchical multiple regression analysis was used to test the relationship between the antecedent variables and Meaning of work and Organizational commitment in the three age groups separately. Age differences in the experience of these two variables were tested by one-way ANOVA.

Findings

In general, both job demands and resources are related to Meaning of work and Organizational commitment. However, the relative importance of demands and resource varied across the different age groups. Overall, older workers reported highest scores on Meaning of work and Organizational commitment.

Discussion

Differences in the antecedents of Meaning of work and Organizational commitment across age groups suggest that different interventions should be considered when aiming to improve meaning of work and organizational commitment among younger, middle aged and older workers.

Oral Presentation Abstracts

Depressive symptoms in patients with COPD as predictors of efficacy of pulmonary rehabilitation

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Background

Pulmonary rehabilitation (PR) aims to improve exercise capacity in patients with chronic obstructive respiratory disease (COPD). However, not all patients do benefit from PR. In the present study we examined whether depressive symptoms are associated with improvement of endurance exercise capacity.

Methods

78 patients with COPD who participated in PR. Age 56 baseline lung function, body mass index (BMI), incremental and endurance shuttle walk tests (ISWT/ESWT) and depression test (BDI-II) were performed. The ESWT and BDI-II were repeated after PR.

Findings

ESWT and BDI-II change after PR; Δ ESWT was 182 } 190 % ($p < 0.001$), BDI-II pre PR was 13.6 } 8.1, BDI-II post PR was 10.6 } 6.7 ($p < 0.001$). BDI-II pre PR ($\rho = -0.09$), BDI-II post PR ($\rho = -0.19$) and Δ BDI-II ($\rho = -0.07$) were not correlated with Δ ESWT.

Discussion

Depressive symptoms do not predict response to exercise training. Change in depressive symptoms and response in exercise capacity after PR seem to be two distinct processes.

Oral Presentation Abstracts

Acknowledging uncertainty about long term effects of the HPV vaccination: effects on HPV vaccination intention

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Background

Being a relatively new vaccine, there remains uncertainty regarding the potential long term effects of the Human Papillomavirus (HPV) vaccination targeting 12-year-old girls. Therefore, in an experimental web-based study, we investigated the effects of acknowledging versus ignoring this uncertainty. A message in which uncertainty was acknowledged was expected to be more persuasive than a message in which uncertainty was ignored.

Methods

695 mothers of girls-to-be invited to the HPV vaccination round of 2014 were derived from the National Immunization Register. Participants were randomly assigned to one of two conditions: 1) acknowledging or 2) ignoring uncertainty about potential long term effects .

Findings

Acknowledging uncertainty resulted in a lower intention towards receiving the HPV vaccination than ignoring it.

Discussion

This study implies that it seems better to ignore uncertainty regarding potential long term effects of the HPV vaccination on the short term. However, based on inoculation theory we recommend future communication to acknowledge this uncertainty, because this will build resistance to future counterarguments and therefore has more positive long term effects than when uncertainty is ignored.

Oral Presentation Abstracts

Towards optimal effectiveness of tobacco packaging communications: determinants and beliefs predicting smoking initiation and cessation

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Background

Although threatening health communications have been found to be ineffective or even backfire, they remain popular. Identifying alternatives to warning labels on tobacco packaging requires first identifying the determinants and beliefs that predict whether people start to smoke or successfully quit. The current literature synthesis provides this starting point for developing effective tobacco packaging communications.

Methods

A query was entered into PsycINFO and MedLine. Hits were screened by two independent screeners in two rounds, and 114 hits were retained for extraction. Qualitative and quantitative results were extracted and integrated qualitatively or, where appropriate, meta-analysed with the R metafor package using random-effects models.

Findings

Quantitatively, in addition to risk perception, a number of other predictors emerged, including self-efficacy, attitude, and subjective norm. In addition to quantitative evidence, a large number of beliefs that potentially predict smoking initiation and cessation were identified.

Discussion

On the basis of the identified determinants and beliefs, tentative recommendations are made regarding specific theory- and evidence based communications on tobacco packaging. In addition, a list of beliefs requiring quantitative verification is presented to guide future research.

Oral Presentation Abstracts

Increased latrine cleanliness after an intervention tailored on psychological determinants: a longitudinal study in Burundi

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Background

Access to improved and clean sanitation is fundamental for the prevention of diarrhoea.

Methods

A baseline survey in rural Burundi had revealed the relevant psychological determinants underlying cleaning behaviour, namely satisfaction with cleanliness, self-efficacy and commitment. Through a follow-up survey, we evaluated promotional household visits targeting these determinants in order to improve latrine cleanliness. Households receiving a promotional visit about water related behaviours served as controls.

Findings

Wilcoxon's sign ranked test revealed that, after the intervention, latrine cleanliness, measured by short observations, had increased in the intervention group (N = 171; Z = -3.06; p = .002; r = .23), whilst there had been no change in the control group (N = 104; Z = -1.38; p = .167; r = .14). Results of a logistic regression showed that intraindividual differences in the psychological factors satisfaction with cleanliness, self-efficacy, perceived effort and perceived difficulty could explain the increase in the household's latrine cleanliness. Differences in "commitment" were not relevant.

Discussion

The results confirmed that interventions tailored to relevant psychological determinants were able to effectively increase latrine cleanliness.

Oral Presentation Abstracts

Exploring positive experiences in the work environment in Norwegian nursing homes – a mixed methods study

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Introduction

Workplace empowerment and job satisfaction in health care have been found related to higher quality care and lower patient risk. The aim was to explore how do health care workers in Norwegian nursing homes perceive positive factors in the work environment?

Methods

The research question was examined using multiple methods. 11 workers participated in an in-depth interview. 105 workers responded to questionnaires (The Systematizing Person-Group Relations Instrument (SPGR), and the Sense of Coherence (SOC)). Analyses of qualitative data were conducted using grounded theory and the qualitative using correlation measurements.

Results

Significant correlation between a strong SoC and high scores on the synergy in the SPGR were found. Interview revealed that better planning, empowerment and predictability made the workers more attended for the patients.

Conclusions

Using humor and positive thinking in the work environment was found to be important to give the workers opportunity to attend to the patients in a good way. Nursing home organizations must promote positive health and a healthy work environment to achieve a meaningful working life for health care personnel in nursing homes.

Oral Presentation Abstracts

Expressive writing intervention for newly diagnosed cancer patients

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Distress at the time of cancer diagnosis predicts distress during the cancer trajectory. This study examined the impact of home-based expressive writing intervention (EWI) on distress among newly diagnosed cancer-patients and whether EWI would be particularly beneficial for individuals with high social constraints in expressing their cancer-related emotions.

Newly diagnosed prostate cancer patient (N=76) were randomized to: 1) EWI group who wrote, three-times at home, over a three-week period about their concerns regarding their cancer; 2) Control Group who wrote about facts regarding their cancer. Anxiety/depression (HADS), Impact of Events (IES), and Social-Constraints Scales were administered at baseline and 3 and 6 months post- intervention.

ANCOVA revealed a significant group effect ($p=0.005$) and a significant groupXsocial constraints interaction ($p=0.001$) for IES. The EWI had lower symptoms at both follow-ups and EWI buffered the adverse effects of social constraints on symptoms. Identical results were obtained for HADS.

Home-based expressive writing reduces distress among newly diagnosed cancer patients particularly for those that feel constraints in expressing their cancer-related emotions. This suggests the importance of providing patients with early interventions allowing emotional expression.

Oral Presentation Abstracts

A resilience-based alcohol education intervention for adolescents in the UK

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Background

Alcohol education often encourages avoidance of excessive drinking, but is rarely designed to help young people to develop the skills required to manage alcohol in social situations. A resilience-based approach could help young people to limit alcohol intake by encouraging the development of skills to manage alcohol in social situations.

Methods

We developed a two-lesson school-based intervention designed to model, and facilitate discussion of, moderate drinking. A prospective longitudinal design was used to examine the intervention impact on personal resilience, drink-refusal self-efficacy (DRSE), and intended and actual alcohol intake. The sample consisted of 16-18 year olds in intervention schools and 2 control schools (total N = 500).

Findings

Analyses provide important information about students' responses to the new classroom materials. Comparisons between intervention and control schools indicate that these new lessons may have an important impact on resilience, DRSE, and alcohol intake.

Discussion

Resilience-based interventions employing realistic models of behaviour may be an important complement to existing alcohol education in facilitating healthy behaviours among young people, particularly in cultures of normative alcohol use.

Oral Presentation Abstracts

What is the psychological impact of self-weighing? A meta-analysis

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Background

Many interventions addressing weight-related problems (e.g., obesity) promote self-weighing. However, while self-weighing has been associated with weight loss, there is mixed evidence regarding the psychological impact of this behavior.

Methods

Twenty four studies (N = 11,490) were identified that included a measure of the frequency of self-weighing and one or more psychological outcomes. Psychological outcomes were divided into those pertaining to (i) affect (e.g., depression, anxiety), (ii) psychological functioning (e.g., self-esteem), (iii) body-related attitudes, and (iv) disordered eating.

Findings

There was no association between self-weighing and affect ($r = .00$, 95% CI: $-.08$ to $.08$), body attitudes ($r = .05$, 95% CI: $-.04$ to $.15$), or disordered eating ($r = .01$, 95% CI: $-.13$ to $.14$). There was, however, small-sized negative association between self-weighing and psychological functioning ($r = -.09$, 95% CI: $-.15$ to $-.03$).

Discussion

The present findings suggest that, for the most part, self-weighing is not associated with adverse psychological outcomes. Effect sizes were, however, heterogeneous and subsequent analyses will focus on identifying moderators of the relationship between self-weighing and psychological outcomes.

Oral Presentation Abstracts

Temporal consequences and message framing - evidence for interactions in two samples and two behaviours

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Background

Message framing interventions have not yet consistently investigated how temporal consequences (short-term versus long-term) affects persuasion outcomes on (antecedents) of health behaviours, despite the fact that Construal Level Theory predicts that temporal distance affects if positive (or negative) consequences should be more persuasive.

Methods

Data were collected in 278 adults (study 1, fruit intake) and 193 adolescents (study 2, hearing loss prevention). Participants were randomly allocated to read one of four messages and reported on intentions, attitudes, and risk perceptions. Data were analyzed using univariate analysis of variance (study 1) and repeated measures analysis of variance (study 2).

Findings

In study 1, gain-framed messages were more persuasive when combined with long-term outcomes, whereas loss-framed messages were more persuasive when combined with short-term outcomes. In study 2, lossframed messages were also more persuasive when combined with short-term outcomes, but no persuasive effect was found for gain-framed messages.

Discussion

Combining temporal consequences with message framing results in more persuasive messages. Adolescents may not be as susceptible for long-term outcomes, potentially because of their lack of temporal discounting.

Oral Presentation Abstracts

Working in institutional care: higher quality of work is associated with higher quality of care

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Background

This study examines whether, on a unit-level, quality of work (psychosocial job characteristics and organizational factors) is associated with quality of care provided. Furthermore, on the basis of the energy depleting process and motivational process described by the Job Demands-Resources model it is tested whether this association is mediated through employee fatigue and commitment.

Methods

About 45,000 employees working in 845 units of organisations providing care for mentally and/or physically disabled filled in self-report questionnaires assessing quality of work, fatigue (CIS-20), organisational commitment, and quality of care provided by their unit.

Findings

Aggregated data on unit level yielded significant associations between quality of work aspects and quality of care provided. Higher quality of care was related to higher staffing resources, better work procedures, higher job control, and more social support between colleagues. Mediation analysis confirmed a partial mediating role of employee fatigue and organisational commitment in the quality of work – quality of care relationship.

Discussion

The findings suggest that improving quality of work may enhance quality of care, partially through improving health/energy and motivation of employees.

Oral Presentation Abstracts

Psychosocial interventions for cancer-related fatigue in post-treatment cancer survivors: a systematic review of the literature

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Cancer-related fatigue (CRF) is a persistent, distressing symptom that can extend into long-term survivorship. A systematic literature review using Cochrane methodology was conducted to evaluate psychosocial interventions to reduce fatigue in samples comprised exclusively of post-treatment cancer survivors. Databases were searched extensively and two authors independently screened titles and abstracts for their eligibility for inclusion. Randomised controlled trials which evaluated psychosocial interventions for adults with post –treatment CRF were included. Two authors independently extracted data using a standard data extraction form and assessed the risk of bias of selected studies.

The search returned 6,380 papers. Following an assessment of the titles and abstracts, 12 papers remained. These included interventions employing CBT, sleep hygiene and psychoeducation techniques. The review highlighted heterogeneity in terms of sampling, methodology, and study quality. The findings suggest that psychosocial interventions were effective in addressing cancer-related fatigue. However, few interventions for CRF specifically target cancer survivors who are post-treatment.

This review was the first to evaluate if psychosocial interventions are effective for post-treatment CRF and indicated a need to embed psychological theory in the design process.

Oral Presentation Abstracts

Question-Behavior-Effect: impact of interviews and mHealth methods on colorectal cancer screening

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Background

Examine the effectiveness QBE in increasing cancer screening in two delivery modes: telephone interview and text-messaging.

Methods

Study 1: 14,472 participants were randomly assigned to a telephone interview or control. Study 2: Following an invitation letter, text-message reminders were sent to 50,000 participants, randomized into five groups: four experimental, one control. Messages were interrogative or declarative, each with/without reference to social context.

Findings

Uptake was higher in the experimental groups than in the controls in both studies. In study 1, uptake was higher the interview group than in the control's in all analyses and at all-time points, with effect size range 0.05 to 0.19. In study 2, all versions but one (the declarative) had a significant effect compared to the control; participation was the highest in the interrogative and interrogative-with-social-reference conditions with effect size of 0.05-0.06.

Discussion

The routine use of the inexpensive text-messaging mode is recommended. Though increased screening was modest, absolute numbers in population-level translate into a clinically significant change.

Oral Presentation Abstracts

The impact of changing attitudes, norms, and self-efficacy on health-related intentions and behavior: a meta-analysis

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Background

Health behavior theories converge on the hypothesis that attitudes, norms, and self-efficacy are important determinants of intentions and behavior. The present review analyzed whether changing attitudes, norms, or self-efficacy leads to changes in intentions and behavior in studies that used random assignment, manipulation checks, and post-intervention measures of outcomes.

Methods

Literature searches obtained 193 experimental tests that met the inclusion criteria, which were meta-analyzed via STATA.

Findings

Experimentally induced changes in attitudes, norms, and self-efficacy all led to medium-sized changes in intention ($d+ = .50, .41, \text{ and } .50$, respectively), and engendered small to medium-sized changes in behavior (norms- $d+ = .20$; attitudes- $d+ = .37$; self-efficacy- $d+ = .46$). These effect sizes generally were not qualified by the moderator variables examined (e.g., study quality, methodological characteristics).

Discussion

The present review (a) indicates that correlational studies (and related meta-analytic syntheses) overestimate the effect of cognitions on intentions and behavior, (b) lends novel, experimental support for key predictions from health behavior theories, and (c) demonstrates that interventions that modify attitudes, norms, and self-efficacy are effective in promoting health behavior change.

Oral Presentation Abstracts

Can answering questions change health behaviours? A systematic review and meta-analysis

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Questioning behaviour and/or cognitions (question-behaviour effect; QBE) may change health behaviours. The present review aims to consolidate QBE studies regardless of behaviour domain and design.

Three databases were searched for papers (1980-April 2014). Included papers measured cognitions and/or behaviour without another intervention vs an unassessed control. Effect sizes were calculated using meta-analysis. Meta-regressions assessed moderator and effect size associations.

96 studies were included from 381 screened papers. Results supported a small significant QBE ($g=.14$, $p<.001$). Bias was a significant moderator, low risk of bias studies had a smaller effect ($g=.07$) than unclear/high risk of bias ($g=.22$). QBE was found to increase healthy behaviours ($g= .16$, $p<.001$), and reduce some health risk behaviours ($g= .08$, $p= .04$).

This review shows QBE as a somewhat effective intervention to increase healthy behaviours. Small effects in low risk of bias studies warrant caution in determining its effectiveness. The limited evidence in risk behaviours suggests it is generally ineffective in reducing these behaviours. Further high quality studies and focus on risk behaviours are needed.

Oral Presentation Abstracts

Effectiveness of a multi-module eHealth intervention on work-related outcomes among working cancer survivors

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Background

Cancer survivors are eager to stay working but often experience disease-related problems. This study assessed the effectiveness of a work-module within a multi-module eHealth intervention (KankerNazorgWijzer) meant to help dealing with impaired cognitive, physical, emotional functioning and practical issues.

Methods

A RCT (n=463) compared Usual Care (UC) and the intervention (ExpC) among cancer survivors. Workrelated outcomes (6-months): job satisfaction, work limitations, productivity loss. We only included workers.

Findings

Most participants were women (85%) with breast cancer (79%). Baseline job satisfaction was high (M=4.1; scale 1-5) with little work limitations. Multiple regression analyses revealed no intervention effects on work outcomes (p-values >.22). Within the ExpC group work-module users reported more increase in weekly working hours compared to non-users (UC: M=6.7; ExpC: M=10.9. p=.049) and appreciated the module (M=7.0; scale 1-10).

Discussion

Preliminary results suggest the intervention is appreciated but not effective in improving work functioning. Lack of effects might be related to sample characteristics (part-time, few work-limitations). It is worthwhile to test the module in cancer populations experiencing more problems.

Oral Presentation Abstracts

Features of physical activity interventions associated with effectiveness in musculoskeletal disorders: systematic review and meta-analysis

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Background

Physical activity (PA) can help manage age-related decline in musculoskeletal (MSK) function. However the features of effective interventions to promote PA remain unclear.

Methods

Systematic review with meta-analyses were conducted to examine the effectiveness of PA interventions in adults with MSK disorders. Univariate meta-regression and sub-group analyses guided by incidence/concurrence matrices explored the association between intervention features (behaviour change techniques (BCTs) and modes of delivery).

Findings

Thirty-five trials were included. Overall interventions effectively increased PA (SMD=0.40, 95%CI 0.14-0.65, p=0.002). Greater increases in PA were associated with interventions with fewer sessions (beta=-0.022, 95%CI -0.044 to -0.0002, p=0.04) and those that were self-management-based rather than instructor-based (p=0.002). Most common BCTs were behavioural practice-rehearsal (75%), demonstration of the behaviour (67%) and goal setting (behaviour) (33%). In over 90% of cases, 'behavioural practice-rehearsal' was used together with 'graded task', 'demonstration of behaviour', and in instructor-based interventions. Neither the number of BCTs nor any individual BCT was associated with increased effectiveness.

Discussion

PA interventions can be effective in MSK disorders. Considering the concurrence of intervention features is important for understanding potentially synergistic effects.

Poster Presentation Abstracts

Increasing self-esteem using subliminal evaluative conditioning: a replication study

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Background

Self-esteem is an important moderator in the relationship between stress and (cardiovascular) health, with low self-esteem potentially exacerbating the impact of the stressor. Boosting self-esteem may therefore lower stress. This study aims to replicate Dijksterhuis (2004) who found that Subliminal Evaluative Conditioning (SEC) increased self-esteem. Given the need for short and evidence-based stress-reduction interventions, this finding seems promising, but is in need of replication.

Methods

Eighty-four students were randomly divided into an experimental or control condition. Self-esteem was manipulated in the experimental condition by subliminally coupling self-related words with positive words (i.e., SEC procedure). Implicit self-esteem (Implicit Association Test) and explicit self-esteem (the State Self-Esteem Scale) were the primary outcomes.

Findings

Subliminally boosting self-esteem significantly enhanced explicit self-esteem ($t(82) = -1.851$, $p = .034$, $d = -0.357$), but not implicit self-esteem ($t(82) = -1.629$, $p = .054$, $d = -0.405$). Analyses were tested one-sided.

Discussion

Results show that a subliminal intervention increased explicit self-esteem. The effects are small though and, according to Bayesian statistics, do not reflect a successful manipulation. Future studies need to further investigate its effectiveness.

Poster Presentation Abstracts

Gender and age differences on resilience in Norwegian adolescents 13-18 years

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Background

The present study investigates gender and age differences on resilience factors comprising personal competence, structured style, social competence, social resources, and family cohesion.

Methods

The cross-sectional sample consists of 1239 adolescents 13-18 years from Mid-Norway. The participants responded on The Resilience Scale for Adolescents. Data was analyzed using two-way between groups ANOVA. Three age groups were used: 13-14 years, 15-16 years, 17-18 years.

Findings

Significant main effects of gender were found on resilience factors comprising personal competence, structured style and family cohesion, where boys had higher mean scores than girls. No significant main effects of age or interaction effects of gender by age on any of the resilience factors were found. However, boys had higher mean scores than girls across the three age groups on the resilience factors of personal competence, structured style and family cohesion, whereas girls had higher scores on social competence and social support.

Discussion

Although significant gender differences are found on resilience factors, the mean scores on resilience do not appear to differ significantly across age groups.

Poster Presentation Abstracts

The efficacy of the Penn Resilience Program and its adapted versions: a systematic review

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Background

Resilience - individuals' capacity to efficiently regulate emotional resources - seems to be the key for students' behavioural 'immunization'. The aim of this systematic review is to update the evidence regarding the efficiency of the Penn Resilience Program (PRP) and its adapted versions in buffering depression and improving wellbeing in students aged 11-18 years old.

Methods/Design

Following the Cochrane Handbook for systematic reviews of interventions guidelines and adopting the PRISMA guidelines of reporting items, a systematic review of randomized controlled trials will be undertaken, assessing the efficacy of PRP and its adapted versions in enhancing students' resilience. A search of multiple electronic databases, trials' registries and 'grey' literature will be conducted. Depression is the primary reported outcome. Secondary outcomes will include resilience and other positive indicators. A pooled meta-analysis and potential trials' sub-group analyses will be conducted, where it is possible.

Findings

Preliminary evidences suggest PRP's effects on outcomes of interest.

Discussion

Providing school community with effective interventions may be of particular value for public health services.

Keywords

Resilience, Penn Resilience Program (PRP), Randomized Controlled Trials

Poster Presentation Abstracts

Health Promotion and Prevention of Addictions Centers of Attica: Interventions and recent developments

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Background

Health Promotion and Prevention of Addictions Centers (HPPACs) in Greece design, implement and evaluate prevention programs targeting at students, aiming to improve the psychosocial health of the community members and develop actions of social impact in order to raise awareness of several health promoting issues. Twenty HPPACs operate in the prefecture of Attica with the collaboration of OKANA.

Interventions

In 2014, 245 schools were approached and health promoting actions were realized. Regarding interventions at students (of all levels), 770 short-term and long-term interventions were applied, whereas 142 groups for parents ran either at schools or the Prevention Centers.

Methods

5,487 students from the primary level and 9,183 students from the secondary level of education took part in these interventions. Participants were from different areas of Attica (covering a wide range of SES and needs). Regarding the number of parents that participated in group-sessions, there were 3,484 parents. Finally, 1,956 individuals received counselling concerning issues like family problems, addictions and poor psychosocial health. Generally, experiential learning is the preferred method.

Discussion

HPPACs implement programs to cover the contemporary community needs

Poster Presentation Abstracts

Predictive factors for subjective happiness and satisfaction with life in Romanian young adults

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The purpose of the study was to investigate the importance of adolescent pathways to well-being to early ages of adulthood indicated by satisfaction with life and happiness. Data were drawn from a 2 wave (3 year) longitudinal study of the health and development of around 2000 Romanian, nationally representative sample of adolescent and young adults. In the first wave, a series of psychological factors were assessed by an online

Questionnaire that included

Self-rated health, risk behaviors, positive resources, and aspects of social cohesion and socioeconomic status. Happiness and life satisfactions were assessed as outcomes in the second wave.

Results

Romanian adolescents reported many health problems, average mental health and high occurrence of risk behaviors. Levels of subjective happiness and life satisfaction were lower compared to European averages. Inequalities in happiness and life satisfaction were mostly related to low socio-economic situation, lack of appropriate social cohesion and presence of risk factors

Poster Presentation Abstracts

Using resilience concepts within youth behaviour change interventions: a review and model for integration

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Background

A resilience approach is valuable for tackling health risks facing young people. Using and adapting established behaviour change techniques to align with a resilience approach may facilitate active facilitation of resilience processes.

Methods

We reviewed published health behaviour change interventions in the Web of Knowledge database engaging with 'resilience' (e.g. through keyword assignment), targeting young people, and focusing on alcohol use, substance use, smoking or sexual risk. Interventions (N = 40) were coded for engagement with resilience processes and for implicit or explicit use of behaviour change techniques. Findings were analysed using content analysis.

Findings

Few published interventions designed to enhance resilience processes explicitly linked resilience processes to identified behaviour change techniques. Implicit use of techniques was more frequent, but inconsistent.

Discussion

We present a model integrating resilience theory and practice with relevant behaviour change techniques, adapting Abraham & Michie's (2008) taxonomy to identify key techniques which conceptually align with a resilience approach. This model may guide practitioners and researchers in designing, developing and evaluating effective interventions to enhance young people's resilience when facing key health risks.

Poster Presentation Abstracts

The impact of perceived self-efficacy on the extinction of conditioned fear

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A positive change in perceived self-efficacy expectation is considered an important goal of exposure-based treatments. In line with this, several studies have demonstrated a positive association between self-efficacy and therapy outcome. While those studies primarily focused on changes in self-efficacy expectation that are achieved through therapy, the present study sought to examine whether changes in self-efficacy prior to treatment have an influence on therapy outcome. To this end, 48 healthy subjects completed a differential fear conditioning task. After the fear acquisition phase, half of the subjects received a positive verbal feedback aimed at increasing self-efficacy (experimental group) whereas others received no feedback (control group). Our results not only show that self-efficacy beliefs can be enhanced through verbal feedback but also point to an enhanced extinction of conditioned fear in the experimental group relative to the control group, evident on the implicit (skin conductance responses) and explicit (valence rating) level. Our results may have clinical implications for exposure-based treatments in anxiety disorders.

Poster Presentation Abstracts

Coping skills and Depressive Symptoms: are they correlated?

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Background

Individuals with depression may use different coping skills than those without depression, both maladaptive and adaptive. Previous studies support that depression is correlated more with the maladaptive strategies. This study's main goal is to identify the coping skills which individuals with depressive symptoms tend to use.

Methods

350 randomly selected participants (ages 18-69; 207 female) responded to the Psychiatric Disorders Screening Questionnaire (PDSQ) and the Brief-COPE, which assessed depressive symptoms and fourteen types coping styles respectively.

Findings

Multiple regression was performed for determining whether depressive symptoms could be predicted by coping skills. The study found that coping skills significantly predict depression $F(14, 288) = .983$, $p < .000$ and explain 23% of the variability of depression. Self-blame, self-distraction and denial coping styles were the best predictors, $p < .05$, with Denial being the most significant predictor of depressive symptoms. Symptoms were also predicted negatively by positive reframing.

Discussion

Depression, in this study, was predicted mostly by high maladaptive coping skills and low adaptive skills. Findings may have implications regarding how improved coping may decrease depressive symptoms.

Poster Presentation Abstracts

Depression among spouses of cancer patients: the role of social constraints and cancer worries

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Background

Depression and worries are common among cancer patients' spouses who are often in a caregiving role. This study examined whether couples' negative social interactions that impair open expression of thoughts and feelings about cancer (social constraints) exacerbate cancer worries and hence depression among patients' spouses.

Methods

Eighty-three female and 48 male spouses of prostate and gynecological cancer patients were recruited through cancer clinics as part of a broader study. They completed the Brief Symptom Checklist-Depression subscale, Cancer Worry Scale, and Social Constraints Scale.

Findings

Male and female spouses had comparable levels of depression symptoms. Cancer worry and social constraints independently predicted spouses' depression scores ($r=.44$ and $.38$, respectively, $p's<.01$). Cancer worry was positively associated with social constraints ($r=.39$) and partly mediated the association between social constraints and depression.

Discussion

Results reveal that social constraints are associated with increased worries and depression among spouses of cancer patients. This underscores the importance of attending to spouses' mental health and of fostering open expression of thoughts and feelings about cancer among couples coping with illness to alleviate spouses' worries and depression.

Poster Presentation Abstracts

Dyadic empathy in the context of stress in romantic relationships

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Background

Dyadic empathy is a precondition for successful relationships. To understand the underlying processes in the context of stress, we explore the influence of type of stressor (internal versus external) on mutual stress reactions and relationship functioning.

Methods

75 couples rate their own and partner's stress (MDS-P), relationship satisfaction (PFB-K) and mood (BSKE) before and after a 10minute conflict discussion. Cortisol is measured in saliva samples at four time points. Data are analyzed with the actor-partner-interdependence model.

Expected results

Differences in stress perception lead to difficulties in couple communication, rise of stress hormone concentrations, impairment of mood after the discussion and relationship satisfaction.

Current stage of work

Data of 33 couples suggest that the partner's external stress can be perceived adequately (men $\beta=.448$, $p<.05$; women $\beta=.546$, $p<.05$). However, the internal stress of the partner isn't perceived accurately, but deduced from one's own stress (men $\beta=.594$, $p<.001$; women $\beta=.656$, $p<.01$).

Discussion

If internal stress can't be perceived correctly by the partner and results in negative relationship outcomes, strengthening this specific skill will contribute to relationship functioning and health.

Poster Presentation Abstracts

When thinking impairs sleep: trait, daytime and nighttime repetitive thinking in Insomnia

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Background

Insomnia affects physical and mental health adversely, but evidence-based interventions are not effective for all insomnia patients. Identifying malleable determinants of insomnia is therefore important. Repetitive thinking (worry, rumination) may be a such a determinant, but research found inconsistent relationships between trait repetitive thinking and sleep diary measures. To explain these results, we investigated effects of timing and thematic content of repetitive thinking in people with insomnia.

Methods

In Study 1, 139 participants completed baseline questionnaires on trait worry and rumination, anxiety, depression, insomnia and a sleep diary. In Study 2, 64 participants completed similar measures and a daytime and nighttime sleep-related worry diary. Multilevel models with baseline measures as between subjects variables and (Study 2) daytime and nighttime worry as within-subject variables, were run.

Findings

In Study 1, trait rumination and worry were not associated with sleep problems. In Study 2, only nighttime sleep-related worry was consistently associated with sleep impairment .

Discussion

Nighttime sleep-related worry may maintain insomnia, while trait and daytime repetitive thinking have benign effects. Insomnia treatment may be improved by specifically targeting nighttime sleep-related worry.

Poster Presentation Abstracts

The role of social networks and social integration on health in multiple sclerosis

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Background

Social networks (SN) and the support associated with them are recognised as important in health, yet vulnerable to decline. Multiple Sclerosis (MS) can negatively affect both SN and health. Health considers impairments (I), activity limitations (ALs) and participation restrictions (PRs) as key components (WHO ICF). In order to optimise health in MS, understanding the role of SN necessary. This research investigated whether; SN was associated with I, AL and PRs in MS.

Method

70 individuals with MS completed measures of SN (Lubben Social Network Scale- LSNS), and health (I-Fatigue, AL/PRs-modified Functional Limitation Profile (mFLP) & WHOQoL-Bref). LSNS assesses 3 domains; Family, neighbours and friends.

Results

All domains of LSNS were significantly correlated with each measure of Health. (However when disease severity and demographics were controlled for only Family domain remained a significant associated with PRs (Mflp β -.237; P <.05p), and Friends with I (Fatigue β -.375; P <.01) and AL (mFLP β -.250; P <.05).

Discussion

SN, specifically family and friends, are an important determinant of health outcomes in MS. The findings further suggest SN influence health outcomes independently of disease severity.

Poster Presentation Abstracts

Anomia as a factor predicting subjective well-being

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Subjective well-being is recognized as one of the important indicators of health. The purpose of this research was to determine how dimensions of anomia are associated with subjective well-being and which dimensions of anomia best predict global life satisfaction and global sense of happiness.

The secondary data from the third European Quality of Life Survey were used. 1009 respondents (residents of Latvia) aged between 18 and 92 years participated in the research (34.9% males, 65.1% females). 3 subscales of anomia (Trustworthiness to Government and Other Social Institutions, Social Isolation and Meaninglessness) were constructed. To assess subjective well-being ten questions of EQLS were used.

It was found that three dimensions of anomia were negatively associated with global life satisfaction, domain satisfaction and global sense of happiness. Meaninglessness, social isolation and trustworthiness significantly predict global life satisfaction, $F(3,797) = 174.55$, $p = .000$, $R^2 = .40\%$. Meaninglessness and social isolation significantly predict global sense of happiness, $F(2,792) = 189.25$, $p = .000$, $R^2 = .32\%$. Dimensions of anomia could be useful in prediction of subjective well-being.

Poster Presentation Abstracts

The relationship between perceived racism, sleep disturbance and quality of life

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Objectives

This study examined the relationship between perceived racism, sleep disturbance and quality of life.

Methods

Seventy legal immigrants, 18 to 60 years of age, with fluency in English were approached in the central department of 10 non-profit organizations. The design is a correlational survey design. Self-reported questionnaires assessed perceived racism, sleep disturbance and quality of life.

Results

Increased levels of perceived racism are associated with sleep deprivation and low quality of life. More specifically, perceived racism is associated with low quality of social relationships and environment. Linear multiple regressions showed that perceived racism significantly predicted reduced quality of social relationships and environment. Similarly, sleep disturbance and low sleep quality predicted reduced quality of social relationships and environment.

Conclusions

This study is the first to examine the association between perceived racism, sleep disturbance and quality of life in immigrants of Greece, and adds to the research literature by identifying a potential pathway through which racism may affect sleep and well-being.

Poster Presentation Abstracts

The benefits of classic and enhanced tasks of expressive writing for emotional well-being of students

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Background

This study aims to evaluate the efficiency of a classical expressive writing task and of an expressive writing task improved with REBT on students' emotional well-being.

Methods

Sixty students (with subclinical depression) were randomly distributed in one of the three experimental groups: the classical experimental group (N=21), the experimental group improved with REBT (N=20) and the control group (N=19). Self-reported measures of the negative and positive affect were collected in the first day of the intervention and four weeks after its completion. The emotional state of the participants was assessed by the Beck Depression Inventory and Profile of Mood States.

Findings

Our results indicate that both experimental tasks succeed to significantly reduce levels of depression and anger. In the case of the experimental group improved with REBT it was also observed an increase in the positive affect level at T2, in comparasion with T1.

Discussion

The result obtained for the positive affect in the case of the experimental group improved with REBT is a promising one. For future research, we recommend the replication of the study among other populations.

Poster Presentation Abstracts

Self-rated health changes depending on respondents gender, age and education level

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Background

Self-rated health (SRH) is a complex health indicator recommended by WHO, commonly used in health psychology (HP) investigations. The aim of this study is to disclose possible linkages between SRH gender, age and educational level of respondents.

Methods

582 males and 859 females were investigated within the framework of teaching project held in HP master programme. Average age – 37.2 years. The six items, unifactor, self-reported scale with standard 5 cut points answers was used. Each item included the word “health” in different evaluative context. $Cr.\alpha = 0.8$. Data was analysed by contingency tables and Student criterion with the SPSS package.

Findings

The SRH was found to be more positive in males than in females, better in younger subjects than in older ones ($p < 0.05$). The SRH is gradually worsening in males and females within 10 years age brackets from 20 through 60. The best SRH was found within the respondents group having university education.

Discussion

It was confirmed that SRH is dependent on other health determinants. This may be important for planning HP intervention in maintenance and promotion of health.

Poster Presentation Abstracts

Students' well-being: impacts of studying out-EU and perceived autonomy on the psychological quality of life

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Background

Well-being of university students plays an essential role in the success of a master's degree and future career. The Luxembourgish government helps students with a financial aid attributed independently of their socioeconomic status. Some choose to study abroad. What relationships exist between their Psychological Quality of Life (Psy-QoL), career goals, perceived autonomy and the country of their university (Luxembourg, European Union, Out-EU)?

Methods

An online questionnaire was sent to all students who received financial aid. Psy-QoL, career goals, autonomy and study country were assessed. A multiple linear regression was used.

Findings

526 students participated (55% women, age 27.1 \pm 0.610 years). Participants who studied out-EU had higher Psy-QoL and higher autonomy than those who stayed in border universities (France Belgium or Germany; $p=0.033^*$ and $p=0.016^*$ respectively). Psy-QoL was mostly impacted by perceived autonomy ($\beta=0.45^{***}$) and study country ($\beta=0.07$ (adjusted $R^2=0.213$)).

Discussion

Students with a better psychological quality of life mobilized their capabilities to study out of their country, which is related with better autonomy. Implementing workshops to increase individual skills may improve and/or maintain wellbeing and limit social inequalities.

Poster Presentation Abstracts

Mindfulness and satisfaction with physical activity: a longitudinal study

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Satisfaction with physical activity is formed when positive experiences outweigh the negative ones. Therefore, awareness of these positive experiences and acceptance of potential negative experiences with physical activity is likely to influence satisfaction. Awareness and acceptance are key elements of mindfulness and may, thus, relate to satisfaction. We aim to examine how mindfulness, negative and positive experiences and satisfaction unfold on a daily basis.

Using a longitudinal design, 225 Dutch participants responded for 14 days to questions on their physical activity behavior, mindfulness, positive and negative experiences with physical activity and satisfaction. The data was collected via internet.

Preliminary multilevel modeling indicated that positive and negative experiences, as well as mindfulness related to satisfaction in the expected direction, showing significant within-and between subjects variability. Further analyses will test a cross-lagged model and explore whether experiences on one moment predict satisfaction on subsequent moments, as well as the moderating role of mindfulness.

The daily fluctuation in the relationship between mindfulness, experiences with physical activity, satisfaction and physical activity behavior could be used to develop momentary interventions to sustain physical activity.

Poster Presentation Abstracts

Loneliness and internet addiction of adolescents

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Background

The aim of study was to assess relationships between internet addiction, loneliness and adolescents' quality of life.

Methods

The survey was conducted on a sample of 376 students, mean age 16. Questionnaire contained the Young's Internet Addiction Test, the De Jong Gierveld Loneliness Scale and KIDSCREEN-10. Data were analysed using SPSS and AMOS programs.

Findings

Almost 12% of adolescents were identified as internet addicted, the next 8% as at risk of addiction. 37,8% of young people were moderate lonely, 2,5% - severe lonely. Partial correlations with age and gender as controlled variables revealed statistically significant relationships between internet addiction and overall ($r = 0,24$) and emotional loneliness ($r = 0,26$), but not social loneliness. Level of loneliness (overall, emotional and social) was negatively correlated with quality of life (accordingly $-0,39$; $-0,41$; $-0,14$). Two different models of relationships between analysed variables were tested, but only model (where loneliness was a mediator between internet addiction and quality of life) achieved good fit parameters.

Discussion

Emotional consequences of internet addiction are dangerous for adolescents' quality of life.

Poster Presentation Abstracts

Attitudes towards help and help seeking behavior of suicidal Lithuanian adolescents

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Surveys of show that suicidal ideation and behavior is highly spread among Lithuanian schoolchildren.

Aim:

To evaluate an attitudes towards help and help seeking behavior among 13 and 15 year old Lithuanian schoolchildren.

Methods

Data from the Health Behaviors in School-aged Children (HBSC) study, collected in Lithuania during 2014 school-year were used in present analyses. The sample of 3715 thirteen and fifteen year old schoolchildren were surveyed anonymously. Multivariate logistic regression model was applied to investigate the importance of adolescents' help seeking attitudes for suicidal risk.

Findings

The research show that suicidal adolescents are more prone to express negative attitudes towards help seeking in comparison to non-suicidal ones. Boys in comparison to girls were more likely to state that nobody is able to help and it is shameful to ask for help while facing emotional problems. All investigated adolescents were lacking information where to find help when needed.

Discussion

Adolescents' attitudes toward help seeking might be a reflection of an attitudes spread in the society. This suicide risk factor and should be taken into consideration in suicide prevention programs.

Poster Presentation Abstracts

Influence of ability to face reality and social support on self-esteem in middle school students

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Background

Our study examined associations between the ability to face reality and social support on changes in self-esteem facilitated by a psychoeducational program.

Methods

49 Japanese junior high school students were given pre-, mid- and post-tests to evaluate their self-esteem (Rosenberg, 1979), their utilization of social support (Kijima, 2008) and their ability to face reality (Matsumoto, 2008).

Findings

An examination of self-esteem growth trajectories across the program sessions and a subsequent latent growth curve model, with ability to face reality and social support as predictors, revealed a good fit with the data ($\chi^2(4) = 3.487$, ns, CFI = 1.000, RMSEA = 0.000). Social support and the ability to face reality significantly predicted the intercept ($\beta = .40$, $p < .05$; $\beta = -.36$, $p < .10$). In the low-self-esteem groups, the ability to face reality through determined control approached significance in predicting the slope ($\beta = .29$, $p < .01$).

Discussion

These results suggest that students with low-self-esteem experienced improvement as the program proceeded and it is important to promote the ability to face reality to improve self-esteem.

Poster Presentation Abstracts

Emotion regulation and behavioral problems in gifted and talented children

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Background

Gifted and talented children and their parents often report about emotional and behavioral problems. The objective of the study was to analyze emotion regulation strategies and behavioral problems in this group and to draw conclusions for health promotion strategies and resilience training.

Methods

Used for assessment were FEEL-KJ, CBCL and the intelligence test (WISC-IV). Participants were 30 children (m=10, f=20) in the age from 11 – 16. Means and correlations were computed.

Findings

The emotional dysregulation strategies and behavioral problems are not correlating with higher or lower intelligence. There are more maladaptive emotion regulation strategies in male children.

Current stage of work

Data analysis of extended sample of the study.

Discussion

More research is necessary for health and emotional problems of gifted and talented children. There is a need to special counseling approaches for gifted and talented children and for their parents. Special training of emotional competence could be developed and offered for affected children.

Poster Presentation Abstracts

The relationship between problem solving ability and responsibility among high school students

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Background

Problem solving is the combination of behavioral, cognitive and emotional reactions that people have in response to cope with external and internal challenges. The object of the present study is to evaluate the relationship between problem solving ability and responsibility among high school students.

Methods

In this study the correlation design was used. The sample consisted of 300 students which were randomly chosen. The measurement tools were PSI and Kordllo scales. Data were analyzed via correlation coefficient of Pierson.

Findings

The research findings show that there is a direct and meaningful relation between the problem solving ability and responsibility ($r=0.62$). Other results state that there are also a meaningful relations between personal control style of problem solving and responsibility with external locus of control ($r=0.44$), avoidance style of problem solving and responsibility with internal locus of control ($r=0.39$), and self reliance on problem solving and responsibility with internal locus of control ($r=0.45$).

Discussion

The results indicate that there is a direct relationship between problem solving ability and responsibility, i.e. individuals with higher responsibilities have higher problem solving abilities.

Poster Presentation Abstracts

State versus trait: validating state assessment of child and parental catastrophic thinking about child pain

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Background

Significant associations have been found between parents' catastrophic thinking about their child's pain and child disability. Studies have interchangeably used trait and state versions of catastrophic thinking measures without exploring the relative merit of or associations between these. The aim of this study is to validate state versions of the Pain Catastrophizing Scale for parents (PCS-P) and children (PCS-C), and examine associations between these and ratings of child pain.

Methods

Using a retrospective cohort design, secondary analysis will be conducted on archival data from 11 studies (children: N=1289; parents: N=1159). Exploratory and confirmatory factor analyses will be conducted to explore and cross-validate the factor structure of state PCS-P/PCS-C. Hierarchical multiple regression will be used to explore associations between state and trait PCS-P/PCS-C and child pain intensity, anxiety, and disability.

Expected Results

State PCS-P/PCS-C scores will provide information that is distinct from trait PCSP/ PCS-C scores for child pain-related outcomes.

Current Stage

Data synthesis is currently underway.

Discussion

Findings will illuminate the importance of multidimensional assessment of pain catastrophising, and provide a basis for robust measurement of state pain catastrophising.

Poster Presentation Abstracts

Genetic impairment and emotion regulation in the variability of Hereditary Angioedema symptoms: an empirical research

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Recent studies suggest that Hereditary Angioedema(HAE) attacks may be triggered or affected by psychological stress. HAE is a rare genetic disease characterized by unpredictable and variable attacks of cutaneous and mucosal edema, carrying a major impact on daily life. We explore the connection between stress, emotion regulation and the variability of the attacks.

Twelve children with HAE, aged 6 to 14, as well as their parents, were involved in a mixed-method study: 1. A qualitative thematic analysis of parent semi-structured interviews on disease variability; 2. a quantitative evaluation of the psychological profile (CBCL), perceived stress levels (CLES) and emotion regulation competences (AQC ; LEASC) of the young patients.

In the interviews, 91% of parents believe emotional and stress factors are involved in trigger-ing HAE. 83% of the children experience an above-average levels of stress, 91% of them manifest deficits in recognizing and naming emotions.

Recognition of stress as a trigger may lead parents and physicians to implicitly or explicitly suggest that stressful and intensely emotional events should be avoided, paradoxically increasing the vulnerability to stress.

Poster Presentation Abstracts

The food allergies' challenge: the role of the resources of parental resilience

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Some features of food allergies may worsen the quality of life (QoL) of the patients and their parents and can have a negative influence at the physical, social and psychological level (Cummings et al., 2010; Sicherer et al., 2001). The study aims to identify the resources of parental resilience that promote parental well-being and QoL of patients and their parents.

In this longitudinal study, parents of children undergoing Specific Oral Tolerance Induction fill out a questionnaire that explores the resources of parental resilience, psychological well-being of the parents and the QoL of the parent and the child. The data will be analyzed at both cross-sectional and longitudinal level; in both cases generalized linear models will be used.

It's assumed that a higher level of resources of parental resilience predicts a greater psychological well-being of parents and a better QoL of both parents and patients.

Today the research is on the stage of data collection.

The identification of the resources of parental resilience in this field, could provide the basis for the creation of wellbeing promotion paths in this population.

Poster Presentation Abstracts

How students and mothers view child vaccination: focus group analysis

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Background

1,291 cases of vaccination refusals were reported in Slovakia until August 2012. Over the following year the number of refusals grew to 2,595. Present paper aims to qualitatively explore background of this phenomenon.

Methods

Focus Group discussions with students and mothers of small children (N=76) were transcribed and analysed by qualitative analysis software using several theoretical frameworks.

Findings

Mothers make vaccination decisions within stressful context of newborn screening calls. In such conditions decision making is often subject to biases and driven by fear. It is more likely for mothers to vaccinate first child and not to vaccinate further children since parents have had time to formulate their positions. Decisions are mostly supported by friends with medical or pharmaceutical background whom parents usually trust and consider them to be experts.

Discussion

Parents attempt to balance an array of potential risks of vaccinating or not vaccinating. The process could be explained by several heuristics, e.g. Ambiguity Aversion Heuristics (Leask, s.a.) or Affect Heuristics (Slovic et al., 2007). The theme of trust also tends to resonate repeatedly. (VEGA Grant 2/0154/13)

Poster Presentation Abstracts

Complementary/alternative medicine and treatment non-adherence in multiple sclerosis: psychological factors and consequences for patients

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Background

Multiple sclerosis is the first cause of non-traumatic disability by young people in developed countries. There is currently no curative treatment for this disease. This research is focused on the non-adherence to treatment, the use of alternative/complementary medicine, and self-medication by the patients.

Methods

Population: 25 patients; data collection: 2 semi-directive interviews per patient; data analysis: IPA and clinical analysis (qualitative approach).

Findings

Themes developed: real-life experience and content of the diagnosis disclosure and the treatments' presentation; beliefs, representations and life-experience link to this disease and treatments; patient's expectations and complexity of the doctor-patient relationship; consequences of the rupture of the trust relationship between patients and neurologists; psychological factors link to the non-adherence; different types of alternative/complementary medicines used by multiple sclerosis' patients, self-medication and factors linked to these complex health behaviours;...

Discussion

Patients' distrust toward the treatments' effectiveness, beliefs and angers linked to the disease and treatments, and feeling of powerlessness due to the progressively crippling character of MS explain the high presence of these health behaviours (risks for health) in order not to suffer passively the disease.

Poster Presentation Abstracts

Exploring the relationship between health beliefs and medication adherence in individuals with asthma

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Aim

To better understand medication-taking behaviour in asthma, the present study aimed to investigate how beliefs about medicines, illness perceptions and locus of control beliefs are related to each other and with medication adherence.

Method

Cross-sectional data was collected from a convenience sample of 113 adults with asthma recruited from community pharmacies and through advertisement on the National Asthma Organisation website. Participants completed a survey of validated questionnaires (Beliefs about Medicines Questionnaire, Brief Illness Perception Questionnaire, Multi-Health Locus of Control Scale and Medication Adherence Report Scale) to elicit health beliefs and medication adherence.

Results

Medication adherence was associated with few concerns about asthma medicines ($r=-0.26$, $p=0.01$), good understanding of asthma ($r=0.26$, $p=0.009$) and a strong belief in the doctor to control their asthma ($r=0.44$, $p<0.001$). Illness perceptions and locus of control beliefs were also related to beliefs about medicines.

Discussion

This study suggests that beliefs about medicines, illness perceptions and locus of control beliefs play an important role in adherence decisions in asthma. Our next step is to further investigate the relationship between these beliefs and how they impact adherence.

Poster Presentation Abstracts

Using the Affect Misattribution Procedure to measure attitudes towards conventional and herbal medicines and adherence

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Background

This project aims to produce a new implicit measure, using the Affective Misattribution Procedure (AMP), to measure attitudes toward conventional vs herbal medicines and predict adherence.

Methods

We plan to recruit initially a convenience sample of 100 participants, followed by a population representative sample of 150. Each participant will complete the AMP, Beliefs about Medicines, Personality Sensitivity to Medicines, Medication Adherence Rating Scale and Probabilistic Medicines Adherence Scale.

Expected results

We expect that the implicit measure will explain additional unique variance to predict adherence. We will also be able to compare the AMP results with previously collected Implicit Association Test (IAT) results from the 150 person cohort.

Current stage of work

Design is near completion; we anticipate being able to present results in September.

Discussion

Currently, the IAT is the most commonly used implicit measure in health psychology, but the AMP holds promise both with respect to effect size, reliability and to measuring attitudes towards more specific targets.

Poster Presentation Abstracts

Psychometric evaluation of the German version of the Beliefs about Depression Questionnaire (BDQ)

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Background

The objective of this study was to psychometrically evaluate the German version of the Beliefs about Depression Questionnaire (BDQ). This illness specific measure is based on Leventhal's five dimensions of illness perceptions (identity, timeline, causes, cure/control, consequences).

Methods

Analyses were carried out in a cross-sectional study of N = 198 depressive inpatients. Factorial validity and factor reliability were analysed using confirmatory factor analysis. Measures of depression severity, self-efficacy, and generic illness beliefs were used to investigate construct validity. Test-retest reliability was determined in a subsample (N = 47).

Findings

The factorial structure of the dimension identity was rejected. The structure of timeline was fully -and the structure of the other dimensions partly- confirmed. Altogether, 14 of the 16 remaining scales show acceptable factor reliability coefficients (.63 - .99) and 15 scales exhibit acceptable test-retest reliability (ICC \geq .496). BDQ-scales and measures were associated in the expected way.

Discussion

The German BDQ is a nearly acceptable reliable and valid measure, which enables depression-specific assessment of patients' perception in German samples. Nonetheless, potential for improvement remains.

Poster Presentation Abstracts

Patient reports of diabetes compliance: a meta-ethnography

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Background

Qualitative methodologies are widely used to understand and explore factors related to diabetes compliance (i.e., adherence to diet, exercise, self – monitoring and medical regimen). The present study aims to synthesize these findings to consolidate and better understand psychosocial factors associated with adherence.

Methods

Meta-ethnography, a method of qualitative data synthesis, was used and 24 studies were included for analyses. Analyses included the following seven steps (Noblit & Hare, 1988): (1) getting started, (2) determining what is relevant to initial interest, (3) reading the studies, (4) evaluating how the studies are related, (5) translating studies into one another, (6) synthesizing the translation, and (7) expressing the synthesis.

Findings

Five key themes emerged as the main factors associated with compliance: (i) illness and treatment awareness/knowledge, (ii) attitudes towards illness and physician, (iii) illness beliefs, (iv) motivation: psychological, socio-cultural, structural factors, (v) physician-patient relationship

Discussion

The meta-ethnography revealed that there were multiple psychosocial factors that influenced patients' compliance to their diabetes regimen. Future research must take into consideration these factors when developing interventions to improve adherence.

Poster Presentation Abstracts

The impact of palliative care on cancer patients' quality of life: systematic review and meta-analysis

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Background

The aim of the study is to investigate and assess the quality of evidence on the impact of palliative care in cancer patients' health-related quality of life (HRQOL).

Methods

A systematic review will be undertaken. The following databases will be searched using specific keywords for published papers: PsycInfo, PubMed, Embase, Medline and Cinahl. All of the papers retrieved will be qualitatively assessed on a number of quality criteria. Consistency among the observational ratings will be assessed using the inter-rater reliability. Studies that achieve certain quality criteria will be included in a meta-analysis which will be run based on the principles of the random-effects models.

Expected results

It is expected that evidence will designate that palliative care has an impact on cancer patients' HRQOL.

Current stage of work

Currently the preliminary searches were conducted and the abstracts of identified studies are assessed against the inclusion criteria.

Discussion

This study can guide policy and practice on palliative care integration. The study can also benefit the understanding of the association between psychosocial factors enhanced by palliative care and an individual's HRQOL.

Poster Presentation Abstracts

Quality of life and psychological distress in patients with advanced cancer and pain

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Background

The prevalence of depression was found to be higher in cancer patients with severe pain. This study aimed to further understanding of the relationship by examining the psychological distress symptoms on the health-related quality of life (HRQoL).

Method

The sample included 125 patients with advanced cancer and pain (82% reported moderate to severe pain, according to VAS) admitted to a palliative setting. The Symptom Distress Checklist (SCL-90) for psychological distress and the WHOQOL-BREF for HRQoL were used.

Findings

The patients studied, scored high on certain SCL-90 dimensions such as Depression, Sleep Disturbances and Thoughts of Death. Depression measured by the SCL-90 has strong associations with Physical, Psychological and Environment HRQoL. Statistically significant effects were also detected for Guilt, Obsessive-Compulsive, Paranoid Ideation and Interpersonal Sensitivity symptoms on certain domains of WHOQOL. Results were in all cases not influenced by the pain severity, metastasis, type of cancer, disease duration or any socio-demographic differences among patients.

Discussion

These findings suggest that psychiatric manifestations are increased in patients with advanced cancer and pain and that focused psychological interventions could improve patients' HRQoL.

Poster Presentation Abstracts

Emotion regulation, self-efficacy, disease severity, and psychological adjustment in patients with inflammatory bowel disease

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Objective

Inflammatory Bowel Disease (IBD) patients have been found to experience less self-efficacy and use more maladaptive emotion regulation strategies (ERS), which in turn have frequently been shown to lead to lowered psychological adjustment. Also, there is inconsistent evidence whether usage of ERS may alter in dependency of disease severity. This study aimed to investigate if disease severity and self-efficacy mediate the relation between ERS and psychological adjustment.

Design

A sample of 106 IDB patients completed an online questionnaire assessing psychological adjustment, adaptive and maladaptive ERS, disease severity, and self-efficacy.

Results

Multiple regression analyses revealed that self-efficacy and adaptive and maladaptive ERS, but not disease severity predicted psychological adjustment. Self-efficacy fully mediated the correlation between adaptive ERS and psychological adjustment and partially mediated the correlation between maladaptive ERS and psychological adjustment.

Conclusion

The results are in line with previous findings and highlight the role of self-efficacy as a key variable for improvement of psychological adjustment in patients with IBD, regardless of actual disease severity.

Poster Presentation Abstracts

Psychological problems after discharge from the Intensive Care Unit: the need for aftercare

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Background

After discharge from the Intensive Care Unit (ICU) many patients suffer from anxiety, depression or posttraumatic stress disorder (PTSD). Purpose of this study was to explore the need for a psychosocial aftercare program among ex-ICU patients.

Methods

A survey was carried out among 109 ex-ICU patients with a minimum 2-day stay. Three months after discharge, they completed a set of questionnaires to measure the levels of depression and anxiety (Hospital Anxiety and Depression Scale), PTSD (Impact of Event Scale), Quality of life (SF36), IC experiences (ICE questionnaire) and the need for aftercare (Need for Aftercare Questionnaire-ICU).

Findings

Results show that psychological problems (depression, anxiety and PTSS), Quality of life and IC experiences significantly contributed to the need for psychosocial aftercare ($p < 0.001$). More frightening IC experiences and less memories of the ICU admission were associated with more psychological problems and an increased need for aftercare ($P < 0.001$).

Discussion

This study emphasizes the importance of psychosocial aftercare to help former ICU patients to deal with the psychological aftermath after discharge from the ICU.

Poster Presentation Abstracts

Hope, empathy gaps and pain perception in patients with chronic spondylalgia

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Chronic spondylalgia affects 50-80% of the population. Hope is a factor which may influence coping with pain as well as cognitive reflection of pain experience. The aim of the study has been to check: 1) whether dependencies exist between hope-state and the pain perception; 2) whether experiencing pain at the time of filling questionnaires matters for the level of hope; 3) whether there is interaction between hope, the pain experienced at the moment of investigation, and memory of the intensity of previously experienced pain. 150 patients with chronic spondylalgia participated in the study. The study was a cross-sectional study, based on questionnaires (State Hope Scale, and NRS of Pain). The presence of pain at the time of filling questionnaires results in reducing the hope-state, but only in those persons, who had experienced severe pain previously. In case of patients who had experienced slight pain previously, the pain present when filling in the questionnaires is conducive to enhanced hope-state. The results of the study confirm the complex character of relations between hope and pain.

Poster Presentation Abstracts

Expectations influence induced scratching behavior in patients with atopic dermatitis and healthy controls

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Background

Itch and scratching can be induced by itch-related audiovisual stimuli. This study investigates whether expectations towards itch stimuli influence induced itch and scratching in patients with atopic dermatitis (AD) and healthy controls (HC).

Methods

40 AD-patients and 40 HC were randomized to an 'informed' (IG) or 'uninformed' group (UG). They were shown an itch-inducing experimental video (EV) and a control video (CV). The IG was told that the videos induce itch in many persons, the UG was not. Scratching during the video presentations was evaluated by two persons.

Findings

Compared to the CV, the EV induced itch and scratching ($p \leq 0.01$). IG and UG did not differ in induced itch intensity ($p > 0.05$). Concerning induced scratching, the UG showed a higher increase in the number of scratch movements ($p = 0.001$) and scratch duration ($p < 0.001$) compared to the IG.

Discussion

The results indicate that being 'warned' about itch stimuli increases the possibility to prevent scratching. Next, informed AD-patients and HC should be compared regarding their capability to prevent themselves from scratching.

Poster Presentation Abstracts

Stigma experiences among substance users with HIV

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Two conditions that are highly stigmatized are substance use and HIV. In this qualitative study, we investigated, through thematic analyses of verbatim transcripts, 15 substance users' experiences with receiving their diagnosis, making disclosure decisions, and receiving and dealing with stigmatizing reactions. Motivations to disclose included being in poor health, having visible symptoms, others seeing HIV medication, poor medication access without disclosure, being asked directly, emotional catharsis, believing that the target will maintain confidentiality, notifying a partner of risk, and disclosing to reduce stigma. Reasons for concealment were needing time to process the diagnosis, fear of stigmatization, previous negative experiences with disclosure, being advised to conceal, not wanting to burden others, and believing that one's HIV is irrelevant. Stigmatizing reactions from others included increased physical distance, excessive precautions, social avoidance, abandonment, rejection, exclusion, judgment, blame, name calling, gossip, denial, and requests to conceal status. Layered stigma was prevalent and substance use stigma was reported to be greater than HIV stigma. Emotional and social consequences were reported, as were a number of coping strategies. Findings are important input for stigma reduction.

Poster Presentation Abstracts

Health Promotion for people with chronic pain at a Norwegian Healthy Life Center

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Background

People living with chronic pain may benefit from identifying and activating their health resources. However, knowledge about what constitutes an optimal non-pharmacological intervention to promote health for people with chronic pain is sparse, along with knowledge about their expectations and experiences with a health promotion (HP) intervention.

Methods

A randomized controlled trial (RCT) will study the effect of an HP intervention at a Healthy Life Center. Healthy Life Centers are recently established as a part of the community health care services in Norway. Qualitative individual interviews nested within the RCT will explore this group of people's expectations and experiences with the intervention.

Expected results

The project will provide knowledge about the effect of an HP intervention, comprising subjective (activation, well-being, pain, sense of coherence), objective (muscle strength and balance) and economic health outcomes (prescribed medications and use of health care services). The project will also provide knowledge about people's expectations and experiences with an HP intervention.

Current state of work

Planning.

Discussion

Implications of these findings will be important in the further development of Healthy Life Centers.

Poster Presentation Abstracts

Regaining mastery during dialysis

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Background

Dialysis is a medical treatment for end-stage kidney disease with serious implications, such as severe fatigue and a strict regimen limiting daily activities. According to research, patients undergoing dialysis perceive less control over their life compared to healthy people. It therefore seems relevant to develop and evaluate an intervention aimed at enhancing perceived control in low-control dialysis patients.

Methods

A randomized controlled trial will be conducted, including 200 dialysis patients with low or decreased levels of perceived control. Patients will complete questionnaires regarding perceived control, quality of life, depression, anxiety, and fatigue. The intervention will be aimed at developing skills in self-regulation (goal setting and pursuit). Data will be analyzed by intention-to-treat principle.

Expected results

A significant larger increase in perceived control in dialysis patients in the intervention condition compared to patients in the waitinglist control condition.

Current stage of work

Intervention development.

Discussion

In case the intervention leads to an increase in perceived control in dialysis patients, the intervention could serve as an add-on to dialysis treatment, contributing to a greater quality of life of dialysis patients.

Poster Presentation Abstracts

Patient education in rheumatology : theoretical foundations and teaching

Methods

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Background

We try to identify through a detailed analysis of the scientific literature, theoretical concepts and frameworks at the heart of the patient education interventions conceived for individuals suffering from rheumatological disease, as well as pedagogical methods used to implement those intervention.

Methods

The research was carried out on 7 databases: Cairn, Pubmed, PsycINFO, Web of Knowledge, Francis, BDSP and Science Direct. We have included 189 articles.

Discussion

Until this day, it remains difficult to know the reasons for a certain intervention's efficiency because the studies are often self-sufficient in their wish to demonstrate efficiency. Consequently, individuals who are not part of the research team face some problems when trying to identify the exact content of the intervention described or when they want to know which aspects of the intervention provoke the beneficial effects for the patient. We noticed that lacked patient education programs a basic theoretical foundation that would serve as a general model to build an intervention. But first, we should assess which theories, models and concepts which make efficient intervention

Poster Presentation Abstracts

Perceptions of functioning and quality of life outcomes from a 3-week pain rehabilitation program

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Background

Chronic pain is a major public health concern, and rates of long-term prescription opiates in the United States have been exceedingly high. Alternatively, interdisciplinary pain rehabilitation programs are based on functional restoration with a biopsychosocial emphasis. This study evaluates outcomes from an intensive outpatient pain rehabilitation program incorporating physical reconditioning, cognitive-behavioral therapy, and opiate withdrawal.

Methods

Participants in this study will include 298 patients who completed the Mayo Clinic 3-Week Comprehensive Pain Rehabilitation Program. Survey measures on functioning and quality of life were completed at admission, discharge, and 6 months posttreatment.

Findings

Preliminary data analysis suggests that patients reported significantly improved outcomes for pain interference, $F(2,88) = 22.99$, $p < .001$, quality of life, $F(2,88) = 18.32$, $p < .001$, pain catastrophizing, $F(2,88) = 23.97$, $p < .001$, and depressed mood, $F(2,88) = 29.42$, $p < .001$. Importantly, these improvements remained significant at 6-month follow up.

Discussion

The data presented add to growing research supporting functional restoration and cognitive-behavioral approaches for chronic pain. This treatment approach will be presented along with recommendations for future research.

Poster Presentation Abstracts

Patients' experiences of the bariatric surgery pathway: feedback on a health psychology led intervention

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Background

Although bariatric surgery is considered the most effective form of obesity management, some patients describe how their psychological issues remain neglected. This study evaluated patients' feedback on additional psychological support (bariatric rehabilitation service, BRS) received as part of a trial and experiences of the bariatric surgical pathway.

Methods

24 months after surgery patients were sent a short survey, using rating scales and open text boxes, for feedback on actual and ideal timing and content of additional support (n=68). Additionally, 16 patients participated in telephone interviews concerning their experiences of surgery.

Findings

A large majority of those who received the BRS reported satisfaction with the service's timing and content. But, regardless of condition, the majority reported wanting further psychological support up to 24 months postoperatively. A minority stated their problems were not emotional therefore additional support was unnecessary.

Discussion

Given the variability in feedback, psychological support before and after surgery could be delivered in relation to individual patient need rather than blanket provision. Further research is needed to determine the optimal timing and who would benefit most from added support.

Poster Presentation Abstracts

Managing cigarette cravings using the Physical over Smoking (PoS) App: a randomized control trial

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Research evidence on smokers show that even small doses of exercise can help to manage cigarette cravings and withdrawal symptoms. The purpose of this study is to test the effects of the PoS app (developed to support quitters to manage cigarette cravings by counter suggesting short exercises) on behavioral and psychological variables. An RCT intervention program is in progress with 50 participants, equally and randomly assigned to 2 groups, with the experimental group using the PoS app as a support tool after quit day. Data are now being collected, from both groups, before quitting, after quitting and for a 6 months follow up period, assessing behavioral (number of cigarettes, number of relapses and amount of physical activity) and psychological variables (e.g.: TPB constructs for physical activity, power of control on manage cravings and cravings awareness effectiveness). Repeated measures MANOVA will be performed to compare groups and it is expected that users of the PoS app will score higher than the control group in all measures. Implications for effective health communication practice are expected to be drawn among other results

Poster Presentation Abstracts

A picture of health: translating complex physical activity data into meaningful and motivating multidimensional feedback

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Background

The aim of the present research was to turn complex data from wearable physical activity monitors into visual feedback that encompasses a clear and more holistic picture of physical activity.

Methods

With an expert multidisciplinary panel and graphic design professionals we developed several representations of multidimensional feedback using minute-by-minute energy expenditure data in an iterative user centred design process. Qualitative interviews on a targeted clinical population and health professionals receiving personalised data was used to test and refine these images.

Findings

We developed 9 graphical representations of physical activity data that could clearly distinguish between individuals with high, moderate and low activity across multiple health-harnessing aspects. Features such as traffic light colours, visual discrepancies to display proximity to a target and graded activity intensity patterns were championed features of the designs.

Discussion

Complex minute by minute energy expenditure data can be suitably transformed into meaningful visual feedback that captures all health-harnessing aspects of physical activity. Researchers and practitioners can use this feedback to educate and motivate individuals who are set to benefit from lifestyle changes through goal-setting and self-monitoring.

Poster Presentation Abstracts

Evaluation of Balance it, a (mobile) serious self-regulation game intervention targeting overweight-related behaviors among students

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Background

e-Health interventions are promising, but (continued) use and effectiveness remain disappointing. Serious gaming may promote persistent use and facilitate learning. We evaluated a systematically developed serious self-regulation game intervention (“Balance it”) targeting DI and PA among Dutch students.

Methods

93 students (aged 17-18 years) evaluated “Balance it” at four weeks follow-up. A mixed methods design (self-reported and objective data) was used to map intervention use.

Findings

72% of the participants reported intervention use compared to 59% of the participants who were objectively registered by the game. Participants played “Balance it” 12.75 times on average, were more likely to set health promotion goals (e.g. walking) than risk reduction goals (snack consumption), and were more likely to achieve their health promotion goals. Goal accomplishment was related to a positive mood ($r = .24$, $p = .000$). Participants were less likely to use prompts after goal accomplishment ($r = -.30$, $p = .000$).

Discussion

The pilot study showed that gaming elements were positively evaluated and may stimulate use. Results of the effect evaluation will be presented at the conference.

Poster Presentation Abstracts

Internet-based CPA smart lifestyle program for preventing abdominal obesity in Japanese workers

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Objectives

Abdominal obesity is a major public health concern. We have developed CPA [Check-Plan-Action] smart lifestyle program to prevent abdominal obesity. The purpose of this study was to examine the efficacy of this internetbased program in Japanese workers.

Methods

Forty five subjects (Men:44.4%, Mean age:44.0+/-10.6 years, Body Mass Index: 24.0+/-3.4 kg/m²) received a CPA booklet, a pedometer, and a mobile-based self-monitoring system ID. According to the CPA booklet, they set two or three behavioural goals (PA or nutrition), they monitored their goal attainment, weight and daily walking step for 3 months via internet.

Results

After 3 months, waist circumference was significantly lost (Pre: 86.3+/-9.7, Post: 85.0+/-10.4 [cm]). HbA1c (Pre: 4.9+/-0.4, Post: 4.8+/-0.4 [%]) and HDL-cholesterol (Pre: 67.3+/-15.6, Post: 70.8+/-16.8 [mg/dl]) were significantly improved after 3 months. The most adhered participants lost waist circumference more than other participants.

Conclusions

These results suggested that internet-based CPA smart lifestyle program may have short-term effects on weight control and some metabolic risk factors.

Acknowledgement

This study was supported by Health and Labour Sciences Research Grants from Ministry of Health, Labour and Welfare in Japan.

Poster Presentation Abstracts

Maternal Obesity Management using Mobile Technology (MOMTech): the results from a feasibility study

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Background

Maternal obesity and excessive gestational weight gain (GWG) are increasing in prevalence with a negative impact on pregnancy and birth outcomes. This study aimed to evaluate the feasibility and acceptability of a text messaging based complex intervention designed to support obese women to avoid excessive GWG through healthy eating and physical activity.

Methods

The complex intervention consisted of diet and activity goal setting and review (in four appointments with a midwife), weekly self-monitoring of diet and physical activity, and the receipt of daily preselected text messages. Interviews and focus groups were conducted postnatally.

Findings

Fourteen women completed the study. Participants had a lower mean GWG (6.65kg compared to a comparison group 9.74kg). Interviews/focus groups revealed that participants were positive about the intervention, and reported that the text messages served as good reminders of their goals. Suggested improvements included more variety in the text messages.

Discussion

MOMTech appears to be feasible within a clinical setting and an acceptable intervention to support women to limit GWG. The findings will be used to refine and simplify the intervention prior to trial.

Poster Presentation Abstracts

An investigation into the efficacy of a smartphone application promoting breast awareness protective behaviours

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Background

To investigate if a pre-existing smartphone application (app) can increase breast awareness in a student population by both investigating users' experiences and by coding the app functions using the Behaviour Change Technique Taxonomy (BCT) (Michie et al, 2011).

Methods

A mixed methods, single blind design will be conducted. Eighty female students will be divided into two experimental conditions (app users versus controls). Breast awareness will be measured using the Breast Awareness Questionnaire. Users' experiences of the app will be assessed using the Software Usability Measurement Inventory. The Behaviour Change Technique Taxonomy will be used to code the app functions. A 2x3 mixed analysis of variance will be conducted to detect changes in self-reported behaviour between groups.

Expected results

It is expected that app users will have a greater increase in Breast Awareness scores than controls. Current stage of work: Participant recruitment is underway.

Discussion

This research will provide a template for the evaluation of pre-existing apps and provide important insight into how the app works by coding the app functions using the BCT and by investigating users' experiences.

Poster Presentation Abstracts

Patients' evaluation of the content, appeal and usability of a dental smart-phone application – 'GezondeMond app.'

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Background

The Ivory Cross Association (www.lvorenkruis.nl) developed a tailored motivational smartphone application (app.): 'GezondeMond' aimed to improve oral health behaviour. The app. provides personal dental advises and reminders. The aim of this observational study was to explore patients' evaluation of the content, appeal and usability.

Methods

76 healthy Dutch adults, visiting the dental clinic in Almere and in Rijswijk, were asked to download the app. and to fill in an online questionnaire after 6 weeks of use. Questions regarding the content, usability and appeal were extracted from existing questionnaires (Cronbach's test: $\alpha=.79$, $\alpha=.82$, $\alpha=.92$, respectively).

Results

79% of the patients downloaded the app. of which 17% did not use the app. The content, usability and appeal of the app. were evaluated as moderately positive by the users. On a scale from 1 (low) to 5 (high), mean ratings were 3.66 (SD=.79) for the content, 3.59 (SD=.83) for appeal, and 3.82 (SD=.52) for usability.

Discussion

The availability, assimilation into patients' everyday lives and our results suggest that smart-phone applications could be potential media for improving oral health behaviour.

Poster Presentation Abstracts

Women's attribution for failure to compensate after an incidence of overeating

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Background

People tend to develop compensatory intentions after indulging in unhealthy behaviors, but rarely enact these intentions. This study explored women's causal attribution for failure to implement compensatory intentions after an incidence of overeating. Additionally, it tested whether women with internal, vs. external, attributions differ regarding BMI, self-efficacy, intention, and perceived implementation success.

Methods

An online survey, spread through social media, was completed by 478 women (Mage = 29.7 yrs., SD = 12.4) who wanted to lose (56%) or maintain weight.

Measures

Frequency of overeating, self-efficacy (2 items), compensation intention (9 items), perceived success (1 item), and reason for failure (open question). The open-answers were coded as internal or external attribution.

Findings

The most frequently reported reason was 'too busy/no time' (external). Other reasons were 'lack of motivation' (internal), 'too little self-discipline' (internal), 'too much temptation' (external), and 'situational factors' (external). Overall, slightly more external attributions (55.1%) were reported. Internal, compared to external, attributers did not differ in BMI, but reported greater self-efficacy, intention, and perceived implementation success.

Discussion

Further research should examine whether internal attributions positively predict compensatory behavior.

Poster Presentation Abstracts

Fruit and vegetable consumption, beliefs and barriers among lower-educated Dutch, Turkish and Moroccan women

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Background

This study identified differences in fruit/vegetable consumption among lower-educated Dutch, Turkish and Moroccan women, and in attitude beliefs and barriers for fruit/vegetable consumption.

Method

Cross-sectional data from 230 participants were analyzed. A food-frequency questionnaire assessed fruit/vegetable intake. Beliefs and barriers were measured using self-report questions.

Findings

Preliminary analyses among a sub-sample showed that only 41% of the women met the recommendations for fruit and 35% for vegetable intake. Ethnic groups did not differ in overall fruit/vegetable consumption. However, Dutch women consumed more cooked vegetables than Turkish and Moroccan women. In contrast, Turkish women consumed more raw vegetables than Dutch and Moroccan women. Turkish women consumed more dried fruit than Dutch women. Attitude beliefs were positive, e.g. that fruit/vegetables are healthy and delicious. Noticeably, more Dutch women considered fruit/vegetables expensive. An important barrier for Dutch women was limited time and for Turkish and Moroccan women to integrate fruit/vegetables in the diet.

Discussion

The attitude beliefs and barriers identified in this study can be addressed in lifestyle interventions.

Poster Presentation Abstracts

The effects of culture and social norms on weight management in Malaysia: a qualitative study

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Malaysia is ethnically and culturally diverse, 60.5% of the population are overweight or obese (2011).

Aims

Explore weight management (WM) experiences; perceived vs actual body mass index (BMI) using a visual scale and objective measures; and cultural influences on WM.

Method

Purposefully sampling people engaged in WM, through Malaysia's Ministry of Health by location, gender, profession and ethnicity. Semi-structured interviews designed to assess experiences of WM using behavioural theories were conducted (n=46). Data analysis followed principles of framework and thematic analysis.

Findings

Participants on weight loss programs (WLP) or currently losing weight, or successfully maintaining WLP were realistic in BMI estimates. Success in WM was attributed to fear of returning to previous weight. Those not on WLP, failed to lose weight or maintain weight loss attributed failure to time and social factors. Both successful & unsuccessful WM weight managers perceived social and cultural norms as strong barriers to weight loss and believed monitoring by healthcare providers was strong motivation for success.

Conclusion

WM requires active and continuous participation beyond healthcare monitoring and is heavily driven by cultural and social norms.

Poster Presentation Abstracts

Understanding food behaviour regarding colic nutrients: a qualitative study

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Background

The Food4Gut project focuses on the impact of foods rich in a type of special fibers, 'colic nutrients', targeting the intestinal micro biota, in order to control and prevent obesity (and associated diabetes) in Wallonia (Belgium). One of the aims is to strengthen the behavioral epidemiological basis regarding food-related health. A qualitative study will be performed to obtain a broad view of initial responses to colic nutrients and to avoid overlooking aspects that cannot be disclosed easily in a questionnaire.

Methods

The study will include qualitative interviews with 5-7 obese patients at VUB and 5-7 people at UCL, interviews will be analyzed according to the Grounded Theory Method.

Expected Results

Spontaneous reactions and new information regarding colic nutrients.

Current stage of work

Ethical approval is obtained so research will start next week and will be finished and analysed before the conference.

Discussion

Results will be used in the following quantitative questionnaire on food frequency and food choice in Wallonia, especially regarding colic nutrients. The results also give initial insight into food behavior that can be used in interventions.

Poster Presentation Abstracts

Predictors of fish oil supplement use in Northern Irish adults

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Background

Although fish oil (FO) supplementation has reported health benefits, few studies have examined individual motivation to take it.

Objectives

To investigate how socio-demographic variables, perceptions and attitudes of the risks and benefits associated with taking FO supplements predicted their use.

Methods

A cross sectional study comparing attitudes to FO supplementation in users and non-users, in a sample of 912 community dwelling Northern Ireland adults, aged 18-80 years. A questionnaire assessed attitudes to FO use, perceptions of risks and benefits of taking the supplement, and its use as part of a healthy lifestyle and diet.

Findings

Users of FO supplements had more positive attitudes towards its usage than non-users. A hierarchical logistic regression analysis showed that FO supplementation use was predicted by being older, being male, having perceived health benefits, being necessary for a healthy lifestyle and having medicinal benefits, accounting jointly for 77% of the variance in use.

Discussion

The attitudinal predictors of FO supplementation could be used to develop more effective ways of promoting this supplement in groups that would benefit from its use.

Poster Presentation Abstracts

A month of abstinence from alcohol: self-affirmation and drink refusal self-efficacy

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Background

Drink refusal self-efficacy (DRSE) has been found to significantly predict responses to “Dry January”, a UK event involving alcohol abstinence throughout January. This study tested whether self-affirmation, the process of reflecting on important self-attributes, moderates the effect of DRSE, especially by enhancing the responses of those low in DRSE.

Methods

Participants (N = 197) completed a DRSE measure several days before being randomly allocated to condition (self-affirmation, control) and viewing Dry January 2015 informational materials. They then completed measures assessing indicators of message acceptance and motivation. Participation in Dry January was assessed at follow-up.

Findings

Self-affirmed participants and those lower in DRSE reported less message derogation. Self-affirmation also moderated the effects of DRSE: higher DRSE was associated with greater self-identity, behavioural expectations, and more positive affective attitudes regarding alcohol abstinence throughout January amongst self-affirmed participants. For controls, higher DRSE predicted more message derogation. There were no effects on participation.

Discussion

Self-affirmation can promote more positive responding to existing health promotion campaigns. Here, self-affirmation enhanced the responses of those already positively predisposed towards the behaviour (i.e., those higher in DRSE).

Poster Presentation Abstracts

Reciprocity of relationships in college freshmen's alcohol consumption: analysis of an emerging social network

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Objective

The social network of college students is important for their alcohol consumption, but the role of relationship reciprocity in this process has not yet been clarified.

Methods

Every week during the first semester, 57 Psychology freshmen indicated their alcohol drinking days, estimated number of drinks per drinking day, and their three most liked classmates (to assess reciprocated and nonreciprocated relationships).

Results

Multilevel modeling of weekly changes yielded that drinking days were adjusted to peers in reciprocated relationships only (reciprocated: $b = .15$, $p = .001$ vs. non-reciprocated: $b = -.02$, $p = .680$), while reciprocation was not important for number of drinks (reciprocated: $b = .11$, $p = .015$ vs. non-reciprocated: $b = .10$, $p = .013$).

Conclusions

Mutual liking is needed for adjusting to classmates' drinking days, but not for number of drinks per drinking day. This may be due to strategies for improving one's social status.

Poster Presentation Abstracts

Attitudes of Estonian adolescents and young adults to alcohol and tobacco consumption and digital interventions

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Background

High rates of smoking and drinking among Estonian adolescents and young adults presents a considerable future public health issue. Very little is known about the preferences for support in this understudied population. This study aims to give insight to the potential for using digital interventions in Estonia.

Method

We conducted a focus group study with three groups. Participants were 22 adolescents and young adults between 13 and 24 years of age from a high school, a youth centre and a university in Tallinn, Estonia. Framework analysis was used to analyse the data.

Results

Estonian adolescents and young adults are keen on opportunities for changing their smoking and drinking behaviour and see digital interventions as an appropriate intervention delivery method. Their knowledge of changing behaviour is lacking and they express interest in the use of personal narratives, self-monitoring and tailoring as useful behaviour change techniques in this population.

Discussion

Estonian adolescents and young adults have easy access to alcohol and cigarettes and not enough support in quitting or reducing consumption. A tailored digital intervention would be appealing to this population.

Poster Presentation Abstracts

‘Safer Nights’: evaluation of a community-based prevention program directed to alcohol abuse and related risks

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The objective of this study is the evaluation of ‘Safer Nights’, a community-based prevention program directed to alcohol abuse and related risks among young adults, provided by the Youthboard of Cyprus to promote safer night life. Participants were 340 individuals (192 females; 17-35 years old) who answered a short self-administrated questionnaire regarding the evaluation of different aspects of the prevention program in a scale from 1 (not at all satisfied) to 5 (absolutely satisfied) and open-ended questions. The majority of participants reported that they were very satisfied (Mean score=3.94, SD=.71) about the theme and the content of the programme, the approach of the program facilitators and their presence in night entertainment venues, and the usefulness of information and material provided regarding alcohol abuse consequences. Significant differences in participants’ satisfaction about the program were found between genders, age and employment status groups. Content analysis indicated that individually-tailored information about alcohol and expanding the program’s content to other dangers of night entertainment were among others the predominant categories of participants’ suggestions. The above findings provide future directions in developing similar prevention programs.

Poster Presentation Abstracts

Psychological predictors of doping susceptibility in junior athletes

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Doping represents a relevant problem even in young athletes, but empirical knowledge of psychological factors that influence this behavior remains sparse. The present study investigated the predictive potential of different psychological factors, namely well-being, confidence and fear of success, goal orientation, performance motivation and locus of control, on doping susceptibility in junior athletes.

As part of this cross-sectional study, 1,265 Austrian athletes (age: 14-19) completed psychometric scales (i.e. Berne Questionnaire of Well-Being in Adolescents; Questionnaire for Evaluating Mental Competencies and Attitudes in Sport) measuring these constructs.

According to multiple regression analysis, positive attitude towards life and performance motivation were negative, while depressive mood, self-esteem, fear of failure and self-oriented goal orientation were positive, predictors of doping susceptibility, explaining 21.7% of the variance in doping susceptibility.

The study corroborates the utility of classical constructs from health psychology in doping research. Educating athletes has already proven useful, but creating an environment that fosters self-efficacy and well-being, and reduces fear of failure, may represent the most-beneficial additional approach for future prevention.

Poster Presentation Abstracts

Comparison of the characteristics of long-term users of electronic cigarettes versus nicotine replacement therapy

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Background

Electronic cigarettes (EC) and nicotine replacement therapy (NRT) are non-tobacco nicotine delivery devices widely used as partial or complete long-term substitutes for smoking. Yet, little is known about the characteristics of long-term users, including their views of these devices.

Methods

Participants were recruited from four naturally occurring groups of long-term (≥ 6 months) users of either EC or NRT who had stopped or continued to smoke (N=36 per group, total N=144). Participants completed a questionnaire assessing socio-demographic and smoking characteristics, nicotine withdrawal symptoms, smoker identity and appraisal of products they were using.

Findings

EC use was associated with stronger smoker identity (Wald- $X^2(1)=3.9, p=0.048$) and product endorsement (Wald- $X^2(1)=4.6, p=0.024$), irrespective of smoking status. Among ex-smokers, EC users reported less severe mood symptoms (Wald- $X^2(1)=6.1, p=0.014$) and cravings (Wald- $X^2(1)=8.5, p=0.003$), higher perceived helpfulness of the product (Wald- $X^2(1)=4.8, p=0.028$) and lower intentions to stop using the product than NRT users (Wald- $X^2(1)=17.6, p<0.001$).

Discussion

Compared with NRT users, EC users have a stronger smoker identity and like their products more. EC are perceived as more helpful and effective which may maintain continued nicotine consumption among long-term users who have stopped smoking.

Poster Presentation Abstracts

Demographic and socio-cognitive variables predicting electronic cigarette experimentation in French adolescents

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Background

Electronic cigarette use is rapidly increasing, particularly among younger age groups. Relatively little is known of the factors predicting electronic cigarette experimentation, and whether these factors differ to those that predict standard cigarette usage.

Method

Data were collected using questionnaires administered in a classroom setting. Participants were 267 (107 female) French adolescents aged 15-16yrs. Data were analysed cross-sectionally.

Results

Sixty-one percent of participants had tried electronic cigarettes (vs. 57% who had tried standard cigarettes). Of those who had tried electronic cigarettes, 18% had never tried standard cigarettes. Sex, socio-economic status and father's smoking status did not predict experimentation with electronic cigarettes, but mother's smoking status did, $b=1.59$, $SE=0.56$, $p=.005$. Over and above this, attitudes, intentions, social norms and prototype evaluation and similarity did not significantly predict electronic cigarette experimentation, but self-efficacy to refrain from smoking ($b=-.66$, $p=.02$) and willingness to try smoking, did ($b=0.30$, $p=.014$).

Conclusions

Among younger age groups, electronic cigarette experimentation is highly prevalent, and usage is not solely as a cessation aid. There is some crossover between factors predicting standard and electronic cigarette experimentation.

Poster Presentation Abstracts

Attitude change in personal travel - A qualitative investigation

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Promoting non-car-mode travel has potential to contribute to reduced sedentary behaviour and the risk of respiratory health issues. But it is unclear how best to promote these alternatives. Psychological antecedents of non-car travel and switching from car to non-car use have been modelled. Qualitative investigation of these antecedents can highlight change processes and instability of psychological antecedents, including attitudes. We explored variability of transport attitudes in response to different personal goals, considering a range of transport modes. Laddering interviews were conducted with three distinct transport mode users to investigate underlying hierarchical goal and value structures. Comparison of drivers and non-drivers identified differences regarding physical activity, environment and social relationships. Results highlight that travel model attitudes are changeable and sensitive to prompted goals, showing that people's view of non-car mode transport may change over time and place. These insights imply that different communicative strategies can be effective for different people under different circumstances. The findings have implications both for future attitude measurement and intervention design.

Poster Presentation Abstracts

Using implementation intention intervention to decrease in-class sedentary behavior among students

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Background

Sedentary behavior is a major risk factor for chronic illnesses, and college students, despite their young age, are a risk group, due to long sitting hours in lectures. The objectives of the study were to examine an implementation intentions (II) intervention focused on mild sedentary-opposing behavior during and between classes on regular academic days. Hypotheses were that the experimental II group will exhibit more sedentary-opposing activities than the control group.

Methods

80 participants were randomly assigned to experimental and control conditions. Both groups were exposed to information on sedentary behavior and the experimental group was induced to form plans for sedentary-opposing behaviors in and between classes. Both groups received daily text reminders during their school days, with each person in the experimental group receiving his/her preferred plan for sedentary-opposing activity. Two weeks following the initial intervention, participants will again report on their sitting activity during the past week.

Plan of analysis

One-way ANOVA examining the II intervention.

Discussion

The results could be relevant to college administrators and students alike.

Poster Presentation Abstracts

Implementation intention and mental imagery to improve physical activity

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Background

Health-related behaviors may be difficult to initiate, like physical activity. The aim of this study is to test the effect of implementation intention and mental imagery to improve physical activity.

Methods

In a randomized control trial, participants will be allocated to a control group, to an implementation intention group or to an implementation intention plus mental imagery group. For a medium effect size, our study requires a total sample size of 54 participants. Physical activity will be measured with self-report questionnaires and special wristwatches (accelerometers) for objective measures.

Expected results

We expect that the participants in the implementation intention plus mental imagery group will have significantly higher scores on physical activity measures than participants in the two other group (calculated with an ANOVA with repeated measures, for a within-between interaction).

Current stage of work

We received the material for the measures of the physical activity and we are currently at the recruitment phase.

Discussion

This research will enable to compare the effectiveness of the mental imagery in addition to the implementation intention to initiate and maintain physical activity behaviors.

Poster Presentation Abstracts

Home and laboratory based stair-climbing interventions have equivalent training effects

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Objectives

To explore the training effects of an 8-week stair-climbing intervention completed at home or in the laboratory.

Methods

Thirty six sedentary women were randomly assigned to control (n=11), and stair climbing at home (n=13) or in the laboratory (n=12). Over 8-weeks, stair-climbing progressed from two ascents per day in week 1 and 2 to eight ascents per day in weeks 7 and 8, for five days/week at a stepping-rate of 90 steps/min. For the home-based stairclimbers, calculations based on the number and height of each participant's stairs matched the vertical displacement occurring with the laboratory stair-machine (143 stairs; 23cm each).

Findings

The stair-climbing interventions reduced weight, percentage body fat and skinfold thickness, as well as improving fitness (increased VO₂max, reduced lactate production) and serum lipid profiles (increased HDL, reduced LDL). Laboratory and home based interventions were equivalent for these variables.

Conclusions

This study reveals that home and laboratory based stair-climbing can confer similar cardiovascular health benefits in sedentary women.

Poster Presentation Abstracts

"It's not all about me": interactive effects of psychosocial and built-environment variables on physical-activity

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Background

Neighbourhood environments can support or hinder physical activity. This study examines how individual-level factors interact with environment-factors associated with physical activity in older adults.

Methods

The Active Streets, Active People study recruited 193 older adults living in a highly walkable neighbourhood in Vancouver. Participants completed questionnaires on walking attitudes, gait efficacy, social support, and neighbourhood satisfaction. To assess physical activity, participants wore an accelerometer. To test whether neighbourhood satisfaction moderated the association of individual-level variables with physical activity we estimated multiple linear regression models with interaction terms.

Findings

In total, 173 had valid accelerometry data and demonstrated high levels of daily moderate-to-vigorous physical activity (M=39.7,SD=34.1 minutes/day). Individual-level factors associated with MVPA were age and attitudes towards walking. Neighbourhood satisfaction moderated the association between gait efficacy and MVPA with stronger associations between gait efficacy and MVPA in individuals with higher levels of neighbourhood satisfaction.

Discussion

Our findings suggest that feeling confident about walking ability is not sufficient to encourage physical activity. Only when individuals are satisfied with their neighbourhood will this translate into behavior.

Poster Presentation Abstracts

Integrating cardiovascular health education with indoor cycling among female inmates: a proof of concept study

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Introduction

Female prison inmates are an understudied population with increased cardiovascular (CV) disease risk (e.g., overweight, low physical activity (PA), increased stress). This study examined feasibility of an integrated CV health promotion education+ PA program (indoor cycling) tailored to this population.

Methods

150 incarcerated women enrolled in our 8-week intervention vs. a no-treatment control. Health education topics included nutrition, PA promotion, stress and weight management, and smoking relapse prevention. Health behaviors were assessed at baseline and post-test.

Results

Preliminary results show participants characteristics were mean age = 33.8 +10.3 years; 47% smokers; 57% African American, 92% overweight/obese. CV health: At post-test, 76.5% in intervention completed the 3-minute step test compared to 23.5% in control group (p=.02). Approximately 30% in intervention had pre-post BMI reduction (19% in control). Health behaviors: Intervention women had improved post-test health knowledge (77% vs. 23% in control had improved knowledge of recommended fruit/vegetable serving sizes). 57% in intervention (vs. 43% controls) reported increasing fruits and vegetable consumption at post-test.

Discussion

Results shows feasibility of a novel behavioral intervention and can guide larger efficacy trials for this high-risk sample.

Poster Presentation Abstracts

Physician – patient communication in Rheumatology: a systematic review

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Background

Physician-patient communication in the assessment and management of rheumatic diseases can have significant impact on patients' health-related quality of life. The aim of this review is to synthesise and systematically appraise the literature reporting on physician-patient communication in Rheumatology with the goal to identify potential gaps and challenges within this area.

Methods

Systematic search of published scientific literature using standard bibliographic databases. Inclusion criteria: (1) diagnosis of a rheumatic condition; (2) patient age >18 years; (3) studies reporting findings on physicianpatient communication.

Expected results

A systematic search of five online databases (Medline, PsycInfo, EMBASE, CINAHL, WebofScience) from earliest record to January 2015 identified 455 relevant articles. Keywords and text words focused on terms related to communication factors and clinician-patient interaction. 119 papers remained after title and abstract filtering.

Current stage of work

Following quality assessment, data will be extracted and synthesised to draw conclusions.

Discussion

Findings will aim to inform the development of interventions on patient-centred care with the aim to enhance communication between physicians and patients with rheumatic disease and improve patient outcomes.

Poster Presentation Abstracts

Association between patients' satisfaction with mental health services and involvement in decision making

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Background and the aims of the current study

1) to measure association between patients' satisfaction with the different aspects of mental health care and their involvement in decision making;
2) to check the influence of different socio-demographic parameters (age, gender, diagnosis, income, employment, family status, duration of treatment).

Methods

Participants are 228 patients (age 18 - 65), with diagnosis of schizophrenia and depression, using local mental health inpatient and outpatient services in Riga.

Instruments

Verona Service Satisfaction Scale – EU, Autonomy Preferences Index scale; socio-demographic data.

Findings

Higher practical involvement in decision making is significantly associated with higher satisfaction with professionals' skills, efficacy, general satisfaction, information, types of intervention and total satisfaction ($p < 0.01$ for all). Higher desire to participate in decision making is significantly correlate with lower satisfaction with different aspects of service ($p < 0.01$ for all). Socio-demographic parameters influence difference aspects of patients' participation in decision making and satisfaction with service.

Discussion

Practical involvement in decision making helps to create position "we" not "me and they" and increase satisfaction with service..

Poster Presentation Abstracts

Emotional conditions as a function of self efficacy and health care practitioners preoperative patient's interaction

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Background

The importance of a good nursing-care and self-efficacy in hospitalized patients has been thoroughly examined indicating that along with low anxiety-depression levels, lead to better health outcomes. Several gaps remain in examining these emotional conditions in Greek preoperative patients and how they can be associated with self efficacy and nursing care.

Aim

The primary objective of this study was to test whether significant differences exist between the two groups of preoperative patients, those perceiving their surgery as of high or low risk and to tested for associations and predictions among emotional conditions and the variables.

Method

The current study used a between groups design, in a sample of 51 patients of low and high perceived risk surgery.

Results

Significant differences were found to exist preoperatively in the scores of optimism, anxiety-depression and self efficacy. In addition satisfaction-of interaction, self-efficacy, optimism and anxiety-depression scores found to be significantly associated with each other. In addition, satisfaction-of interaction found to be a significant predictor towards anxietydepression and optimism scores, while self efficacy found to be a significant predictor towards anxiety-depression scores preoperatively.

Poster Presentation Abstracts

Improving breaking bad news skills in chronic medical conditions: development of a formative self-assessment tool

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Background

This study aims to develop an online formative self-assessment tool based on questions and messages intended for physicians to guide them in a reflection about how they break bad news.

Methods

A group of psychologists and physicians worked together to analyse the literature about communication skills and the discourse of 25 patients and 22 physicians, and to develop questions and related messages about breaking bad news. The tool will then be improved both in form and in content during a pilot phase. Finally, a randomized controlled trial will be performed.

Expected results

It is expected that this tool impacts: (1) professional practice and physicians' satisfaction, (2) patients' understanding of information, satisfaction with medical care, and psychological adjustment.

Current stage at work

Currently, we have developed a set of 71 questions and related messages reviewed by a group of rheumatologists concerned by breaking bad news.

Discussion

The pilot phase will help to analyse the impact on physician behaviour and to establish the optimal tool presentation format (number of sessions per week, duration of sessions) in order to improve physicians' practice.

Poster Presentation Abstracts

French adaptation of the Medical Communication Competence Scale in the context of cancer

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Background

The study presents the French validation of Medical Communication Competence Scale (MCCS, Cegala, 1998, 2007). MCCS is a self-report scale for measuring doctors' and patients' perceptions of selfcommunication and other communication competence during a medical interview.

Method

The French version of MCCS (40-item) was administered to 218 patients with cancer (Age = 61,6 y.o. - 69,3% Female), as well as the BIPQ (Brief Illness Perception Questionnaire) and QLQ C-30 (Quality of life of cancer patients).

Results

Factor analysis showed a unidimensional structure (Cronbach's alpha = .92). Bivariate correlations between MCCS scales, BIPQ and QLQ C-30 showed a weak association between satisfaction with medical communication and treatment control ($r=0.18$), understanding ($r=0.19$) and emotional response ($r=-0.16$) representations, but no significant association with general quality of life.

Discussion

In a one-dimensional perspective, this scale is a general assessment of the quality of the patientphysician relationship and it provides a way to explore the link between this relationship and the patients' beliefs about their illness, and to improve patients' understanding of the information, satisfaction with medical care and subsequent psychological adjustment.

Poster Presentation Abstracts

Relationship between social support from supervisors, workload, autonomy, and work engagement among Norwegian nurses

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Background

There is a lack of nurses in the active working force worldwide because of a high turnover. The aim of the present study was to examine the longitudinal relationship between workload, social support from supervisors, job autonomy and work engagement.

Methods

Based on a longitudinal study, data were collected via a self-reported survey among different occupations from 2003 to 2005. In this study, only nurses' responses were used (n=1000). Structural equation modeling was used to test the longitudinal association, both regular and reversed, between the variables.

Findings

There was a reciprocal negative association between workload and work engagement. Social support had a reciprocal positive significant association to the dedication component. Autonomy was not significantly related to work engagement.

Discussion

The present study suggests that nurses' work engagement is related to features in the working environment. The findings emphasize the need to ease the workload since a heavy workload appears to reduce their level of engagement. The findings also suggest that in order to create work engagement, there is a need to focus on social support from supervisors.

Poster Presentation Abstracts

Emotional labor and burnout among GPs: the influence of perceived equity

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Emotional labor, i.e., “the effort, planning, and control needed to express organizationally desired emotions during interpersonal transactions” (Morris & Feldman, 1996, p. 98), has been shown to impact on burnout. However, to date, we don’t know to what extent this impact depends on perceived equity in the interaction.

Methods

428 GPs completed a questionnaire containing:

- The MBI-HSS (Maslach & Jackson, 1986) to assess burnout.
- The Emotional Labour Scale (Brotheridge & Lee, 1998) to assess emotional labor (Intensity and variety of emotions, surface acting, and deep acting).
- Adams’s formula adopted to GPs (Truchot, 2009) to assess perceived equity in the interaction with patients.

Results

Regression analyses revealed that emotional labor (emotion intensity and surface acting) is linked to burnout in situations of perceived inequity in GPs' interaction with patients, but not in situations of perceived equity.

Conclusion

Our results point to the necessity of taking into account perceived equity when studying the impact of emotional labour on burnout.

Poster Presentation Abstracts

Predicting psychological well-being in paid carers

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Psychological well-being (PWB) refers to an individual's subjective appraisal of self-worth, interpersonal relationships, environmental mastery and purpose in life. As such, PWB is associated with positive mental functioning and quality of life. Occupation and working environments influence PWB especially, if an individual regularly cares for others. Utilising multiple regression, the current research focused on predicting PWB in two opportunity samples (Study 1, N = 39 domestic paid-carers; Study 2, N= 60 carers supporting people with intellectual disabilities) working in various settings located in Gloucestershire, UK. In Study 1, participants completed measures of PWB, emotional intelligence, emotional exhaustion, emotional dissonance, empathy and job satisfaction. Results produced a significant model; emotional dissonance and emotional intelligence were significant predictors of PWB. In Study 2, participants completed measures of PWB, emotional intelligence, emotional exhaustion, health beliefs and health support behaviours. Results produced a significant model; emotional intelligence was the only significant predictor. Together, these results suggest that emotional intelligence is important in predicting PWB in paid carers. Interventions that enhance paid carers emotional intelligence would be beneficial in supporting them in such challenging roles.

Poster Presentation Abstracts

Psychosocial working conditions, the personality and the professional burnout at employees of the health care

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The subject of the research is connection between psychosocial working conditions, personality and professional burnout at employees of the health care. Three groups have been examined: 102 doctors with specialization, 65 doctors residents and 70 nurses. The groups were examined by questionnaire methods. It has been proved, that the professional burnout is a relevant problem in the group of employees of the health care. Psychosocial working conditions are an essential mediator in the relation personality - professional burnout in individual groups. The structure of professional role seems to be an essential indicator of the professional burnout and so determined configurations of variables in all sort groups can be an indicator of effective psychological influences.

Poster Presentation Abstracts

A critique on using body weight as a primary outcome measure

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A mixed-methods study was conducted to evaluate the feasibility of implementing a web-based dietary-focused weight loss intervention (i.e. POWeR-RN) for people with excess weight, most of who were physically active prior to the introduction of POWeR-RN (Garip & Yardley, 2013). The primary outcome measures for evaluating the efficacy of the POWeR-RN intervention were participants' (n = 43) body mass index (weight and height) and waist circumference, measured objectively at baseline and 12-weeks later. Overall usage of the POWeR-RN intervention was low, with 1.5 sessions accessed on average, out of a possible 11 sessions. A critique is presented of triangulating participants' (n = 21) views, experiences (Garip, Morton, Bridger, & Yardley, 2014), and usage of the POWeR-RN intervention on how using body weight as a primary outcome measure may negatively influence people with excess weight who are physically active. In light of the literature on the relationship between physical fitness, weight, and morbidity/mortality (Fogelholm, 2009; Lee, Artero, Sui, & Blair, 2010), health psychologists could develop interventions that focus on improving cardio-respiratory fitness, and retreat from using weight as a primary outcome measure.

Poster Presentation Abstracts

Over-reporting in handwashing self-reports: potential explanatory factors and alternative measurements

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Handwashing effectively prevents from several communicable diseases. Handwashing interventions are a program priority in development aid. Intervention evaluations are rare because handwashing is difficult to measure with observations being valid but costly and self-reports being efficient but invalid due to over-reporting (OvR). While socially desirable responding (SDR) is claimed as the main cause of OvR, the underlying factors are understudied. We investigated factors potentially explaining over-reported handwashing to gain indications for measures mitigating OvR. One alternative self-report measure was developed and tested. Data were collected cross-sectionally in Ethiopia, by observations and interviews (N = 554). Correlation and regression analyses and dependent t-tests were conducted. OvR was associated with factors potentially involved in SDR; encoding and recall of information and dissonance processes. The latter two factor groups explained OvR beyond SDR. The alternative self-report measure reduced OvR when compared to conventional self-reports. The present study is the first investigating factors explaining over-reported handwashing. It contributes to a limited evidence base on a highly important subject: how to evaluate handwashing interventions efficiently and accurately.

Poster Presentation Abstracts

Food dudes and data dudes: procedural improvements in evidencing the outcomes of behaviour change interventions

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²Bangor University, United Kingdom

Background

The Food Dudes Programmes are school-based behaviour change interventions that produce meaningful improvements in the diets of children in nursery and primary classes.

Method

As part of Programme rollouts in hundreds of UK schools and in controlled evaluations of the effectiveness of the Food Dudes, food consumption data are collected in classrooms and dining halls to evidence changes in children's eating habits over time.

What went wrong: School staff often failed to keep accurate paper records and evaluators likewise struggled with pen-and-paper measures because of busy school schedules, number of schools participating and the chaotic nature of the dining hall environments.

Possible solutions

Training school staff to use an online data capture system can improve compliance and accuracy of school records; digital photography can be used to assess positive changes to nutritional content of foods that children consume at lunchtime that result from the Food Dudes.

Conclusion

Consumption measures and feedback to schools can be improved by sensitive application of technology and appropriate engagement of staff, causing minimal disruption to the classroom and dining hall.

Poster Presentation Abstracts

An open-access digital repository of self-regulation measures for health Behaviors

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Background

The use of valid and culturally-appropriate instruments for assessing psychosocial factors related to health behavior change (HBC) ensures high standards in measurement procedures. However, researchers must have easy and open access to these measures. To address this need we built an open-access digital Repository of Portuguese measures of self-regulation for physical activity, eating behavior, and weight control.

Methods

Eligible instruments were identified through several sources (e.g. international repositories, research teams). Instruments were categorized according to the construct(s) and behavior(s) assessed. For each instrument, we extracted information on the construct(s), mode of administration, scoring, validation procedures, and psychometric properties. Additional psychometric analyses were conducted whenever necessary.

Results

Forty questionnaires were identified, 15 of which were validated to the Portuguese population. Detailed descriptions and Portuguese versions of the measures were made available in the digital Repository. The Repository is regularly updated with new instruments and additional data to the existing ones. It also contains a glossary of psychometric and theoretical construct(s) terms.

Discussion

This open access digital Repository is a valuable resource to enhance the quality of HBC research and practice..

Poster Presentation Abstracts

Data Prompted Interviews: using individual ecological data to stimulate narratives and explore meanings

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Background

An emerging trend in qualitative research is to use individual participant data to stimulate narratives in interviews. The aim is to describe the method of the data prompted interview (DPI) and highlights its potential benefits and challenges.

Methods

DPIs use personal ecological data gathered prior to the interview to stimulate discussion during the interview. Forms of data include photographs, videos, audio recordings, graphs and texts. This data can be gathered by the researcher or generated by the participant and may utilise ecological momentary assessment.

Findings

For the researcher, DPIs provide an opportunity to explore the meaning of the data and to explain data patterns. For the participant, presented stimuli give guidance for discussion and allow them to reflect. The challenges associated with conducting DPIs include practical issues such as data selection and presentation. Ethical challenges of DPI include concerns around data anonymity and sensitivity.

Discussion

In the context of health promotion and illness prevention DPI offers a unique opportunity to explore reasons, opinions, and motivations for health-related behaviors in the light of previously gathered data.

Poster Presentation Abstracts

Integrated model for evaluating the effectiveness of rhythmic movement therapy for alexithymia

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Background

The objectives of the present study were to apply the nonlinear response function model of alexithymia (ALEX) to evaluate the outcome of rhythmic movement therapy (RMT) for alexithymia and to analyze whether intervention-related changes in several psychological variables (extraversion, neuroticism, autonomy, locus of control, and hostility) were mechanisms underlying alexithymia alleviation in subjects participating in RMT group.

Methods

65 participants of Mental Health Management Program (MHMP) suffering from high level of alexithymia were randomly assigned to RMT intervention condition (N=45) or waiting-list condition (N=20)..

Findings

Computer experiments with ALEX model using pre-post scores of psychological variables of the participants of RMT and control groups indicated that ALEX model is predicting satisfactorily not only actual and prognostic levels of alexithymia, but clinically significant change as well.

Conclusion

The results of our study revealed that 1) nonlinear ALEX model is the appropriate assessment tool for evaluation the effectiveness of RMT; 2) RMT is rather effective method of psychological treatment not only for alexithymia but also for some other personal traits associated with it.

Symposium

Fidelity of behaviour change interventions – challenges and future Directions

Aims

- To demonstrate the relevance of fidelity evaluations to behaviour change interventions
- To highlight the need to define and assess the various aspects of fidelity
- To discuss challenges of measuring fidelity and present state-of-the-art methods to assess fidelity
- To discuss the potential of fidelity research in advancing behaviour change science

Rationale

Evaluating fidelity of interventions is a prerequisite for making valid conclusions about effectiveness. However, fidelity assessments are rarely reported in intervention evaluations. Without evaluation of the processes through which interventions are hypothesised to work, we limit our potential to improve our understanding of behaviour change, and hence, improve interventions and theory.

Summary

The presentations in the symposium review shortcomings of assessing and reporting fidelity in the current literature (Lorenzatto et al.), and provide examples of empirical studies that have used both qualitative and quantitative methods to evaluate fidelity, e.g., whether the intervention was delivered as intended (Hardeman et al., Simpson et al.), or whether participants enacted the behaviour change techniques that they were prompted (Hankonen et al.). Finally, professor Michie will lead a discussion about theoretical and methodological issues raised by the presentations and suggest directions for future research and implementation.

Symposium Abstracts

The assessment of intervention fidelity for smoking cessation behavioural support interventions: a systematic review

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Background

Intervention fidelity is a multidimensional concept. This review examined the extent to which five dimensions of fidelity proposed by the National Institute of Health Behaviour Change Consortium Fidelity Framework (Design; Training; Delivery; Receipt; Enactment) are assessed in smoking cessation behavioural support interventions.

Methods

Electronic database searches using terms related to fidelity, smoking cessation and behavioural interventions identified 17 eligible studies. Data was extracted on study characteristics, fidelity definitions, dimensions assessed, data collection/analysis strategies (e.g. frequency of assessments; coding frameworks; reliability; association with outcomes).

Findings

Only five studies assessed more than one fidelity dimension. Delivery was most frequently assessed (94%); Design and Enactment least frequently (6%). Fidelity was defined using variable terminology, typically assessed once, during the intervention, in a sub-sample, by audio-recording intervention sessions and rating fidelity using validated adherence checklists. 50% of studies assessed inter-rater reliability, and only two examined associations between fidelity and outcomes..

Discussion

Fidelity is not comprehensively assessed for behavioural support interventions. Standard terminology and methods for assessing fidelity are lacking, highlighting recommendations for improving fidelity evaluations and reporting practices.

Symposium Abstracts

Fidelity of very brief interventions for physical activity in primary care (VBI pilot trial)

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Background

Very brief, five-minute interventions (VBIs) for physical activity in primary care may be cost-effective, but the fidelity of their delivery and receipt is unknown. Our pilot trial assessed fidelity of three VBIs as part of preventative health checks alongside potential efficacy.

Methods

394 adults (mean (SD) = 53 (9.1) years, 59% female) were randomised to a motivational VBI (n=83), pedometer VBI (n=74), or motivational plus pedometer (combined) VBI (n=80) following the health check, or health check alone (n=157). We assessed VBI duration and practitioner adherence from 51 audio-taped consultations; and ease of delivery and receipt from interviews (37 participants, 12 practitioners).

Findings

Only the pedometer VBI was deliverable within five minutes and judged easiest to deliver by practitioners. Practitioner adherence was 62% (motivational), 72% (pedometer) and 74% (combined). Participants mentioned that VBIs fitted well within the health checks and reminded them of the importance of physical activity.

Discussion

VBIs for physical activity can be delivered faithfully in routine consultations. A large-scale trial is evaluating cost-effectiveness of the pedometer VBI.

Symposium Abstracts

Weight loss maintenance in adults: the WILMA trial process evaluation

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Weight loss maintenance interventions have had limited effectiveness. We assessed an intervention based on Motivational Interviewing (MI) in a 3-arm RCT. This paper outlines the trial process evaluation framework, presents the results of the fidelity assessment and discusses key challenges in measuring fidelity.

We developed a mixed methods process evaluation framework and a logic model which outlined the components of the intervention and the processes by which the intervention brings about change through theorised mediators.

The intervention was successfully delivered by trained counsellors. There were some issues with telephone delivery and use of the website for self-monitoring. The data gave some support to the theorised intervention model. The MI was delivered with good fidelity, although assessing fidelity raised a number of issues including obtaining recordings of sessions, over-manualising, identifying a gold standard, cost and the degree of flexibility in delivery that is acceptable.

These methods are crucial for understanding how interventions are implemented and how they produce change and there are many issues to be considered at the design stage, in particular in relation to assessing fidelity.

Symposium Abstracts

Use of behavior change techniques in a school-based physical activity intervention: Feasibility study results

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Background

Interventions rarely measure whether participants actually use the intended behavior change techniques (BCTs). We investigated uptake of BCTs and intervention acceptability of the Let's Move It program that aimed to increase physical activity (PA).

Methods

In a randomized feasibility study, six group intervention sessions were delivered within 4-5 weeks. Participants (N=43) reported their use of 14 BCTs at baseline, post-intervention and six months. PA was measured with accelerometers. Intervention participants rated satisfaction (acceptability) post-intervention.

Findings

Acceptability ratings were high (M=6.29, SD=0.56, scale range 1-7). Intervention group reported increased use of BCTs post-intervention. Post-intervention, the proportion of weekly users of BCTs ranged from 50% to 80%, e.g., 50% reported having used self-monitoring and 65% coping planning. BCT use correlated with objectively measured PA ($r=.41$, $p<.05$).

Discussion

Even in well delivered and acceptable interventions, participants' enactment of BCTs may remain lower than expected. Participants might choose to use the BCTs they see as the most valuable. Investigating BCT use enabled identifying needs for improvement in intervention design, and strategies to promote BCT use were included in the optimized intervention.

Symposium

Innovative approaches in eHealth interventions

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Aims

The aim of this symposium is to present innovative approaches in eHealth interventions that can positively influence levels of reach, use and effectiveness. The symposium will consider the effectiveness of interventions developed for different target groups, including not only the general population, but also young adults and cancer survivors. In addition, the effects on several health behaviours, ranging from mental health to dietary intake, smoking cessation and multiple behaviour change are discussed.

Rationale

eHealth interventions have been proven to be effective in changing health behaviours. However, their actual impact on public health is often limited due to suboptimal levels of reach and use by the target group. It is therefore imperative to invest in innovative strategies to optimize reach, use and effectiveness of these interventions.

Summary

De Vries will open this symposium by demonstrating innovative strategies that can be used to achieve multiple behaviour change with an eHealth intervention for the general population, by focusing on a sequential and simultaneous approach to lifestyle change. Savvides developed an Avatar led Acceptance and Commitment Therapy (ACT) eHealth intervention and examined how adding insights from ACT can stimulate smoking cessation among young adults. Willems will address the use of an eHealth intervention to increase the quality of life among cancer survivor by assisting them in dealing with frequently occurring psychological problems. Storm will then focus on compensatory health beliefs which have been found to interfere with the adoption and maintenance of recommended health behaviours. Her study focuses on the influence of these beliefs on health behaviour change supported by an eHealth intervention. Finally, Schneider will focus on increasing the public health impact of eHealth interventions by using a proactive strategy to disseminate an eHealth intervention promoting mental fitness. Positive effects regarding levels of reach, use and effectiveness will be discussed.

Symposium Abstracts

Sequential or simultaneous behavior change via a computer tailored eHealth intervention

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Background

Interventions focusing on multiple behaviors can have a greater impact on public health than single-behavior interventions, but are more extensive and demanding. This study assessed the effect and cost-effectiveness of a sequential and simultaneous computer-tailored web-based intervention on multiple behaviors.

Methods

An RCT was conducted with a sequential, simultaneous and control condition. Respondents (N=5,055) received feedback indicating whether they complied with the Dutch guidelines for physical activity, vegetable consumption, fruit consumption, alcohol intake, and smoking. Participants in the sequential and simultaneous condition received tailored feedback to change unhealthy behaviors one at a time (sequential) or all at the same time (simultaneous).

Findings

Both tailoring strategies were effective in improving lifestyle after 12 months, whereas the simultaneous condition was most effective after 24 months. There were no educational differences in the effectiveness. In addition, the economic evaluation revealed that the simultaneous condition was most cost-effective.

Discussion

Despite the fact that suggesting behavior change for several health behaviors can be very demanding, our results suggest that a lifestyle approach can be more effective than an approach addressing one behavior.

Symposium Abstracts

Evaluating an acceptance and commitment therapy internet-based intervention for smoking cessation in young adults

S.N. Savvides¹, M. Karekla¹

¹University of Cyprus, Cyprus

Smoking remains a global concern, especially in youth, and cessation practices have not sufficiently achieved to make youth quit. The present study aimed to: 1) create an Avatar led Acceptance and Commitment Therapy (ACT) internet-based intervention for smoking cessation in youth; 2) evaluate program satisfaction and 3) its effectiveness. Participants were 357 high school and university students, aged 15-28 years old ($M = 21.06$, $SD = 2.96$) randomized to either ACT or waitlist-control group. Participants found the 6 online sessions satisfactory, useful, and motivating. Individuals in the treatment group had significantly higher quit rates than control (51.9% vs. 14.3%; $OR = 6.46$, 95% $CI = 1.76 - 23.71$, $p = .005$) and significant decreases in nicotine dependence, number of cigarettes smoked and increases in self-efficacy and intention to quit, acceptance of smoking triggers and cognitive defusion. The treatment was found to work via its proposed mechanisms of action, as cognitive defusion mediated the relationship between group and cessation self-efficacy and intention to quit. Results are encouraging for the use of internet-based, avatar led ACT, in smoking cessation for youth.

Symposium Abstracts

Short-term effectiveness of an eHealth intervention aimed at improving cancer survivors' quality of life

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Background

Since eHealth can be a valuable tool for addressing frequently occurring psychosocial problems in the population of cancer survivors, we developed the 'Kanker Nazorg Wijzer' (KNW; Cancer Aftercare Guide). This is an online tailored intervention aimed at increasing survivors' quality of life by tackling frequently experienced problems.

Methods

As part of a RCT, quality of life (EORTC QLQ-C30), psychological distress (HADS), and fatigue (CIS) at 6 months were compared between the intervention (n = 186) and control (n = 149) group, controlling for baseline values. MANCOVAs tested overall effects, ANCOVAs subscale effects.

Findings

MANCOVAs only revealed an effect for psychological distress. Results of the ANCOVAs showed that the intervention group reported higher emotional functioning (QLQ-C30; $p = .03$, $\eta^2 = .009$), lower anxiety (HADS; $p = .03$, $\eta^2 = .007$) and depression (HADS; $p = .01$, $\eta^2 = .011$), less subjective fatigue (CIS; $p = .03$, $\eta^2 = .007$) and higher motivation for undertaking activities (CIS; $p = .03$, $\eta^2 = .008$).

Discussion

The first results of the intervention-effectiveness are promising. The KNW seems to successfully address important patients' needs. Further research will explore relevant moderators or mediators.

Symposium Abstracts

Compensatory health beliefs influence dietary intentions when self-efficacy levels are low in an eHealth intervention

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Background

Fruit and vegetable consumption (FVC) has high potential reducing cardiovascular risk. However, compensatory health beliefs (CHBs) have been found to interfere with behavior change, which makes it difficult to adopt and maintain the recommended behavior even if supported by an eHealth intervention.

Methods

N=915 participants (M=50.80 years, SD=13.19, Range 19-83), 63.5% male) were recruited in cardiac rehabilitation facilities, heart training groups and internet platforms in Germany and the Netherlands. Patient characteristics, social-cognitive variables and compensatory health beliefs were investigated via an eHealth program. Data analysis was done with SPSS 22.

Findings

Self-efficacy was positively correlated with FVC intention ($r=.56$, $p<.001$). The effect of CHBs on intention was moderated by self-efficacy ($b=0.15$, $p=.014$): CHBs negatively predicted intention at low levels of self-efficacy only.

Discussion

Improving healthy eating by an eHealth intervention may require first to work on self-efficacy to set the stage for successful behavior change. However, CHBs should also be worked on in the eHealth intervention to diminish negative effects of CHBs when forming intentions to eat healthily.

Symposium Abstracts

Proactive dissemination of an eHealth intervention promoting mental fitness: reach, use and effectiveness

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²Trimbos Institute, Netherlands

Background

The impact on public health of effective eHealth interventions is often limited due to suboptimal levels of reach and use. We studied the effectiveness of a proactive strategy to increase reach and use of an eHealth intervention promoting mental fitness.

Methods

The intervention was proactively offered to online participants of a large Dutch Health Monitor. Success of this strategy was assessed by studying both levels of reach and use of the intervention, as well as predictors of use. In order to determine the effects mental fitness was assessed at baseline and 6 months.

Findings

Almost 17.000 participants indicated their interest in the eHealth intervention and a total of 4.378 participants actually registered, of which 20% consisted of active users and 2% adhered to the intervention. Males, older and higher educated people were more likely to use the intervention. Small effects on mental fitness were identified.

Discussion

Proactive dissemination of an eHealth intervention is a promising strategy to reach the target group. However, strategies to increase levels of use and adherence to the intervention need to be developed

Symposium

Current challenges for alexithymia research: understand better explanatory factors and provide new paths for intervention

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Alexithymia is a construct comprising (a) difficulty identifying feelings; (b) difficulty describing feelings to others; (c) a restricted imagination, and (d) a cognitive style that is literal and utilitarian. These cognitive and affective characteristics were observed among patients with a variety of psychiatric and medical disorders that involve disturbances in emotion regulation, suggesting that alexithymia could be a vulnerability factor.

One central question is to better understand how high alexithymia scorers (HA) process emotions on different channels, which relates to a multimodal approach of vulnerability factors in health. Habituation to emotion will be the focus of Panayiotou, examining how physiological (HRV) and subjective responses to emotion covary.

Ridout will test the possible combined influence of mood (depression) and alexithymia to explain the severity of disordered eating. High degree of interoceptive awareness has been identified as a key factor for better emotion regulation capacities. Alexithymia is associated with strong deficits in interoceptive awareness, which can explain important pathways leading to illness behaviors and symptoms reports. This question will be examined by Pollatos and by Mai in children and adolescents, knowing that the deficits observed at a young age can be a risk-factor for disturbed embodiment, which is a key factor in eating disorders.

Although alexithymia was mainly investigated at an intrapersonal level, there were more attempts recently to examine interpersonal outcomes. This literature did not consider, however, the way partners deal with individual and dyadic stressors. Luminet will show that couples with unbalanced alexithymia have more difficulties in dyadic coping compared to couples with similar level of alexithymia, which can affect psychological adjustment of each partner, but also marital satisfaction in the couple.

Symposium Abstracts

Startle reactivity to affective imagery during deep and shallow emotional processing in alexithymia

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²Centre for Psychiatry, Queen Mary University of London, United Kingdom

Background

We examined startle modulation by emotional imagery and its associations with Heart Rate Variability.

Methods

Fifty-four adults (27 alexithymic) imagined Joy and Fear scripts. Physiology was assessed during baseline, initial exposure (under instructions for shallow or deep emotion processing) and uninstructed reexposure.

Results

Deep processing resulted in larger and faster responses during Fear at exposure for alexithymics. Higher HRV was related to larger startle during exposure/Deep processing in alexithymia. At re-exposure, higher HRV was related to larger startles during Fear/Deep processing for controls, but to smaller responses for alexithymics.

Discussion

HRV is typically positively related to expected fear-potentiated startle. This pattern occurred among alexithymics only during exposure/Deep processing. As deep processing continued in re-exposure, alexithymic fear startle responses were reduced, in relation to better emotion regulation (higher HRV). When exposed to prolonged, intense threat, alexithymics may show overregulated emotional reactivity that is similar for both threatening and non-threatening stimuli. Their increased health concerns may reflect such emotional responses that do not differentiate appropriately between actual symptoms and innocuous body signals.

Symposium Abstracts

Trait emotional intelligence, behavioral difficulties and interoception in children

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²University of Potsdam, Germany

Background

Trait emotional intelligence (TEI), a construct closely associated with aspects opposed to alexithymia, has emerged as an important protective factor in the processes of resilience and adaptation. Its relationship to the sensitivity for bodily signals, a factor associated with better emotion regulation capacities in adults, was never investigated in children and this was the main focus of this study.

Methods

1590 children (693 girls) aged between 6 and 11 years (mean 8.4) were examined as part of a larger on-going longitudinal study on intrapersonal developmental risk factors. Interoceptive sensitivity was assessed using an adapted heartbeat detection task, TEI was quantified with the German version of the Emotional Quotient Inventory-Youth Version. Parents reported behavioral difficulties by questionnaire (SDQ).

Findings

Small, but significant positive correlations between interoceptive sensitivity and TEI were found. Emotional problems were partly negatively correlated with subscales of TEI.

Discussion

Similar to adulthood, emotional intelligence and the sensitivity for bodily signals are also associated in primary school children. Disturbed interoceptive processes might contribute to emotional problems in this age, e.g. by misinterpretation of bodily signals.

Symposium Abstracts

Alexithymia predicts the malleability of bodily representations in adolescents

S. Mai¹, E. Georgiou², O. Pollatos¹

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²University of Ulm, Germany

Background

Body-ownership involves an attentional focus on and awareness of internal body sensations. While it is known that abnormalities in body-ownership occur in eating disorders, relevant psychological variables modulating body-ownership remain unclear. First empirical results evidence that body-ownership is associated with alexithymia in adults. Therefore, we wanted to explore the relationship between alexithymia and body-ownership in adolescents in more detail.

Methods

54 (28 female) participants aged between 11 and 17 years were examined. The Toronto Alexithymia Scale, a common self-report questionnaire, was used to assess affective and cognitive aspects of alexithymia. A multi-sensory-induced manipulation of body-ownership, the rubberhand illusion (RHI), was then introduced, probing the malleability of body ownership and operationalizing the strength of the illusion using behavioural (proprioceptive drift), physiological (temperature change) and introspective measures (subjective feelings).

Findings

High scores in alexithymia (affective subscale difficulties in identifying feeling) were associated with a stronger body-illusion tendency (behavioral and subjective measures).

Discussion

The observed positive relationship between alexithymia and the RHI suggests an increased malleability of the bodily self in adolescents which might serve as risk-factor for disturbed embodiment.

Symposium Abstracts

Alexithymia and dyadic coping: when similarity might be better than complementarity

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³University of Bordeaux, France

Background

Recent studies investigated alexithymia in couples and showed its association with less marital satisfaction. The aim of this research was to explore effects of alexithymia on dyadic coping, which is the way partners deal with stress.

Methods

We recruited 112 heterosexual couples (mean age 35.1, mean couple duration 11.6 years). We compared 4 groups (1 = both partners without alexithymia, 2 = husband with alexithymia, 3 = wife with alexithymia, 4 = both partners with alexithymia).

Results

No group differences were found. We confirmed previous gender effects in dyadic coping: women higher for stress communication and emotional common coping, men higher for instrumental and negative coping. Interaction effects showed highest differences within the couples in group 2 and 3: partners with alexithymia reported higher negative coping and lower positive coping compared to partner without alexithymia.

Discussion

Couples with one partner having alexithymia show more difficulties in dyadic coping compared to couples with similar level of alexithymia. Further research is needed to understand better the benefits and disadvantages of similarity or complementarity of each partner's alexithymia.

Symposium

Embracing mHealth technologies for health behaviour change

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Rationale and Aims

Mhealth (mobile health) is the practice of medicine, public health and allied healthcare or self-care supported by mobile devices (e.g. smartphones, tablet computers, wearable activity monitors). The use of smartphones has risen exponentially globally and shows no sign of abating. The development of these and other novel mobile technologies provide a unique opportunity for researchers in population health to track real-time, continuous, accurate and objective measures of health indices and related behaviour, as well as provide a powerful platform for delivering behavioural interventions and providing health relevant feedback to users. Mhealth interventions have the potential to overcome several barriers to behaviour change, as well as provide flexibility to participants to engage with the educational content of an intervention in any context or time that provides an opportunity. There is emerging evidence that well-designed Mhealth interventions can effectively change patient health-related behaviour, improve patient knowledge and support for active involvement in self-management and lifestyle change leading to better health outcomes. Mhealth research affords a real opportunity to study, understand, and positively affect human behaviour.

Summary

This symposium outlines a series of studies that have synthesised behaviour change strategies delivered via these new technologies on a variety of health behaviours. The Walsh et al paper outlines how an everyday mobile app can successfully be manipulated using behaviour change strategies to increase physical activity in young adults. Naughton et al found positive effects for the use of a smoking cessation app to collect real-time context aware data. Carr et al. found that a smartphone app can successfully be used to increase intentions to improve fruit and vegetable intake in young people, and finally Morrissey et al looked at how mobile technologies can be used to deliver an intervention targeting cognitive and affective attitudes (and measure behaviour) towards physical exercise.

Symposium Abstracts

An mHealth intervention using a smartphone app to increase walking behaviour in young adults

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²National University of Ireland, Galway, Ireland

Background

Physical inactivity is a growing concern for society and is a risk factor for cardiovascular disease, obesity and other chronic diseases. This study aimed to evaluate the efficacy of a smartphone application (app) to increase daily step count in young adults..

Methods

Smartphone users (n=55) between 17-26 years of age were randomised to one of two conditions. Both groups downloaded an app that recorded daily step count. Baseline data was recorded and followed up at 5 weeks. Both groups were given a daily walking goal of 30 minutes, but the experimental group were told the equivalent goal in steps with feedback from the app. The primary outcome was daily step count between baseline and follow up.

Findings

A significant time x group interaction effect was observed for daily step count (p= .04). The control (p=.03) and experimental group (p=.00) showed a significant increase in daily step count with the experimental group walking an additional 2,000 steps per day.

Discussion

The results show that a smartphone application can significantly increase physical activity in a young adult sample.

Symposium Abstracts

The feasibility of a context aware smoking cessation app (Q Sense): a mixed methods study

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Background

We investigated the feasibility of a context aware smoking cessation app (Q Sense) which uses a smoking episode reporting system with location sensing to inform support content and delivery.

Methods

A mixed methods study using an interpretive integration framework. Participants were smokers (N=15) owning an Android smartphone and willing to set a quit date. App data included smoking reports with geospatial location and 'end of day' (EoD) surveys. Semi-structured interviews (n=13) were analysed thematically to explore app usage.

Findings

Pre-quit date, mean daily smoking reports was 2.0 (SD 1.1) with 60.0% of EoD surveys completed. Participants underreported smoking episodes on at least 63.3% of days. Forgetting was the primary reason for non-reporting. 95.2% of reports included geospatial location (mean accuracy = 31.8 meters). Of those reaching their app quit date, 44% received geofence ('high risk' locations with >4 reports) triggered support and were broadly positive about their value.

Discussion

Collecting real-time behaviour to inform a context aware intervention was feasible and seen positively. Underreporting of smoking and handset/app technical interactions preventing geofence support are areas for future focus.

Symposium Abstracts

An mHealth intervention to increase fruit and vegetable intake in a student Population

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Background

To investigate if a smartphone application (App) designed to promote goal-setting, selfmonitoring and social support can increase perceived behavioural control (PBC) for fruit and vegetable intake (FVI), intentions to increase FVI, and increase levels of FVI

Methods

A mixed methods, single blind design was conducted. Participants were 152 registered students at an Irish University. Seventy-five per cent of the sample was female (n=113). The age range was 17-57 years (M = 26.39, SD = 8.34). FVI was assessed using a modified version of the SLAN-06 food frequency questionnaire (FFQ). Intention, PBC and perceived social support (PSS) were measured using self-report scales.

Findings

The use of an app significantly increased participants' intentions to improve their FVI. Overall participants in the experimental group experienced the highest increase in perceived social support for FVI. App use did not significantly increase Perceived behavioural control (PBC).

Discussion

While the current study suggests that the App enhanced FVI intentions, further research is needed to better understand how Apps can be used to translate this into behaviour change.

Symposium Abstracts

An mHealth intervention to increase physical activity targeting affective and cognitive attitudes

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³NUI Galway, Ireland

Background

The aim of this research was to investigate the effectiveness of a smartphone application (app) to deliver an intervention investigating the influence of cognitive and affective framed messages and a neutral control messages on physical activity (PA) within the framework of the Theory of Planned Behaviour (TPB).

Methods

Participants (N = 53) were randomly assigned to one of three groups, receiving cognitive framed messages (N = 16), affective framed messages (N = 15) or neutral control messages (N = 14). The outcome measures were a step count recorded via smartphone using a pedometer app and the International Physical Activity Questionnaire (IPAQ - SF). These were recorded at baseline, post-intervention and follow-up.

Findings

Step count increased across time points from baseline follow-up in the cognitive message group, however these differences were not significant.

Discussion

In contrast to previous research that targeted affective and cognitive attitudes, this study failed to replicate similar patterns of PA change. Future research would benefit from tailoring persuasive messages specifically to walking behaviour.

Symposium

Psychological flexibility: examining its components and their relation to functioning in chronic pain

M. Karekla¹, E. Karademas², G. Rovner³, V. Vasileiou³, M. Constantinou⁴, J. Dahl⁵

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Psychological inflexibility (including avoidance of thoughts and sensations concomitant with pain) has been recognized as a major contributing component to suffering associated with chronic pain conditions. It is no surprise that treatments specifically aiming to increase psychological flexibility (e.g. ACT) have shown effectiveness for a variety of chronic pain conditions. The present symposium will present new research evidence attempting to further examine components of the psychological flexibility model and their relation to functioning. In this regard, the first paper will present the relationship between illness representations of control and quality of life and whether they are conditional upon psychological flexibility. The second study compares chronic pain patients with individuals who suffer from a chronic illness that does not involve pain, in respect of the effects of acceptance as a mediator of quality of life, illness perception and coping. The third study examined gender differences on pain acceptance and their relevance for pain rehabilitation. The final study, examines whether psychological inflexibility can predict observations of pain signs in patients with chronic pain.

Symposium Abstracts

Adaptation to chronic pain: psychological flexibility and the self-regulation Mechanism

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Background

The aim of this study was to examine whether the relationship between the illness representations of control of patients suffering from chronic pain and their quality of life is conditional on psychological flexibility (PF). PF is defined as the ability to change or persist in behavior which serves valued ends, while not permitting painful experiences interfere with values..

Methods

52 patients suffering from rheumatoid arthritis and 79 from musculoskeletal pain participated in this cross-sectional study. Physical symptoms, emotional well-being and pain were used as quality of life indicators.

Results

After controlling for patient and illness-related variables, PF moderated the effects of representations of control on physical symptoms and pain. The positive relations of the representations of control to these indicators of quality of life were statistically significant only at the medium and/or higher PF levels. Flexibility did not impact the relation of representations of control to emotional well-being.

Discussion

Psychological flexibility seems to affect the close association between illness representations and health outcomes. Thus, it impacts adaptation to chronic pain as a significant part of the patients' self-regulation mechanism.

Symposium Abstracts

Examining the role of acceptance and defusion processes in mediating pain interference and adjustment

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Acceptance and defusion are two of the six processes of the Psychological flexibility model (PF). These two processes together have been described as the “open” response style. Recent evidence suggests that when these two processes are cultivated, positive treatment gains are achieved. The aim of this study was to examine the mediating effects of defusion and acceptance, between pain interference and psychosocial variables of pain (e.g. anxiety, depression, pain intensity). 160 chronic pain patients completed a packet of self-report questionnaires (AAQ, CPAQ, PIPS, CAMS, HADS etc). A series of SEM models showed that higher scores in acceptance and defusion, were associated with lower pain intensity, emotional distress, and pain interference. Correlations among the latent variable and acceptance and defusion, were also significant. Dismantling studies and multivariate examination of the PF processes provide further evidence of the relevance of response styles and how they are related to patients function.

Symposium Abstracts

Effectiveness of an online-based Acceptance and Commitment Therapy for chronic pain

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⁶Linköping University, Sweden

⁷Karolinska Institutet, Stockholm, Sweden

Background

Internet-based pain interventions might be a (cost-)effective way to overcome treatment barriers of traditional face-to-face pain interventions. This study aims to investigate the (cost-)effectiveness of a guided and unguided acceptance- and commitment-therapy-based online-intervention for chronic pain (ACTonPain).

Methods

In this ongoing pragmatic three-armed RCT aiming at 300 participants, ACTonPain guided and unguided are compared to a waiting list. Assessments take place before, 9 weeks after, and 6 months after the randomization. The primary outcome is pain impairment, secondary outcomes are physical and emotional functionality, pain intensity, ACT-related variables, and quality of life. A cost-effectiveness analysis is conducted from a societal perspective.

Findings

As yet, 45 participants were randomized, with 19 having filled out the post-assessment. Aspects of usability and recruitment will be discussed. Preliminary results of the effectiveness-analyses will be presented.

Discussion

The present study contributes to the evidence-base for online-based pain interventions and provides central information on the treatment success in relation to the intervention's level of guidance.

Symposium Abstracts

Can psychological inflexibility predict physical observation of pain signs in patients with chronic pain?

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²University of Nicosia, Cyprus

Psychological inflexibility (including avoidance of thoughts and sensations concomitant with pain) has been recognized as a major contributing component to suffering associated with chronic pain conditions. The present study aimed to examine psychological inflexibility as a predictor of physical observations of pain signs among patients with chronic pain. A new tool of pain assessment completed by health care providers when interviewing chronic pain patients about their condition was utilized to assess observed pain signs. Findings compare observed pain signs to self-reported pain symptoms of chronic pain patients. Then, it examines whether psychological inflexibility assessed via the chronic pain acceptance questionnaire (CPAQ) can predict the observed pain signs recorded by health providers. Results will be discussed in regards to the utility of psychological flexibility as a predictor of both observed and subjective pain reports.

Symposium

Exploring cultural differences in alcohol consumption in young people across Europe

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³University of Sheffield, United Kingdom

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Aims

To compare the prevalence of alcohol-related problems in different European countries. To evaluate young people's perceptions of alcohol control policies in different European countries. To confirm the factor structure of the Drinking Motives Questionnaire-Revised across European countries. To test the effectiveness of psychological interventions to reduce problematic alcohol consumption.

Rationale

While it is well known that European countries have drinking cultures that vary considerable (i.e., Northern European populations tend to drink less frequently, but more heavily, than Southern European populations) little research has attempted to systematically measure psychological aspects of alcohol consumption across countries to try and understand these differences. To address this limitation, this symposium focuses on four key aspects of young people's alcohol consumption (i) prevalence of alcohol-related problems, (ii) perceptions of alcohol control policies, (iii) validity of measurement scales and (iv) psychological interventions to reduce hazardous alcohol consumption.

Summary

Petrilli et al. compared patterns of alcohol consumption in seven European countries. Problematic consumption was more common in Northern European countries relative to Central and Southern European countries. De Visser et al. examined perceived effectiveness of alcohol control strategies in different European countries. Across countries, university students rated policies that would not affect them (alcohol dependence treatment centres) as more effective than those that would affect them (raising the legal drinking age). Fernandes-Jesus et al. assessed the factor structure of Cooper's (1994) Drinking Motives Questionnaire-Revised. They found few differences between respondents in different countries; removing one item, which was problematic in all countries, resulted in a valid measure. Finally, Norman and Wrona tested self-affirmation with implementation intentions as psychological interventions to reduce hazardous alcohol consumption. Participants who formed implementation intentions engaged in less hazardous consumption, but, there was no impact of self-affirmation and no benefit to combining implementation intentions with self-affirmation.

Symposium Abstracts

Patterns of alcohol use among university students

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Background

Hazardous alcohol consumption is often common among university students in European countries. However, there is a lack of cross-national comparison studies, so it is important to explore the patterns of alcohol use among university students.

Method

The Alcohol Use Disorders Identification Test (AUDIT) was used in a sample of 2446 (Female=1712;Male=728) university students from seven European countries recruited via an online survey.

Results

62.3% of students obtained a score of alcohol consumption indicating sensible consumption, 30.1% hazardous consumption, 4.6% harmful consumption and 3.1% possible dependence. Moreover, results show that country of study predicts patterns of alcohol consumption $F(6,2440)=49.135, p \leq .0001$. Higher level of alcohol consumption were found in the UK ($M=9.84$; $SD=6.1$), the Netherlands ($M=9.35$; $SD=5.68$), and Denmark ($M=7.86$; $SD=4.86$). In turn, Portugals have the lowest level of alcohol consumption among the university students ($M=5.09$; $SD=4.67$). Overall, post hoc tests indicated that university students in the Netherlands and UK significantly differed from all other countries.

Discussion

Results suggest that university students' alcohol consumption is culturally determined. There is a need to further explore the cultural factors on alcohol use among university students in different countries.

Symposium Abstracts

Which alcohol control strategies do young people think are most effective?

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Background

Alcohol control strategies (e.g., increasing the price of alcohol, raising the legal drinking age) have been proposed in an attempt to reduce young people's hazardous alcohol consumption. However, little research has measured young people's perceptions of the effectiveness of such strategies. The present study collected data from young people in several European countries to answer this question.

Methods

N = 1704 (Female = 1219; Male = 481) participants, recruited from five European countries, reported their perceptions regarding the effectiveness of 11 alcohol control strategies via an online survey.

Findings

Repeated Measures ANOVA was used to compare perceptions of strategies. Statistically significant differences in perceived effectiveness of the strategies were found $F(10,1694) = 236.408, p < .001, \eta^2 = .583$. "Alcohol treatment and relapse prevention" received the highest rating of effectiveness ($M = 5.45; SD = 1.51$), while "Raise the legal drinking age" was received the lowest rating of effectiveness ($M=3.12; SD=1.98$).

Discussion

Study results show that young people rate strategies that do not directly affect them as the most effective, and rate strategies that could affect them as less effective.

Symposium Abstracts

Drinking motives among university students in Europe

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⁷University of Sussex, United Kingdom

Background

Cooper's (1994) Drinking Motives Questionnaire-Revised (DMQ-R) is frequently used to measure reasons for engaging in alcohol consumption. However, there is a need to check if results from the model are consistent across countries. The aim of this study was to use confirmatory factor analysis (CFA) to assess the validity of the DMQ-R in different countries.

Method

N = 2057 (Female = 1456; Male = 596) completed the DMQ-R as part of an online survey of university students conducted in six European countries.

Findings

CFA supports the proposed four-factor solution: enhancement, coping, social and conformity. However, in order to achieve a satisfactory model fit (CFI=.954; NFI=.946; PGFI=.706; RMSEA=.061; SMR=.060) we had to eliminate the item "Because you feel more self-confident and sure of yourself." Eliminating this item guarantees the invariance of the model across countries. Descriptive analyses indicate that external factors—social and enhancement—have higher mean scores in all the countries.

Discussion

This study confirms the DMQ-R factor structure using data from different European countries. Results show that university students mainly give external reasons for their alcohol use.

Symposium Abstracts

Can self-affirmation and implementation intentions be combined to reduce binge drinking in university students?

P. Norman¹, A. Wrona²

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²The University of Sheffield, United Kingdom

Background

Self-affirmation decreases defensive processing of health messages, whereas implementation intentions help people translate positive intentions into behaviour. Combined, they have the potential to reduce binge drinking intentions and behaviour.

Methods

UK university students (N=348) reported their typical weekly alcohol use and were randomly assigned to condition in a 2 (self-affirmation) × 2 (implementation intention) between-participants factorial design. All participants read a summary about the health risks of binge drinking. Measures were taken of message derogation, perceived risk, intention and planning. Binge drinking was assessed at one-week follow-up.

Findings

Self-affirmed (vs. non-affirmed) participants reported making clearer plans to avoid drinking. No other significant self-affirmation main effects were found. Participants who formed implementation intentions (vs. not) reported drinking fewer units of alcohol and engaging in binge drinking less frequently at one-week follow-up. None of the self-affirmation × implementation intention interactions were significant.

Discussion

The present study provides additional evidence for the positive effects of implementation intentions, but only weak evidence for using self-affirmation, to reduce alcohol use in university students.

Symposium

The varied roles of self-efficacy in health behaviour change

M.Y. Tang¹, D. French¹, M. Johnston², A. Luszczynska³, R. Schwarzer⁴, D. Williams⁵

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Self-efficacy is a consistent strong correlate and determinant of various health-related behaviours. In spite of this, it is still unclear exactly what role self-efficacy plays in causing changes in health-related behaviours.

Aims

This symposium will present evidence in relation to the following key issues:

- 1) Clarifying the role of self-efficacy in initiating and maintaining health-related behaviour
- 2) Identifying which individual behaviour change techniques (BCTs) and clusters of BCTs are most effective at bringing about change in health-related behaviours
- 3) Clarifying the independent and synergistic effects of self-efficacy and planning in bringing about changes in behaviour
- 4) Identifying when self-efficacy should best be considered a moderator of the effects of other constructs, and when it should be considered a mediator.
- 5) Considering whether effects that are currently attributed to changes in self-efficacy should be considered as due to changes in outcome expectancies

Rationale

This symposium is in line with this year's conference aims of developing understanding on the principles of behaviour change in health and illness.

Summary

This symposium has speakers from four different countries discussing cutting-edge issues regarding the role of self-efficacy in behaviour change. Four key issues will be discussed: (a) the role of self-efficacy in moderating as well as mediating effects of other constructs across several behaviours (Schwarzer), (b) which individual BCTs and clusters of BCTs are most important in initiating and maintaining changes in self-efficacy and physical activity (Tang), (c), the synergistic effects of interventions to alter self-efficacy and increase planning in changing diet (Luszczynska) and (d) whether the observed effects of self-efficacy are due to contamination of measures with outcome expectancies (Williams). Overall, the symposium will critically consider the multiple possible roles of self-efficacy in changing behaviour, and identify new avenues for future research to make best use of this central construct in behaviour change.

Symposium Abstracts

Self-efficacy: mediator or moderator? Summary evidence from 7 studies

R. Schwarzer^{1, 2}

¹Australian Catholic University, Australia

²Freie Universität Berlin, Germany

Self-efficacy is regarded as a predictor of various health behaviors based on a substantial number of empirical evidence. Moreover, many observational studies have specified self-efficacy as a mediator, illustrating HOW change takes place. Interventions often affect self-efficacy first, leading to changes in behavior, suggesting a mediated effect. Moderation points to the question FOR WHOM a treatment is beneficial. At some levels of the moderator a mediation chain is valid, and for others, a different mechanism is valid (moderated mediation). Research from 7 studies, conducted in several countries, will be presented: In an oral hygiene study, self-efficacy mediates between experimental conditions and self-monitoring; it interacts with a planning intervention on physical activity; with intention on dietary planning; it interacts with intention on dental flossing; it interacts with planning on physical activity; it interacts with preparatory behaviors on physical activity in a student sample; it interacts with social support on physical activity in a student sample as well as in older adults. Based on such evidence, researchers need to explore various complex models when embedding self-efficacy in behavior change research.

Symposium Abstracts

The role of self-efficacy in the initiation and maintenance of physical activity: a systematic review

M.Y. Tang¹, D. Smith¹, M. Hann¹, J. Mc Sharry², D. French²

¹University of Manchester, United Kingdom

²National University of Ireland, Galway, Ireland

Background

Self-efficacy is an important determinant of physical activity. However, how best to change self-efficacy to bring about the initiation and maintenance of physical activity remains unclear. The present review aimed to identify which specific and clusters of behaviour change techniques (BCTs) are included in the most effective interventions for initiating and maintaining changes in self-efficacy and physical activity.

Methods

A systematic review with meta-analysis yielded 237 randomised trials aimed at changing self-efficacy for physical activity of adults. Intervention content was coded using the BCTv1 Taxonomy. Analyses examined which individual BCTs and which clusters of BCTs were associated with changes in self-efficacy and physical activity.

Findings

BCTs most commonly used in interventions included: goal setting (behaviour), problem solving, action planning, self-monitoring of behaviour, and social support (unspecified). Many individual BCTs and clusters of BCTs were associated with outcomes in univariate analyses, although it was difficult to disentangle unique effects of specific BCTs due to clustering.

Discussion

This review identified which individual and clusters of BCTs are likely to be effective at both initiating and maintaining physical activity changes.

Symposium Abstracts

Encouraging replacing energy-dense food intake with fruits and vegetables: effects of self-efficacy and planning interventions

A. Luszczynska¹

¹University of Social Sciences and Humanities, Poland

Background

This study compared effects of self-efficacy and planning interventions, encouraging fruit and vegetable intake (FVI) in place of energy-dense foods.

Methods

Data were collected among 506 adolescents (13-18 years old; 22% with overweight/obesity) who were randomly assigned to control (n = 181), planning (n = 153), or self-efficacy (n = 172) conditions. Nutrition behaviors and cognitions were self-reported whereas body weight, height and body fat tissue were objectively measured three times (with the 2-month and 14-month follow-ups).

Findings

Similar significant increase of FVI was found for self-efficacy and planning interventions (small-to-medium effects). Planning intervention did not influence dense-energy food intake, but the self-efficacy intervention tended to result in stabilizing intake (compared to an increase found in the control group). There were no effects on body mass. Similar patterns were found for the total sample and for a subsample of adolescents with overweight/obesity. The effects of interventions on FVI were mediated by respective cognitions.

Discussion

The findings are discussed in the context of the effectiveness of behavior change techniques and best practice characteristics in interventions addressing obesity prevention and treatment.

Symposium Abstracts

A critique of the self-efficacy concept: implications for interpretation of self-efficacy research

D.M. Williams¹

¹Brown University School of Public Health, United States

Background

Self-efficacy is central to multiple health behavior theories due to its robust predictive power.

Methods

Critical evaluation of self-efficacy theory, including the conceptualization and assessment of self-efficacy, with particular focus on the distinction between capability and motivation.

Findings

Consistent with self-efficacy theory, self-efficacy questionnaires ask respondents to indicate the extent to which they “can” or “cannot” perform the target behavior. However, for behaviors that are under our volitional control—such as most health-related behaviors—the question of what people “can do” serves as an indicator of broad motivation rather than perceived capability. Thus, contrary to self-efficacy theory, self-efficacy ratings are influenced by expected outcomes of the behavior, whether one likes or dislikes performing the behavior, and the social implications of the behavior, as well as all of the above factors as they apply to competing alternative behaviors.

Discussion

As a broad indicator of motivation, ratings of self-efficacy do an excellent job of predicting the target behavior, but a poor job of helping us understand and intervene upon the myriad underlying factors that determine each person’s motivation.

Symposium

Computer-based health promotion to change health behaviors and to overcome health literacy challenges

S. Lippke¹

¹Jacobs University Bremen, Germany

Aims

Review innovations, test and compare evidences and discuss directions especially when using computerbased interventions.

Rationale

Behavior change in health and illness are mainly related to innovations and their effectiveness. Thus is it important to discuss principles, theoretical approaches and avenues.

Summary

Computer-based health promotion is an area concerned with the intersection of computing and health promotion. Key words like eHealth, iHealth, mHealth, ICT in medicine and health, online counseling, internet-based interventions, virtual interactive interventions are well known and widely applied to promote health. While increasing numbers of applications and studies are outperformed, it is important to review innovations, to test and compare their evidences and to discuss directions especially with low health literate populations. With this goal the symposium brings together experts from different continents presenting research from various settings and populations, debating about theoretical backdrops, mechanisms and moderators.

Brian Oldenburg (AUS) evaluates an automated interactive telephone system, the Australian Diabetes Telephone- Linked Care (TLC), regarding the improvement of diabetes self-management. He shares the results on behaviour change and HbA1c decrease. Wayne Velicer (USA) uses Relational Agents, computer-based virtual characters in an intervention. He reports on whether these Relational Agents can establish a continuing personal relationship and increase participant engagement. Hein deVries (NL) reviews results from different RCTs testing computer tailored technology including videos and games. He presents findings on changes in smoking, alcohol, nutrition, and physical activity when addressed separately as well as in combination. Lilian Lechner (NL) reports on effects of different theoretical approaches (ActivePlus vs. I Move). All interventions are tailored to the specific personal characteristics, needs and preferences of the individual user.

The symposium chair Sonia Lippke (GER) invites the audience to discuss the value of these and other innovations, the need for specific evidences and future directions.

Symposium Abstracts

How can new technologies help people with diabetes improve selfmanagement?

B. Oldenburg¹, D. Bird², F. Cocker², A. Russell¹

¹University of Melbourne, Australia

²University of Queensland, Australia

Background

We have developed an automated interactive conversational program, called Digital Diabetes, to improve diabetes self-management.

Methods

Participants upload their blood glucose results via cellphone and "converse" with the program on topics critically important for diabetes self-management including blood glucose monitoring, nutrition, physical activity and medication taking.

Findings

A published randomized study of adults with type 2 diabetes has demonstrated significantly improved glycemic control and mental health functioning. Program use was high and medication costs were also lower for intervention participants. Program evaluation has further demonstrated how this program influences people to change multiple diabetes self-care behaviors.

Discussion

The presentation will discuss how the program provides people with very valuable information, enhances self-efficacy and motivation, teaches new strategies and helps establish routines. It also leads to other actions to improve health and has some important mental health benefits. The presentation will discuss the wider applications and potential scalability of this program as well as the further development of this program for a mobile health program and the evaluation of this new program.

Symposium Abstracts

Using relational agents to increase engagement in computer-based interventions: preliminary outcomes

W. Velicer¹, C. Redding¹, B. Blissmer¹, S. Babbin¹, A. Paiva¹, T. Bickmore², J. Johnson³

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²Northeastern University, United States

³ProChange Behavior Systems, United States

Introduction

Multimedia computer-tailored (Expert System; ES) interventions represent a low cost, easily disseminated method of changing behaviors in a general population. Effectiveness has been established. However, these interventions have produced only small effect sizes, partially due to low participant engagement. Relational Agents (RA), computer-based virtual characters who can establish a personal relationship, have the potential to increase engagement. This paper reports the Month 12 outcomes for a RCT involving Relational Agents.

Methods

The design was 3 groups (Control, ES, RA) by 3 Occasions (Months 0, 12, 24). A representative USA sample (N = 1639) of individuals at risk for both exercise and UV protection was recruited.

Results

Month 12 data demonstrated that the RA Intervention increased participant engagement. The average number of sessions viewed/week was 0.048 (ES) compared to 0.142 (RA). The RA also increased satisfaction and was viewed as more helpful. Proportion at criteria for exercise was: Control (13.6%), ES (15.7%) and RA (16.6%).

Conclusions

The Relational Agent Intervention has the potential to outperform the previous best practice for computer-based interventions.

Symposium Abstracts

Tailored eHealth and mHealth: findings of recent applications

H. de Vries¹

¹Maastricht University, Netherlands

Background

Computer tailored strategies and formats can differ substantially, by targeting one behavior or several behaviors, by providing texts in parts or at once, by using text or video, by using games, and by using PCs or smartphones. Special attention is needed for at risk groups, such as lower educated participants as they are at higher risks of health problems and may react to these interventions in a different way.

Objective

This presentation describes the results of 6 RCTs testing the above questions concerning delivery modes .

Methods

The results of 6 RCTs will be discussed where we randomly assigned respondents to conditions to test the differential effects of mode of delivery.

Results

Both sequential and simultaneous tailoring are effective to change lifestyles; video tailoring is more effective than text tailoring; no big differences between e and mHealth occurred; no educational differences were found; computer tailoring is cost-effective.

Conclusion

Implementation of effective computer tailored programs is recommended given their costeffectiveness. Further experimental studies need to identify the optimal mix of communication strategies and methods.

Symposium Abstracts

Computer tailoring intervention to enhance physical activity: effects of different theoretical approaches

L. Lechner¹, S. Friederichs¹, D. Peels¹, A. Oenema², H. de Vries¹, C. Bolman³

¹Open University of the Netherlands, Netherlands

²Maastricht University, Netherlands

³Open university of the Netherlands, Netherlands

Objective

Computer tailoring (CT) modifies an intervention to the specific personal characteristics, needs and preferences of the individual user. However, the way CT is theoretically embedded varies substantially, possibly resulting in different effects or behavioral change processes.

Methods

Two online CT interventions targeted at increasing physical activity (PA) are presented. ActivePlus, targeting older adults, is based on theories as SCT, TPB and Self-Regulation Theory. I Move, aimed at adults, is based on Self Determination Theory, Self-Regulation Theory, and integrates Motivational Interviewing techniques in online CT. In a RCT we compared the more traditional online ActivePlus to I Move, to test differences in PA effects and behavioral change processes.

Findings

Both ActivePlus and I Move were effective 6 and 12 months after baseline compared to a control group. The differences in effects, as well in the behavioral change processes of both CT interventions, will be presented.

Discussion

CT is potentially effective in increasing PA. However, different approaches can lead to differences in effects as well as in behavioral change processes. mHealth applications might further enhance these effects.

Symposium

Justification processes in self-regulation

M. Adriaanse¹, J. De Witt Huberts^{2, 3}, S. Prinsen³, S. Dohle⁴, D. De Ridder⁴

¹Utrecht University, Netherlands

²London School of Hygiene and Tropical Medicine, United Kingdom

³Potsdam University, Germany

⁴University of Cologne, Germany

Aims

This symposium aims to introduce justification as a central, but understudied, process in the domain of self-regulation. Specifically, we aim to present novel findings on the role of justifications in triggering self-regulation failure (self-licensing) and to discuss recent findings highlighting the use of justifications in the aftermath of self-regulation failure (confabulation). The talks included in the symposium aim to show the relevance of justification processes in self-regulation by addressing a variety of justification cues and to explore moderating as well as mediating factors. Moreover, we aim to discuss the implications of justifications processes for theorizing in health psychology, and to highlight implications for interventions in the health domain.

Rationale

Justifications are a frequently overlooked mechanism underlying self-regulation failure, as well as a relevant psychological consequence of non-consciously triggered self-regulation failure. Recent insights on justification have as of yet only received limited attention in the health domain, despite their significant implications for theory and practice. The EHPS conference provides a perfect opportunity for discussing state of the art research on this topic among health psychologists.

Summary

The first three talks (de Witt Huberts, Prinsen, Dohle) will discuss self-licensing as a relevant and distinct route to self-regulation failure. The authors will present findings showing how negative emotions, as well as positive experiences (academic success or engaging in exercising) may be deliberately used as excuses for indulgence. Implications of this rational and deliberate route towards self-regulation failure will be discussed.

The second set of talks (Adriaanse & De Ridder) explore 'confabulation', as a compensatory justification mechanism to account for non-consciously triggered self-regulation failure. The authors will present data testing a novel model delineating when and how various types of justifications may be triggered post self-regulation failure and will discuss practical implications of these down-stream consequences of self-regulation failure.

Symposium Abstracts

Emotional License: Negative emotions as justification for self-regulation Failure

J. de Witt Huberts^{1, 2}, C. Evers³, D. De Ridder²

¹London School of Hygiene and Tropical Medicine, United Kingdom

²Potsdam University, Germany

³Utrecht University, Netherlands

We propose that negative emotions do not always cause self-regulation failure by making us more impulsive; sometimes they are deliberately used as a justification to allow oneself a forbidden pleasure. We report two studies that investigated whether negative affect is used as license to indulge while ruling out direct emotion effects.

Awareness of an emotional event was manipulated by inducing emotions either consciously or unconsciously. Only participants who were aware of experiencing a negative event would have a justification to indulge and would therefore eat more in a subsequent taste test while keeping negative affect constant in both conditions. Results indicated that, despite being equally emotional, participants highly aware of an emotional event indulged more in tasty but unhealthy snacks than participants less aware of the event (Study 1, N= 39). Furthermore, highly aware participants only consumed more of tasty but forbidden food, but not of equally palatable but healthy food (Study 2, N= 57).

These findings suggest that a prototypical 'hot' state can lead to indulgent behavior in a more deliberate manner by employing negative emotions as a justification.

Symposium Abstracts

License to indulge: reflecting on prior (academic) success increases unhealthy snack intake

S. Prinsen¹, C. Evers¹, D. de Ridder¹

¹Utrecht University, Netherlands

Background

Self-licensing is the process whereby people make excuses to (temporarily) abandon their long term goal(s). In the domain of eating behavior, prior success has been identified as a commonly used license, yet this claim lacks sufficient empirical evidence. The support for this type of license is limited in that only hypothetical food choices have been examined. Therefore, the present studies aimed to look at the effect of a 'success-license' on actual food intake.

Methods

In Study 1 (N = 81) and Study 2 (N = 91) female students were provided with a license to indulge (by means of reflecting on prior academic success; license condition) or not (control condition). Unhealthy snack intake was measured in a subsequent a taste-test.

Findings

In both studies, participants in the license condition ate significantly more of the provided unhealthy snack than participants in the control condition

.

Discussion

Together, these findings extend previous research by showing that a success-license increases indulgent eating behavior. The underlying mechanism remains to be empirically verified in future studies, as well as the role of positive affect.

Symposium Abstracts

Exercise as a license to eat? The Eating Styles of Exercisers Scale (ESES)

S. Dohle¹

¹University of Cologne, Germany

Background

When people begin exercise programs they often report gaining weight instead of losing it. One of the possible explanation is that exercise may act as a license to eat. The aim of study was to develop a scale that measures people's self-reported tendency to reward themselves with foods for exercising.

Methods

The data for the study come from a mail survey conducted in the German-speaking part of Switzerland (N=368). Responses to the 42 items were subjected to a factor analysis (principal axis factoring method with promax oblique rotation). Cronbach's alpha was calculated to determine the internal consistency of the scale.

Findings

The factor analysis identified four different subscales. Internal consistency for the four different scales was acceptable/good (Cronbach's alpha between .76 and .84). The first subscale measured exercisers' selfreported food reward behavior and was positively associated with BMI.

Discussion

The food reward behavior subscale of this newly developed Eating Styles of Exercisers Scale (ESES) demonstrated good psychometric properties and could be used as an effective screening tool in exercise intervention programs for weight loss.

Symposium Abstracts

Justifying unconsciously triggered self-regulation failure

M. Adriaanse¹, F. Kroese¹

¹Utrecht University, Netherlands

Background

We investigated the down-stream consequences of unconsciously provoked self-regulation failure. Building on recent insights, we hypothesized that unconsciously provoked unhealthy eating triggers a need to 'confabulate' a reason to justify this behavior. In addition, we aimed to foster insight into when confabulation occurs, by testing the moderating role of standards and the presence of an explanation.

Methods

The study (N = 125) had a 2 (Dieting Standard: high- low) x 3 (Condition: control - prime - prime and tell) between subjects design. Participants were primed to indulge in chocolate. The dependent variable was the degree to which participants confabulated a reason to justify their indulgence.

Findings

Participants primed to indulge confabulated reasons for indulgence, but only when they had strong dieting standards and no explanation for indulging was provided.

Discussion

Results enhance insight into the downstream consequences of unconsciously triggered selfregulation failure. Moreover, they suggest that the obesogenic food environment is problematic not merely because people overeat, but also because they subsequently seek for justifications, which may spill over to next occasions thereby leading to even more unhealthy behavior.

Symposium Abstracts

Revisiting 'emotional eating': retrospective overestimation of negative affect as a post-hoc justification for overeating

D. de Ridder¹, J. de Witt Huberts², S. Prinsen², M. Adriaanse²

¹Utrecht University, Netherlands

²London School of Hygiene and Tropical Medicine, United Kingdom

Background

Emotional eating (overeating in response to negative emotions) is a widely accepted explanation for eating behaviors that are not in line with personal eating-norms. However, evidence for a causal link between negative emotions and overeating is lacking. In the present studies it was hypothesized that rather than predicting norm-violating eating behaviors, negative emotions are retrospectively 'blamed' for this violation.

Methods

Employing an experimental design, Study 1 (N = 46) and Study 2 (N = 60) examined how students who participated in a taste-test retrospectively assessed negative affect (NA) after having received feedback that they ate too much (norm-violation condition) or an acceptable amount of food (control condition). Both studies also assessed current NA and restraint eating.

Findings

In both studies, retrospective NA strongly correlated with current NA in the norm-violation condition, but not in the control condition. In addition, participants who scored high on eating restraint overestimated NA, whereas participants who scored low underestimated NA.

Discussion

These findings suggest that NA resulting from norm violation motivates people to justify their eating behavior, especially when overeating constitutes a personal norm-violation.

Symposium

Psychosocial risk factors in chronic pain

B. McGuire¹

¹National University of Ireland, Galway, Ireland

Aims

To highlight the significant psychosocial risk factors affecting pain experience in different population groups. To promote effective assessment and intervention tailored to meet the specific psychosocial needs of people with chronic pain. Rationale Chronic pain is a significant problem in terms of personal impact and health service burden. If better understood, psychosocial risk factors in chronic pain can be targeted in assessment and intervention to alleviate some of the burden of pain.

Summary

In the symposium, we will present findings from a 1-year prospective study of chronic pain called the PRIME study (Prevalence, Impact and Cost of Chronic Pain). Specifically, we will report on the psychosocial risk factors for persistent pain and for onset of new pain and protective factors in those whose chronic pain has resolved after one year. Then, we will report on an educational tool to enhance knowledge of GP trainees regarding the future risk of disability, based on the psychosocial 'yellow flags' among their patients presenting with chronic pain. The third paper will explore the challenges of identifying pain in people with cognitive impairment, who may be at increased risk of pain but have reduced ability to communicate their pain and seek support. Data will be then presented from a prospective study on the psychological predictors of chronic pain and depression following child-birth, where the participants were assessed both before and after childbirth. In the final paper, we will present findings on the impact of chronic pain on sexual functioning as well as psychological variables associated with worse outcomes. This symposium therefore provides data on psychosocial variables in the pain experience of people with a broad range of presenting clinical difficulties.

Symposium Abstracts

Risks and protective factors for chronic pain after one year: findings from the PRIME study

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This study examined predictors of physical and psychological quality of life (QoL) in a 12-month follow-up of a chronic pain (CP) sample from the PRIME study and the persistence of CP and incidence of new cases of CP in that period. Postal survey responses (N=717; 60%) indicated that among those with CP at baseline, 59.9% still reported CP at follow-up ('persistent CP'), which was associated with a longer history of pain at baseline, more pain sites, higher baseline depression scores and greater levels of pain intensity and disability at baseline. At one year, 12.7% had developed new CP, which was predicted by lower physical QoL at baseline. Among those with persistent CP, a better physical QoL at 12 months was predicted by a lower number of pain sites, lower pain disability, and lower levels of pain catastrophising at baseline. A better psychological QoL was linked to being older, lower depression scores, lower pain catastrophizing, greater levels of social support and greater levels of understanding of pain at baseline. Results are discussed in light of extant research and theory.

Symposium Abstracts

Clinical judgment of GPs regarding risk of long term disability in low back Pain

C. Dwyer¹, P. MacNeela¹, H. Durand¹, B. McGuire¹

¹National University of Ireland, Galway, Ireland

Chronic low back pain (CLBP) is a major healthcare burden and often results in workplace absenteeism. Thus, it is a priority for GPs to manage CLBP appropriately to get individuals back to work as early as possible. Interventions informed by the Flags approach (Kendal et al., 1999), which integrates cognitive and behavioural approaches via the identification of biopsychosocial barriers to recovery, have been observed to lead to successfully reduced pain-related work absences and increased return to work for individuals with sub-acute and CLBP. However, research indicates that physicians' adherence to biopsychosocial guidelines is low. Although GP trainees and medical students may be open to considering biopsychosocial perspectives, their treatment strategies may overlook these features depending on the nature of their education. The current study examined the effects of a Flags-based e-learning intervention on the clinical judgments of medical students and GP trainees regarding risk of future disability of CLBP patients. Using 40 CLBP cases, differences in clinical judgment were examined pre- and post-intervention, in comparison with a no-intervention control group. Results are discussed in light of existing theory and research.

Symposium Abstracts

Pain in people with cognitive impairment

M. Constantinou¹

¹University of Nicosia, Cyprus

This paper will describe the latest findings regarding pain assessment and pain identification in cognitively impaired individuals, especially those with dementia. Particular emphasis will be given to the specialist tools used to identify pain and current attempts to develop an improved assessment tool. The validity of facial and other signs of pain in cognitively impaired people who are not verbal will be discussed. The presentation will culminate with the discussion of new findings from a recent study, which will support the correlation of observational data and subjective reports of pain in a group of adults with chronic pain, in an attempt to support the development of the new pain assessment tool.

Symposium Abstracts

Psychological predictors of chronic pain and depression following childbirth

J. Bogue¹

¹National University of Ireland, Galway, Ireland

Persistent pain and postnatal depression (PND) following childbirth affects a significant proportion of women and can have serious and long-term consequences. Within mainstream chronic pain research, psychosocial variables such as depression, anxiety, stress, pain catastrophising and perceived social support have frequently been associated with pain severity and pain coping. These psychosocial factors have also been linked to the occurrence of PND. The current study aimed to examine psychosocial predictors of persistent pain and PND following childbirth. Women (N=220) in the final two months of their pregnancies were recruited through an internet parenting site and to complete an online survey. Sociodemographic and medical information, along with measures of stress, anxiety, depression, perceived social support and pain catastrophising were collected. Approximately 12 weeks after reported due dates, women who agreed to participate in second part of the study (N=111) were followed up to complete measures of postnatal pain and PND. A regression analysis revealed that only pain catastrophising before birth significantly predicted persistent pain in the final model. In a separate analysis, prenatal anxiety and persistent pain significantly predicted levels of PND.

Symposium Abstracts

Prevalence and predictors of sexual dysfunction in people with chronic pain

S. O'Higgins¹

¹National University of Ireland Galway, Ireland

The aims of this study were to: 1) examine the prevalence of sexual dysfunction in a chronic pain sample; and 2) test a predictive model of sexual functioning. Participants were 269 individuals recruited online. Their mean age was approximately 37 years, and a majority were female, heterosexual, and currently in a relationship. High levels of pain severity, interference from pain, fatigue, depression, anxiety, stress, and body image concerns were reported along with low levels of self-esteem and pain self-efficacy. In addition, substantial proportions of male and female respondents had scores indicative of sexual dysfunction. Exploratory hierarchical regression analyses revealed that, for females, depression emerged as a statistically significant predictor of sexual functioning while perceived stress was a significant predictor of relationship satisfaction. For males, no statistically significant predictors of sexual functioning were observed; however, self-esteem predicted relationship satisfaction. Limitations of the current study and directions for future inquiry are detailed.

Oral Presentation Abstracts

Food Choice in 12-13 years old adolescents: an extended Dual Process Approach

S. Fernandes-Machado¹, F. F Sniehotta¹, A. Adamson¹, M. J Tovee¹, V. Araujo-Soares¹

¹Newcastle University, United Kingdom

Background

The present study used a dual-process approach in order to explore the role of reflective and impulsive processes, as well as the interaction effect of executive functioning on a food choice task in a sample of adolescents.

Methods

285 adolescents completed a questionnaire assessing reflective (intention and PBC over eating) and impulsive measures (temptation to eat) and a computer task measuring executive function (inhibitory control). Food choice was assessed using a Behavioural Choice Task.

Results

Hierarchical linear regression analysis showed that reflective measures explained 17% of the variance in food choices in step 1. By adding temptation in step 2 an additional 13% was explained. In the last step, the interaction between temptation to eat unhealthy snacks and the inhibitory control significantly predicted food choice.

Conclusions

Temptation to eat seems to have a stronger impact on an immediate food choice task when compared with intentions and PBC. Adolescents with greater inhibitory skills were better at resisting temptation to eat unhealthy food. These results demonstrate that imparting executive functioning skills to adolescents might support healthier choices.

Oral Presentation Abstracts

What influences nurses eating and physical activity behaviours? A theoretical domains framework informed investigation

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²Aberdeen Health Psychology Group, University of Aberdeen, United Kingdom

Background

Our understanding about the determinants of nurses eating and physical activity is limited. The aim of this study was to assess nurses' perceptions of the relative importance of domains within the theoretical domains framework (TDF) in influencing their eating and physical activity behaviours for weight management.

Methods

Semi-structured qualitative interviews with 16 nurses to explore factors that behavioural theories suggest may influence nurses' eating and physical activity for weight management followed by a survey of 245 nurses to confirm and generalise the qualitative findings were undertaken. Important theoretical domains were identified using a hybrid process of inductive and deductive content analysis of the qualitative data and descriptive statistics of the survey data. The TDF guided data collection and analysis.

Findings

Shift work (theoretical domain of "environmental context and resources") and lack of planning strategies ("behavioural regulation") were identified as important barriers. Important enabling influences included beliefs about benefits ("beliefs about consequences") and routine ("behavioural regulation").

Discussion

Findings suggest that future efforts to change nurses eating and physical activity for weight management should consider targeting environmental and intrapersonal level factors.

Oral Presentation Abstracts

Quality of life following cancer treatment: impact of illness perceptions, distress, fatigue, and cognitive failures

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Background

We describe the interplay between several psycho-emotional factors leading to a lower quality of life (QoL) in cancer survivors. The Antecedent-Beliefs-Consequences framework of cognitive behavioural therapy facilitated understanding the association between illness perceptions (IPs), distress, fatigue, cognitive failures, and QoL.

Methods

Through a cross-sectional design, cancer survivors (n=57) were compared to matched controls on IPs, distress, fatigue, cognitive failures, and QoL. Patients were on average 2.7 years following treatment for lymphoma, breast cancer, germ cell tumours, and sarcoma.

Findings

All factors differed between groups. QoL was influenced by the perception of symptoms and illness duration (27.1%), distress and fatigue (29.7%), and cognitive failures (5.6%). Anxiety mediated 95% of the impact of IPs on cognitive failures; cognitive failures mediated 45% of the impact of anxiety on QoL; depression mediated 65% of the impact of IPs on QoL.

Discussion

Negative IPs led to mood changes, which triggered cognitive failures, influencing patients' QoL. Discussing patients' perception of the duration and number of post-treatment symptoms may improve their QoL. However, longitudinal monitoring is warranted to explain whether these variables may be causally related.

Oral Presentation Abstracts

Interaction of physical activity and interoception in children

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Background

Previous research indicates that interindividual differences in the perception of bodily processes (interoceptive sensitivity, IS) interact with the degree of physical activity (PA) in adults. Whether there is a similar relationship between PA and IS in children has not been investigated yet. Therefore, the aim of this study was to investigate the interaction between IS and PA during physical performance tasks and in everyday situations.

Methods

IS was assessed using a heartbeat perception task in a subsample of 49 children within the health promotion program “Join the Healthy Boat”. PA was examined using a physical performance task, assessing the distance covered during a standardized 6-minute run. Everyday PA was measured by a multi-sensor device.

Findings

Children with higher IS performed better in the physical performance task. Additionally, based on energy expenditure defined as metabolic equivalents, IS was positively correlated with the extent of light PA levels in the morning and afternoon.

Discussion

IS interacts positively with the degree of PA in children supporting the idea that interoception is important for the self-regulation of health-related behavior.

Oral Presentation Abstracts

The intention-behaviour gap does not differ according to socioeconomic status in French adolescents

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Background

Socio-economic status (SES) has been shown to exert both a direct and indirect (via socio-cognitive variables) effect on health behaviour, in various behavioural domains. Recent research has also demonstrated that SES moderates the strength of the relationship between socio-cognitive variables (intentions) and behaviour.

Purpose

This study aims to explore whether, as has been demonstrated for other health behaviours, the intention-behaviour gap is more pronounced for those of lower SES, in a sample of French adolescents.

Methods

Effects were tested on data from a longitudinal questionnaire study (CAPSCA) examining healthy eating behaviour in French adolescents (N=1132). SES, socio-economic status and socio-cognitive variables were measured at baseline and healthy eating behaviour two years later.

Findings

Controlling for SES, sex and socio-cognitive variables, there was no significant interaction between SES and intentions on healthy eating behaviour, $b=0.06$, $t(1114)=1.26$, $p=.21$.

Discussion

We discuss how the absence of a moderating effect of SES on the intention-behaviour gap in this sample could be due to environmental factors specific to the French school system, the behavioural context examined here, or the measurements used.

Oral Presentation Abstracts

Day-to-day variations in health behaviors and daily functioning: two intensive longitudinal studies

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Health behaviors tend to show a high variability over time within the same person. However, most existing betweenperson research can only assess a snapshot of a person's behavior. Two longitudinal studies examine the natural daily variability in health behaviors and their implications for affect and academic performance.

In two intensive longitudinal studies with up to 65 assessment-days over one academic year, university students (Study 1: N = 292; Study 2: N = 304) reported sleep quality, physical activity, snacking, learning goal achievement, positive and negative affect.

Multilevel structural equation models showed that on days on which participants reported better sleep quality or more physical activity than usual, they also reported increased positive affect, decreased negative affect, and better learning goal achievement. Higher snacking was only associated with increased positive affect. Affect was a mechanism underlying the relation between health behaviors and learning goal achievement. Importantly, sleep quality was a stronger predictor for affect and learning goal achievement than physical activity or snacking.

These findings have important implications for low-threshold interventions targeting the improvement of daily functioning.

Oral Presentation Abstracts

Neuropsychological outcome and quality of life in adults after neonatal surgery for congenital heart disease

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Congenital heart disease (CHD) and open-heart surgery may lead to an increased risk of cognitive and behavioural disorders in children. Our goal is to determine the long-term neuropsychological outcome of this population, now adult, operated for CHD during neonatal period, as it has never been studied before.

Sixty-five adults with CHD (ACHDs) and forty-one healthy subjects matched in age, gender and socio-cultural level had participated. The assessment, based on validated tools (tests, scales and structured clinical interview), concerns cognitive functions, mood and quality of life (QoL).

Compared to healthy adults, ACHDs present more visuospatial and executive function difficulties. Moreover, they have a higher lifetime prevalence of depression and social phobia. ACHDs have a good QoL as no difference had been observed between the groups. However, in ACHDs the presence of executive function deficits, of depression or social phobia during life is associated with a poorer QoL.

ACHD population appears to present an increased risk of cognitive and psychological impairments which could reduce their QoL. A better understanding of their outcome could contribute to the development of adapted remediation and psychotherapy.

Oral Presentation Abstracts

Maternal psychopathology, feeding practices and pre-schooler obesity risk: a longitudinal study

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The present study was the first to longitudinally examine associations between maternal psychopathology (depressive and anxiety symptomology, self-esteem and body dissatisfaction), pressure and restrictive child feeding practices, and risks for pre-schooler obesity (child BMI-z change) over two years.

Participants were 290 mother-child dyads from Melbourne, Australia. Questionnaires examining demographic information, mothers' psychopathology, feeding practices, and pre-schoolers' BMI data were completed. Preschoolers' BMI data was again obtained approximately two years later. Relationships were tested via path analysis and t-tests.

At two-year follow-up, path analysis found that although the proposed model was a good fit ($\chi^2 = 13.44(16)$, $p > .05$), only family income significantly predicted child BMI-z score change ($\beta = 0.13$, $p < .05$). Maternal psychopathology and child feeding practices were not significant predictors of pre-schoolers' obesity risk. Independent t-tests revealed that children of mothers with either elevated body dissatisfaction or anxiety symptoms had significantly greater increases in BMI-z change.

Results suggested maternal body dissatisfaction and anxiety may increase obesity risk in pre-schoolers. Future research into these contributors may assist in reducing the obesity epidemic and associated physical and psychological consequences.

Oral Presentation Abstracts

The use of condoms among HIV-positive men, stigmatization, and the Health Action Process Approach

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Background

The goal of the study was to test the associations between the frequency of condom use among people living with HIV, the cognitions included in the Health Action Process Approach (HAPA), and the aspects of stigma of living with HIV (negative self-image, disclosure-related stigma, public attitudes stigma, and personalized stigma).

Methods

A total of 102 HIV-positive men, recruited in Centre for Prophylaxis and Treatment of Infectious Diseases and Drug Addiction (Poland) participated in the study. The mean age was 37.6 years (SD = 9.35).

Findings

Across the HAPA constructs, outcome expectancies were the strongest correlates of the frequency of condoms use in anal contact in stable relationships. Regarding stigma dimensions, lower levels of disclosure-related stigma were associated with more frequent use of condoms in anal intercourses during sex with casual partners.

Discussion

This study points to the role of condom use-related outcome expectancies, referring to protection from sexually transmitted infections and effects on sexual satisfaction.

Oral Presentation Abstracts

Job search, work volition, and stigma for unemployment among unemployed adults in Japan

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The economic turndown in the last two decades resulted in higher unemployment rate than ever in Japan. Due to long-believed lifetime employment system in Japan, not much has been known for job search behaviors and their psychological correlates among unemployed individual. In an aim of exploring relationships among job search behaviors, work volition, and stigma for unemployment among unemployed adults, an online survey was conducted with 400 unemployed individuals. Participants were asked to rate scales of job search behaviors and support, stigma attached to unemployment, work volition, and mental health indices. Two hundred and eighty two adults (70.5%) reported that they had not engaged in any job search activities for the past three months. We thus sought to examine job search preparation, performing correlational analyses with these 282 individuals. It was revealed that job search preparation was weakly correlated with job search support. Work volition and job search self-efficacy were negatively correlated with stigma for unemployment and scores of GHQ. The findings suggested the need for changing stigma for unemployment as well as negative health states.

Oral Presentation Abstracts

The associations between meaning in life and quality of life among post-stroke patients

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This study investigated the relationship between two types of meaning, adjustment to post-stroke situation, and somatic domains of quality of life in a longitudinal sample of patients with stroke.

Data was collected two times, with a 4-weeks interval between Time 1 (T1) and Time 2 (T2). Patients in post-stroke rehabilitation with speech difficulties and atony (N = 89, 46,1% women), aged 25-85 filled out the questionnaire, assessing their meaning in life, the power of meaning making, quality of life.

The results indicated mediation effects after controlling for T1 QOL indicators. Patients who reported higher levels of the meaning in life (T1) were likely to report greater adjustment (T1) which in turn was related to better quality of life in somatic domain at T2. Further, patients who reported higher levels in somatic domain of QOL (T1) were likely to report greater meaning in life (T2) which in turn predicted better sense of balance (T2). The meaning in life and meaning-making processes should be taken into account when considering post-stroke adaptation and their quality of life.

Oral Presentation Abstracts

A network approach to understanding child and parent causal attributions in childhood obesity

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Background

Illness attributions affect psychological adjustment, while parental attributions are associated with treatment initiation, acceptability, engagement and outcome. Current knowledge of child and parent causal attributions in paediatric obesity is in its infancy. The purpose of this study was to investigate child and parental causal attributions in paediatric obesity using network analysis.

Methods

A cross-sectional design was used employing the diagram network analytic method. 56 participants (30 children, 26 parents) generated individual causal attribution maps. Network theory was used in the analysis of causal effects and results visualised using open source network visualisation software.

Findings

Separate aggregated maps were produced for children and parents. Child maps were analysed by eating style (emotional, external and restraint eating). Parent maps were analysed by child behaviour profile (externalising and internalising). An individual map was reproduced to illustrate the value of network analysis as a clinical tool.

Discussion

Investigation of child and parent attributional processes may enhance the treatment of paediatric obesity through the provision of a potential treatment target and a mechanism to individually-tailor obesity treatment for children and parents.

Oral Presentation Abstracts

Why do people use dietary supplements? Exploring the role of psychological and socio-cognitive factors

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Background

Worldwide, the use of dietary supplements is increasing. However, there is still no scientific consensus whether supplements are necessary to meet one's daily nutritional needs. This study attempted to explore psychological and socio-cognitive motives for (non)usage, applying the Integrated Change Model as theoretical background.

Methods

In total 11 focus group discussions were held among users (n=28) and non-users (n=19) separately. A theory-based structured interview guide with open ended questions was used during each session. Interviews were audiotaped, then transcribed and analyzed following the principles of framework analysis.

Findings

Some themes identified were: lack of confidence towards the nutritional knowledge of general practitioners and dieticians, skepticism towards the practices of food industry in general (e.g. sprayed fruits and vegetables) and the nutritional value of food. Additionally, many people had several misconceptions about how supplements are produced and controlled.

Discussion

This study contributes to the understanding why people use dietary supplements. This information can be applied for setting up communication strategies adapted to the characteristics and needs of consumers.

Oral Presentation Abstracts

Impact of military life stressors on health and well-being of single-parent military families

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Background

Single-parent military families experience various unique stressors associated with the demands of military life. However, there has been minimal research examining the impact of military life on the well-being of singleparent military families in Canada.

Methods

An electronic survey was completed by single Canadian Armed Forces members (N = 552) who had dependents of 19 years old or younger.

Findings

This study showed that CAF single-parent families encounter many challenges, including financial strain, stressors related to relocation and deployment, and poor work-life balance. Moreover, military stressors have a negative impact on the health and well-being of both single parents and children. However, important protective factors were also identified, including the availability of peer and organizational social support and active parental coping.

Discussion

This research will allow the military organization to help families to maintain and even enhance resiliency in the face of the stressors associated with military life. Various recommendations for mitigating the impact of militarylife- related stressors, such as increasing awareness of family assistance programs and developing a policy that establishes consistent practices for flexible work arrangements, are offered.

Oral Presentation Abstracts

Quality of life in patients on peritoneal dialysis: a 12-month longitudinal study

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Background

Quality of life (QOL) impairments are common in dialysis and are associated with higher morbidity and mortality, but little is known about the course of outcomes overtime, especially for patients on peritoneal dialysis (PD). This study sought to investigate QOL across 12 months in PD.

Methods

115 PD patients completed the SF-12 and Kidney Disease Quality of Life Short Form at baseline and 12 months later. Intra-individual changes in Physical (PCS), Mental (MCS), and Kidney Disease Component Summary scores (KDCS) were identified based on the minimally important clinical difference threshold.

Findings

PCS and MCS remained stable. Significant decreases were noted for KDCS-total, patient satisfaction and staff encouragement while the effects of kidney disease improved. While for most QOL remained stable, 23–48% had deteriorating QOL; No sociodemographic or medical variables were found to be associated with course of outcomes.

Discussion

Although PD offers the convenience of home-based care, it is associated with diminishing perceived quality-of-care. This highlights the need for improving health service and care for patients on home-based dialysis.

Oral Presentation Abstracts

Development of an evidence-based intervention improving body composition and autonomous exercise motivation in youngsters

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Background

We aim to combat obesity in youngsters (11-13y), combining biological and psychological insights. Concerning body composition, overweight youngsters have a higher muscle mass compared with normal-weight youngsters. They are stronger and better in exercises wherein the focus is on absolute strength, making them more motivated to engage in strength exercise and ultimately maintain a physically active lifestyle (DOI:10.1097/MCO.000000000000099).

Methods

Applying a theory- and evidence-based approach, we developed an intervention improving body composition and autonomous exercise motivation.

Findings

The school-based intervention consists of: 1. A guideline for Physical Education teachers to safely integrate strength exercises in PE-classes, based on current insights of strength exercises in youth. 2. A motivational intervention guideline for teachers to increase the autonomous motivation to exercise, with online and face-to-face lessons. 3. An online environment for youngsters to monitor their own progress (physically and motivationally). We will show materials and movies about the program.

Discussion

This multidisciplinary approach aims to make youngsters more motivated to be physically active, resulting in a healthier body composition. This will be evaluated in an RCT.

Oral Presentation Abstracts

A systematic review of self-regulation mediators of success in obesity interventions: the SPOTLIGHT project

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Background

This review examined individual self-regulation mediators of medium/ long-term weight control, physical activity, and energy intake in clinical and community behavior change obesity interventions.

Methods

Studies were identified through electronic database searches. Studies reporting on experimental designs were eligible if: a) reported intervention effects in overweight/obese adults on at least one of the hypothesized mediators (self-regulation factors), and b) the association between these and outcomes of interest (weight change, physical activity, energy intake). Methodological quality and content of studies were extracted. Data was analyzed by means of narrative synthesis.

Findings

Thirty-five studies testing 42 putative mediators were included. Ten studies included formal tests of mediation. Identified mediators for medium/long-term weight control were higher levels of autonomous motivation, self-efficacy/barriers, self-regulation skills, flexible eating restraint, and positive body image. For physical activity, significant putative mediators were high autonomous motivation, self-efficacy, and use of self-regulation skills. For dietary intake, no consistent mediators were identified.

Discussion

Despite limited evidence, this review identified important self-regulatory mediators of change in obesity-related behaviors in overweight/obese individuals that can contribute to improve future interventions' design and efficacy.

Oral Presentation Abstracts

The job-demand-control model for predicting German university students' subjective stress

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Background

According to Karasek's job-demand-control model (1979) an employee's possibility to control his work (decision latitude) and the job's demands characterize the working situation as a straining or senseless respectively as an active or passive job. This is also influenced by the social support by coworkers and the employer. The model was transferred to the situation of German university students and the job content questionnaire (JCQ) was adapted. This study's purpose is to test Karasek's main hypotheses of subscales' relationships in explaining students' subjective stress.

Methods

Self-reported data from 1,523 German university students aged 23 years was analyzed in a descriptive way and by correlation and multiple regression analyses.

Findings

Like Karasek suggested, stress is negatively correlated with decision latitude (-.18**) but strongly positively associated with psychological demands (.58**). Overall, 37% ($p < .001$) of students' stress is explained by JCQ subdimensions decision latitude, psychological demands, social support and expectations for the future.

Discussion

Students' daily living situations in the light of the Bologna reform are discussed in order to derive preventive starting points.

Oral Presentation Abstracts

A selfregulation intervention program for obese adults with a gastric balloon

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Background

This study describes an intervention program for obese adults (BMI: 27-40) who chose to have a gastric balloon for a period of 6 months, in order to loose weight.

Methods

This intervention program included 2 groups of participants that followed either 1) a shortterm self-regulation intervention program (SRI; N=48), or 2) no psychological consultation (N=40). In both groups participants were free to choose to consult a dietician and/or physiotherapist.

Research question

Is there a difference in weightloss between the two groups? Socio demographic variables, weight and psychological wellbeing (SCL-90) were assessed at the start of the program (T1). Psychological wellbeing was measured directly after the SRI and weight loss after 6 months (T2). Anova analyses were used.

Results

A significant difference in weightloss ($\alpha < 0.05$) and psychological complaints ($\alpha < 0.05$) between the two groups was found, in favour of the SRI group.

Discussion

The results suggest that a SRI, including phases of goal setting, planning, goal pursuit, emotion regulation, empowering social skills, anchoring, and (process) evaluation, directed at changing dietary and exercise behavior, positively affects both psychological wellbeing as weight loss.

Oral Presentation Abstracts

Parental influences on healthy behaviors and body mass changes among adolescents with overweight and obesity

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Background

This study investigated the relationship between perceived parental behaviors (parental diet and physical activity, and parental verbal pressure), and changes in body mass index (BMI) among adolescents with overweight or obesity.

Methods

Data was collected three times, with a 2-month interval between Time 1 (T1) and Time 2 (T2), and a 11-month interval between T2 and Time 3 (T3). Adolescents (N = 100) aged 13-19 with BMI above 24.01 filled out the questionnaire, assessing their dietary behaviors, physical activity, perceived parental behaviors, and parental verbal pressure. Adolescents' weight and height was measured objectively.

Findings

Adolescents who reported higher levels of perceived parental diet and physical activity (T1) reported healthier diet, higher levels of physical activity and lead healthier lifestyle at T2 and T3, and consequently had lower BMI at T3. In contrast, there were no indirect effects of the perceived parental verbal pressure (T1) through adolescents' behaviors (T2) on their BMI (T3).

Discussion

The role of parents' healthy behaviors should be taken into account when considering adolescents' overweight and obesity prevention and treatment programs.

Oral Presentation Abstracts

The role of temporal framing in narratives about excessive sugar consumption

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Background

Narrative storytelling can be used to convey health risk information. This research aimed to determine the influence of temporally framed narratives about excessive sugar consumption on motivation to reduce intake and behaviour at follow-up.

Methods

In study 1 (N = 69), participants read a narrative which described negative outcomes as occurring to a significant number of people every day ('day-frame') vs. every year ('year-frame'). Sugar consumption was recorded 7-days later. In study 2 (N = 294), we also included a control condition in which the outcomes were presented without a temporal frame.

Findings

In study 1, participants spent longer reading the narrative message in the 'day' vs. 'year' frame condition. For those low in eating self-efficacy, the 'day' frame was associated with greater worry and higher intentions to reduce sugar consumption. In study 2, there was greater transportation when the narrative contained the 'day' frame compared to when it contained the 'year' frame or no frame.

Discussion

The persuasive effects of narrative communications may depend on the temporal context in which the outcomes are set.

Oral Presentation Abstracts

Sleep quality and the association between hypertension and carotid arterial wall thickness: Toon Health Study

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Background

Modification effect of sleep quality on the association between hypertension and carotid arterial wall thickness was investigated.

Methods

Subjects was 1,965 men and women aged 30-79 who participated in the Toon Health Study in 2009-2012 with satisfactory information. Sleep quality was evaluated by Pittsburgh Sleep Quality Index (PSQI) and defined ≥ 6 as deteriorated. Hypertension was blood pressure $>140/90$ mmHg. Carotid arterial wall thickness (CAWT) was maximum intima-media thickness ≥ 1.1 mm in the common carotid artery. Logistic regression model was used to calculate odds ratios (ORs) of CAWT for hypertension according to sleep quality. Covariates were age, body mass index, smoking, drinking, exercise, psychological stress and antihypertensive drug use.

Findings and Discussion

The association between hypertension and CAWT was more evident for those who had deteriorated sleep quality in women. The respective multivariable ORs (95% CIs) were 1.47(1.00-2.18) and 2.41(1.41-4.10) for non-deteriorated and deteriorated in total (p for interaction=0.21), and 1.31(0.71-2.42) and 4.23(2.02-8.89), respectively, in women ($p=0.05$).

Oral Presentation Abstracts

Social changes in family building: British media constructions of cross border surrogacy

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Background

Media framing can influence people's perceptions of social changes in family building, and has the potential to influence their future actions.

Objectives

To analyze the type of framing and construction used in news print articles of international surrogacy arrangements.

Methods

UK newspaper media were searched using the search engine Lexis-Nexis for articles on international surrogacy. Content analysis was undertaken to identify use of gain/loss, alarm and vulnerability frames, as well as type of construction. Four researchers independently analysed articles using a coding strategy specifically developed for this study.

Results

57 articles were analyzed. Differences in constructions between serious (mainly legal, financial), middle market (legal, social) and tabloid (social, commercialisation) newspapers were found. The middle market was more likely to cover stories concerning gay than heterosexual families, and all newspapers portrayed surrogacy negatively using loss frames for surrogates and gain frames for commissioning parent(s).

Discussion

Social changes in family formation did not always follow legal changes and framing of legal and commercial problems was prevalent. The welfare of children and surrogacy for medical reasons were minimally addressed.

Oral Presentation Abstracts

Health warnings on plain packs do not promote quitting intention: results from two EMA studies

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Background

Fear-inducing warning labels on tobacco products are widely used, despite theory and experimental evidence suggesting that fear appeals are ineffective and may even cause denial, disengagement, or maladaptive behavior.

Purpose

To examine effects of plain packaging health warnings on quitting intentions and its predictors in smokers' everyday life.

Methods

Two Ecological Momentary Assessment studies tested whether smokers report higher risk appraisals, self-efficacy, and quitting intentions immediately after seeing a warning compared to random times of the day (Study 1, n=33), and whether smoking from plain packs results in higher quitting intentions, risk appraisal, and self-efficacy than smoking from branded packs (Study 2, n=62).

Findings

Encountering health warnings did not increase self-efficacy, risk appraisal or intention, however, self-efficacy and risk appraisal were predictors of intention.

Discussion

Health warnings on plain packs seem inefficient in increasing quitting intentions, better messages focusing on self-efficacy are needed to make the most of plain packaging.

Oral Presentation Abstracts

Longitudinal effects of depression on cardiovascular risk in developing children: the LOOK Study

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Background

Depression constitutes a major risk factor for cardiovascular disease (CVD) in adults. This longitudinal study investigated the effects of depression on prognostic cardiovascular measures and behavioural risk factors in a cohort of Australian children.

Methods

Between the ages of 7 and 17 years, 852 children from the LOOK study completed measures of depression (Children's Depression Inventory), endothelial function (EndoPAT), pulse wave velocity (PWV), cardio-respiratory fitness (20m multistage shuttle run) and percent body fat (DEXA).

Findings

General linear mixed models indicated that children with greater depressive symptoms had significantly lower fitness, and greater percent body fat but there was no evidence of any effect on endothelial function or pulse wave velocity.

Discussion

Children as young as 7-years are already experiencing depressive symptoms, and more so in less fit and fatter children. Although we did not uncover any direct impact on cardiovascular function, given the risks associated with low fitness and obesity, depression in childhood may be exerting an early impact on the risk of developing CVD in later life.

Oral Presentation Abstracts

Sexual identity priming impacts men's attitudes towards sexual risk-taking behavior and sexual behavior norms

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Background

Past literature has indicated that temptation for unsafe sex, masculinity endorsements and lower condom self-efficacy are associated with sexual risk-taking behavior and, consequently, HIV risk. Additionally, researchers have found that stereotypes can have negative psychosocial consequences for members of stereotyped groups, including conformity to stereotypes. Two studies explore the role of sexual identity priming in perceptions of norms, endorsements of sexism and conforming to sexual stereotypes in males.

Methods

Two experimental (N = 84, N = 147) studies tested whether sexual identity salience impacted reported sexual risk-taking.

Findings

Differences in temptation for unsafe sex and condom self-efficacy appeared in conditions when sexual identity was made salient (Study 1). Hostile sexism predicted participants' temptation for unsafe sex, whereas benevolent sexism did not (Study 2). Additionally, temptation for unsafe sex was strongly predictive of actual reported unsafe sexual behavior.

Discussion

These data suggest that sexual identity salience may change male attitudes about unsafe sex. Because temptation for unsafe sex has been associated with unprotected sexual behavior, sexual identity awareness may provide a pathway for intervention on unprotected sexual behavior in males.

Oral Presentation Abstracts

Targeting Intention, Motivation and Engagement in Physical Activity Interventions (TIME-PAI): a meta-analysis examining effective components

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Background

Intention and motivation predict behavior (change); and engagement with behavior change interventions is vital to their success. However, it is not known which components of interventions are associated with increases in intention, motivation and engagement. This systematic review and meta-analysis investigates this question among interventions to increase physical activity (PA).

Methods

Intervention studies that assessed changes in a measure of intention or motivation for PA, and/or engagement with intervention materials, were coded with BCTTv1. Random effects meta-analyses, comparative subgroup analyses and meta-regressions examined the effects of BCTs and modes of delivery on changes in intention and motivation for PA, and on intervention engagement.

Findings

Overall, interventions had a significant main effect on measures of intention and motivation for PA. Several intervention components were significantly associated with changes in intention and motivation, as well as with increased participant engagement with intervention materials.

Discussion

This study identifies intervention components associated with changes in intention and motivation for PA, and with greater engagement with PA interventions. These results can help researchers develop and refine the motivational aspects of interventions to increase PA.

Oral Presentation Abstracts

Early implicit effects of self-affirmation in attending to graphic anti-smoking

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Background

Threatening health information can induce counter-productive defensive responses. Self-affirmation can reduce this defensiveness to health-risk information. In the current eye-movement study we measured whether self-affirmation causes more attention allocation (i.e., more fixations) to threatening anti-smoking information among those for whom the information is self-relevant.

Methods

After being randomized to a self-affirmation manipulation, 47 smokers and 52 non-smokers were exposed to a series of cigarette packs containing either high threat or low threat smoking-related images.

Findings

A significant three-way interaction was found among smoking status, affirmation condition and image. Self-affirmed smokers made more fixations to the cigarette packs displaying high threat and low threat images than did nonaffirmed smokers. Self-affirmed non-smokers showed less fixations to the high threat and low threat images than did non-affirmed non-smokers.

Discussion

The findings indicate positive attention effects of self-affirmation on early attention allocation processes among those for whom the information is self-relevant (i.e., smokers). The use of this implicit measure of performance in the form of eye movements contributes novel data to inform our understanding of the working mechanisms of self-affirmation.

Oral Presentation Abstracts

Associations between cardiovascular disease and post-traumatic stress disorder

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There is a large body of evidence linking cardiovascular disease and post-traumatic stress disorder (PTSD). However, the specificities of the association between these conditions are not well understood. The following review aims to highlight the current body of research, providing a comprehensive view of the relationship between cardiovascular disease and PTSD. Patients with PTSD experience maladaptive autonomic responses, secreting increased levels of stress hormones that, over time, damage the heart and blood vessels. Such neurobiological responses also contribute to the development of co-occurring mental health problems that modify cardiovascular functions in response to internal and external stressors. Research also suggests that experiencing a heart attack, may itself trigger PTSD symptomology. Survivors may experience flashbacks of the event, and actively attempt to avoid reminders while remaining hypervigilant to the threat of a repeat heart attack. The current body of research deserves critical consideration in an effort to inform the need for enhanced screening and treatment protocols. It also serves to reiterate the substantial connection and value in integrating the body and mind in medicine.

Oral Presentation Abstracts

Personal and parental religiosity influences on HIV prevention behaviour among Pentecostal Botswana youth

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Background

Religiosity is a resource for safer-sex behaviour in HIV pandemic regions. We investigated influences of personal and parental religiosity on safer-sex behaviours among Botswana Pentecostal youth.

Methods

261 youth (female = 65%) from a major Pentecostal Church in Botswana completed the Botswana Youth Health Survey (BYHS). The BYHS included questions on personal and parental religiosity (intrinsic – extrinsic dimensions), personal predispositions (impulsivity), demographic characteristics, and safer-sex behaviours.

Findings

Personal religiosity, especially choir attendance, was positively associated with safer-sex behaviours. Personal religiosity was also positively associated with safer-sex behaviours but only in younger participants and those with longer congregation affiliations. Paternal and maternal religiosity explained safer-sex engagement, but it was paternal religiosity that exerted the strongest influence, reflecting underlying patriarchal structures. Parental and personal religiosity influences on safer-sex were indirect, through impulsivity.

Discussion

Religiosity impacted safer-sex behaviours but this was not straightforward. HIV prevention efforts may need to consider family religiosity, and utilize music and song appropriately. However, little progress can be made in terms of HIV prevention if Botswana patriarchal structures remain unchanged.

Oral Presentation Abstracts

Developing effective health behaviour change interventions: a novel 'Realist' methodology for formative process evaluation

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Background

Developing a novel methodology for formative process evaluation of behaviour change interventions following MRC guidelines for process evaluation of complex interventions (2014) using a Realist Evaluation approach.

Methods

A logic model (developed from Realist Review, case studies, focus groups) outlined context-mechanism-outcome chains (CMOs) of interest in bringing about intended behaviour change. Nine practitioners delivering the intervention, and 30 men in intervention participated. Session recordings were rated according to presence/absence of intended behaviour/s. 'Realist interviews' explored CMOs of interest for intended behaviour change. Framework Analysis (FA) was used; the framework built from CMOs.

Findings

This novel methodology provided rich detailed data regarding contexts, mechanisms, and outcomes of interest and their impact on intended behaviour changes. Iterative intervention development was informed by identifying behaviours happening/not-happening, and linking these with theory and data about CMOs important in that behaviour change.

Discussion

This novel method for understanding how and in what context/s mechanisms for change act to bring about behaviour change in an intervention supports development of interventions more likely to affect intended health behaviour change.

Oral Presentation Abstracts

Reception of multiple health risk feedback: do good news compensate bad news?

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In real life, people often receive feedback for various health risk factors simultaneously. Hence, the actual individual risk profile might encompass a 'mixed' risk status with an evaluated status on one risk factor (e.g. high blood cholesterol) and a normal status on another factor (normal blood glucose). The present study tested how mixed versus consistent risk feedback profiles are processed.

In a public health screening, 817 participants received feedback about their actual coronary risk status profile (blood cholesterol, blood glucose, blood pressure). Afterwards risk perceptions and perceived need to act were assessed.

Participants acknowledged their individual risk profile in their risk perceptions ($F_s > 11.8$, $p_s < .001$). Interestingly, mixed risk profiles did not induce 'attenuation' effects in comparison to consistent risk profiles. Thus, an elevated reading on a risk factor induced a higher risk perception even when simultaneously a normal reading on another risk factor was present.

People are sensitive to the risk profile when receiving multiple risk feedback and do not compensate bad news with good news indicating relative accuracy. Resulting theoretical implications for the processing of health risk information are discussed.

Oral Presentation Abstracts

Neurocognitive impairment in HIV: reliability and validity of a practical screening tool

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Background

Neurocognitive impairment (NI) prevalence in HIV is estimated >50%, associated with disease severity (CD4-cell count), medication adherence, and quality of life (QoL). Early detection is paramount but assessments are resourceintensive. This study explores the reliability and validity of a 3-item NI screening tool to identify patients eligible for comprehensive NI assessment.

Methods

A longitudinal study in which 138 patients completed baseline and follow-up (14.5 months later) questionnaires including NI and QoL (sf12_v2). The CD4-cell count prior to baseline was collected from clinic records. We examined internal consistency and test-retest reliability of the NI scale; and for convergent validity we examined the association of NI with CD4-cell count and QoL.

Findings

Cronbach's alpha at baseline and follow-up (.86 to .84), and test-retest reliability were good ($\rho=.75$, $p<.001$). CD4- cell count predicted baseline and follow-up NI ($\rho=.22-.21$, $p<.01$). NI predicted mental ($\beta.378$, $p<.001$) but not physical QoL, while controlling for age, CD4-cell count and baseline QoL.

Discussion

This 3-item NI screening tool seems reliable and valid and could be considered for routine screening for NI in HIVcare.

Oral Presentation Abstracts

Factors associated with STIs among traditionally circumcised men in the Eastern Cape Province, South Africa

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Background

The aim of this study was to explore factors associated with STIs among traditionally circumcised men in the rural areas of Eastern Cape Province, South Africa.

Methods

Cross sectional study using interviewer administered fully structured questionnaires was conducted among 1167 men who had undergone initiation and traditional male circumcision in rural areas of the Eastern Cape Province.

Results

The mean age of the participants was 19.8 years. About 31% reported having more than one sexual partner. A total of 37.9% reported inconsistent condom use and 21% did not use condom at last sex. Overall, 8.4% reported ever having had an STI. Logistic regression analysis showed that a diagnosis with an STI was associated with increasing age, being employed, having multiple sexual partners, knowing HIV status, perceived personal STI risk and beliefs about male circumcision and STI protection.

Discussion

The study findings reveal important target points for future cultural sensitive health education aimed at decreasing STIs among traditionally initiated and circumcised men.

Oral Presentation Abstracts

Effective behaviour change techniques in health behaviour change interventions: a review of meta-analyses

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Background

Coding of intervention descriptions for inclusion of specific behaviour change techniques (BCTs) is becoming an increasingly popular means for identifying 'active ingredients' of interventions and to inform the design of optimally effective interventions.

Methods

An electronic search identified 16 meta-analyses that met the inclusion criteria. Data were extracted from moderator analyses to determine differences in average effect sizes associated with the presence versus absence of each distinct BCT.

Findings

The BCTs most commonly reported on were 'prompt specific goal setting' (data extracted from 15 metaanalyses; k), 'prompt barrier identification' (k=14), 'prompt self-monitoring of behaviour' (k=14), 'provide information on consequences' (k=13), 'provide feedback on performance' (k=13), 'use of follow-up prompts' (k=13), 'plan social support or social change' (k=13), 'provide instruction' (k=12), and 'prompt review of behavioural goals' (k=12). Of these, the inclusion of all but one BCT (follow-up prompts) appeared to be associated with larger effect sizes than non-inclusion.

Discussion

The results suggest that the inclusion of particular BCTs are likely to increase the effectiveness of interventions, and contribute to the emerging science of behaviour change.

Oral Presentation Abstracts

Is seeing really believing? Patient responses to retinal images in routine retinopathy screening sessions

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Background

Annual diabetic retinopathy screening provides an opportunity to relay visual feedback about patients' eye health. Viewing retinal images in the screening session has become standard care, but patients' understanding of their retinopathy risk and the link between diabetes and eye health is unclear. This study explored patients' experiences of viewing images and the impact this may have on illness cognitions and diabetes management.

Methods

Twelve semi-structured interviews were conducted with patients attending hospital-based diabetic eye screening in London. Five had retinal changes detected in the screening session. Verbatim transcripts were analysed using thematic analysis.

Findings

Two themes emerged: mood alteration and images as facilitators of communication with a health professional. The images were perceived as a valued part of the screening. They facilitated communication with the health professional, but repeated exposure to retinal images could result in habituation. Patients tended to use defensive coping, downplaying the significance of retinopathy, perceiving existing changes as reversible. Viewing images didn't alter motivation to control diabetes.

Conclusion

Access to diabetic retinopathy images is valued by patients, but it may hinder effective risk communication.

Oral Presentation Abstracts

Cortisol levels and suicidal behaviour: a meta-analysis

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Background

Suicide is a major cause of death worldwide, responsible for 1.5% of all mortality. The causes of suicidal behaviour are not fully understood. Dysregulated hypothalamic-pituitary-adrenal (HPA) axis activity, as measured by cortisol levels, is one potential risk factor. This review aimed to estimate the strength and variability of the association between cortisol levels and suicidal behaviour

Methods

Twenty-four studies met our inclusion criteria (N = 1,862; 765 suicide attempters & 1090 non-attempters). We compared participants identified as having a past history of suicide attempt(s) to those with no such history.

Findings

Overall there was no significant effect of suicide group on cortisol ($r = .059$, $p = .242$). However, age moderated the association between cortisol and suicide attempts. In studies where the mean age was below 40 years the association was positive (i.e., higher cortisol was associated with suicide attempts) and where the mean age was 40 or above the association was negative.

Discussion

These findings confirm that HPA axis activity, as indicated by age-dependent variations in cortisol levels, may play an important role in suicidal behaviour.

Oral Presentation Abstracts

Socio-cognitive predictors of primary and secondary sexual abstinence among South African adolescents

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Background

While predictors of condom use among sub-Saharan African adolescents have been studied extensively, factors related to abstinence have received far less attention. This study identified socio-cognitive predictors of primary and secondary abstinence. Furthermore, this study assessed whether these socio-cognitive determinants could be modelled according to propositions of the I-Change Model.

Methods

South African students (N=1,351) filled in a questionnaire at baseline and after 6 months. Structural equation modelling was applied to assess direct and indirect effects.

Findings

Among sexually inexperienced adolescents, negative attitudes and lack of knowledge predicted sexual debut 6 months later. Among the sexually experienced, no socio-cognitive factors significantly predicted abstinence. Positive norms and attitudes towards abstinence did, however, predict secondary abstinence intentions. Explained variance proportions were low (all $R^2 < 0.30$). Knowledge and risk perception effects were mediated via attitudes and norms. Differences between boys and girls were present.

Discussion

Socio-cognitive factors yielded low proportions of explained behavioural variance. The relation with the sub-Saharan African context will be discussed and adaptations for future studies will be proposed.

Oral Presentation Abstracts

Acceptability of financial incentives and penalties for encouraging uptake of healthy behaviours: focus groups

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Background

Financial incentive interventions to encourage healthy behaviours are increasingly common. Previous literature lacks an empirical grounding on whether or not incentives are acceptable and why. We sought to gain an insight into the factors related to acceptability of financial incentive interventions for health behaviours and to understand preferred formats for financial incentives.

Methods

Eight focus groups were conducted with 74 members of the UK public. Audio recordings were transcribed verbatim with thematic analysis to identify key themes.

Findings

Five themes were identified: the nature of fair exchange; effectiveness and cost-effectiveness; impact on individuals and wider society; acceptable recipients; and 'other issues'.

Discussion

Participants were distrusting of financial incentive interventions. However, they were more likely to be deemed acceptable if they were fair to recipients, if they were closely monitored and evaluated, if they were shown to be effective and cost-effective, and if health education is also provided. Participants preferred positive rewards, and those in the format of shopping vouchers rather than cash incentives. These results highlight clear suggestions for how to design acceptable health promoting financial incentives.

Oral Presentation Abstracts

Resilience and lifestyle in patients with acute coronary syndromes: a prospective one-year follow-up study

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The importance of healthy lifestyle and the control of modifiable risk factors are cardinal aspects of prevention and treatment of cardiovascular diseases (CVD). In recent decades, several studies have shown that the manifestation and clinical evolution of CVD are related to a range of negative and positive psychosocial aspects, but research on the contribution of positive factors to the changes in lifestyle in patients with CVD is notably absent.

Aim of this study was to investigate the predictive role of resilience (i.e., perceived social support, sense of coherence, self-esteem, optimism, general and disease-specific self-efficacy), in behavioral changes in acute coronary syndrome (ACS) patients, especially for dietary pattern, physical activity, smoking status and alcohol consumption.

Two-hundred and seventy-five patients (83.3% men; mean age=57.1, SD=8. 0) were enrolled. Psychological factors and lifestyle were assessed during three measurement points (baseline, 6-month and 12-month follow-ups).

Results from regression analyses showed that disease-specific self-efficacy and sense of coherence can predict lifestyle improvement after ACS. These findings underline the importance of working on resilience factors to change lifestyle in patients with CVD.

Oral Presentation Abstracts

“I might be fit, but I don't feel like exercising” - perceived barriers to self-efficacy

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Background

The lack of physical activity (PA) among older adults cannot be fully explained by deteriorating objective health. As hypothesized by Social-Cognitive Theory, perceptions of somatic states play an important role for self-efficacy (SE) and for PA. Among older adults, self-rated health was found to be a stronger predictor of SE than objective health measures.

Methods

This 3-wave study predicted SE and accelerometer-assessed PA in N=158 community-dwelling German adults aged 65+. The predictive value of objective or more general barriers for SE and PA (chair-raise test fitness, SF-36 pain, diagnosis with arthritis or arthrosis, falls within 12 months) were compared with perceived barriers (self-rated fitness, pain, illnesses and fear of falling).

Findings

Perceived barriers had a stronger association with SE than objective or more general measures and indirectly predicted PA via SE (all bootstrapped 95% CI not including 0; controls were baselines, age, gender, education).

Discussion

PA interventions might try to explicitly address participant's perceived barriers for PA and test their amenability to individualized feedback about remaining PA capabilities to increase SE for PA among older adults with health issues.

Oral Presentation Abstracts

Overcoming barriers to implementation of routine alcohol screening and brief intervention in general practice

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Background

Despite its efficacy, alcohol screening and brief intervention (ASBI) has rarely been integrated into routine clinical practice. This study aims to identify strategies that tackle barriers to ASBI implementation in general practice by involving health professionals and prevention experts.

Methods

A three-round online Delphi study among health professionals and prevention experts was carried out in the Netherlands. The first open-ended questionnaire (N=39) generated ideas about strategies to overcome barriers. In the second round (N=214), participants were asked to indicate how useful they considered each strategy. Items without consensus were systematically fed back (N=144) in round three.

Results

Results show that participants consensually supported the usefulness of 62 strategies targeting the inner and outer setting of the general practice, as well as intervention and provider characteristics. Differences between groups were found between GPs and practice nurses on the one hand and prevention experts on the other hand.

Conclusions

This explorative study identified a broad set of feasible strategies and paves the way for future research to experimentally test the identified strategies using multifaceted approaches.

Oral Presentation Abstracts

The role of physical post traumatic growth in predicting adjustment in prostate cancer

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This study explored how growth following a physical trauma predicts adjustment (physical post traumatic growth; PPTG). This study assessed whether mindfulness moderates the relationship between post traumatic growth and adjustment and whether the relationship between resilience and adjustment is mediated by growth.

Structural Equation Modelling was used to evaluate the role of post traumatic growth (PTG) in adjustment. Men 1-10years post prostate cancer treatment were recruited (n = 241). Measures: Post Traumatic Growth Inventory, Hospital Anxiety and Depression Scale, Connor-Davidson Resilience Scale, Patient Oriented Prostate Utility Scale, and Freiburg Mindfulness Inventory.

P-PTG predicted lower distress and improved quality of life (QoL). The relationship between resilience and adjustment was fully mediated by P-PTG and PTG. Furthermore, mindfulness was found to moderate the relationship between P-PTG, PTG and QoL. This structural equation model exhibits a good fit: $\chi^2(352) = 567.40$, $p < .001$, $Q = .160$, $CFI = .93$, $RMSEA = .050$ (.042-.058) $AIC = 787.40$.

This study supports P-PTG and its value in predicting adjustment and provides insight into the relationships between resilience, mindfulness, PTG and adjustment.

Oral Presentation Abstracts

Staying physically active in old age: can prospective memory deficits be buffered by planning efforts?

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Background

Even if older adults have good intentions, health problems and cognitive deficits may be barriers for regular physical activity (PA). If the cognitive resource prospective memory (PM) is low, planning competencies may help translating intentions for PA into behavior.

Methods

Longitudinal data from 310 older adults (64+) with three measurement points (across 12 weeks) were analyzed. A mediated moderation model was estimated specifying the link between intentions and PA via planning (controlling for baseline characteristics). PM was introduced as moderator of this association.

Findings

Planning significantly mediated the intentions-PA link. The moderation was also significant: Older adults with worse PM could buffer their deficits by increased planning efforts.

Discussion

Particularly in older adults with decreasing cognitive capacities, planning strategies are important to stay active and healthy. Intervention studies for older adults should, therefore, target planning strategies and, additionally, consider training PM. Results are discussed by integrating research on health psychological theories and cognitive aging.

Oral Presentation Abstracts

Voluntary periodic abstinence from alcohol during “Dry January” and subsequent alcohol use

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Background

Periodic abstinence from alcohol may convey physiological benefits and enhance well-being. The aim of this study was to address a lack of information about: correlates of successful completion of a planned period of abstinence; and how success or failure in planned abstinence affects subsequent alcohol consumption.

Methods

857 British adults (249 men, 608 women) participating in the “Dry January” alcohol abstinence challenge completed a baseline questionnaire and a 6-month follow-up questionnaire. Key variables assessed at baseline included measures of alcohol consumption and drink refusal self-efficacy (DRSE).

Findings

Success during Dry January was best predicted by greater DRSE, more moderate drinking at baseline, intending to stop drinking after Dry January, and fundraising during Dry January. Participation in Dry January was related to reductions in alcohol consumption and increases in DRSE among all respondents at 6 month follow-up, regardless of success, but these changes were larger among people who successfully completed the challenge.

Discussion

Periodic abstinence from alcohol can lead to changes toward healthier drinking and greater DRSE, and is unlikely to result in “rebound effects”

Oral Presentation Abstracts

Emotional adjustment and quality of life in men undergoing prostate biopsy

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Background

The incidence of prostate cancer in men has risen and numbers undergoing a prostate needle biopsy have increased correspondingly. While biopsy can be associated with adverse side effects, evidence of its psychological impact is lacking. This study assessed the relative importance of stress appraisal, self-efficacy and personality in predicting adjustment in men facing the threat of a cancer diagnosis.

Methods

Men attending a Rapid Access Prostate Clinic for a biopsy (N=115) participated in the study. Psychological variables included global stress measured by the Perceived Stress scale (PSS) and General Self Efficacy (GSES) and Sense of Coherence (SOC). Adjustment was measured by the profile of mood states (POMS) and quality of life (EORTC QLC – C30). Demographic data was also gathered.

Findings

Hierarchical regression analyses demonstrated that the set of predictors accounted for 46% of variance on total mood and 17% on global quality of life.

Discussion

Perceived stress emerged as the strongest predictor across all subscales. This is an important finding as stress has rarely been examined in this context. Research and clinical implications are discussed.

Oral Presentation Abstracts

Active ageing: towards an integrated model of physical activity among older adults

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Background

Physical activity can significantly buffer against age-related illness and disease. Despite existing initiatives to promote active ageing, many older adults remain insufficiently active. Drawing on sound behavioural theory, the aim of the current study is to develop an integrated behavioural decision-making model to understand better older adults' physical activity.

Methods

The model is informed by a prior qualitative study (Study 1) and the extant literature. Study 1 interviewed community-dwelling older adults (N=20, age range 67-87) to explore their meanings and perceptions toward physical activity engagement, and how these were conceptualised within the process of ageing. The findings informed Study 2 (N=212), a longitudinal assessment to determine the predictors of older adults' physical activity decision-making.

Findings

Study 1 revealed that older adults hold some unique perceptions related to individual, social-cognitive, and physical environmental types of influences of their physical activity engagement. Study 2 determined the mechanisms by which these processes operate.

Discussion

Understanding the influences of and mechanisms guiding older adults' physical activity is integral in supporting active and healthy ageing of older adults.

Oral Presentation Abstracts

Review of reviews of school-based interventions to improve sexual health and reduce alcohol misuse

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Objective

To systematically review existing reviews of school-based sexual health education and alcohol misuse education, to summarise evidence relating to effectiveness, and to identify program elements that are effective in reducing risky behaviour.

Methods

Electronic bibliographies were searched systematically. Results were pooled using a narrative synthesis.

Findings

Twenty nine systematic reviews were included in the analysis. Six categories of programs were identified. Those focusing on abstinence-only are not effective in changing behaviour; however, programs that are comprehensive, promote sexual risk reduction, or target HIV can have positive impacts on knowledge, behaviour and health. We present a list of 28 factors that may increase the effectiveness of such programs.

Discussion

There are very few studies of the effectiveness of programs focusing on alcohol and risky sexual behaviour. However, programs targeting risky sexual behaviour can be effective. We suggest that certain types of program can lead to changes in behaviour, and we present a list of characteristics that may facilitate this. We encourage intervention developers to consider this list when developing programs.

Oral Presentation Abstracts

Frequency of laughter predicts subsequent functional ability in communitydwelling older Japanese

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Introduction

The importance of positive emotion to our health has been recognized. The aim of this study was to investigate the association between frequency of laughter (FOL) and subsequent functional ability in communitydwelling older Japanese.

Methods

A two-year prospective study was conducted among 480 residents (male: 213, female: 267) of Tosa Town aged 65 and older without disability in performing basic activities of daily living (BADL) at baseline. Measures included self-ratings of FOL, functional ability, sociodemographic factors, depression, self-rated health and medical conditions. Odds ratio (OR) and 95% confidence interval (CI) of functional decline two years later according to level of FOL at baseline were estimated using logistic regression models.

Results

52 (10.8%) participants reported a decline in BADL at follow-up. Low FOL at baseline was significantly associated with a higher risk of functional decline, even after controlling for potential confounding factors (OR: 3.2, 95% CI: 1.3-7.8).

Conclusions

Frequency of laughter might be a predictor of subsequent loss or maintenance of functional ability among older people.

Oral Presentation Abstracts

Intimacy and sexuality of older adults in nursing homes: the aged care staff's perspective

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Intimacy and sexuality amongst the elderly people remain important and contribute to quality of life and well-being, including those living in nursing homes. However, these issues are often considered as a taboo in institutions and are therefore not addressed adequately, preventing the fulfilment of such needs for the residents. One of the obstacles seems associated to representations among the aged care staff on these topics. This presentation covers an extensive literature review on the subject. A critical analysis on existing research on aged care staff perspective allows us to identify three main themes: their perceptions; their actual practices and implemented strategies; and finally, mainstream approaches aiming at behavioural change among health professionals regarding their attitudes on intimacy and sexuality. Our analysis highlight that staff shows mostly positive attitudes on the importance of both issues, yet practices do not necessarily reflect this position. As a result of this gap, elderly are not considered in their needs and may even be repressed for having them. Finally, few means are implemented to raise awareness to provide the staff with necessary training.

Oral Presentation Abstracts

What are good practice characteristics in interventions and policies promoting healthy diet and physical activity?

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Background

This umbrella review aimed at eliciting good practice characteristics of interventions and policies aiming at healthy diet, increasing physical activity, and lowering sedentary behaviors.

Methods

A systematic review of reviews and stakeholder documents was conducted. Data from 7 databases and resources of 7 major stakeholders (e.g., World Health Organization) were systematically searched (10 documents met inclusion criteria). Overall, the review yielded 74 systematic reviews, 16 position review papers, and 19 stakeholders' documents. This investigation was undertaken by the DEDIPAC Knowledge Hub (the Knowledge Hub on the DEterminants of Diet and Physical ACTivity), which is an action of the European Union's joint programming initiative.

Findings

53 good practice characteristics were identified and group into 3 domains proposed by the World Health Organization's framework, (1) main intervention/policy characteristics, referring to the design, targets, and participants, (2) monitoring and evaluation processes, (3) implementation issues.

Discussion

The use of the proposed list of 53 good practice characteristics may allow for identification of success vectors in the domains of main characteristics of interventions/policies, their implementation, evaluation and monitoring processes.

Oral Presentation Abstracts

Efficacy of Mindfulness: Improving the mood states and cognitive emotion regulation on women with Multiple Sclerosis

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Background

The object of the present study has been evaluating the effectiveness of mindfulness in changing the mood states and emotion regulation strategies among women with Multiple Sclerosis (M.S.)

Methods

In this study, semi-experimental design pre-test/post-test was done with the control group. The statistical sample included 30 under treatment women with M.S. living in Tehran, and was selected by an objective-based sampling method. These participants were randomly put in 2 groups of 15 individuals including the experimental group and the control group. The experimental group was trained in 8 sessions. The measurement tools were Brums and CERQ scales. The results were analyzed using T-Test method.

Findings

The results showed that the eight training sessions improved both the experimental group's mood states and cognitive emotion regulation ($P < 0.01$).

Discussion

These results suggest that the therapeutic sessions based on mindfulness strategies increased the vigor and reduced the tension, depression, anger, fatigue and confusion levels of the participants. Also, these strategies increased the use of positive strategies (positive refocus and programming, positive evaluation, acceptance) and decreased the use of negative strategies (self-blame, blaming others, rumination, catastrophizing).

Oral Presentation Abstracts

Positive aging for all? The protective effect of positive views on aging in precarious circumstances

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Background

Precariousness, defined as lack of security for retirement, can influence aging and result in health inequalities in old age.

Methods

A mixed methods approach was used to explore differences in psychosocial resources that middle-aged individuals from precarious and financially secure backgrounds use for positive aging and whether positive views on aging can compensate for lacking resources in midlife. Data from the German Ageing Survey (N=1,888 in the secure group, N=521 in the precarious group) were analyzed to explore the relation between resources, health and wellbeing, and to compare strategies used by precarious and financially secure individuals. Semi-structured interviews with middle-aged persons (N=20) from these two categories were analyzed in order to further explain the quantitative findings.

Findings

Precarious individuals have less resources for positive aging. However, having a positive view on aging can compensate for insufficient resources. Qualitative findings showed differences in strategies for resource management and perceptions of positive aging.

Discussion

Findings underlie the importance of positive views on aging as a resource for healthy aging interventions.

Poster Presentation Abstracts

Apps and adherence: a content analysis

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Background

There are a vast number of smartphone applications (apps) aimed at promoting medication adherence on the market; however the theory and evidence base in terms of applying established health behaviour change techniques (BCTs) underpinning these apps remains unclear. This study aims to code these apps using a BCT Taxonomy for the presence or absence of established BCTs.

Design

The sample of apps will be identified through systematic searches in both the Google Play Store and Apple App Store. All apps which fall into the search categories will be downloaded for analysis.

Methods

The downloaded apps will be screened with exclusion criteria and suitable apps will be reviewed and coded for BCTs. Coding will be done independently by two researchers.

Expected Results

Descriptive data will be presented on the type and number of BCTs included.

Current Stage of Work

All free apps from the Apple App store have been downloaded, screened and are currently being coded.

Discussion

This research can be used to provide a link between behaviour change research and software development and point to areas for further study.

Poster Presentation Abstracts

Using the Person-Based Approach to develop ‘Balance Retraining’: an online intervention for dizziness symptoms

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Background

As people become older, experiencing dizziness becomes more common and can lead to falls and poor quality of life. Specific exercises can retrain the balance system but are rarely taught. Given older adults’ increasing use of digital technology, we developed ‘Balance Retraining’: an interactive online intervention incorporating these exercises to support individuals in reducing dizziness.

Methods

A ‘person-based approach’ to intervention development was taken, focusing on accommodating perspectives of target-users. Think-aloud and semi-structured interviews examined older adults’ (N = 18) experiences and perceptions of ‘Balance Retraining’. The resulting transcripts were thematically analysed.

Findings

The findings revealed a positive reception regarding the look and feel of the intervention. Users reported it to be reassuring, supportive and educational. They also discussed the intervention as facilitating their continuation of the exercise therapy.

Discussion

Older adults found an online intervention for self-management of dizziness to be accessible and engaging. The extent to which the use of the person-based approach facilitated user-engagement with the intervention will be discussed with reference to users’ experiences of engaging with the intervention.

Poster Presentation Abstracts

“I think my child has ADHD”- parents looking for help in Romanian online discussion forums

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Background

Attention deficit hyperactivity disorder (ADHD) is a common neurodevelopmental disorder that affects 3-5% of school-aged children. Parents are main responsible for symptoms identification and addressing to a mental health specialist. Given the growth of online resources, parents often search health information on websites or engage in online discussion forums. The aim of this study is to explore parents' needs and reasons for using online discussion forums.

Methods

We gathered parents' messages from 15 online discussion forums (1550 messages). Thematic analysis is used to categorize messages into themes.

Expected results

The preliminary results show that online discussion forums are predominantly used by mothers. They search information about causes, symptoms, useful treatments and diagnosis methods. Online communication encourages self-disclosure, tackles social support from other parents and is a friendly environment to discuss the ADHD diagnosis.

Current stage of work

We have selected the forums and representative messages and we proceed with thematic analysis.

Discussion

The results of this study may be used in planing successful e-health interventions for parents of children with ADHD.

Poster Presentation Abstracts

Development of an mHealth application for adherence to psychotropic medication

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Approximately one out of two patients do not take their medication three months after therapy starts, while in patients with mental disorders this number varies i.e. 35%-45% for bipolar disorder. The WHO published a guide for clinicians, advising them to develop strategies for improving medication adherence. Based on this need, the aim of our project is to develop and evaluate a smartphone application that will help patients adhere to their psychotropic medication and help clinicians to keep track of their patients' adherence. This project incorporates 4 phases: a) investigating the application's features, using patients and clinicians focus groups, b) building the application, c) investigating usability using the focus groups and d) evaluating and validating the application with a clustered randomized control trial. We are expecting that the application users will show higher levels of medication adherence, in comparison with patients receiving usual care. Project is in the early stages of development. Implementing such an app will lead to an effective and low cost method for improving psychotropic medication adherence with significant improvement for both patients and clinicians.

Poster Presentation Abstracts

Is facebook use associated with happiness or stress?

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The purpose of the current research was to investigate the relationships between Facebook use and negative emotional states with a focus on the characteristics of active Facebook users. We created two questionnaires for the present study (435 respondents): Facebook Attitudes and Reasons for Using Facebook, based on the instruments of Ellison et al. (2007) and Sen-Chi et al. (2012). In addition we measured depression, stress, anxiety, and happiness. We registered that participants up to 22 years of age, those with secondary education, who do not work, and do not live with a partner, tend to spend more time on Facebook and have more friends there. We also established significant differences in Salience of Facebook use, Maintaining Existing Connections, and Emotional Support through Facebook, according to gender, age, education, work, and marital status. Weak but positive correlations were found between salient Facebook use and preference for sharing content, on the one hand, and depression, anxiety, and stress, on the other. The present research sheds light on the relationships between Facebook use and correlates of subjective well-being and mental health.

Poster Presentation Abstracts

Is EMDR effective for women with posttraumatic stress symptoms after childbirth?

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Background

Negative delivery experiences can result in psychological disorders like postpartum depression, anxiety, psychosis and posttraumatic stress disorder (PTSD). Eye movement desensitisation and reprocessing (EMDR) has been shown to be effective in reducing symptoms of PTSD in several target groups. Our research aims to study the effectiveness of EMDR treatment in women with posttraumatic stress symptoms as a result of childbirth.

Methods

Women treated with EMDR for traumatic obstetric experiences (n= 26, mean age 30,9) completed questionnaires with measures of PTSD (Dutch Impact of Event scale), anxiety (STAI) , depression (SCL-90) and Quality of Life (RAND36) before the treatment (T1) and immediately after the treatment (T2).

Findings

Preliminary results show significant differences between T1 and T2 for the Dutch Impact of Event scale, STAI and the subscale depression of the SCL-90 ($p < 0.001$). Both mental health and social function scores on RAND36 were improved after the treatment ($p < 0.05$).

Discussion

The findings indicate that EMDR significantly decreases symptoms of PTSD, anxiety, depression and increases mental health and social functioning in women with traumatic birth experiences.

Poster Presentation Abstracts

Mental-health status, resilience factor and recognitions of the great-east-Japan earthquake and nuclear accident at Fukushima

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This study aimed to clarify the relations between mental-health and resilience and recognition of the great-east- Japan-earthquake and nuclear-power-plant accident at Fukushima among residents of the Greater Tokyo Area twoyear after disaster.

A cross-sectional web-based questionnaire research was conducted with 1,000 men and women who were in the age group of 25-49 on March, 2013. 954 who lived in the area on March 11, 2011 were for analysis. 20 items of recognition of the great-east-Japan-earthquake and nuclear-accident were created newly. Mental-health was measured by K10, and sense of coherence was measured as resilience factor indicator. Three factors were extracted from 10-earthquake-related-item; 'positive changes by great-east-Japan-earthquake', 'concern about next great earthquake (concern)' and 'efficacy for disaster evacuation (efficacy)'. Also, three factors were from 10-nuclear-accident-related-item; 'self-restriction of living activities from nuclear accident (self-restriction)', 'anxiety for radiation exposure (anxiety)' and 'shortage of radiation exposure literacy'. Furthermore, there were significant ($p < .01$) partial-correlation-coefficients between resilience and sub-scales except 'self-restriction', and between mental-health and 'concern', 'efficacy' and 'anxiety'. The strength of resilience related efficacy of disaster evacuation and radiation literacy as well as reduction of anxiety.

Poster Presentation Abstracts

Stress among two wheeler riders, who sustained limb fracture or injury due to road accident

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The objective of this study is to find whether there is a difference in the level of stress among young adult two wheeler riders, who sustained limb fracture or limb injury, due to road accident. A sample of 40 young adult two wheeler riders were chosen, consisting of males and females (20 each inclusive of 10 Limb Fractured and 10 Limb Injured) using purposive sampling method. The Impact of Events Scale – Revised (Weiss & Marmar, 1997) was used in this study. This tool is based on the Diagnostic Statistical Manual (DSM) IV criteria for Post-Traumatic Stress Disorder (PTSD) and measures its three dimensions: Intrusion, Hyper-arousal and Avoidance. The statistical analysis used for the study were ANOVA and 't' test. The study concludes that among the groups of males and females with limb fracture and limb injury, the level of stress was highest for Males with Limb Fracture and the lowest for Females with Limb Fracture. Among the sample, males have higher Intrusion, Hyper-arousal and Avoidance than females.

Poster Presentation Abstracts

Alcohol abuse : a self-regulated health behaviour among the survivors of sex trafficking

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Sex trafficking is an abusive offense affecting the identity of the trafficked due to the social isolation and stigma it accompanies. The present study aims at exploring how alcohol abuse is related to sex trafficking, based on interviews with survivors of sex trafficking and the staff of non-governmental organizations involved in their rehabilitation. Thematic analysis indicates that addiction plays both direct and indirect roles in the process of sex trafficking. The abuse of alcohol is often part of the process of induction into sex work. Many victims are introduced to alcohol by pimps, brothel owners or other prostitutes to make initial sexual abuse easier to bear. Yet, not all the sex trafficked become addicted. 'Addiction', nevertheless, emerges as an important theme in their narratives. For instance, many of the victims spoke about being 'addicted to sex' or 'addicted to money', which made the process of rehabilitation difficult to consider. Finally, the study indicates towards how alcohol abuse unlike the other addictions can be selfregulatory, even while it is a maladaptive strategy, thus reflecting the complexities behind the phenomenon of 'addiction'

Poster Presentation Abstracts

The role of illness perception and sociodemographic characteristics for life satisfaction in Lithuanian Alcoholics Anonymous

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Objective

This study was intended to find out if and how illness perception both with SES indicators are related to life satisfaction of Alcoholics Anonymous in Lithuania.

Methods

A cross-sectional survey using self-report questionnaire (with Illness Perception Questionnaire and Life Satisfaction Scale) was carried out in various groups of AA in Lithuania. The total sample included 98 AA group members (65 males and 33 females).

Results

No gender or age, or education level differences in life satisfaction of AA members were found. Life satisfaction was not related to the duration of visiting AA groups also. But in AA men's group higher life satisfaction was predicted by longer duration of abstinence, lower relapse rate and lower perceived consequences of the illness; and in AA women group – by lower relapse rate and not being single. Also two aspects of illness perception (lower illness identity and less illness consequences) were related to the higher AA group members' life satisfaction.

Conclusion

The results confirm that interventions targeted at various aspects of illness perception could increase life satisfaction of alcohol dependent people.

Poster Presentation Abstracts

The factors associated with health-related quality of life in adult congenital heart disease

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The increasing survival of people born with congenital heart disease has resulted in a growing population of adults. There is lack of research examining the factors associated with the Health-Related Quality of Life (HRQoL) in adult congenital heart disease (ACHD). A cross-sectional study was conducted to examine the demographic, clinical, and psychosocial factors associated with HRQoL in ACHD. Three hundred and fourteen participants from four diagnostic groups (Simple, Tetralogy of Fallot, Transposition of the Great Arteries, Single Ventricle) completed a range of psychosocial measures and generic and disease-specific HRQoL. Data were analysed using ANOVA and hierarchical multiple regressions. The findings indicated interesting differences in HRQoL between the groups and the general population. Illness perceptions explained the largest proportion of variance (16-32%) in generic (physical and psychosocial) and disease-specific HRQoL. Psychosocial factors including strong perceptions about the symptoms and consequences of ACHD, the use of self-blame as a coping strategy, and mood were independently associated with HRQoL over and above demographic and clinical characteristics. The findings highlight the importance of addressing negative illness perceptions and mood problems in people with ACHD.

Poster Presentation Abstracts

Illness perceptions: mediators of the relationship between SES and quality of life in COPD?

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Background

Socio-economic status (SES) and illness perceptions are associated with quality of life (QoL) in COPD. We examined whether illness perceptions mediate the relationship between SES and QoL in COPD.

Methods

Cross-sectional study involving 176 COPD patients. SES was measured as weekly household income, illness perceptions with the Illness Perceptions Questionnaire-Revised and QoL with the Chronic Respiratory Questionnaire.

Findings

Illness perceptions mediated the association between SES and QoL. Negative association between high SES and: (a) dyspnoea and fatigue was mediated by less adverse consequences and stronger personal control; (b) emotional function was mediated by fewer attributed symptoms and less negative emotional representations ($R^2=0.06, F(2,173)=5.37; p=0.006$); (c) mastery was mediated by fewer symptoms, less negative emotional representations and stronger personal control ($R^2=0.09, F(2,173)=8.93; p=0.0002$).

Discussion

Higher SES was associated with fewer symptoms, less adverse consequences, less emotional representations but stronger personal control in COPD. Higher SES is linked to exposure to less stressful situations which may contribute to less adverse illness perceptions.

Poster Presentation Abstracts

Education differences in cancer fatalism: the role of information seeking experiences

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Background

Cancer fatalism is the belief that cancer is uncontrollable and lethal. Previous research suggests that individuals with less education are more likely to hold fatalistic beliefs about cancer, but the mechanism accounting for the relationship between education and cancer fatalism is not well understood.

Methods

Representative samples of the US population from three cycles of the Health Information National Trends Survey (HINTS) were used to examine whether individuals with less education have more fatalistic beliefs about cancer due to negative health information seeking-experiences. Structural equation modeling was used to test this model in the three samples.

Findings

The three models showed good fit to the data (SRMR Model 1= .028; SRMR Model 2= .044; SRMR Model 3= .031). Across all datasets, the link between lower education level and higher cancer fatalism was partially mediated by negative health information-seeking experiences.

Discussion

Health information seeking experiences consistently explained the relationship between education and cancer fatalism. This is relevant, since unlike education, information seeking experiences is a potentially modifiable factor that may be targeted in future interventions addressing fatalistic beliefs about cancer.

Poster Presentation Abstracts

Health-threatening interpretation of ambiguity early on: risk or protective factor? Comparing CFS/ME and healthy individuals

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Background

A cognitive account of the persistence of Chronic Fatigue Syndrome/Myalgic Encephalomyelitis (CFS/ME) proposes biased interpretation may distort symptom perception and undermine recovery. Interpretation of somatic information that favours health-threatening meaning may lead to negative and maladaptive illness cognitions and prolonged suffering. The study aimed to measure an online interpretive bias in CFS/ME, the interpretations made at the moment of encounter of ambiguous information at an early stage of information processing.

Methods

33 CFS/ME and 33 healthy matched controls completed a lexical decision task that measured preferences in the interpretation of ambiguity.

Findings

CFS/ME individuals did not have an interpretive bias towards health-threatening meaning following presentation of ambiguous information $F(6, 384) = .662, p = .680, \eta^2 = .010$. Healthy participants showed a bias towards illness prime threat compared with the neutral primes, $t(32) = 2.54, p = .016$.

Discussion

The experiment showed an absence of interpretation biases in the early stages of information processing among CFS/ME individuals, but suggested that healthy individuals may be susceptible to the potentially threatening meaning of the ambiguous illness prime.

Poster Presentation Abstracts

Attentional bias for health-threat in CFS/ME following depressed mood

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Background

A cognitive account of the persistence of Chronic Fatigue Syndrome/Myalgic Encephalomyelitis (CFS/ME) proposes amplified attention towards somatic information may distort symptom perception and maintain symptoms. Negative mood may further affect cognitive processing by dwelling on health-threat further amplifying attention to symptoms. The study aims to measure an attentional bias towards health-threat in CFS/ME following a depressed or neutral mood induction.

Methods

16 CFS/ME and 34 healthy and 29 asthma participants completed an attentional task that measured allocation and shifting of attention in response to health-threat or neutral information.

Findings

CFS group similar to healthy controls, but unlike asthma, is showing an attentional bias towards healththreat $F(2, 61) = 4.06, p = .022, \eta^2 = .118$. Against the prediction, the negative mood appears to decrease the magnitude of the attentional bias in CFS participants.

Discussion

Attentional bias manifests under the higher mental load for CFS/ME and healthy individuals, but not for asthma. Depressed mood decreases the bias, against the expectation that it would amplify the focus on somatic symptoms.

Poster Presentation Abstracts

Determinants of health-related quality of life in liver transplant candidates

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Background

This study examined the impact mood, disease severity, and satisfaction with medical care have on liver transplant candidates' HRQOL and whether dispositional optimism, specific coping styles, or perceived social support mitigate those effects.

Methods

Sixty participants completed the Liver Disease Quality of Life Instrument 1.0, Hospital Anxiety and Depression Scale, Life Orientation Test-Revised, MOS Social Support Survey, Brief Resilient Scale, and Ways of Coping Checklist. Partial correlations and stepwise regression analyses were conducted.

Findings

HRQOL was not impacted by time listed or disease severity. Depression was associated with decreased HRQOL. Anxiety was associated with decreased psychosocial HRQOL. Satisfaction with medical care was associated with increased physical HRQOL. Proactive coping, optimism, and social support were negatively associated with mood. Resilient coping attitude was a predictor of increased physical HRQOL. Avoidant coping was a predictor of decreased psychosocial HRQOL. Depression was a predictor of decreased overall HRQOL. These findings were statistically significant, $p < 0.01$.

Discussion

Results encourage the development of psychological interventions that boost proactive coping strategies and foster of resilient and optimistic outlooks on health.

Poster Presentation Abstracts

Effect of emotional competences on cancer emotional adjustment and quality of life of patients

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Background

Our aim was to investigate the effects of intrapersonal and interpersonal emotional competences (identification, understanding, expression, regulation and use of one's own emotions and those of others) of patients on their emotional adjustment (anxiety, depression) and their quality of life (functioning variables).

Methods

76 cancer patients (24% head and neck cancer, 38% gynecological cancer, 38% gastrointestinal cancer) have completed the self-reported questionnaires.

Findings

Multiple Regression Analyses revealed that emotional competences, mostly intrapersonal competences, predict anxiety and functioning. Complex intrapersonal competences reported more effects than simple ones (identification, understanding): emotional regulation had a beneficial effect while the use of emotions showed a detrimental effect on anxiety and functioning. Interpersonal expression improved social functioning.

Discussion

These results strengthen the value of integrating emotional competences in health models and psychosocial interventions. It seems important to target intrapersonal regulation and interpersonal expression in interventions to improve adjustment and quality of life of patients. On the contrary, it might be better to avoid use of emotions in a cancer setting, but further investigation is warranted to better understand this puzzling deleterious effect.

Poster Presentation Abstracts

Quality of life after chemotherapy: the role of hope and mediation of emotion regulation

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Hope and emotion regulation are frequently referred to as important for coping with therapy procedures for cancer. The aim of the study is to reveal if the state of hope before chemotherapy influences quality of life (QoL) after chemotherapy in colorectal cancer patients. The second unexplored question is whether this relation is mediated by regulation of emotion.

Colorectal cancer patients (N=32) completed Adult State Hope Scale and Inventory of Cognitive Affective Regulation Strategies (ICARUS) before chemotherapy and measures of QoL after chemotherapy. Analysis was conducted using the PROCESS macro in which three dimensions of ICARUS were expected to mediate the relation between hope and QoL. The results suggested that both direct effect of hope: 95%BC(.01-.11) and two simultaneous indirect effects via emotion regulation were significant predictors of QoL:95%BC(-.05 – -.00) & 95%BC(-.10 – -.00).

We found that hope as well as the way of managing emotions are relevant factors of QoL after chemotherapy. That means that work on improving of QoL of colorectal patients must include not only enhancing hope, but also developing of positive and reducing pathological strategies.

Poster Presentation Abstracts

Using ‘Photovoice’ to explore the quality of life of informal carers of Multiple Sclerosis patients

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Background

Caring for someone with Multiple Sclerosis (MS) may negatively impact quality of life (QoL) of informal carers. However, there is a paucity of research exploring the QoL of MS carers from a qualitative perspective. Therefore, this study aimed to explore the lived experiences of MS carers and impact of MS on their QoL through the use of photovoice methodology.

Methods

Twelve MS informal carers (aged 30-73 years) took photographs of objects/places that represented enhancement or compromise to their QoL and wrote narratives explaining each photograph. 126 photographs and their corresponding narratives were analysed using content analysis.

Findings

Eight themes emerged from the photovoice data: Unpredictability, sense of loss, precious moments, support, hopelessness, worries and troubles, escape and loneliness.

Discussion

These findings suggest that although the impact of MS on carers' QoL was mostly negative, there were also positive aspects to caregiving such as happy moments and the support of loved ones that helped ameliorate these negative events and enhance QoL. It is hoped that these findings will be useful in designing interventions to support these carers in future.

Poster Presentation Abstracts

Quality of life and psoriasis: analysis of 50 interviews and construction of a French questionnaire

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Introduction

Psoriasis affects 4.7% of the French population. However, there is not French tool to assess the patients' quality of life (QoL).

Methods

50 psoriasis patients participated in a recorded, semi-structured interview. A thematic content analysis of each interview was then performed.

Findings

The main aspects of QoL which were deteriorated by the disease and the treatments were (by decreasing order): 1) impact of psoriasis on the social sphere (feeling of stigmatization), on everyday and leisure activities (beach) and on conjugal life (sexuality); 2) impact of symptoms on the somatic sphere (itching, pain); 3) constraints linked with treatment (creams); 4) impact of the disease and the treatments on the emotional state (sanxiety). Each category was transcribed into items, depending on the frequency of its occurrence. A 53 items questionnaire was built, which is currently being validated in a cohort of 500 subjects with psoriasis

Conclusion

The diversity of these themes points out the particularly deleterious effect of psoriasis on the everyday life. After factorial validation, this tool should help the physician and the patient to make a concerted therapeutic decision.

Poster Presentation Abstracts

Predictors of quality of life in patients with chronic obstructive pulmonary disease

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Background

The predictors of quality of life (QoL) usually combine both objective disease severity and subjective individual variables. The aim of this study was to analyze the contribution of objective and subjective variables to QoL in a sample of patients with chronic obstructive pulmonary disease (COPD).

Methods

119 patients with COPD completed a QoL measure (Saint George's Respiratory Questionnaire) and questionnaires measuring social support, personality, subjective disease-related appraisals and acceptance of life with the disease. All patients were subjected to routine physical examination, gasometric study and pulmonary function examinations. Regression analysis was computed with QoL as a dependent variable and the remaining measures as independent variables.

Findings

Only one subjective (appraising the disease as an obstacle/loss) and one objective (maximal volume capacity – VCmax) variable were significant predictors of QoL, accounting for up to 24% of variance in QoL.

Discussion

Out of a wide range of independent variables in this study, only two were found to explain (a portion of) variance in respiratory QoL. This urges researchers to search for other factors that affect QoL in patients with COPD.

Poster Presentation Abstracts

Body image dysphoria and quality of life among women who apply for cosmetic surgery

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Background

Body Image Dysphoria(BID) affects perceptions, thoughts, feelings. Usually cosmetic surgery is considered to improve self-perception and psychosocial functioning. The objective is to examine the relations between BID and Quality of Life(QoL) and changes after surgery.

Methods

BID assessed by the Situational Inventory of Body Image Dysphoria(SIBID), QoL by SF-36 scale and Body Image Quality of Life Inventory(BIQLI). Female participants (n=80) aged 20-50, were divided into: Control Group(CG)- satisfied with appearance, Experimental Group1(EG1)- were operated, Experimental Group2(EG2)- planning surgery. Pierson correlation coefficient was used for statistics.

Findings

Lowest QoL indicates EG2 for Emotional Well-being(EWB), Social Functioning(SF). These parameters increased by 20-25% in EG1. However, QoL is lower in EG1 than in CG by 10-20%. SIBID scores: EG1- 1.21 (SD=0.80), EG2- 2.04 (SD=0.73). Mean score- 1.09 (SD=0.90). BIQLI scores in EG1/EG2 are 1.25 (SD=0.73) /-0.5 (SD=0.94). Mean score is 1,00 (SD=1.09). Significant correlations are between: EG1- SIBID and Mental Health ($r=-0.7$), EG2- SIBID and SF($r=-0.63$), EWB(-0.6), ($p<0.5$).

Discussion

BI distress frequency interplays with low QoL and has negative influence on psychosocial well-being. Surgery effects BI satisfaction, however body acceptance stays a disturbing problem.

Poster Presentation Abstracts

Psychosocial risks and resources and treatment outcome in patients with mental disorders

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Background

Psychosocial factors have an impact on functioning and treatment outcome in patients with mental disorders. We developed a checklist of psychosocial risks and resources (RiRes). The aim of this study was to evaluate the predictive power of the RiRes.

Methods

N=712 patients completed the RiRes. In addition, data on activity limitations and participation restrictions (ICF-PsychA&P) and psychosocial health (HEALTH-49) from three measurement points (admission, discharge, 6- month follow-up) was available. Linear regression analyses were performed and cut-off scores were determined using ROC analysis.

Findings

The 20 items of the the RiRes explain 36% to 39% of the variance in the ICF-PsychA&P total score at follow-up. When a sum score (range: 0-60) of the 20 items of the RiRes-P is calculated, a cut-off score of 24 identifies 66% of patients with unfavorable ICF-PsychA&P total score at follow-up.

Discussion

The RiRes comprises environmental (social- and working environment, employment perspective) and personal factors (dealing with the disease, expectations, personal characteristics) which predict treatment outcome. This information may guide assigning interventions or developing treatment options for patients with mental disorders.

Poster Presentation Abstracts

The distinctive symptomatology of mental health illness in economic “crisis-related” patients: a preliminary study

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Background

Help requests for psychological disorders due specifically to the impact of the economic crisis have been constantly increased. The aim of the study is the identification of a distinctive symptomatology between subjects affected by “crisis-related” mental health illness and people who refer to the same Mental Health Care Center.

Methods

An observational research design was used. Patients (n=70) related to the “Crisis and Psychopathology Observatory”–Ospedale Maggiore Policlinico, Milan–were tested with: Beck Anxiety Inventory (Alpha=.86), Beck Depression Inventory II (Alpha=.85), Rosenberg’s Self-Esteem Scale (Alpha=.87) and Derogatis’ Brief Symptom Checklist (Alpha=.96).

Findings

MANCOVA was used to test differences–controlling for diagnosis and the elapsed time between the onset of symptoms and the psychiatric visit. Results suggest that “crisis-related” patients show: higher anxiety [$F(1,68)=6.07$; $p=.02$] and higher depression [$F(1,69)=8.23$; $p=.012$]; higher number of psychological symptoms [$F(1,69)=12.34$; $p<.001$]; but an equivalent self-esteem [$F(1,69)=1.94$; $p=.069$];.

Discussion

Results points out that “crisis-related” patients showed a wider mental health illness’ symptomatology and important index as regards the acuteness; and also suggest a possible way in order to treat this new kind of suffering.

Poster Presentation Abstracts

The mediating role of social support protect economic crisis-related patients from suicidal ideation: preliminary study

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Background

Subjects affected by “crisis-related” mental health disorders often report strong psychological suffering derived from hopelessness that sometimes could lead to suicidal ideation. However, this ideation could be curbed by social support. The aim of the study was to prove if social support could buffer the relationship between crisis-related hopelessness and suicidal ideation.

Methods

Using an observational research design, patients (n=40) related to the “Crisis and Psychopathology Observatory”–Ospedale Maggiore Policlinico, Milan–have been tested with: BDI II (Alpha=.91), BHS (Alpha=.92), and social support (Alpha=.86).

Findings

Mediation analysis revealed that the observed relationship between hopelessness and suicidal ideation (path c: $\beta=.637$; $p=0.01$) was indeed entirely mediated [CI95%:.0340-.1254; $R^2=.736$; $F=30.27$, $p<.001$] by social support (path c': $\beta=.188$; $p=.27$). In fact, the effect of hopelessness on suicidal ideation passed through perceived support (path a: $\beta=-.602$, $p=.003$ and path b: $\beta=-.746$, $p<.001$).

Discussion

Results point out the importance of social support as a protective factor from suicidal ideation in “crisis-related” patients and also suggest possible ways in treatments exploiting psychological support in this kind of economic crisis-related illness.

Poster Presentation Abstracts

Formation of hysterical neurosis as the result of pathological upbringing

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Background

Different conceptions that described formation of hysterical neurosis were analyzed.

Findings

Analysis of works on the base of formation of hysteria showed development of this conception in three directions.

First – classical theory of Z. Freud, that studied the child with the fear and repression of edipal desire. Other scientists proved this theory and emphasized the role of lack of proper upbringing in the family that leads to the disturbances of psychosexual development – A. Adler, R. Khan, S.M. Jonson. Second – sociocultural direction, presented by G.S. Sullivan, E. Fromm, V.N. Myasishev, L.L. Shapira refused the theory of obligatory link of hysteria and psychosexual development.

Third – integral, that combined the theory of different psychotherapeutic directions - A. Jakubik, A.I. Zaharov, V.I.

Garbuzov.

Discussion

In our days the multifactorial model in formation of neurotic neurosis is proved. Along with the leading role of family in formation of the child it is necessary to analyze the role of community in general. The subject of "hysterical culture" at present is widely discussed. It is important to include this factor in further studies.

Poster Presentation Abstracts

Psychomotor programs in the treatment of schizophrenic

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Background

The study deals with the impact of psychomotor therapy on the mental health of patients suffering from schizophrenia. The psychomotor programmes focused psychosomatic integration and inducing mutual non-verbal and verbal communication. It proves that if psychomotor therapy programmes are included in the routine treatment of patients 3 times a week, for a period of 14 weeks; and that these programmes significantly impacting their mental health.

Methods

The study included 80 schizophrenia patients (male=40, female=40), divided into experimental and control group . The Brief Psychiatric Rating Scale – BPRS – was chosen to verify the diagnostics and effectiveness of the long-term effects of psychomotor programmes .

Findings

It has been confirmed that the programmes initiated changes in perception of self, renewed awareness of their abilities and skills in dealing with problems in the personal sphere and less in social sphere.

Discussion

The work show that physical activity programmes may be a safe and economically effective treatment for many patients, particularly for those whose range of problems is difficult to treat using other therapies.

Key words

Schizophrenia, Physical activity, Psychomotor Therapy

Poster Presentation Abstracts

The dual pathway model of bulimia: replication and extension with perfectionism

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The dual model of bulimia proposes that social pressure for ideal body, stereotypes internalization, body image dissatisfaction, dietary and negative affect are lead to development of bulimia. Previous research confirms this model, but it is still not clear why some females tend to internalized ideal body images more than others. The addition of perfectionism may help to answer this question.

The aim of the study was to explore the meaning of perfectionism predicting bulimia symptoms, according to the dual pathway model of bulimia variables. A sample of 348 VIII-XII classes schoolgirls from Kaunas city completed the Multidimensional Perfectionism Scale, Eating Attitude Test, Negative Affect Schedule, Body shape Questionnaire, Perceived sociocultural pressure scale and Ideal Body Stereotype Scale.

Structural equation analyses suggested that maladaptive perfectionism predicts a higher body stereotype internalization, larger perceived social pressure, increased body dissatisfaction and bulimia symptoms. Greater adaptive perfectionism predicts a higher body stereotype internalization, and higher perceived social pressure. The findings provide support for dual pathway model of bulimia and the addition of perfectionism appears to strengthen the model's predictions of bulimic behavior.

Poster Presentation Abstracts

More psychological distress and tiredness is associated with lower self-efficacy in patients with arthritis

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Background

Arthritis patients' life quality is influenced by several features; e.g. disease-activity, coping and depression, while self-efficacy have shown to prevent development of psychological problems in this group of patients.

Methods

This study was cross-sectional, aiming to explore associations between arthritis patients' self-efficacy and other factors (disease-related and psychological) by performing secondary analyses on data from a randomized controlled study (RCT) on arthritis patient education (PE). Data was collected 12 months after inclusion in the RCT, and comprised information from valid and reliable questionnaires reflecting self-efficacy, psychological distress, disease-characteristics and coping (patient activation). A multivariable linear regression analysis was performed with self-efficacy as dependent variable.

Findings

The sample consisted of 71% women, 62 % with rheumatoid arthritis, and a mean age of 58 years. The findings show that more psychological distress ($p=.001$) and tiredness ($p=.014$) are associated with lower self-efficacy, while being women ($p=.034$) and better coping skills ($p=.000$) were associated with higher self-efficacy.

Discussion

A holistic approach is necessary to support arthritis patients with their daily management of disease symptoms and implications of having arthritis.

Poster Presentation Abstracts

Exploring stigma in individuals with Pernicious Anaemia

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Pernicious Anaemia (PA) is a chronic condition which results from the body being unable to absorb vitamin B12. Nearly two thirds of individuals living with PA report that they are dissatisfied with their current treatment plan; Patients commonly report that their condition is not understood by health professionals (Hooper, Hudson, Porter and McCaddon, 2014). To date there has been no research documenting the extent to which individuals with PA experience stigma and what impact this has on their wellbeing. This study aims to measure stigma in individuals living with PA using the Chronic Illness Anticipated Stigma Scale (CIASS, Earnshaw, Quinn & Park, 2012). Respondents will also complete a number of general measures of psychological wellbeing. It is anticipated that this study will document high levels of anticipated stigma in this patient group. Experiencing stigma is likely to have a direct impact on measures of psychological well being. This study is in the initial data collection stage but it is anticipated that the findings will further the understanding of the impact of stigma in chronic illness.

Poster Presentation Abstracts

Coping, social support, and adjustment of people with a motor disability to the built environment

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Background

This study aims to explore the environmental barriers experienced by people with motor disabilities in Romania. The roles of physical limitations, coping strategies and perceived social support are investigated in relation to the perception of and adjustment to the built environment.

Methods

Data is collected through self-report questionnaires completed by 100 participants with motor disability. Hierarchical regression will be used to test the hypothesis: coping style and perceived social support are strongly related to adjustment to the built environment, even when controlling for severity of disability.

Expected results

Difficulties due to inaccessible building design will be the most frequently reported environmental barriers. High perceived social support, together with problem-focused and social oriented coping will be associated with a better adjustment to the built environment, even when physical limitations are severe.

Discussion

The built environment cannot always be subjected to immediate transformation by the individual, but it may be perceived and navigated differently as a function of certain psychosocial factors. Taking this into consideration may help identify important resources that promote adjustment to disability, even in problematic environments.

Poster Presentation Abstracts

Compensatory health beliefs in adolescents with type 1 diabetes- a think aloud study

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Background

Compensatory Health Beliefs (CHBs) in adolescents with type 1 diabetes (T1D) has been assessed using the diabetic specific CHBs Questionnaire (Rabiau et al., 2006). We aim to use the “think aloud” method in order to establish if any of the three dimensions of compensatory beliefs (CHBs but no compensational behavior; CHBs and compensational behavior; no CHBs but compensational behavior) is activated in adolescents with T1D.

Methods

Fourty adolescents between 13 and 16 years of age will complete the CHBs Questionnaire using the “think aloud” method. Participants’ responses to the CHBs scale will be analysed using a mixed method approach.

Expected results

Using a “think aloud” method we aim to provide an insight into how adolescents with T1D arrive at their answer while responding to CHBs questionnaire items. We expect that all three dimensions of compensatory beliefs to be activated in adolescents with T1D.

Current stage of work

Selecting our sample of participants.

Discussion

In depth knowledge about CHBs in adolescents with T1D could discriminate between CHBs and compensatory health behaviors.

Poster Presentation Abstracts

Perceived autonomy determines helpfulness of social support in patients with implantable cardioverter defibrillators

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Self-Determination theory of Ryan & Deci (2000) suggests that perceived autonomy support plays an important role for the quality of life (QoL) in patients with implantable cardioverter defibrillators (ICD).

Of N=113 ICD-patients (M=63 years, SD=12.34, 76% men) data on QoL (SF-36), overprotective social support (PFUK), perceived autonomy support (RNSS), depression (PHQ-9) and self-efficacy (FERUS-26) was collected.

In a multiple regression ($F(6,106)=57.339$, $p<0.001$, $R^2=.764$) mental QoL is significantly predicted by perceived autonomy support ($\beta=0.145$, $p=0.06$), while actually received overprotective support has no impact ($\beta=0.005$, $p=0.981$). These results persist under control of socio-demographic (age, sex), medical (BMI, LVEF) and other psychometric variables (depression, self-efficacy).

These results link to previous findings showing that it is particularly important how patients perceive their social support independent of the support they actually receive. Relatives and cardiologist of the patient should support the patient's autonomy but also get feedback whether it is well-received by the patient to optimize ICD-patient care and QoL.

Poster Presentation Abstracts

Predictors of loneliness in older people: a national longitudinal study

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Loneliness in old age is rarely considered from a gender perspective, despite gender differences in life experiences. This study examined a) changes in reported loneliness over time, and b) factors predicting loneliness, in a sample (N=587) of older people (70+ years) from the 2004 and 2011 waves of SWEOLD, a Swedish longitudinal national survey. The prediction of loneliness in 2011 by variables measured in 2004 and 2004-2011 variable change scores was examined in three logistic regression models: total sample; women; and men. Results indicated that despite an increase in loneliness with age, many older people moved into and out of loneliness over time. Loneliness at baseline, depression increment and recent widowhood were significant predictors of loneliness in all three models. Widowhood, depression, mobility problems and mobility reduction predicted loneliness uniquely for women; while low level of social contacts and social contact reduction predicted loneliness uniquely for men. These results challenge the notion that feelings of loneliness in old age are stable, and demonstrate gender differences in predictors of loneliness, important findings for evidenced-based interventions to combat later life loneliness.

Poster Presentation Abstracts

Are spousal dementia caregivers more vulnerable to cognitive and physical dysfunction?

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Background

Caring for a spouse with dementia is a chronic stressor that may compromise caregivers' own cognitive functioning and capacity to provide adequate care.

Methods

We examined whether having (i) a spouse with dementia and (ii) a spouse who requires assistance with activities of daily living predicted cognitive and functional impairments in respondents to the Health and Retirement Study (n = 7,965).

Results

Respondents who had a spouse who requires care had poorer cognitive functioning, and this relationship was significantly stronger for male respondents. Having a spouse with dementia moderated the relationship between income and cognition and also predicted caregiver functional impairment, though not when depression was controlled. No significant differences were found on any individual cognitive domains between 179 dementia-caregivers and sociodemographically-matched non-caregivers.

Discussion

Direct comparisons between matched dementia-caregivers and non-caregivers may mask underlying group differences. Caregivers, especially men, and low-income individuals who have a spouse with dementia may be more vulnerable to adverse cognitive outcomes. Targeting depression in spouses of people with dementia may help to prevent functional impairments.

Poster Presentation Abstracts

Stress Related Growth (SRG) among family caregivers of people with dementia in Japan

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This study focused on the stress related growth as one of positive appraisal among people who have caring experience to family members with dementia. The purpose of this study is to examine the stress related growth and to see the difference between family caregivers who are caring presently (present group: n=148) and who were caring in the past (past group: n=157). 324 family caregivers (255 women, 59 men, 10 blk; M=67.7

Health Inventory, Post Traumatic Stress Growth, Sense of Coherence, General Self-efficacy as well as Stress Related Growth (SRG). Mean score of SRG was higher than 3, the middle point. It reveals that family caregivers have not only feelings of burden but also positive feelings through caring experience; however, the result of t-test indicated that scores in 6 questions of SRG was significantly higher in the past group than the present group. While positive appraisal was observed, specific situation of the stress related growth was found to be different between two groups. Relationships of SRG with other measurements were also discussed.

Poster Presentation Abstracts

Apolipoprotein e gene and cognitive functioning: preliminary results from the neurocognitive study on aging

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Background

The allele e4 of the apolipoprotein E (apoE) gene, is considered a biological risk factor for cognitive decline. The distribution of the apoE defers by ethnic group and geographic region. This study examined the distribution apoE gene and its effects on cognitive health in Cypriots over 60.

Methods

304 participants were recruited from the Neurocognitive Study on Aging. 42,7% had the e3/e3 allele combination, 6,5% the ε2/ε3, and 0,4% the e2/e2. Thirty-seven (12%) had at least one e4 allele. Those 37 (> 60 years) were matched on critical variables with 37 individuals with the e3/e3 (neutral) allele and were administered a neuropsychological battery.

Results

Participants with at least one e4 allele had significantly lower scores on Mini Mental State Exam (MMSE) than those with the neutral e3, $p = .003$. Hierarchical regression showed that education combined with allele type predicted performance on MMSE better than education alone, $p = .002$.

Discussion

ApoE allele combinations make significant contributions to cognitive health. The ApoeE4 allele in combination with lower education levels increase the risk for cognitive decline in Cypriot adults.

Poster Presentation Abstracts

Cohort differences in old age survival, in psychosocial variables, and their associations

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The existing empirical research findings show noticeable inconsistencies regarding both the role and the significance of psychosocial factors in their association with health and survival in older adults.

The objective of this research was to check the cohort differences in survival, in psychosocial variables, and the associations of the observed psychosocial variables with the survival of older persons.

Participants were two cohorts of older persons. The 1994 cohort consisted of 186 participants (144 women, average age 78.6 years). The 2008 cohort consisted of 505 participants (367 women, average age 79 years). Both cohorts lived in retirement homes. The measured variables were: socio-demographic, self-assessed health, functional ability, psychosomatic complaints, depression, social participation. Data were collected by specifically constructed survey questionnaire, administered individually in the form of structured interview, by the trained interviewer. The survival was followed by 2015.

Results indicate significant cohort differences in survival, with continuing trend of women surviving longer. Significant correlation between observed variables and survival was found for self-assessed health variable. However, combinations of multivariate analyses showed that psychosocial variables significantly contributed to the prediction of survival.

Poster Presentation Abstracts

Physical activity intervention for motivated older adults: what went wrong?

What was learned?

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Background

3-hour face-to-face group intervention for physical activity (PA) and volunteering (VO) was developed respectively. Behaviour change techniques (BCTs) were parallel for both behaviours: information about benefits, focus on past success, goal setting, action planning (use of cues), modelling behaviour (video) and self-monitoring.

Methods

The RCT (5 time-points, 15 months, N=310) compared a PA against a VO group and a waiting list control group (CO). Outcomes were self-reports and accelerometer-assessed PA (for at random assigned accelerometer wearers). Self-reported minutes per week assessed VO. What went wrong: PA did neither increase in the PA nor the VO group as compared to all other groups. VO increased at 6-weeks-follow-up but levelled out afterwards and did not affect PA.

Possible solutions

A recent review suggests that self-regulatory BCTs diminish the effects of PA interventions in older adults.

Conclusions

In the present group sessions, planning and self-monitoring evoked reactance in some participants. Interventions for older adults could try to avoid self-regulatory strategies and put more emphasis on positive affect through PA and flexible schedules of retired persons.

Poster Presentation Abstracts

Strengthening couples during the transition to parenthood: a randomized controlled study

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This study aims at evaluating the effects of the Couple Care and Training Program (CCC-P), which is based on two evidence-based programs and designed to support couples during and after the transition state to first parenthood.

CCC-P will be compared to two other conditions: a self-directed learning approach where parents use a DVD to learn knowledge and skills needed to adapt to parenthood and treatment as usual (TAU). 210 couples will be randomly assigned to one of the three conditions. Assessments by questionnaire and videotaped interaction will take place several times during the study.

CCC-P should, relative to the other two conditions, produce positive changes in attitudes, role division and relationship skills. These changes are expected to mediate better couple relationship satisfaction, child and parents' well-being. Self-directed learning should yield better results than TAU. In the recruitment stage, more than 200 couples (98% of a telephone screening) were willing to participate. However, drop-out after birth remains a challenge. The study design seems nevertheless feasible. Results will produce a deepened insight in how to optimize support to couples who become parents.

Poster Presentation Abstracts

Quality of life, dyadic adjustment and psychological distress during transition to parenthood

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Background

Literature shows that quality of life may change during formative periods as transition to parenthood. This study aims to examine how psychological symptoms and marital adjustment affect general quality of life after childbirth in both mothers and fathers.

Methods

Socio-demographic information, quality of life, dyadic (marital) adjustment and psychological distress were assessed. 56 participants (28 couples) completed questionnaires on 3rd trimester of pregnancy and two months after childbirth.

Results

In our sample, there were no significant differences between antenatal and postnatal quality of life, for both male and female. Linear regression analysis showed that postnatal quality of life was predicted ($R^2_{\text{adjust}}=.243$) by antenatal psychological distress ($\beta=-.40$; $p=.002$). Moreover, postnatal dyadic adjustment was a mediator in the relation between antenatal psychological distress and postnatal quality of life, meaning that the higher the postnatal dyadic adjustment, the higher the couple's quality of life after childbirth is.

Discussion

Dyadic adjustment had a strong impact on quality of life after childbirth. Therefore, considerate couple-related factors underlying well-being during transition to parenthood may allow adequately supporting couples enhancing their quality of life after childbirth.

Poster Presentation Abstracts

Predictors of risk for parental stress among parents of children with behavioural difficulties

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Prior findings suggest that parents of children with externalizing behaviors experience considerably higher parental stress. This study tested the hypothesis that higher levels of child hyperactivity significantly predict higher parental stress. Positive parenting practices and demographic variables were also tested in relation to parental stress. Data was collected from a community sample of 88 Greek speaking parents (Age; M=37,66 years, sd=5,43) of children ages 5-8 years old. The study used the Greek versions of the Parenting Stress Inventory-Short Form, the Eyberg Child Behavior Inventory, the Attention Deficit and Hyperactivity Scale – IV , and the Alabama Parenting Questionnaire. As predicted, results showed that PSI-SF Parental Distress correlates significantly with child hyperactivity but not inattention. The child's gender and parent's employment status and family income were also significant correlates. However, Positive Parenting Practices did not correlate with parental stress. Significant correlates will be entered in regression analyses to develop prediction models for parental stress. In a health prevention model, identifying significant predictors of parental stress among parents of young children with behaviour difficulties allows for early detection and targeted interventions.

Poster Presentation Abstracts

Effective early intervention for parental stress: parenting the Strong-Willed Child/ Group Curriculum with Greek-speaking parents

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This study reports effectiveness data from a non-controlled clinical trial of a cultural adaptation of "Parenting The Strong Willed Child" Group Curriculum" (PSWC-GC) (Forehand & Long, 2002) for Greek-speaking parents. PSWCGC is a 6-week program that trains parents of young children with behavior difficulties in applying five parental skills: Attending, Rewarding, Ignoring, Instructions, and Timeout. The PSWC-GC was translated and culturally adapted for Greek parents while maintaining critical aspects for treatment fidelity. A community sample of 144 Greek speaking parents of children ages 2-8 years old (M=4,44 years, sd=1,74) participated in the study and completed a packet of questionnaires at baseline (T1) and upon completion of the intervention (T2). All measures had high Cronbach alphas. A paired sampled t-test showed that child defiant behaviors on the Eyberg Child Behavior Inventory and Parental Distress on the Parenting Stress Index-SF decreased significantly at T2. Qualitative and quantitative data suggests high consumer satisfaction. Results ontribute to the ecological validity of the effectiveness of the PSWC-GC in a Greek sample and suggest that it can be an effective intervention for parental stress.

Poster Presentation Abstracts

Factors influencing parent involvement in early intervention process in case of developmental disabilities

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Involvement of parents in early intervention program is one of core factors promoting positive outcomes. Current study aims at answering following questions: does parental involvement depend on type of developmental disability, time after diagnosing and type of service? Are parental stress and coping styles correlate with the level of involvement?

140 parents will participate in the study. The research will be conducted in two stages. At the first stage, to develop parent involvement questionnaire 2 focus groups will be held. At the second stage, by using quasi-experimental design, data regarding stress, copying styles and parental involvement received from parents of children with different types of developmental disabilities and typical development, as a control group, will be compared. Correlation and regression analysis will be made.

We expect that the low involvement of the parents in the early intervention process will be related with parenting stress mediated mainly by child's diagnosis and service's type. Current stage of work: The first stage of the research was finished.

The results of the study will be used to develop parents' support program.

Poster Presentation Abstracts

Use use condoms: the effect of implicit and explicit attitudes on condom use

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Background

People often behave riskily, as when having unprotected sex. Dual process theories posit that decisions are made via the reflective system, or originate from the impulsive system. We posit that implicit attitudes result in behavior relatively unaffected by other factors, as behavior is automatically activated. Explicit attitudes, however, interact with other factors, because all information is considered during decision-making.

Methods

Sexually active men (N = 137) completed measures for implicit attitudes (SC-IAT), explicit attitudes, sexual sensation seeking, substance intoxication, sexual deprivation, self-monitoring, self-control, action planning, coping planning, action control, and condom use with casual partners over the last six months (dependent variable)

Results

Substance intoxication, sexual sensation seeking, action- and coping planning significantly interacted with explicit attitudes on condom use. We found no main or interaction effects for implicit attitudes.

Discussion

Implicit attitudes might not determine behavior because we retrospectively measured attitudes towards condoms, not condom use. We investigated desirable behavior, without conflict between both attitudes, and showed that weak explicit attitudes sometimes result in riskier sexual behavior. Attitudes are important for the prevention of sexually transmitted diseases.

Poster Presentation Abstracts

Condom use and vaccination – An intervention aimed at high school students

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Background

Primary prevention methods against cervical dysplasia/cancer are condom use and vaccination. The aim of this intervention was to improve high school students' knowledge and attitudes about cervical dysplasia/cancer and its primary prevention methods. The intervention was based on the Health Belief Model.

Methods

Quasi-experimental design. A questionnaire was completed before and after the intervention by an intervention group (n=92) and two comparison groups (n=182). The intervention consisted of an informative web site, give-away condoms, a folder, and a one-hour lesson on school hours focusing on discussions about perceived barriers and perceived benefits of the primary prevention methods.

Results

At baseline, the median knowledge score was one out of ten possible correct answers in all groups but at follow-up, the median knowledge score had increased to 6 out of ten in the intervention group while it was unaffected in the comparison groups ($p < 0,001$). The findings did not indicate any change in attitudes ($p > 0,05$).

Discussion

An effect on knowledge was achieved but to see an effect on attitude and most likely also behaviour change a more comprehensive intervention is needed.

Poster Presentation Abstracts

Health locus of control and condom attitudes and use in healthy adults

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The relationship between the subscales of the Multidimensional Health Locus of Control Scale, attitudes toward condoms, and self-reported use of condoms was investigated in healthy university students. It was hypothesized that an internal attributional style would be positively associated with condom use. Specifically, the prediction was that individuals with high internal health locus of control (IHLC) would endorse more favorable attitudes toward condoms and would use condoms more frequently. In contrast, those scoring high on the powerful other (POLC) or chance locus of control (CHLC) were hypothesized to be less likely to express positive attitudes toward condoms and would use condoms less frequently. The results partially confirmed the hypotheses: Those with high scores on the IHLC were most likely to have positive attitudes toward condoms. However, there were no statistically significant differences between the groups and condom use frequency.

Poster Presentation Abstracts

What educational programs prevent sexually-transmitted diseases in adolescents? A meta-analysis

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Background

Educational programs for preventing sexually transmitted diseases (STDs) have often been implemented in different settings and populations. However, it is not clear to what extent interventions are effective and what are the program characteristics contributing to this effect.

Methods

We reviewed published and unpublished reports (1989-2012) on methodologically sound programs aiming to reduce sexual risk behaviors in US adolescents.

Findings

Eighteen studies met the selection criteria and provided data on STD incidence (N=15,579). On average interventions reduced incidence roughly from 7 to 6 out of 100 people (17% relative risk reduction (RRR)). Interventions focused on abstinence had no effect, while comprehensive education programs aiming to improve skills and promote safe sexual practices reduced risk by 4 percentage points (23% RRR). In particular, interventions teaching condom use skills or communication and negotiation skills reduced incidence of STDs by 3 to 4 percentage points (30% RRR).

Discussion

Interventions should offer STD knowledge and solid communication and condom use skills to adolescents. Properly designed interventions with the above-mentioned characteristics can achieve a 30% reduction of STD incidence.

Poster Presentation Abstracts

Exploration of the intersection of alcohol use, sexual activity and gender in Emerging Adulthood

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Background

Understand developmental student sexual activity, in the context of existing gender and cultural scripts, and how alcohol influences decisions regarding sexual activity. Theoretical perspectives framing are Emerging Adulthood, Sexual Script Theory and Self-regulation Theory.

Methods

Cohort-based cross-sectional and longitudinal surveys of college students in eight locations. Regression-based analyses and analysis of group differences will be used to assess research queries.

Expected Results

- Understand the mediating influence of alcohol on patterns of sexual activity
- Assess gender differences in how consent to sexual activity is negotiated
- Understand the extent to which self-regulation serves as a protective factor against risky behaviours such as binge drinking and unprotected sex.

Current Stage of Work

Data collection commenced at NUI, Galway in February, 2015 with initial sample of 5,000 students.

Discussion

Understanding patterns of sexual behaviours has relevance in terms of sexual health (e.g. STIs), and highlights the importance of understanding how emerging adults regulate their own sexuality. Little incorporation of self-regulation with studies of emerging adulthood exists. Health risks have been considered representing social norms, including alcohol use and sexual behaviour.

Poster Presentation Abstracts

The impact of self-affirmation on working memory and self-control

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Background

Self-affirmation – the act of reflecting upon a personally important value – has been successfully employed in health interventions and has been shown to have a beneficial effect on health-related attitudes and behaviours. Recent studies have demonstrated that self-affirmed individuals perform better at tasks measuring working memory and self-control, compared to non-affirmed individuals. The aim of the current study was to replicate and extend these findings.

Methods

In a lab-based study, participants (N = 83) were randomly allocated to either the self-affirmation or control condition. All participants then completed a computerised version of the 2-back task (a measure of working memory) and a computerised version of the Stroop task (a measure of self-control).

Findings

Self-affirmed participants performed better on the 2-back task (evidenced by improved accuracy) and the Stroop task (evidenced by quicker reaction times), compared to non-affirmed participants.

Discussion

This study is an important replication and extension of previous findings and adds to our understanding of the link between self-affirmation and changes in health-related behaviours.

Poster Presentation Abstracts

Invoking identity to promote behavior change: a randomized controlled trial and three experimental tests

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Background

Although role identity predicts behavioral intentions in correlational studies, there have been relatively few experimental tests of the impact of identity invocation on health-related intentions or behavior. A randomized controlled trial tested whether survey items that invoked a relevant identity (“being an organ donor”) increases organ donor registration relative to items concerning the focal behavior (“organ donation”), or demographic items only.

Methods

A nationally representative UK sample (N = 1,508) was randomly assigned to the three conditions, and completed 10 items concerning the identity or the behavior. Whether or not participants visited the national donor registration website was recorded.

Findings

Contrary to expectations, participants generally had more favorable views of organ donation than being an organ donor. There was no reliable effect of condition on behavior (website visit rates = 2.5% to 3.8%). Three subsequent experiments concerning dietary behavior, physical activity, and alcohol consumption (Ns = 279, 162, and 335, respectively) also observed null effects of identity invocation.

Discussion

Invoking a relevant identity does not appear to promote health-related intentions or action, at least for the behaviors examined here.

Poster Presentation Abstracts

Enhancing executive functions among elementary school children

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Executive Functions (EF) are top-down mental processes such as ‘working memory’, ‘inhibitory control’, and ‘cognitive flexibility’ that are crucial for our ability to control our daily behavior and develop skills such as reasoning, problem-solving, and planning.

Currently we are developing an intervention aiming to enhance Executive Functions among elementary school children (9-11 y/o) through focused exercise, cognitive training, socio-emotional learning, and combinations thereof. Additionally, the program will be complemented with an e-tailoring program to provide individual feedback regarding exercise and healthy dietary habits. Aside from enhancing Executive Functions and related cognitive academic skills, the intervention is expected to improve general physical and mental well-being and health behavior (exercise, dietary habits). Training effectiveness will be investigated by longitudinal monitoring (pre-, post, and a 6-month follow-up) of children’s potential performance and behavior improvements using a computer task-battery taxing the EF-components, and questionnaires, filled out by more than 500 children, parents, and teachers. The randomized controlled intervention will start in October 2015 and run for one academic year.

Poster Presentation Abstracts

Personalized ICT Guidance Service for Optimizing Healthy Lifestyle Behaviour through Awareness, Motivation and Engagement (PEGASO)

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Background

Obesity in teenagers is a rapidly increasing global public health crisis. Using serious gaming, multimedia eDiary, and embedded kinematic sensors the PEGASO project (EU FP7 funded) delivers a personalised behaviour change intervention, informed by the Behaviour Change Wheel Framework (BCW), targeting dietary and physical activity behaviours in European teenagers (13-16 yrs).

Methods & Expected Results

Participants (n= 400) will be recruited from sites in Italy, Spain & UK. Adapted versions of a quantitative self-assessment questionnaire (COM-B-Q) embedded within the system will assess teenagers' awareness of their own health behaviours. Qualitative (eDiary) and quantitative data (kinematic sensors) will be analysed and triangulated for measures of overall behaviour change. The study is in Pre-Pilot Phase to evaluate usability and acceptance of the system, assess impact, long-term use of the technology, and suitability of outcome measures reflecting COM-B domains.

Discussion

Results will refine the PEGASO system to facilitate wider roll-out across European partner countries (Pilot Phase), and explore validity of the BCW to design interventions for dietary & exercise behaviour change in European teenagers, embedded within an ICT system workflow.

Poster Presentation Abstracts

Lost in transition: designing an online Possible Selves intervention for new university students

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Background

In a transnational study, a three-staged online-intervention encouraging new university students to adopt healthy lifestyles is developed and evaluated. The motivational component/stage uses Possible Selves (PS), i.e. images of what students expect, hope or fear to become in the future, to guide health-related behavioral decisions during their first year at university.

Method

In this formative research with 20 students, quantitative and qualitative data are gathered on several mockups for online PS-interventions (e.g. text, photorealistic pictures, avatars) regarding content, identification, functionality and usability.

Expected results

Mock-ups that include feared PS and dynamic features will be evaluated as most effective. Current stage of work: In a current study first year students generate attributes they might possess at specific times in the future. Most commonly mentioned PS will be used in the mock-ups, to be designed and pilot-tested during Spring/Summer 2015.

Discussion

The results will inform the design of a tailored PS-intervention providing vivid and easily-accessible mental images of future-selves, which can be retrieved when making health-related behavioral decisions to help align the present-self with future-selves.

Poster Presentation Abstracts

‘Engager’ formative process evaluation: Evaluation/development of a two-stage behaviour change intervention for offenders

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A Realist formative evaluation to evaluate/develop a two-stage behaviour change intervention to support health and wellbeing of offenders. A logic model outlined contexts, mechanisms, and outcomes considered important in enabling two-stages of behaviour change: 1) practitioners’, 2) offenders’. Nine practitioners and 30 men in the intervention took part. Twenty session recordings, 9 practitioners’ notes, and ‘realist interviews’ with 20 offenders and 9 practitioners were collected and analysed using Framework Analysis. Whilst practitioners believed in the Engager model and felt inspired and empowered to work in new ways, reasons for slow behaviour change included a lack of clarity about the theoretical approach, inconsistent supervision, role uncertainty, initially greater confidence in practiced ways of behaving in challenging situations, and cultural/practical difficulties of prison contexts. Offenders reported trusting and liking Engager practitioners and strong engagement with Engager and other services, often against expectations of services familiar with them. The formative evaluation highlighted particular mechanisms/contexts that were barriers/ facilitators to offender health behaviour change. These informed changes to the Delivery Platform (logic model, manual, training, supervision) for the RCT.

Poster Presentation Abstracts

The role of therapeutic changes in treatment of patients with behavioural disorders in CBT approach

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The role of therapeutic change in CBT for patients with BD needs to be analyzed. The factors of therapy success and impact of change should be specified. What are the principles and mechanisms of behavioral change among patients with BD? What factors contribute to the occurrence of BD? How is CBT effective in the treatment of BD? The author will attempt to find answers to the research questions, using the discourse analysis method. Current research analysis shows high a influence of therapeutic change on the CBT success with patients suffering from BD. This allows the researcher to assume that CBT has a high efficiency in the treatment of BD by using CBT techniques and strategies in order to cause and maintain the therapeutic change. Future research on the role of change in treatment of patients with BD should focus on important areas such as mechanisms, indicators and processes of change, effective methods of individualization of intervention, identification and management of group processes and group dynamics, motivation to change, and finally the factors that can maintain a change and prevent relapse.

Poster Presentation Abstracts

Enhanced lifestyle satisfaction in severely dependent smokers after quitting successfully using inpatient smoking cessation therapy

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Background

Smokers in precontemplation stage for cessation, mainly those with high nicotine dependence, fear significant disadvantages after quitting smoking - such as intolerable craving, irritability or increased anxiety. Inpatient smoking cessation provides the chance to experience that this kind of expected distress does not occur; in contrast various benefits particularly with lifestyle satisfaction arise.

Methods

This is a descriptive observational study with real world evidence. After inpatient smoking cessation therapy, long term (> 1 year) smoke-free participants are compared to non-responders. For 270 participants (55.6% men), treatment effects such as health complaints, sense of well-being, and changes in sleep patterns were analyzed.

Findings

12 months post-therapy follow up, 42.6% of participants were identified as non-smokers. Non-smokers reported significant changes to their lifestyle satisfaction such a better sense of well-being and sleep habits, increased level of physical activity, and lower drug prescriptions.

Discussion

Current smokers who have based on their heavy dependence to nicotine not yet made serious attempts to quit tobacco should be motivated by our encouraging findings in their attempt to quit.

Poster Presentation Abstracts

Students smoking habits in Lithuania according to GYTS in 2001-2014

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Background

The Global Youth Tobacco Survey (GYTS) provided by WHO Euro and GYTS collaborative group is designed to monitor students on behavioural and social smoking determinants thus coinciding with health psychology tasks in the area of preventive interventions. This study aims to evaluate students smoking situation in Lithuania by using GYTS.

Methods

GYTS in Lithuania was carried out in 2001, 2005, 2009 and 2014. A total of 3413 eligible students in grades

7-9 completed the GYTS survey questionnaire in 2014. Overall response rate of all students was 79.2%. Answers were analyzed in eight sub-scales reflecting smoking prevalence, second-hand smoking, availability etc.

Findings

Overall ever smoked cigarettes 60.9%, 43.6% were exposed to tobacco smoke at home, 27.0% of current smokers bought cigarettes by themselves. Percentage of current smokers in 2014 decreased from 33.7 to 19.4 %.

Discussion

Essential changes in student smoking habits were seen in Lithuania GYTS 2014 which were not a case in three previous surveys. It coincided with extensive anti-smoking campaigns and law enforcement. The data may be interesting for health psychologists guiding preventive interventions with students.

Poster Presentation Abstracts

Introducing 'opt-out' referrals for pregnant women to stop smoking services: impact on smoking cessation

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To evaluate the impact on smoking cessation of an intervention involving routine carbon monoxide (CO) testing for pregnant women and 'opt-out' (whether requested or not) referrals to cessation services with CO>4ppm.

'Opt-out' referrals were introduced during 12-week antenatal scan appointments in one UK hospital Trust, in addition to standard care ('opt-in' referrals at 9-weeks appointments). Routine referral data at both appointments and referral outcomes (setting quit dates/self-reported abstinence) were collected during 6-months study period and a matched control period the previous year.

Approximately 2300 women attended antenatal care in each period. Compared to the control period, over twice as many women in the study period set a quit date (2.5% (95% CI: 1.9% - 3.2%) and 5.3% (95% CI: 4.4% - 6.3%) respectively) and reported abstinence (2.0% (95% CI: 1.5% - 2.7%) and 4.1% (95% CI: 3.3% - 4.9%) respectively).

Introduction of CO testing and 'opt-out' referrals led to a significant increase in smoking cessation in pregnancy, compared to the control period.

Poster Presentation Abstracts

Improving the effectiveness of tobacco education for low-educated adolescents: giving information or telling a story?

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Background

Low-educated adolescents more often smoke tobacco and are less influenced by school health education. This study investigates the effectiveness of narrative versus informative written health materials.

Methods

Three-wave experimental study on a sample of 256 low-educated adolescents, measuring knowledge about disadvantages of smoking, beliefs, attitude, and intention. Waves were one month apart; exposure to materials was prior to the second wave. Repeated measures anova was employed.

Findings

Immediately after exposure, knowledge increased in informative condition and beliefs became more negative towards smoking in both conditions. However, attitude became borderline more positive towards smoking in narrative condition. Four weeks after exposure, attitude was significantly more positive towards smoking in narrative condition, whereas there was a non-significant change in the other direction in the informative condition. No significant effects on intention were found. An explanation for the undesired effect on attitude is that it was also found that adolescents in the narrative condition thought less about the negative consequences of smoking.

Discussion

A narrative format reduces active processing of message content. For low-educated adolescents, an informative format is advised.

Poster Presentation Abstracts

Smoking behaviour in lower and higher socio-economic status groups: exploring social support and identity factors

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Background

Smoking is more prevalent and persistent among lower than higher SES groups. We examined the role of social support and identity processes within this relationship between SES and smoking.

Methods

Online longitudinal study among 339 lower, middle and higher SES daily smokers. Expected and desired social support for quitting, identity factors (smoker, quitter and non-smoker self- and group-identity) and intentions and attempts to quit were measured.

Findings

Lower SES smokers expected to receive more negative and practical support than higher SES smokers. Smokers from all SES backgrounds wished to receive positive support. Also, controlled for other important influences, stronger quitting self-identity and non-smoker group-identity predicted stronger intentions to quit, and stronger quitting self-identity predicted a higher likelihood of quit attempts six months later.

Discussion

The results show the importance of the 'possible self' as a quitter or non-smoker for smoking cessation. Future research should explore how the social environment of smokers who intend to quit can be encouraged to provide the type of social support that smokers find helpful, and how identification with quitting and non-smokers may be strengthened.

Poster Presentation Abstracts

Predicting changes in smoker identity and quitter identity among smokers and ex-smokers using ITC data

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Background

Smokers with stronger quitter and non-smoker identities, and weaker smoker identities, are more likely to (intend to) quit smoking. However, little is known about how identity may change in smokers and ex-smokers. We will explore whether changes in identity can be predicted by clusters of variables related to perceived effects of antismoking policies and psychosocial factors.

Methods

Longitudinal data (eight waves over eight years) from the International Tobacco Control (ITC) Netherlands survey will be used. Quitter self-identity and smoker self- and group-identity were measured among } 2000 smokers and ex-smokers. Data will be analysed with cross-lagged structural equation modelling.

Results

Results will show how antismoking policies and psychosocial factors may affect identity change and behaviour in smokers and ex-smokers.

Current stage of work

Data have been collected and will be analysed in the first half of 2015.

Discussion

More insight in dynamics of identity change processes related to smoking and smoking cessation over time will address an important gap in the current literature, and will aid the development of effective smoking cessation interventions and antismoking measures.

Poster Presentation Abstracts

The delivery of smoking cessation advice to hospitalised smokers: a twohospital survey

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Smoking is the single most preventable cause of disease, disability, and death. Hospitalisation is an ideal time to implement cessation interventions. We determined the prevalence of smoking, cessation advice received by inpatients and quit rates in two teaching hospitals in Ireland.

We surveyed 1001 in-patients over six-months. Motivation to quit, cigarette dependence, attitudes to quitting and recent quitting history was assessed. Telephone follow-up and carbon monoxide testing at 3-months established postdischarge motivation to quit, smoking behaviours and quit attempts.

Smoking prevalence was 23.4%. Only 32% reported that smoking cessation was discussed during admission. At 3-months, 17% of smokers reported smoking cessation. Brief intervention with smoking cessation advice during hospitalisation was associated with higher motivation to quit (OR=2.79, 95% CI 2.12-3.68), and successful quit behaviour (OR=2.02, 95% CI 1.34-3.06).

A systematic focus on smoking cessation is needed in hospital settings. Where advice was given, it was associated with enhanced motivation to quit and increased quit rates, suggesting that systematic provision of low-intensity cessation interventions could significantly enhance quit rates in hospitalised smokers

Poster Presentation Abstracts

Psychological effects of colorectal cancer screening invitations: a randomized trial

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Background

Participation in cancer screening programs might cause worries in the population that could outweigh the benefits of reduced mortality. The present study investigated the psychological reactions towards an invitation for colorectal cancer screening (CRC) in Norway.

Methods

In a prospective, randomized trial participants were invited to either flexible sigmoidoscopy screening (FS), Faecal Immunochemical test screening (FIT), or no screening (control arm). Together with the invitations participants received a Health-related Quality of Life (HRQoL) questionnaire (The ShortForm-12) and an anxiety and depression questionnaire (Hospital Anxiety and Depression Scale).

Findings

Number of invited individuals and questionnaire response rates were; 6845 (42%) in the FS arm, 6886 (52%) in the FIT arm, and 7666 (34%) in the control arm, respectively. The FS participants reported significantly less anxiety, and better HRQoL compared to controls. FIT participants reported lower HRQoL compared to controls. None of the statistical differences were considered clinically relevant, operationalized as a difference of at least half a s.d.

Conclusion

The present study indicates the absence of clinically relevant negative reactions after receiving an invitation for CRC screening.

Poster Presentation Abstracts

Barriers and facilitators to attendance of NHS Health Checks for vulnerable groups: a qualitative study

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Background

The objective was to qualitatively evaluate the commissioning of outreach services aiming to improve the experience, and reduce barriers to attendance of NHS health checks in vulnerable groups' (adults with learning disabilities, a mental health condition, and BME women).

Methods

We carried out focus groups with people from vulnerable groups (n=28) and support workers (n=5), which was analysed using framework analysis (Richie & Spencer, 1994).

Findings

Themes fall under this main framework: awareness of the NHS health checks; facilitators of attending the health checks; barriers to attending health checks; experience of health checks; behaviour change; and conditions for independent access and positive experience.

Discussion

Providing NHS health checks in the outreach units reduced barriers to attendance for BME women and people diagnosed with a mental health condition (different from doctor's surgeries). For adults with learning disabilities, attendance had fewer barriers, so a positive experience during attendance was more important. NHS health checks can act as the first step towards behaviour change, with recommendations made as to how this can be achieved and maintained (e.g., commissioning follow up support).

Poster Presentation Abstracts

Facilitators and barriers for implementation of user participation at Healthy Life Centres

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Background

Healthy Life Centres (HLCs) are established in the Norwegian community health care services to promote health and prevent lifestyle diseases. Implementation of user participation at HLCs is considered important to achieve these objectives, and is also required by law. However, to what extent user participation is implemented at HLCs and which attitudes and knowledge users and staff possess on this, is not known. Hence, the aims of this project are to investigate facilitators and barriers for implementation of user participation at HLCs, perceived by users and staff.

Methods

Qualitative focus-groups interviews of users and staff at HLCs in Mid-Norway (N=30) will be conducted along with a quantitative national survey among HLC staff throughout Norway (N=400).

Expected results

This project will provide knowledge in users' and staffs' awareness and attitudes towards user participation at HLCs. Moreover, potential differences between users and staff in how they consider the impact of user participation may be relieved.

Current stage of work

Planning.

Discussion

User participation promotes health through stronger empowerment among users and enhanced equality between users and staff at HLCs.

Poster Presentation Abstracts

Evaluation of support for Eating Disorders (EDs): how well used are telephone helplines and why?

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Alternative sources of support are increasingly being accessed by individuals with EDs. This mixed-method study aimed to explore perspectives and utilisation of helplines. Part one involved distribution of postal questionnaires to service users throughout Wales via NHS ED services. Deductive thematic analysis was conducted on 40/135 returned questionnaires. Part two involved evaluation of an existing helpline and support service, independent chisquare tests and qualitative content analysis were used to analyse the 153 completed contact report forms. Findings indicated that a helpline can provide emotional and informational support, however less than a third of participants reported using this type of service and satisfaction levels were mixed. Lack of awareness of the service and preference for face to face contact were identified as reasons for non-use. Results indicated that carers were more likely to use the helpline ($p < .001$) while sufferers were more likely to access online support ($p < .001$). Therefore helplines may provide a valuable source of support for carers in particular while anonymous support provided online or via mobile devices may be more suitable for individuals with EDs.

Poster Presentation Abstracts

Promoting adolescent mental health in Norway: development of a universal intervention lead by school nurse

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Background

There are currently no recommended interventions run by the school nurse to promote mental health, implemented in high schools. The goal of this study is to develop a universal, theory driven school nurse lead intervention to promote mental health.

Methods

The intervention has a salutogenic fundament and will be developed in collaboration between researchers, school nurses in the municipality, user involvement by adolescents and student public health nurses. The study design is a quantitative non-randomized interventional trial with experimental and control group. Totally 1500 students will participate.

Expected results

An intervention that later can be evaluated for positive impact on adolescents mental health.

Current stage of work

The intervention is divided in three parts:

Morning conference where the school nurse covers basic elements for good mental health.

Workshop with a salutogenic dialogue led by school nurse on setting personal boundaries, friendship, and normal variations in mood.

Case studies.

Discussion

Intervention development through collaboration, aims to bridge the gap between academia and clinicians and promote best practice.

Poster Presentation Abstracts

Kids safe and smokefree: an ongoing multilevel intervention trial addressing underserved children's tobacco smoke exposure

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Introduction

Addressing child secondhand tobacco smoke (SHS) exposure is a public health priority (WHO). Our trial tests a multilevel intervention linking brief pediatric provider advice with individualized telebased counseling for parents focused on SHSe protections and smoking cessation.

Methods

We modified pediatrics systems' electronic assessments and trained providers throughout Philadelphia, PA, USA to educate smoking parents about SHS harms and the health benefits of protecting children from SHS. These providers referred parents to the trial. Parents are randomized to either 12 weeks of telebased smoking counseling or an attention control condition focused on nutrition education.

Results

We have received >2900 referrals, enrolling over 300 parents (~90% retention). Over 80% of participants are women and African American, and over 75% are below the poverty line. Results suggest that relative to controls, the multilevel group: a) was less likely to smoke around their child, and b) was more likely to implement residential smoking bans ($p < .05$).

Discussion

Adding telephone counseling significantly improved the low-intensity pediatric clinic intervention, suggesting that multilevel interventions are sustainable models that hold great promise for reducing child SHS exposure.

Poster Presentation Abstracts

Development of policy-directed, practical, evidence-based guidance for public health intervention evaluation

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Background

Quality useable guidance on the evaluation of public health programs for practitioners would facilitate the identification of effective, and ineffective services according to a variety of criteria.

Aims and methods

1. To systematically collect available guidance to write a “Catalogue of available Public Health Evaluation Guidance”
2. Interview public health practitioners to identify what kind of evaluation training and materials would be of most use.
3. Use evidence collected for aims 1 and 2 to consider how to fill the gaps in the current provision.

Expected results

Initial results will include a catalogue of available Public Health Evaluation Guidance. This will be a resource in itself or public health practitioners. Interviews with practitioners will identify gaps in existing guidance documents, and highlight areas that need to be developed.

Progress to date

We have systematically reviewed the literature and identified documents that can be used to support the evaluation of complex health interventions, our initial search identified 402 documents. These are currently being reviewed and summarised. Interviews have been completed with 10 public health practitioners. Data is currently being analysed.

Poster Presentation Abstracts

Evaluation of a collaborative smoking cessation intervention in primary care: a cluster-randomized controlled trial

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Background

Tobacco consumption is a preventable risk factor for disease and complicates the treatment of medical conditions. The objective of this study is to evaluate the effectiveness of a primary care intervention with the aim of achieving health behavior change among smokers and patients with smoking-related disease.

Methods

In this cluster-randomized controlled trial, forty medical practices are randomly assigned to the intervention or control group. In total, eight-hundred patients are recruited within practices. General practitioners in the intervention group motivate patients to participate in smoking cessation courses, refer them to courses and subsequently ask about course participation. General practitioners in the control group provide usual care. Smoking status, quality of life and respiratory complaints are assessed at baseline, after six and twelve months.

Results

Cigarette consumption and respiratory complaints are expected to decrease whereas quality of life is expected to increase in the intervention, compared to the control group. Recruitment is ongoing.

Discussion

The results serve to determine the intervention's effectiveness and can contribute to the design of interventions in the field of health services research.

Poster Presentation Abstracts

Do dentists use validated child dental anxiety measures in clinical practice? A mixed methods study

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Background

Assessing anxiety is an important part of the assessment of a child presenting for dental treatment. Health psychologists have been key in developing and validating child dental anxiety measures yet there is little information concerning their implementation and use by paediatric dentists. The aims of our study were to establish the extent to which anxiety measures are used in clinical practice, and to explore the experience and views of dentists regarding anxiety assessment.

Methods

We audited the use of formal anxiety assessment across child patient notes in a UK dental hospital. We also interviewed fourteen paediatric dentists on how they identify anxious patients.

Findings

Our audit highlighted only five patients were assessed using validated anxiety questionnaires. Thematic analysis of the dentist interviews revealed three themes: Using clinical experience to identify anxiety; Time as a barrier to using anxiety measures; Lack of knowledge/experience of anxiety measures.

Discussion

There is a role for health psychologists to highlight the importance of validated child dental anxiety measures, in order to identify highly anxious patients and to help monitor the effectiveness of treatment interventions.

Poster Presentation Abstracts

Health professionals' views of discussing weight management within a routine clinical consultation: a meta-synthesis

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Background

Obesity places a significant burden on health care systems globally. Key guidelines (NICE, USPSTF and the AMA) suggest health professionals (HPs) can play a pivotal role in weight management. However, weight management advice delivered by HPs remains inconsistent suggesting potential for improvement in both frequency and quality. This review is to identify and synthesise qualitative studies that elicit health professionals' views of discussing weight management within a routine clinical consultation.

Methods

A systematic search of four electronic databases was conducted (Medline, EMBASE, CINAHL and PsycINFO). Scoping exercises were used to refine search terms and to maximize identification of studies. Quality was appraised using the Critical Appraisal Skills Programme tool. Thematic synthesis was used to analyse the data.

Findings

Twelve studies met the inclusion criteria. Synthesis resulted in the development of 3 key interlinking themes (a) responsibility for weight management (b) barriers to weight management and (c) enablers to weight management.

Discussion

This research highlights the fact that considerable barriers still exist during consultations between health professionals and patients about weight management; suggesting an urgent need for changes in practice.

Poster Presentation Abstracts

Predicting health support behaviours in paid carers of people with intellectual disabilities

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Ensuring the physical health of people with intellectual disabilities is often expected from those who are paid to care for this client group. Working environments influence peoples' actual behaviours especially, if they involve regularly negotiating challenging daily chores as part of their job role e.g., caring for others. Utilising multiple regression, the current research focused on predicting health support behaviours in an opportunity sample (N= 60) of carers supporting people with intellectual disabilities working in various settings located in Gloucestershire, UK. Participants completed a measure of health support behaviours and bespoke measures derived from the theory of planned behaviour. Specifically, measures assessing direct and indirect attitudes, self-efficacy, perceived control, injunctive norms and intention. Results produced a marginally significant model $p = .05$; perceived control was the only (marginal) significant predictor ($p = .06$). These results suggest that perceived control is important in predicting health support behaviours in this occupational group. Results support extant research emphasising the importance of perceived control and suggest that working environments that facilitate perceived control would be beneficial for carers and evoke actual health support behaviours.

Poster Presentation Abstracts

“Let’s talk about sex” – with intellectual disabled residents

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Background

Sexuality in people with intellectual disability is often far more taboo, as for example staff in residential homes does often not have sufficient training to adequately operate sex education.

Methods

Guideline-based interviews with five employees of residential homes for people with intellectual disabilities and four interviews with adolescent female residents were carried out and analyzed using qualitative content analysis.

Results

Employees stated that they had no problem with sexual relations of the residents among themselves, they would have and show significant uncertainties if it comes to sexual violence. Employees described difficulties in the context of sexual-education. Answers to the questions on sexual-education among the residents showed that they were fearful and had unrealistic and wishful thinking about a romantic relationship.

Conclusion

Concepts for employee-training should be developed and evaluated in order to allow the proper handling of the sexuality of residents and suitable sex and contraceptive education.

Poster Presentation Abstracts

Body satisfaction among muslim adolescents with western and non-western dress preferences

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The aim of the study was to investigate body satisfaction and readiness to accept Western standards of beauty (thinideal) among Muslim female adolescents with different strength of religious beliefs, manifested in different dress preferences.

The sample consisted of 150 high school students. All students were Muslim, but half of them accept Western dress preferences, and other half follow traditional way of dressing wearing a head veil (hijab). The instruments were: Contour Drawing Rating Scale for measuring body satisfaction and SATAQ-3 for measuring sociocultural attitudes towards body appearance.

Muslim adolescents wearing a hijab were significantly less likely to express drive for thinness or pressure to attain a thin-ideal standard of beauty than adolescents wearing Western dress style ($t = -5,761$; $p < 0,001$). They are also more satisfied with their body shape, than adolescents accepting Western dress standards ($t = 3,029$; $p < 0,005$).

The results suggest the significance of Western cultural pressures in existence of body dissatisfaction and drive for thinness in adolescents. Such pressures could be the important risk factor for developing of eating disorders.

Poster Presentation Abstracts

Evaluation of Girls' Talk, sexuality education for lower education girls

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Girls are more at risk for sexual disease and -abuse than boys. Girls with lower education or immigrant parents are more at risk than indigenous girls with higher education. Girls' Talk is a group counseling program aimed at decreasing their risk by increasing knowledge about sexuality, sexual self-esteem and assertiveness. Effects were measured using self-report questionnaires among 210 participants aged between 14 and 20. Follow up (N = 104) after 4 months yielded a 15% decrease of sexual abuse experiences in the last 6 months in experimental group (5% decrease in control), and a 10% decrease of experience with being pressured by boys to perform sexual acts (5% increase in control). However, these results were not significant, probably due to drop-out (50% in experimental, 30% in control). Participants associated positive emotions with the program. A qualitative study aimed at clarifying the quantitative results ensued. Participants (N = 13) of the Girls' Talk program were interviewed in-depth about the perceived effects of the program. Results of this study indicate that motivation to participate influences attributions of behavior change to the program.

Poster Presentation Abstracts

Mental health, lack of social support and economic crisis: a preliminary study in “crisis-related” patients

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Background

An increasing rate of mental health illness linked to the current economic crisis has been recorded worldwide. The lack of perceived social support and lower quality of social relationships could lead to psychological disorders and suicidal ideation too. The aim of this study is to compare the quality of social sphere of patients affected by “crisis-related” psychological disorders with other people's, who have asked assistance to the same Mental Health Care Center.

Methods

Using an observational research design, patients (n=45) of “Crisis and Psychopathology Observatory”–by Ospedale Maggiore Policlinico, Milan–have been investigated about the perceived quality of social relationships (Cronbach's Alpha=.75), and the social support received (Cronbach's Alpha=.76).

Findings

MANOVA points out that “crisis-related” subjects showed a less quality of social relationships: $F(1,44)=7.01$; $p=.012$ and–at the same time–a lower perception of psychological support received $F(1,44)=7.37$; $p=.01$.

Discussion

The results show that “crisis-related” patients have a lower quality of the social sphere. The results suggest a possible way to elaborate actions and therapies in order to improve change in psycho-social variables connected to this new psychological illness.

Poster Presentation Abstracts

Medical mistrust and religion predict contemplation of blood donation in people from different ethnic origins

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Background

People from ethnic minority groups can be more difficult to reach in health promotion. In this study, we tested whether medical mistrust and religion influenced whether non-donors of different ethnic origins contemplated blood donation or not.

Methods

A questionnaire, based on individual and focus group interviews, was sent to non-donors of Dutch, Moroccan and Surinamese origin. Contemplation was measured by the question: “Did you ever consider donating blood?”.

Findings

Preliminary logistic regression results (NDutch = 34, NMoroccan = 61, NSurinamese = 56) show that medical mistrust seems to decrease the odds of contemplation mostly for Surinamese people (ORDutch: .41, 95%CI: .12-1.41; ORMoroccan: 1.59, 95%CI: .61-4.14; ORSurinamese: .52, 95%CI: .24-1.11). 75% of Islamic people (mostly Moroccan) who know their religion has a positive attitude towards donation contemplate donating blood, versus 44% who do not know their religions attitude (Chi-square(1, 96) = 8.12, p = .005).

Discussion

Preliminary results show that medical mistrust could influence recruitment of blood donors of Surinamese origin, whilst Islamic people could be motivated through information about blood donation from a religious perspective.

Oral Presentation Abstracts

Evaluation of 'Dream, Think, Act', a self-regulation intervention to promote mental wellbeing among young people

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Background

Effect and process of a self-regulation intervention ('Droom, denk, doe'; DDD) that promotes mental wellbeing among secondary vocational students.

Methods

A clustered RCT with a pretest-posttest (at 3 & 6 months) was carried out. 74 classes (1261 students, 74 classes) were randomized to the intervention (DDD) or control condition. DDD is a 5 module class room intervention, developed with Intervention Mapping, using methods such as goal setting, action planning, and different materials (legacy game, buddy demonstration movies and peer mentoring) . Measurements include psychological wellbeing (RPWB, MHI-5, SDQ), depression (CES-D), and self-regulation skills.

Findings

No differences were observed between the conditions over time. The process evaluations shows that students were generally favorable: 64% of the students liked the class exercises. Half of the students agreed with the statement that 'they have learned important things from DDD'. 85% of the students liked helping their buddy with his/her goal. The teacher evaluations showed that program implementation was not optimal, and they evaluation the program as complex.

Discussion

No positive overall intervention effects were found. Additional implementation strategies may be needed.

Oral Presentation Abstracts

Effectiveness of an online multi-module intervention on dietary behavior, smoking cessation, and physical activity

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Background

Online interventions are proven effective in changing lifestyle behaviors and therefore can be beneficial for cancer survivors. We assessed the online 'Kanker Nazorg Wijzer (KNW)' (Cancer Aftercare Guide) on diet, physical activity, and smoking outcomes.

Methods

Survivors participated in a RCT (intervention [IC]: n = 232, 79.3% females, mean age 55.6 years; usual-care control [UC]: n = 231, 80.5% females; mean age 56.1 years). We analyzed baseline and 6 months data (n=325; 70.2%) obtained from online questionnaires using multilevel analysis.

Findings

IC reported significant higher vegetable (B = 14.08, p = .003) and whole wheat bread (B = 0.43, p = .05) consumption and a nearly significant increase in days per week activity (IC = .34 days, UC = .20 days; B = .29, p = .09). A higher proportion of smokers (11.1%) quit smoking in IC (UC = 3.1%). Comparative tests were impossible due to the small numbers.

Discussion

Preliminary results indicate the KNW to be effective in changing dietary behavior. Trend effects on physical activity might consolidate over time, simultaneously with a decrease of possible medical complaints.

Oral Presentation Abstracts

Predicting adherence to diet and physical activity recommendations and weight loss after bariatric surgery

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Background

Psychosocial predictors of postoperative weight loss have been much studied with inconsistent findings. Little is known about factors related to adherence to post-surgical diet and physical activity guidelines the patients are recommended to follow to sustain weight loss and avoid weight gain. Within a self-regulatory framework, we aimed to examine the relationship between preoperative psychosocial factors and postoperative behavior besides weight loss.

Methods

In this prospective cohort-study 246 patients underwent gastric bypass. Weight was measured at the hospital and the patients completed an extensive questionnaire before, and one year after surgery.

Findings

Only age, previous diet attempts and snacking were related to weight loss, while several psychosocial factors were significantly associated with eating behavior and physical activity. Some of the factors positively associated with both physical activity and adherence to diet guidelines were motivation to change behavior, planning and body image, while depression was negatively correlated.

Conclusion

Our findings suggest that a number of psychosocial factors predicted the behavior necessary for a positive long-term outcome after bariatric surgery. If focusing primarily on weight loss, valuable information might get lost.

Oral Presentation Abstracts

Inner health picture as a mental model based on the executive functions control

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Inner health picture (IHP) is a mental model including a child representation about him (her) self as a health human. The purpose of the investigation was to analyze the psychophysiological mechanism which this mental model could be based on. 82 children 9.1 was determined with using the inventory (Nikolaeva, 2013). All children performed simple and complex sensorimotor reactions. The peculiarity of method was that stimuli flows consisted from two identical parts. It enabled us to appreciate the capacity to find unconsciously this pattern and to predict stimuli appearance in the second parts of the tasks. We have found out that the more IHP level is the better child performs both simple and complex sensorimotor reactions as for the first and for the second parts of the tasks. We could conclude that Inner health picture is a mental model which both includes the child's representation about him(her)self as a healthy person and is based on a system of the executive functions control. Work is supported by RGNF № 14-16-48005a(p)

Oral Presentation Abstracts

Testing the Social Cognitive model of fear in smoking cessation

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Background

Fear is an emotion that probably has been essential in human survival. The emotion of fear is based on the appraisal of an impending negative outcome. In health psychology fear is the primary drive to behave healthy. In this study the role of fear in smoking cessation is addressed using the Social Cognitive model of Fear.

Methods

In three cohorts of smokers T1 fear is used to quitting activity during a period of 7 to 9 months. In a cohort of exsmokers, T1 fear is used to predict relapse over a period of 7 months. Besides fear, expected outcomes of quitting and self-efficacy were assessed.

Findings

The results show that fear at T1 significantly predicted later quitting activity in smokers. When controlling for expected outcomes and self-efficacy, the relation remained significant. However, in ex-smokers fear significantly predicted relapse.

Discussion

Fear is an essential emotion in stimulating spontaneous quit attempts, but in ex-smokers fear seems to undermine abstinence. In fear-appeals fear must be carefully targeted and dosed.

Oral Presentation Abstracts

Are asthma patients unrealistically optimistic in the same ways as the healthy?

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Background

There is evidence that patients with psychosomatic disorders do not share the tendency to unrealistic optimism found in the healthy population when considering the risk of future health problems (unrelated to their current condition), but are more optimistic about physical threat than healthy individuals. It is hypothesised that asthma patients perceive risk similarly to the healthy population, and this may contribute to the problem of non-adherence to medication.

Methods

Asthma, CFS/ME, and healthy groups (N=211) assessed the risk of particular health threats (eg arthritis) and physical threats (eg being burgled) in the future, for themselves and for other people of the same age and gender.

Findings

There were significant differences among the groups; greater pessimism for health risk for self (versus other) was largest for asthma, and greater optimism for physical threat for self (versus other) was smallest for asthma.

Discussion

Asthma patients differ from healthy individuals in their perceptions of future risks, in a manner partially shared with patients with psychosomatic disorders. Implications for non-adherence to medication in asthma will be discussed.

Oral Presentation Abstracts

The effects of implementation intentions with imagery on sub-clinical checking behaviours

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Background

Previous research on compulsive checking shows that checkers have impaired prospective memory as well as reduced cognitive confidence and vividness in their actions. Therefore, the study's objective is to increase cognitive confidence and vividness by using two interventions: implementation intentions and imagery.

Methods

This is a quasi-experimental between subjects study with 120 participants. The independent variables were the condition group and participants' checking score. The dependent variables were the prospective memory performance, confidence and vividness scores.

Participants were classified as high or low checkers based on their checking score. Half of the high/low checkers were instructed to use the two strategies prior to the task. All participants performed a prospective memory task followed by confidence and vividness measures.

Findings

Analyses revealed that individuals in the intervention condition reported increased confidence in their actions and their memory was more vivid compared to controls. No difference in prospective memory.

Discussion

The study proposes that implementation intentions with imagery increases cognitive confidence and vividness. The findings suggest that the intervention could possibly reduce checking repetitions within a clinical population.

Oral Presentation Abstracts

Do telecommunication interventions support medication adherence to people with/at risk of CVD? Systematic review

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Background

Medication adherence is the best available option to prevent risks from CVDs and achieve favourable health outcomes. However, only half of the people with/at such risks do take their medications as prescribed. Telecommunication interventions using voice or text messages can provide tailored support to large number of people and in the long-term. This research aims to assess whether and how telecommunication interventions support people with/at risk of CVD to take their medications as prescribed.

Methods

Systematic literature review of RCTs was conducted and a random effect model was used for the metaanalysis.

Findings

Preliminary results showed the overall effect of the interventions on outcomes measured (n=16 studies, 9450 participants) to be $z=0.59$ (CI95% -0.18, 1.05), and not statistical significant. Analysis of BCTs and sensitivity analysis will be presented.

Discussion

Telecommunication interventions are effective at supporting continuous engagement with medication adherence interventions (e.g. more than 6 months) to large number of people. However, there is a need to further explore the factors that support medication adherence using voice and text messages interventions.

Oral Presentation Abstracts

Investigating factors associated with hormonal therapy adherence in breast cancer survivors: a systematic review

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Background

This review aimed to identify predictors of non-adherence and non-persistence to hormonal therapy in breast cancer survivors, in order to inform development of an intervention to increase adherence rates.

Methods

Included studies measured associations between adherence or persistence and predictor variables. Studies were identified by searching electronic databases and reviewing grey literature. Eligible studies were assessed for methodological quality, data was extracted and a narrative synthesis of the results was conducted.

Findings

The search identified 54 papers. The majority of research focused on clinical and demographic factors and found inconsistent results. The most consistent results showed that receiving specialist care, having more prescription medications and fewer hospitalisations often were related to increased adherence and persistence. Very little research investigated potentially modifiable factors. There was a small amount of evidence to suggest that medication beliefs were associated with adherence, but more high quality research is needed to confirm this.

Discussion

In order to increase adherence rates, and reduce rates of cancer recurrence and mortality, future research needs to identify psychosocial predictors of non-adherence which are amenable to change.

Oral Presentation Abstracts

Assessing interventions to increase adherence to patching treatment in children with amblyopia: a systematic review

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Background

Amblyopia or “lazy-eye” is the most common disease affecting visual acuity in childhood. It is a serious condition leading to increased risk of blindness and left untreated it will not resolve itself. Occluding the good eye with a patch is a highly effective treatment if carried out before age 7 but adherence is a major problem. This systematic review addresses the question: How effective are existing interventions at increasing adherence to patching treatment in amblyopic children?

Methods

Electronic searches were carried out in June 2014 to identify studies that reported primary data on an intervention to increase patching adherence. Data screening, extraction and quality ratings were performed independently by two researchers.

Findings

Nine papers were included in the review. Interventions including an educational element (5) increased patching adherence and had higher quality ratings than interventions that changed aspects of the patching regime (3) or involved supervised occlusion (1).

Discussion

Interventions to increase patching should include educational elements. Future research should assess additional behaviour change strategies and qualitative research is needed to understand patching from the child’s perspective.

Oral Presentation Abstracts

The importance of self-efficacy and action planning for smoking cessation

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Background

Socio-cognitive theory forms an important basis for effective behaviour change interventions. The study aimed to prospectively assess whether the effect of a web-based computer-tailored intervention on smoking cessation is mediated by socio-cognitive constructs as proposed by the I-Change model.

Methods

Smokers (N=2099) were randomly assigned to the control, text- or video-based condition. Structural Equation Modelling was used to assess intervention effects on attitude, social support, social modelling, self-efficacy (SE), action planning (AP), and on three outcomes (i.e. seven days abstinence, prolonged abstinence, and continued abstinence) after 6 months.

Findings

Results showed significant mediation effects of the intervention (both video and text) via AP and SE on all three outcomes. No differences concerning AP and SE were found between the text and video condition. The mediated pathways accounted for the full intervention effect.

Discussion

Few smoking cessation programs assess operating mechanisms of their programs. Our results confirm the importance of SE and AP for smokers that want to quit smoking, and the efficacy of our computer tailored intervention in realizing this.

Oral Presentation Abstracts

Building a theoretical model of depressive vulnerabilities, depression trajectories and poor outcomes in ACS patients

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Background

Depression is associated with increased mortality in patients with acute coronary syndrome (ACS). However, little is known about the theoretical causes of depression trajectories post-ACS, and whether these trajectories predict mortality. We tested a theoretical model of depressive vulnerabilities, trajectories and mortality.

Methods

A prospective observational study of 374 ACS patients was conducted. Participants completed questionnaires on vulnerabilities (interpersonal life events, reinforcing events, cognitive distortions, Type D personality) during hospitalisation and depression at baseline and 3-, 6- and 12-months post-hospitalisation. Latent class analysis determined trajectories of depression. A generalised structural equation model tested relationships among vulnerabilities, depression trajectories and 7-year mortality.

Results

Four depression trajectory categories were found: persistent (15%); subthreshold (37%); never depressed (48%). Vulnerabilities independently predicted trajectories, with effect sizes significantly highest for persistent depression. Both subthreshold and persistent depression trajectories were significant predictors of mortality (e.g. persistent depression OR=2.4, 95% CI=1.8-3.1), relative to never depressed.

Conclusions

Theoretical vulnerabilities measured during hospitalisation can identify those at risk for persistent depression and elevated mortality risk post-ACS.

Oral Presentation Abstracts

The combination of action planning and coping planning to improve medication adherence in transplanted patients

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Background

Medication nonadherence increases the risk of mortality in transplanted patients. The objective of this study is to test the effect of the implementation intention to improve medication adherence in transplanted patients.

Methods

In a randomized control trial, we tested the combination of action planning and coping planning to help patients to take their treatment as the doctor prescribed it. At T1, participants were randomly allocated to a control group (n=27) or to an experimental group to form implementation intentions (n=27). The coping planning helped patients to anticipate barriers to medication adherence whereas the action planning targeted more on memory lapses.

Findings

We expect that the participants in the experimental group will score significantly higher on the medication adherence scales after having formed implementation intentions relative to the participants in the control group.

Discussion

Showing the effectiveness of action planning and coping planning to improve medication adherence may be an easy way to help transplanted patients to have better health outcomes, without any substantial human and financial costs.

Oral Presentation Abstracts

Effects of monitoring and brief messaging interventions on medication adherence for people with type2 diabetes

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Background

There is enthusiasm for interventions that monitor behaviour and send brief messages to promote medication adherence. We conducted a systematic literature review to examine the effects of such interventions in patients with type 2 diabetes, and their basis in explicit theory.

Methods

Systematic electronic searches of five electronic databases identified eleven eligible randomised trials (fifteen interventions) with 4480 patients that reported effects on medication adherence.

Findings

Three interventions were based on delivering brief messages, six on monitoring of medication adherence, and six used both strategies. Only one study presented a low risk of bias. Improvements in self-reported medication adherence were observed in six interventions, although effect sizes were generally moderate. A meta-analysis of interventions combining monitoring and messaging strategies showed no overall difference in effect size between intervention and control groups (Cohen's $d=0.05$). Only six of the interventions had any explicit theoretical basis, and even these demonstrated little use of theory.

Discussion

Although interventions based on messaging and monitoring have the potential to improve medication adherence, additional high-quality research is needed, with greater use of theories of behaviour change.

Oral Presentation Abstracts

Diabetes locus of control, autonomous motivation, diabetic care and medication adherence in type 2 diabetes

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Background

The present research aimed to examine: predictors of medication adherence in patients with type II diabetes; moderating effect of diabetic care and mediating role of treatment motivation on the relationship between locus of control and medication adherence.

Methods

Cross-sectional correlational design was used. Sample comprise of 150 patients recruited from diabetic clinics in public sector hospitals of Lahore. Diabetes Locus of Control Scale; Treatment Self Regulation Questionnaire; Summary of Diabetes Self Care Activities; and Adherence to Refill and Medication Scale were used for assessment. Correlation analysis, moderation and path analysis were used to analyse data.

Findings

Locus of control had positive relationship with autonomous motivation which in turn had significant positive relationship with diabetic care. Diabetic care had positive relationship with medication adherence. Diabetic care had a moderating role whereas treatment motivation did not mediate between the relationship of locus of control and medication adherence.

Discussion

Findings highlight the significance of diabetes locus of control and motivation in diabetic care and treatment adherence and have important implications for individuals with diabetes and health care professionals in Pakistan.

Oral Presentation Abstracts

Definitions of health and perceptions of health behaviours and healthy environments: parent's perspective

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Background

The aim of this study was to explore current health behaviours and health environments among a sample of parents of adolescents receiving public mental health care in South Africa.

Methods

This qualitative study was grounded in phenomenology. The participants included 30 parents. Individual interviews were conducted by a trained researcher. The thematic content analysis approach as suggested by Georgi was used to make sense of the data.

Findings

Health was defined as having a good physical and mental constitution. The broad theme that emerged from analysing the perceptions of parents regarding what constitutes health behaviours and a healthy environment was that there were facilitators and barriers in each instance. Facilitators were internally driven (personal choice and ability to control a healthy life-style) and barriers were stated as those factors external to the individual (environmental factors, inability to control a healthy life-style and inherited medical conditions). The exorbitant cost of healthy food was cited as a primary reason for not being able to encourage family members to improve their pattern of eating.

Discussion

These findings have implications for family-based interventions.

Oral Presentation Abstracts

The effect of counterfactuals as an expression of unattained goals on sexual risk taking

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Background

In the context of hedonistic goals, such as having sex, unattained goals can lead to counterfactual thoughts (CF, what would have happened if a condition in the past had been different). Previous research has shown that counterfactuals can influence future behavior, but has not focused on goal attainment processes that are associated with sexual risk. We posit that the presence of counterfactuals thoughts about unattained sexual goals leads to riskier sexual behavior.

Design

Four studies (total N = 572) with MSM and heterosexual participants (age range 18-65); quasi-experimental designs (Study 1-3, coding for the presence and type of CF), and experimental designs (Study 4, 1-factorial inducing CF, 2 control conditions); sexual risk taking intentions, past STI history as dependent measures.

Findings

MSM, young adults and adults showed more future sexual risk taking intentions when counterfactuals about sexual goals were present. MSM also had more STI episodes in the past 6 month.

Discussion

This research supports the innovative notion that sexual risk taking is not necessarily a product of selfregulation failure, but a “functional” result of hedonistic goal attainment processes.

Oral Presentation Abstracts

Depressive symptom trajectories in breast cancer patients and their partners: a nationwide prospective cohort study

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Background

This study identified distinct trajectories of depressive symptoms for breast cancer patients and their partners, examined how relationship quality and medical and socio-demographic factors were associated with these trajectories, and explored whether patient and partner within couples had similar trajectories.

Methods

A total of 546 women with breast cancer and 508 male partners in Denmark completed the Center for Epidemiologic Studies-Depression Scale \leq 4 months after surgery and 5 and 12 months later. Socio-demographic and medical characteristics were retrieved from nationwide registers. A trajectory finite mixture model was used to identify trajectories.

Results

Three distinct trajectories of depressive symptoms were identified for both patients and partners. Some 13% of patients and 11% of partners had a stable trajectory of high depressive symptoms. Poorer relationship quality and previous use of antidepressants were the most consistent risk factors for trajectories with elevated depressive symptoms. Within couples trajectories were weakly correlated.

Discussion

The results draw attention to variability in trajectories of depressive symptoms. The observed risk factors can help clinicians identify and target patients and partners who might need support.

Oral Presentation Abstracts

Does situation specificity affect the operation of an implementation intention intervention to increase physical activity?

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Background

Interventions that ask participants to link critical situations with appropriate responses (implementation intentions) have shown promise in increasing physical activity. Whether the specificity of the stated critical situation influences the effectiveness of an implementation intention-based intervention to increase physical activity is tested.

Methods

Office workers (N=133) were allocated to: (a) form implementation intentions using a “volitional help sheet” that provided 10 specific critical situations; (b) form implementation intentions using a “volitional help sheet” that provided a single generic critical situation; or (c) think about critical situations and appropriate responses, but not form implementation intentions.

Findings

At two-month follow-up, participants who formed implementation intentions reported engaging in significantly more vigorous physical activity than those in the control condition ($d = 0.57$). There were no significant differences between participants between the two implementation intention conditions ($d = 0.04$).

Discussion

Situation specificity did not affect the operation of an implementation intention-based intervention to increase physical activity meaning that participants may not need to be offered exhaustive lists of specific critical situations with which to form implementation intentions.

Oral Presentation Abstracts

Effectiveness of an online intervention for people with HIV and depressive symptoms: a pilot study

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Background

Many people with HIV suffer from depressive symptoms. We developed an online self-help program for people with HIV and depressive symptoms, based on previous research. This pilot study investigated the effectiveness of the program on depressive symptoms in people with HIV.

Methods

The effectiveness of the program was examined in a one-group experimental design. The self-help program contains four main components: activation, relaxation, changing maladaptive cognitions, and goal attainment. Twenty participants worked on the program for six to eight weeks. A coach provided motivational support by telephone once a week. Depressive symptoms were assessed with the PHQ-9 and the CES-D at baseline and after completing the program.

Findings

We found that participants significantly improved on depressive symptoms from pretest to posttest. Furthermore, participants evaluated the program as easy to use and very helpful to them.

Discussion

Next, a RCT regarding the effectiveness of the program will be conducted. If the intervention shows to be effective, the program will be implemented. Many patients with HIV could then be reached and psychological care may be improved.

Oral Presentation Abstracts

Associations with taking medication and their relationship with medication adherence

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Cognitive factors, like beliefs, have been studied extensively as determinants of medication (non-)adherence, while the role of affect associated with taking medicines is largely unknown. In the present study (N=525) we investigated affect by assessing patients' first spontaneous associations with taking their medicines. With use of the affective imagery method, patients freely recalled the first association that came to mind. Three raters independently categorised all responses. Results showed that the associations with taking medication were related to self-reported medication adherence: patients who associated taking their medication with negative affect had the lowest adherence scores in our sample, while patients who associated taking their medication with the necessity of their medicines had the highest adherence scores. Results further suggested that negative associations were mainly affective and positive associations were mainly cognitive in nature. Our results support the idea that first associations (including affect) should be considered an important determinant of medication adherence. Interventions to increase adherence have the potential to be more effective when the role of affect as a determinant of adherence is considered.

Oral Presentation Abstracts

Association between parental numeracy and children's BMI

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Background

Low numeracy skills are associated with low weight-related information processing skills and higher body mass index (BMI) in adults. However, the impact of parental numeracy on children's BMI is unknown. This study investigates the relation between parental numeracy and children's BMI. Further, we explore how children's BMI and parental numeracy skills are related to weight related information processing, namely portion size estimation skills, nutrition label- and growth charts comprehension.

Methods

Numeracy, portion size estimation skills, nutrition label- and growth charts comprehension was assessed in 326 parents using face-to-face interviews. Body weight of parents and their child was measured.

Findings

Parental numeracy predicted a higher risk of child overweight (OR = 0.62, $p = 0.010$) or obesity (OR=0.27, $p<0.001$). Lower parental numeracy skills were associated with poorer portion size estimation skills ($r=-0.13$, $p=0.018$), growth charts- ($r=0.274$, $p<0.001$) and nutrition label comprehension ($r=0.26$, $p<0.001$), with numeracy emerging as the strongest predictor for overweight and obesity.

Discussion

This is the first study identifying parental numeracy as predictor in children's overweight and obesity. Implications for prevention and intervention in childhood obesity are discussed.

Oral Presentation Abstracts

Testing the vicarious licensing effect in healthy eating: results of two randomised experiments

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Background

Vicarious licensing perspective suggests that seeing fellow in-group members make progress towards a shared group goal may cause high identifiers to lower their personal efforts towards that goal. The applicability of vicarious licensing to healthy eating was tested in two experiments.

Methods

Study 1 (n=87) included a manipulation of identity content: participants were shown images portraying Australians as a healthy or unhealthy nation. Choices from an online restaurant menu constituted the outcome variable. Study 2 (n=117) involved a similar manipulation in the context of female identity, using the amount of food eaten in a taste test as the outcome. Both studies included a measure of group identification. Results were analysed using multiple regression techniques.

Findings

In both studies, healthiness of the presented social images interacted with participants' group identification to predict eating behaviour. Consistent with vicarious licensing, high identifiers chose higher calorie food from an online menu and ate more food in a taste test when presented with images of their in-group members behaving healthily.

Discussion

The results suggest that vicarious licensing may contribute to unhealthy eating.

Oral Presentation Abstracts

Social participation, self-esteem and quality of life in people with multiple sclerosis

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Background

The aim of this study is to explore whether self-esteem and social participation are associated with the physical and mental domains of quality of life in people with multiple sclerosis, and whether self-esteem can mediate the association between social participation and health-related quality of life.

Methods

We collected information from 118 consecutive MS patients (response rate: 76.1%, 72.2% women), who completed the Participation Scale, the Rosenberg Self-Esteem Scale and the Short-Form Health Survey for measuring the physical (PCS) and mental (MCS) components of quality of life. Multiple linear regressions and structural equation modeling were used for statistical analyses.

Findings

Age, gender, disease duration, functional status (EDSS) and participation were significant predictors of PCS, explaining 55.4% of the variance. No mediating effect of self-esteem was found between participation and PCS. Self-esteem mediated the association between social participation and MCS (Est./S.E.=-4.872; p<0.001), and along with EDSS it explained 48.3% of the variance in MCS.

Discussion

Self-esteem mediates the association between social participation and MCS, but not PCS, and can be used in intervention and educational programs for patients and their caregivers.

Oral Presentation Abstracts

The role of planning and action control on avoiding exposure to pollution by using masks

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Background

Beijing is one of the most air-polluted mega cities in the world with over 100 haze days every year. Wearing face masks to avoid exposure to air pollution becomes necessary for the local peoples in the winter season. The aim of the current study was to explore the volitional determinants of the use of filtering facepiece respirators.

Methods

of the current study was to explore the volitional determinants of the use of filtering facepiece respirators. Methods: In a longitudinal survey, 164 young adults from Beijing, China, completed assessments at baseline (Time 1) and two weeks (Time 2) and four weeks later (Time 3). Planning, action control and face masks wearing were measured at three time points. A latent curve growth model (LCGM) was specified to reflect possible pathways of influence.

Findings

Planning, action control and face masks wearing linearly increased with time. The slope of action control mediated between slopes of planning and face masks wearing, with the standardized mediated effect is 0.88, 95% CI [0.66, 1.20].

Discussion

Results support a mechanism with a focus on volitional process, in which action control was a more proximal predictor of self-protective face mask wearing.

Oral Presentation Abstracts

Health theory in mobile technology apps supporting young people's long-term condition/s management: a systematic review

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Background

Prevalence of long-term conditions is rising in young people. Mobile technologies featuring software program applications or 'apps' are well used by young people for social networking and gaming. Apps are being increasingly utilized in health contexts. This systematic review's objective was to assess the effectiveness of smartphone and tablet apps in supporting young people's management of their physical long-term condition/s.

Methods

The search strategy combined indexed and free-text terms. Two reviewers independently searched hits generated from five bibliographical databases and identified articles meeting the inclusion criteria. Data extraction and quality assessment tools facilitated consistent analysis and synthesis. Inter-rater-reliability was assessed.

Findings

The search returned 1120 hits; four articles were included (one pilot randomized-controlled-trial and three quasiexperimental studies) with a combined sample size of 46. Apps were aimed at diabetes (n=2), asthma and cancer management. Further heterogeneity e.g. outcome measures and follow-up times prevented meta-analysis. Health psychology models were notable by their absence, with only one app reporting theoretical underpinning.

Discussion

The disparity between the volume of health apps available and the sub-set based on empirical evidence is of concern.

Oral Presentation Abstracts

Supporting adherence to asthma medication: what happens in primary care?

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Background

Clinical guidelines recommend primary care practitioners to support medication adherence. In asthma management, little is known about how practitioners deliver this routinely. Reliably assessing adherence support in routine care and uncovering relevant determinants can help identify avenues for intervention and guideline implementation.

Methods

Within a European study (ASTROLAB), 117 French general practitioners answered an online survey on 25 adherence support activities, sociocognitive determinants, professional background, and demographics. We examined items using item-response and classical test theory, and explored associations between adherence support and determinants.

Findings

Substantial variability in practitioner responses was found; some activities were reported by most practitioners (education about medication, 98%), while others were rarely performed (encourage reminders use, 23%). Twelve activities formed a unidimensional scale ($\alpha=.75$; $H=.37$; mean=7.2 [2.8; range 0-12). Support scores were unrelated to background variables, but showed significant associations with sociocognitive determinants ($\rho=.19$ - .31).

Discussion

Routine adherence support can be assessed reliably in primary care via practitioner self-reports. Targeting sociocognitive variables such as self-efficacy and perceived norms could lead to better guideline implementation.

Oral Presentation Abstracts

Community based prevention: does the Communities That Care (CTC) framework apply to Germany?

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Background

The CTC Youth Survey, is based on a meta-analysis of longitudinal studies of youth development to identify malleable risk and protective factors for adolescent problem behaviors, e.g., substance use. CTC was developed in the U.S. and was transferred to Germany recently. This study aims at analyzing the transferability of the risk factors and their utility for the German context.

Methods

Self-reported data from N=978 students aged 12-15 years was analyzed applying sensitivity and specificity analyses as well as predictive validity using logistic regressions.

Findings

In general, the mean sensitivities of the risk factor scales ranged between 43% and 49% for the grades 6-9 and were lower than the respective specificities (73% - 77%). Favorable attitudes toward drug use and problems with family management showed good sensitivity scores; whereas, e.g., school grades and history of family problems did not. Odds ratios for the risk factors ranged from moderate to very strong.

Discussion

Although risk factors seem to be of universal validity, the measurement of those has to be adjusted thoroughly when transferred to other countries.

Oral Presentation Abstracts

Real-time decreases in cognitive functioning are associated with increases in high-calorie snacking: the SNAPSHOT study

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Background

Failures of dietary control and increases in weight are reliably associated with trait-level (betweenperson) deficits in the 'executive functions' (EFs) – the cognitive processes underpinning self-control. As EF also fluctuates within-people over time, the present study investigated whether people eat more high-calorie snacks at times when EF resources are depleted.

Methods

65 adults (50F, M age=38.9years) completed a trait EF questionnaire (BRIEF-A) before recording food intake and completing a computerised EF test (GoNoGo) every waking hour over 7 consecutive days using a wrist-mounted electronic diary (ProDiary). Data were analysed using multi-level modelling.

Findings

Slow reaction times on the hourly GoNoGo task (indicative of weak EF) were associated with increases in self-reported intake of high-calorie snacks ($p<.05$). Performance on the GoNoGo task significantly interacted with trait levels of EF ($p<.05$) in predicting snacking.

Discussion

Real-time reductions in EF efficiency are associated with increases in high-calorie snacking. This relationship is strongest in those with weak trait EF, indicating that individuals with EF deficits are more likely than others to snack in response to momentary reductions in EF resource.

Oral Presentation Abstracts

Predicting mental health after living kidney donation: a single-center prospective cohort study

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Background

Living donor kidney transplantation offers advantages to patients, however, involves risks to donors. In order to promote donor safety, this study investigated factors predictive of mental health after donation, based on stress models of Lazarus (1999) and Ursin & Eriksen (2004).

Methods

Living kidney donors (N=151) participated 2.5 months before, and 3 and 12 months after donation. Using multilevel linear models we examined whether appraisals, expectations (LDEQ), knowledge (R3K-T), social support (SSL), coping (COPE-Easy), and life events predicted psychological symptoms and wellbeing (BSI; PANAS; MHCSF); and whether stress (DASS) mediated these relationships.

Results

None of the factors predicted change in mental health. Lack of social support, expectations of negative health outcomes, lower appraisals of manageability, and an avoidant coping style were related to higher psychological symptoms. The latter three were mediated by stress. Lower social support, expectations of negative health outcomes, and lower positive appraisals of donation were related to lower level wellbeing.

Conclusions

This study identified risk factors for negative psychological outcomes after living kidney donation that should guide assessment and care.

Oral Presentation Abstracts

Informed Decision Making about prenatal screening: does it work?

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Background

Pregnant women in the Netherlands can make use of prenatal screening for Down's Syndrome (combined test) and/ or other congenital disorders (ultrasound at 20 weeks). Women are supposed to make an informed decision about participation. However, it is not clear whether they do, especially not for women from ethnic minority groups, those with lower SES and young women under 23.

Methods

Focusgroup discussions, and face-to-face interviews with Turkish, Moroccan, low SES, and young pregnant women were held using IPA for analyses.

Findings

Women mentioned various reasons for (usually) not taking part in Down Syndrome screening. There were both valid: 'my risk is low since I am young', and less valid reasons: 'Down Syndrome does not occur in my family'. Emotions played an important role. The ultrasound at 20 weeks was considered standard care and taken as opportunity to learn about the baby's sex.

Conclusion

Pregnant women make a conscious, but not always informed, decision about taking part in Down Syndrome Screening, which is not covered by insurance companies. They do not reflect upon taking part in standard care

Oral Presentation Abstracts

Interest in genomic testing and risk communication preferences in women from BRCA1/2 negative families

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Scientific advances have allowed the development of multiplex gene panels in which many genes are assessed simultaneously in women who have tested negative for BRCA1/2. We examined correlates of interest in testing for genes that confer modest/moderate breast cancer risk and risk communication preferences. Women who were firstdegree relatives of breast cancer patients who tested negative for BRCA1/2 mutations (n = 124) completed a survey assessing testing interest and risk communication preferences. Interest in genomic testing was high (71%) and even higher if results could guide risk-reducing behavior changes (81%). Participants preferred to receive risk communications from a variety of sources including: primary-care physicians (83%) printed materials (69%) and the Internet (60%). In multivariable analyses, factors that were independently associated with interest in genomic testing were: younger age ($p = 0.017$), moderate to high levels of cancer worry ($p = 0.003$), and fruit and vegetable intake ($p = 0.048$). Our findings provide guidance for health psychologists and researchers, who can help develop and test genomic risk communications, promote informed decision-making and customize behavioral interventions.

Oral Presentation Abstracts

Decisions about requesting secondary genomic findings: Intentions versus reality among patients undergoing diagnostic genomic sequencing

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Background

Next generation sequencing is increasingly used in clinical settings, prompting debate about returning secondary findings (SFs)—health-relevant information unrelated to the indication for sequencing. This study investigated intention to request SFs, actual requests, and their correlates among adult patients undergoing diagnostic genomic sequencing.

Methods

85 participants were randomly assigned to learn about six categories of non-medically actionable SFs after receiving their diagnostic results (versus participants receiving diagnostic results only). Next, they completed measures (intentions to request SFs, demographics, health literacy, numeracy, knowledge). Actual requests required a phone call and were tracked.

Results

78% of participants intended to request at least some SFs; only 35% actually requested them. Correlates of intentions (race/ethnicity, education, health literacy; $p < .05$) differed from correlates of requests (race/ethnicity; $p = .049$). Compared to participants who did not request SFs, those who requested them perceived higher benefits ($p = .02$) and lower risks ($p = .01$) for learning their SFs.

Discussion

This study design differentiated intentions and requests for SFs among patients undergoing diagnostic genomic sequencing and identified correlates of requests. Findings can help guide best practices for returning SFs in clinical settings.

Oral Presentation Abstracts

Family disease history and perceived risk for Type 2 diabetes, cardiovascular disease, cancer and depression

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Background

We compared relations between family disease history and perceived risk for Type 2 diabetes (T2D), cardiovascular disease (CVD), cancer and severe depression.

Methods

Participants were Finnish 25–74-year-olds (N=5024) from a population-based FINRISK 2007 study. Perceived absolute risks for diseases were measured as ordinal variables (1 to 5). Regression analyses were performed to examine the effect of family history (parents and siblings), demographics and behavioral risk factors (e.g. smoking) on perceived risks.

Findings

Family history was most prevalent for cancer (39%), least for depression (19%). Perceived risk was highest for CVD, lowest for depression. In regression analyses, relation between family history and perceived risk was strongest for T2D ($\beta=0.35$, $p<0.001$), weakest for depression ($\beta=0.18$, $p<0.001$). The association remained significant ($p<0.001$) for all diseases after adjusting for demographic and behavioral risk factors. For depression the association of family history and perceived risk was stronger for women than men ($p<0.001$).

Discussion

Relation between family history and perceived risk varies across diseases. Future studies should examine whether the effect of genetic risk information on perceived risk varies similarly across diseases.

Oral Presentation Abstracts

Perceived risk predicts Type 2 diabetes but not weight gain in a five year follow-up

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Higher perceived risk for certain disease should lead to actions that decrease the risk. Aim of this study is to examine does risk perception predict T2D in random sample of general population. Participants aged 45-74 years from the FINRISK study (n=1109) were invited to follow-up study 5 years later. 80% of the high risk group for T2D (n=432) and 84% of the other group (n=477) participated in the follow-up. Weight, height waist, hip, 2 hour fasting glucose test were measured in a health examination. Absolute perceived risk for T2D, selfefficacy, outcome beliefs and health behaviors were self-reported.

High risk group had higher perceived risk than other group but no difference in self-efficacy or beliefs. After five years, 34% of high risk group and 6% of other group were diagnosed as having T2D. Perceived risk did not predict weight or waist changes but those who had higher perceived risk were more likely to have T2D in both groups OR=1.78 (1.44-2.21). Perceived risk predict new T2D cases but not weight or waist increase in high and normal risk groups.

Oral Presentation Abstracts

Why do nurses get fatigued? Energy expended, stress or ego depletion?

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Background

Fatigue increases throughout the working day and may lead to inefficiency and errors. Why do people become fatigued: because of the cumulative effects of energy expenditure (EE), the stress experienced or the accumulation of ego depleting demands? These questions were examined in nurses assessed in real time over two work shifts.

Methods

100 nurses completed electronic diaries which measured fatigue, tense arousal (stress) and work demand every 90 minutes. EE was measured continuously using the Actiheart system. The determinants of fatigue were tested in two ways by predicting fatigue from EE, stress and work demands: accumulated over a shift and for the previous two occasions (3 hours) using distributed lagged models with allowance for passage of time and concurrent values of determinants.

Findings

Neither EE nor work demand predicted fatigue in either statistical model. However the accumulation of tense arousal (Beta .035, $p < .002$) and current levels (Beta .147 $p < .001$) did.

Conclusion

Nurses do not get fatigued because of the energy they have expended nor the demands they have experienced but, in part, because, they have been stressed.

Oral Presentation Abstracts

Psychological structures of time in a stressful work context among nurses

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In occupational health psychology, the lived experience of time is mainly linked to stress and its related health problems (burnout, depression or muscular pain). However, time can also be perceived as a health protector under specific conditions as a fundamental dimension of nurses' professional activity through time constraints (complex situations; emergencies; responsibility of patients' lives). Semi-structured interviews were conducted with 16 female nurses from 28 to 50 years old in a 2-steps design to explore among others the lived experience of time. According to a phenomenological analysis of their discourses, we can assess three structures of time among nurses. First, the latitude of choice and the freedom to plan schedules is the most important positive factor developed in relation to family life and leisure. Second, working time is made both of slow and fast moments of activities that allow nurses to keep a protecting balance in their lived experience. Third, time is elaborated through the lenses of career and longterm personal evolution. These findings have implications for organisational management in terms of protecting and developing workers' self-control on working time.

Oral Presentation Abstracts

Stress and relief in pediatric cancer healthcare workers

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Background

The objective was to examine the impact of sources of stress and of relief in health professionals.

Methods

The subjects were 55 physicians and nurses in a pediatric cancer institute. They were administered questionnaires assessing Perceived stress (Sheldon Cohen), Compassion Fatigue (Figley), Burnout (Maslach and Melamed-Shirom), and sources of stress and actions providing relief for stress (Kreitler).

Findings

The results showed that the major sources of stress were related to work conditions, family, and daily arrangements rather than to medical or psychosocial issues of patients. Doctors and nurses did not differ in stress sources. The major relief factors were physical, social, entertainment, and emotional expression. Regression analyses showed that perceived stress was predicted significantly by both instigating and relief factors, more by lack of relief than by stress factors.

Discussion

The conclusions are that perceived stress is high in caretakers. It is due mainly to work and life conditions and may be reduced by relief factors. For reducing stress in health professionals it is recommended to improve work conditions and train them in applying stress relieving actions.

Oral Presentation Abstracts

Burnout, is it just a case of immature defence styles?

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Two studies investigating burnout in Irish Psychologists (N=174) and female trauma therapists (N=35) support the idea that emotional exhaustion and depersonalisation are merely the consequence of using immature defence styles, as measured by Bond's Defence Style Questionnaire. In particular, minor image distorting defences are related to both the tendency to become emotionally exhausted and to develop a detached and cynical view of the client. These findings suggest that the unconscious deployment of defences in order to maintain self-esteem and to lower anxiety may be a key factor in the development of and maintenance of burnout in caring professions such as psychology and therapists. With this in mind, supervisors of carers need to focus on the possibility of distortion as a self protective but inevitably self-destructive work behaviour in psychologists and therapists. This relationship between defences and burnout needs to be further replicated and examined across other occupational groups.

Oral Presentation Abstracts

Decision-coping styles of hospital nurses compared to their decisionmaking Performance

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The Melbourne Decision Making Questionnaire (MDMQ) is based on the assumption that use of different decision-coping styles, associated with different levels of stress, affects the quality of decision-making. The aim of the study was to assess the association between decision-coping styles and decision-making performance (DMP), measured both by self-ratings and supervisor ratings among hospital nurses. Data were collected in the Children's University Hospital Bratislava, Slovakia (N=105; 103 females; mean age 38.4yrs.; SD 8.9yrs.). Decision-coping styles were measured by the four dimensions of the MDMQ (self-report). Self-rated- and supervisor-rated DMP were measured by a visual analogue scale. The relationships were analysed using linear regression, adjusting for years of practice. Self-rated DMP was negatively associated with hypervigilance, buck-passing and procrastination ($\beta=-.22$, $-.27$ and $-.21$, respectively). Supervisor-rated DMP was not significantly related to any decision-coping style. The lack of any relationship of self-reported decision-coping styles to supervisor-rated DMP casts some doubts on the predictive validity of the measure.

Oral Presentation Abstracts

Illness perception profiles and their association with 10-year survival following cardiac valve replacement

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Background

To evaluate whether profiles of illness perceptions are associated with 10-year survival following cardiac valve replacement surgery.

Methods

In a prospective design, illness perceptions were evaluated in 204 cardiac patients awaiting first time valve replacement and again one-year post-operatively using cluster analysis. All-cause mortality was recorded over a 10- year period. At one-year, 136 patients were grouped into one of four profiles (stable positive; stable negative; changed from positive to negative; changed from negative to positive).

Findings

The median follow-up was 3063 days (78 deaths). After controlling for clinical covariates including markers of function, and psychological distress, patients who changed illness perceptions from positive to negative beliefs one year post-surgery had an increased mortality risk (HR = 3.2, 95% CI: 1.2 – 8.3, $p = .02$) compared to patients who held positive stable perceptions.

Discussion

Following cardiac valve replacement the development of negative illness perceptions over the first postoperative year predicts long-term mortality. Early screening and intervention to alter this pattern of beliefs could be beneficial and improve outcome.

Oral Presentation Abstracts

Illness perceptions as a marker for accelerated disease progression during predialysis care

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Background

Illness perceptions are associated with mortality in renal patients. However, no data is available regarding the relationship between illness perceptions and accelerated disease progression.

Methods

416 incident pre-dialysis patients participating in a prospective cohort (PREPARE-2) completed the Revised Illness Perception Questionnaire. Associations between illness perceptions, time until start of dialysis and change of kidney function (i.e. eGFR) over time, were investigated using Cox regression models and linear mixed modeling.

Findings

After adjustment for sociodemographic and clinical variables, dialysis started earlier and kidney function declined faster (ml/min/1.73m²/year) in patients with an increased belief that their disease is cyclical (HR=1.32 [95%CI 1.11;1.56]; additional change -0.64 [95%CI -1.16;-0.13]), has negative consequences (HR=1.47 [95%CI 1.18;1.85]; additional change -0.67 [95%CI -1.30;-0.04]) and causes negative feelings (HR=1.21 [95%CI 1.03;1.42]; additional change -0.65 [95%CI -1.13;-0.16]). Furthermore, kidney function declined faster in patients with an increased belief that their disease cannot be personally controlled (additional change -0.69 [95%CI -1.31;-0.09]) and understood their disease less well (additional change -0.53 [95%CI -1.05;-0.01]).

Discussion

Negative illness perceptions at the start of pre-dialysis care are a marker for accelerated disease progression

Oral Presentation Abstracts

Illness representations and coping predict the severity of atopic dermatitis: a 1-year follow-up

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Background

Illness representations and coping have been associated with disease-related impairment in patients suffering from different chronic diseases like COPD, tinnitus, psoriasis or atopic dermatitis (AD). However, this study is the first investigating whether illness representations and coping at the end of a rehabilitation clinic visit (T1) predict the severity of the disease 1 year later (T2) in AD-patients.

Methods

109 AD-patients filled in validated questionnaires to measure illness representations and coping at T1. At T2, all patients were asked to evaluate the severity of AD by means of the PO-SCORAD (response rate 55%).

Findings

18.4% of the AD-severity at T2 was explained by illness representations and coping ($p = 0.003$): The belief that the disease was caused by chance, that it will have a bad course as well as depressed reactions were positively associated with the disease severity at T2.

Discussion

This study indicates that illness representations and coping predict the severity of AD one year later. Future research should investigate the effects of cognitive restructuring on skin status in AD-patients.

Oral Presentation Abstracts

Illness perceptions or recurrence risk perceptions: what comes first? A longitudinal examination among cardiac patients

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Background

Previous research suggested that illness perceptions provide the basis for illness risk perceptions through an inductive reasoning process. The present study assessed the causal direction of relationships between illness and recurrence risk perceptions among cardiac patients.

Methods

A longitudinal study was conducted among 116 patients undergoing coronary angioplasty. Self-report questionnaires measured perceived recurrence risk and illness perceptions one day and one month after catheterization.

Findings

Cross-lagged Panel Model Analyses revealed that higher perceptions of timeline, consequences, cause (attributing the disease to aging), and emotional representations of illness at hospitalization led to higher risk perceptions one month later. Perceived personal control was the only illness perception with bi-directional causal effects: higher perceived personal control at hospitalization led to higher risk perceptions one month later; and higher risk perceptions at hospitalization led to lower personal control one month later.

Conclusion

The findings suggest that the associations between risk and illness perceptions can only partly be explained by inductive reasoning. Affective and defensive processes are suggested as complementary explanations for the observed associations between risk and illness perceptions.

Oral Presentation Abstracts

Illness representations, coping, and illness outcomes in people with cancer: systematic review and meta-analysis

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Background

Cancer is a leading cause of illness burden, with people with cancer at high risk for negative health and coping outcomes. The Common Sense Model (CSM) has been employed widely to understand individual responses to cancer. However, research is disparate, and a systematic review examining the associations of the CSM's illness representation dimensions with health and coping outcomes in people with cancer, had not yet been conducted.

Methods

A systematic literature search identified 51 relevant studies, with 36 providing sufficient data for metaanalysis. A narrative review of remaining studies was conducted.

Findings

Random-effects meta-analysis revealed, for example, small to moderate effects (Fischer's $Z = .267 - .287$) between personal control, problem-focused coping, and cognitive reappraisal, and moderate to large effects ($Z = .355 - .731$) between identity, consequences, emotional representations, and distress.

Discussion

This first systematic review and meta-analysis indicates how illness representations relate to illness outcomes in people with cancer. High heterogeneity suggests potential moderators of the relationships between illness representations and health and coping outcomes, including diagnostic, prognostic, and treatment related variables.

Oral Presentation Abstracts

“Motivation gets you started, habit keeps you going”: Feasibility of a habit-based physical activity intervention

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Background

Habit formation is a proposed mechanism for behaviour maintenance. However, very few studies have adopted this framework for interventions. We tested feasibility for a theory-based behaviour change intervention encouraging women to embed exercise into daily life routines.

Methods

The EASY LiFE study recruited 13 women who completed performance-based (Short-Physical-Performance-Battery) and psychological self-report measures (intention, self-efficacy, planning, action control, habit strength, quality of life) at baseline and four-months follow-up. The intervention include 7 group sessions and 2 phone calls. We conducted t-tests and Wilcoxon signed rank tests to evaluate changes over time, and the Framework- Method to post-intervention interviews to evaluate program content, delivery and acceptability.

Findings

In total, 10 women completed the program and showed significant changes in their level of action control ($d=-1.2$), action planning ($d=-0.7$), habit strength ($d=-1.1$), and quality of life ($d=-0.6$). Participants valued the social support of the group, the behavioural practice with an exercise professional, and ‘education’ on habit formation.

Discussion

The theory-based framework showed feasibility for promoting life-style integrated balance and strength exercise habits.

Oral Presentation Abstracts

A qualitative data-prompted study of weight loss maintenance experiences using individual ecological data

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Background

This study aimed to advance understanding of psychological and contextual variables associated with weight loss maintenance (WLM).

Methods

Semi-structured, data prompted interviews were conducted with people who lost over 5% of their body weight in the previous year. For two months participants gathered WLM relevant data through ecological momentary assessment using online delivered surveys, WiFi connected activity monitors and scales, and through experience sampling. During the interview, participants were presented with reports based on their own data including weight and activity graphs; correlations of psychological factors; self-generated real time notes; and pictures. The data was analysed using the Framework method.

Findings

Twelve participants were interviewed after 2 months (mean age 50.58, SD=9.92; 3M, 9F). Five main themes associated with successful WLM emerged from the data: (1) change in motivation, (2) shift from effortful selfregulation towards (3) habit formation, (4) relying on plentiful cognitive resources, and (5) supportive environment.

Discussion

This study used mobile and wireless devices to obtain data that was used to stimulate narratives and to explore WLM.

Oral Presentation Abstracts

Moderation effect of BMI on unhealthy eating habits

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Background

Unhealthy eating habits are a barrier against diet. However, some people maintain a healthy body despite their habits. This study examined the difference of influences of unhealthy eating habits between people with BMI below and above healthy levels. Method: 368 female participants completed an online questionnaire including measures of snacking habit (SRHI), diet intention, unhealthy willingness (reactive motivation), behavioral control (internal and external control), and BMI. Two weeks later, subsequent consumption of snacks (FFQ) was measured.

Methods

The consumption of snacks was determined by unhealthy willingness, external control, and snacking habits. Diet intention and internal control had no effect on the consumption. Moreover, the process analysis indicated a moderated mediation effect of BMI and unhealthy willingness on the strength of habits. Unhealthy willingness mediated the influence of snacking habits only among people with BMI above healthy levels.

Discussion

People with a healthy body tend to eat snacks as a result of habitual routine. People who are overweight tend to eat snacks reactively to their habits. The study discussed the importance of tailored approach to dieting depending on BMI.

Oral Presentation Abstracts

Can it work? Barriers to delivering Problem-Solving Treatment in a low vision rehabilitation setting

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Background

Limited service uptake and availability frequently prevent the management of depression in vision impaired adults. The aim of this study was to identify barriers and enablers to the implementation of Problem-Solving Treatment (PST) in a national low vision rehabilitation setting, when delivered by rehabilitation staff over the telephone.

Methods

Twenty-two staff completed a semi-structured interview. Barriers and enablers were identified using inductive thematic analysis and were mapped to predefined themes. Themes were grouped under four key domains: individual (professional); individual (client); intervention; and environment/organisation factors.

Findings

Frequently reported barriers were a lack of role recognition (professional), poor understanding of PST (client), no face-to-face contact (intervention) and limited organisational awareness of PST (environment/organisation). Enablers included finding PST rewarding (professional), recognising benefits early in the treatment (client), a practical focus (intervention) and comprehensive PST staff training (environment/organisation).

Discussion

Offering PST in low vision services may be feasible with sufficient resources to ensure staff delivery is fully-supported, PST is effectively communicated and promoted and flexibility is offered around the mode of delivery.

Oral Presentation Abstracts

CaRe QoL Chronic Heart Failure: a care-specific QoL PROM based on patient's perspective

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Background

Many PROMs exist measuring care-outcomes as perceived by patients to optimizing care. However, the outcomes measured are mainly determined by healthcare professionals. Moreover, measuring long-term care outcomes often relies on QoL questionnaires that are not care-specific. We aimed to develop a PROM for chronic heart failure (CHF) starting from patient's perspective.

Methods

Mixed Methods using focusgroups exploring care-outcomes that are most important for people with chronic heart failure, using IPA for analysis; Literature review listing all relevant PROMs; Survey amongst 3,053 patients (RR 36%) validating the newly developed CaRe QoL CHF.

Findings

Care-outcomes that mattered most to patients were 'being part of society', and 'feeling watched over'. None of the existing PROMs fully met patient's perspective. The CaRe QoL CHF proved valid and reliable.

Conclusion

People with chronic heart failure found it hard to name care-outcomes directly related to the care received. However, they identified themselves with the new CaReQoL CHF, especially since it was framed to the language they use. In order to properly measure patient outcomes these should fully incorporate patient's perspective and use their language.

Oral Presentation Abstracts

Health professionals' experiences of talking about weight management with overweight patients with knee osteoarthritis

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Background

By 2030, sixty per cent of the world's adult population could be obese. Overweight or obese is a risk factor for osteoarthritis, notably knee osteoarthritis (KO). Key guidelines recommend health professionals (HPs) provide weight management support and target weight loss in KO patients (2014) as this eases symptoms. However, little is known about weight management communication between HPs and KO patients. The aim was to understand HPs' experiences of talking about weight management with overweight patients with KO.

Methods

26 semi-structured interviews with a range of HPs who have contact with KO patients (Doctors, Physiotherapists, Nurses, Dieticians). Interviews were audio recorded, transcribed and analysed using thematic analysis.

Findings

Participants, regardless of discipline, received little or no training in behaviour change, including weight management. Initiating the topic was viewed as sensitive and HPs avoided or 'disguised' it. HPs regarded weight management as other people's responsibility and were pessimistic about their role.

Discussion

HPs have an important role in helping patients manage KO symptoms through weight management. However, they currently feel ill-equipped and are not adequately trained.

Oral Presentation Abstracts

Where we are now and how we can improve ART adherence support in Romania

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Background

Improving adherence support (AS) to antiretroviral treatment (ART) is a priority in Romania and worldwide. Understanding current support provided in clinical practice in light of behavioral theory is essential for developing effective and sustainable interventions. We explored practitioners' experiences of AS to assess care capacity and needs.

Methods

Ten semistructured interviews were conducted with practitioners from 6 HIV centers in Romania on topics regarding adherence assessment, key determinants, interventions used, perceived influences on their AS capacity. Verbatim transcripts were analyzed via thematic analysis, using behavior change theory and evidence-based taxonomies of personal adherence determinants and intervention content.

Findings

There is solid foundation for AS in Romania; services are usually delivered by experienced psychologists within multidisciplinary teams, with a high degree of intervention tailoring. AS services would benefit from adopting a more structured and focused approach to patient profiling and intervention delivery, conceptualizing and recording active intervention content using precise and standardized terminology, and monitoring intervention effectiveness.environment.

Results

Our qualitative investigation provided valuable information on improving AS, and will guide the implementation of organizational changes and practitioner training programmes.

Oral Presentation Abstracts

Optimising acceptability and feasibility of a physical activity intervention for adults with Type 2 diabetes

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Background

To optimise a theory-based physical activity behaviour change intervention 'Movement as Medicine for Type 2 Diabetes (MaMT2D)' for use in routine primary care.

Methods

An open pilot study in two primary care practices. Six healthcare professionals were trained to deliver MaMT2D to adults with Type 2 diabetes (N=28). A qualitative process evaluation identified opportunities for intervention optimisation and barriers/enabling factors to implementation. Video recordings of consultations assessed fidelity of intervention delivery by professionals.

Findings

Barriers and enabling factors to patient acceptability were cognitive burden of intervention components and increased knowledge/positive beliefs about the impact of physical activity on glycaemic control respectively. Professionals reported few opportunities to practice delivery of behaviour change techniques (BCTs) and negative beliefs about their capabilities for intervention delivery. A key enabling factor was transferability of MaMT2D to other clinical populations. Fidelity of intervention delivery by professionals was satisfactory. Optimisation involved improved access to content on delivery of BCTs in professional training and reformatting of patient materials.

Discussion

An open pilot facilitated optimisation of MaMT2D to maximise acceptability and feasibility in primary care.

Oral Presentation Abstracts

Self-management of diabetes in Chennai, India: What helps and what does not help

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Background

Diabetes self-management refers to the way in which patients adhere to their recommended regimen including diet, exercise, medication, and self-monitoring. Research indicates diabetes self-management is related to a range of psychological outcomes (e.g., distress, quality of life, coping). The present study aims to explore experiences of diabetes self-management among Indian patients.

Methods

Using semi-structured interviews, 50 patients with Type II diabetes were asked about their experiences of managing their illness, specifically focusing on what helped and did not help in successful self-management. The interviews were transcribed and analyzed using Interpretative Phenomenological Analysis.

Findings

Nine themes emerged from the analysis: (1) illness knowledge and discovery, (2) illness beliefs, (3) symptoms guide behaviour (4), using multiple strategies, (5) locus of control, (6) financial situation, (7) social support, (8) cultural perceptions, (9) patient-physician relationship.

Conclusion

The study findings suggest that diabetes self-management is related to a range of psychosocial and culturally specific variables. Further, these findings can guide the design of future self-management interventions in culturally diverse populations.

Oral Presentation Abstracts

Understanding immigrants' access to Child Health Surveillance Services in Portugal: a grounded-theory approach

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Barriers to adult immigrants' access of health services have been identified: communication problems; health services' bureaucracies; health-care providers' biases; low SES (e.g. Dias et al., 2009; Straub, 2012). Nevertheless, few studies have focused on immigrant children (Mendoza, 2009). This study developed a Grounded Theory (GT) on the determinants of immigrants' access to Child Health Surveillance Services (CHSS) in Portugal. 5 focus groups and 10 individual interviews were conducted, including: 17 Cape Verdean, 12 Brazilian and 7 Portuguese caregivers, from heterogeneous SES; allowing the identification of common and specific determinants of immigrant and Portuguese caregivers' access to CHSS. Data was analyzed using a GT methodology (Strauss & Corbin, 1990). (Not)Go to CHSS is the theory's nuclear concept. Its common main determinants were: perceptions of CHSS usefulness; consultation scheduling; vaccination as the perceived main activity of CHSS. Immigrants specific determinants of CHSS access were: degree of access to primary health care, related to (not)having social support and to immigrants' legal status in Portugal; (cultural)differences in health surveillance conceptions. These findings may contribute to improve immigrants' access to CHSS.

Oral Presentation Abstracts

'I feel useless and dependent on others': South Asian patient experiences of Haemodialysis

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Background

Owing to language barriers, less is known about how patients of South Asian origin cope with the haemodialysis (HD) treatment regimen, despite increased risk of end-stage renal disease. In the current study, focus groups were conducted with patients who communicate primarily in Gujarati, Punjabi or Urdu, with the aim of unearthing experiences of living with renal failure.

Methods

Seven focus groups facilitated by bilingual researchers, were held across four NHS Trusts. Twenty-eight patients participated (15 males and 13 females). Thematic Analysis was used to explore the data.

Findings

Six themes were identified; the instability of day-to-day life, social support as a double-edged sword, lifestyle restrictions, mood on dialysis, access to organs and communication with health professionals.

Discussion

There are commonalities in patient experiences across different cultural groups, signalling the challenges associated with HD and living with renal failure. For those with limited English, communication through other people poses a barrier to illness ownership. Depressive symptoms feature prominently in patient descriptions of mood on dialysis and warrant advances in culturally relevant screening and intervention.

Oral Presentation Abstracts

UK Foodbank client experiences and their barriers to fruit and vegetable consumption: A qualitative investigation

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Background

UK Foodbanks have unmasked widespread food poverty. Lack of a cold chain means Foodbanks cannot provide fresh fruit and vegetables (F&V). Foodbank client's experiences and their ability to store and prepare fresh foods were explored.

Methods

Qualitative interviews with 18 Foodbank clients investigated what brought them to the service, how they coped with food insecurity, its impact on food choice, and their ability to store and cook fresh produce. Transcripts were analysed thematically.

Findings

Clients were grateful for the service, though some felt ashamed. Strategies to cope with lack of food included skipping meals or not using heating. School holidays were difficult for families without the benefit of free school meals. Those who were housed had greater ability to refrigerate and cook fresh foods than those who were homeless. F&V were deemed important, but an unaffordable luxury.environment.

Discussion

UK Foodbanks provide a valued nutritional safety-net and the inclusion of F&V provision would be welcomed. Assisting with winter fuel bills and meal provision outside the school day may alleviate some of the food poverty in this group.

Oral Presentation Abstracts

Critiques of health behavior change programs in the Global South (and what they miss)

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Background

Critics have raised several concerns about health behavior change in public health programs. However, there has been very little reflection about behavior change critiques specific to the Global South and, in particular, what health psychology has come to mean within those critiques. The aim of this paper was threefold: to describe existing critiques of behavior change, to reflect on how health psychology has been written into those critiques, and to determine what theoretical resources critiques may overlook.

Methods

A critical review of the published English language health behavior change literature from 1990 to 2015 was conducted. Particular emphasis was placed on reviewing literature that was critical of behavior change in the Global South.

Findings

The paper presents four types of critiques (instrumental, social-collectivist, ethical and governance); argues that critiques, despite their critical orientation, tend to be highly 'psychologized'; and that critiques may overlook important theoretical resources from critical psychology such as discourse, class and globalization.

Discussion

It is hoped that this paper will stimulate further debate about the role of critique in health psychology in the Global South.

Oral Presentation Abstracts

Lonely hearts don't check their hearts: social support in cardiovascular risk Screening

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Background

Few studies have investigated what factors promote regular screening for cardiovascular risk. The aim of this study was to investigate the relationship between social support and adherence to hypertension and blood cholesterol screening.

Methods

We analyzed data from the Spanish National Health Survey—a cross-sectional representative survey conducted by the Spanish Ministry of Health in 2012 (N=21 007). Participants reported whether they had their blood pressure and cholesterol levels measured in the previous 12 months. Social support was measured with a validated scale. Multiple logistic regressions were conducted adjusted for socio-demographic variables and multiple health-related factors. The obtained results were replicated in a previous wave of the survey (2007, N=29 478).

Findings

Compared to individuals who reported sufficient social support, individuals who perceived a lack of social support were on average twice less likely to report participation in blood pressure and cholesterol screening.

Discussion

Increasing perceptions of social support can promote regular screening for cardiovascular risk. Future research should investigate what specific supportive behaviours most effectively increase screening participation among high risk populations.

Oral Presentation Abstracts

Disease-related appraisals and perceived social support in patients with chronic obstructive pulmonary disease

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Background

Disease-related appraisals (DRAs) are subjective meanings that patients attribute to their disease (i.e. threat, profit, obstacle/loss, challenge, harm, value). Previous research has emphasized the significance of DRAs through demonstration of their links with indicators of adaptation to living with a chronic disease. The aim of this study was to test whether DRAs are linked to perceived social support in a sample of patients with chronic obstructive pulmonary disease (COPD).

Methods

142 patients with COPD completed measures of DRAs and social support and were assessed with respect to clinical and laboratory indices of disease severity.

Findings

Patients with different degrees of disease severity did not differ significantly on DRAs or social support. Higher levels of social support were correlated positively with positive meanings attributed to the disease (i.e. profit, challenge and value; $P < .001$) and one negative meaning (threat; $P < .05$). Other negative meanings (obstacle/loss and harm) did not correlate significantly with social support.

Discussion

Subjective DRAs may be unrelated to objective severity of COPD. Higher social support may be viewed as facilitating positive DRAs, however these relationships are most probably bidirectional.

Oral Presentation Abstracts

Perceived social support buffers negative health outcomes

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Health outcomes of women victims of domestic violence were studied on 300 women in Georgia. The proposed model is based on the buffering hypothesis: experience of domestic violence is moderated by perceived social support and these two variables together affect health outcomes. We studied different forms of perceived social support - peer and family support, and organizational support - measured by Sarason et al. social support questionnaire. Various forms of domestic violence were studied by Psychological Maltreatment of Women Inventory, Tolman. The dependent variables were depression and anxiety respectively measured by Center for Epidemiologic Studies Depression Scale, Radloff, and State-Trait Anxiety Inventory. We did not find any difference among the effects of various forms of violence on health outcomes. Multiple regression showed that social support together with experiencing violence explains variance in dependent variables - with 32% for depression, and 25% - for anxiety. As expected, perceived social support plays a role of a moderator between negative, stressful experiences and health outcomes.

Oral Presentation Abstracts

Importance of social support for mental health of Lithuanian emigrants

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Objective

This study was intended to evaluate relations between social support and mental health indicators in a sample of Lithuanians emigrants.

Methods

A cross-sectional survey using self-report questionnaire (with social networks' support questions and Mental Health Continuum-Short form) was carried out in group of Lithuanian emigrants from 25 countries. The total sample included 620 respondents (80.2 percent females; mean age 32.2 years).

Findings

All aspects of Lithuanian emigrants' mental health (emotional well-being, social well-being, and psychological well-being) were significantly predicted by emotional and instrumental support from social networks. Duration of emigration, size of social networks in the country of emigration as though as gender, age or having a paid work were not related to any aspect of mental health. Still predictive value of all independent variables for mental health were quite low.

Conclusion

The results confirm that social support related to social networks of emigrants is important factor for their mental health indicators, but other aspects of emigration should be taken into account in order to have full picture of emigrants' mental health.

Oral Presentation Abstracts

Externalization of mental illness symptoms and economic crisis in order to predict perceived social support

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Background

An increasing psychological requests related to economic crisis has been recorded in the Italian population. Moreover “crisis-related” patients shows lower degree of perceived social support which could lead to psychological illness and suicidal ideation too.

Methods

Using an observational research design, the aim of the present study was to investigate – in a sample of patients (n=91) from the “Crisis and Psychopathology Observatory” – the relationship between the demand analysis (crisis-related vs. ordinary mental health care), the tendency for externalizing psychological problems (Cronbach's Alpha=.88) and perceived social support (Cronbach's Alpha=.81). In order to predict perceived social support ANOVA has been performed.

Analysis

The results showed an interaction between the tendency for externalizing psychological symptoms and the demand analysis: $F(1,90)=5.38$; $p=.02$. High psychological problems related to economic crisis combined to a low tendency of externalizing symptoms leads to a low perceived social support.environment.

Discussion

The present study gives prominence to psycho-social variables related to this new psychological complaint and suggest possible pathways in treating economic “crisis-related” patients.

Oral Presentation Abstracts

Self-determination theory and motivational interviewing in web-based physical activity promotion: long-term effects

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Background

This study assessed the long term effects of I Move, a web-based computer tailored physical activity (PA) intervention, based on self-determination theory (SDT) and motivational interviewing (MI).

Methods

A randomized controlled trial (n = 3165) was conducted, comparing three research conditions: 1) I Move; 2) an existing web-based computer tailored PA intervention, based on traditional health behavioral theories; 3) a control condition. PA behavior was assessed through self-report at baseline, 6 and 12 months. Intervention effects were evaluated using multilevel linear regression analyses.

Findings

At 12 months from baseline, I Move significantly increased weekly minutes of moderate to vigorous PA (ES = .13) compared to the control group, while the more traditional intervention did not achieve a significant effect on this outcome. The traditional intervention significantly increased weekly days with ≥ 30 minutes PA (ES = .11) compared to the control group, while I Move did not significantly influence this outcome.

Discussion

The results suggest that web-based computer tailored PA interventions might best include elements based on both SDT/MI and traditional health behavioral theories.

Oral Presentation Abstracts

Threat elicits a positive bias during health-related Internet search

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The Internet provides easy access to health information. Compared to traditional sources (e.g. doctors, brochures), information acquisition on the Internet is more self-guided. This gives room to biases. In general, subjective threat elicits preferential processing of positive information. Therefore, we predicted that health-related threat elicits a positive bias also during Internet searches about health issues. A two-wave longitudinal study with patients suffering from a chronic disease (N=208) and three experiments in which threat was induced (N=121) tested for long-term and immediate effects of threat on information acquisition during Internet search. The longitudinal study demonstrated that the stronger participants' health threat was, the stronger was their health self-esteem if they used the Internet frequently, but not if they used it rarely to acquire health information. The experiments showed that threat positively biases search term generation, link selection, memory, and evaluations of treatments after an Internet search. Thus, health-related Internet searches under threat might facilitate emotional coping with health threat, but they also contribute to biased perceptions of own health and potential treatments.

Oral Presentation Abstracts

The effects of a smartphone application intervention to stimulate fruit and vegetable intake

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Background

In a randomized controlled trial, we tested the efficacy of an intervention delivered via a smartphone application that communicated either textual or auditory persuasive health information.

Methods

After downloading the smartphone application, respondents were exposed to either text-based or audio-based tailored health information and feedback over a period of six months. In addition, a control condition was added in which respondents completed only the baseline and post-test measures. Within a community sample (N = 146), self-reported fruit and vegetable intake at six-month follow-up was our primary outcome measure.

Findings

A significantly higher fruit intake was found after exposure to the auditory information, especially in recipients with a poor perceived own health. In addition, a significantly higher vegetable intake was found for recipients with high health literacy after exposure to one of the interventions, whereas it was the highest in the control condition for low health literacy recipients.

Discussion

Auditory persuasive health information can lead to behavior change via our smartphone application. It is however worthwhile to investigate how recipients with low health literacy can benefit from persuasive health information.

Oral Presentation Abstracts

SMS reminders to increase accelerometer wear-time: a within-trial RCT comparing persuasive messages

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Background

Increasing accelerometer wear-time enhances the reliability of outcomes in physical activity research. Literature on persuasion suggests increased compliance with requests supplemented by a rationale. This study tested whether providing a rationale raises accelerometer wear-time.

Methods

A within-trial RCT was conducted during baseline data collection in a school-based physical activity intervention trial. Of 186 total participants (mean age=18.6), 97 (52%) opted to receive daily SMS reminders to wear their accelerometers. These 97 participants were then randomised to receive either succinct reminders or reminders that additionally included a rationale.

Findings

No significant difference in wear days was observed between those receiving SMS reminders (M=4.9, SD=2.2) and those not (M=4.4, SD=2.5) ($p=0.67$). Mean wear days did not significantly differ between the succinct reminder group (M=4.8, SD=2.3) and the rationale group (M=5.0, SD=2.0) ($p=0.82$).

Discussion

Additional reasons may be unnecessary for participants already motivated to wear an accelerometer. Selection bias might explain why receiving reminders was not associated with increased wear time.

Oral Presentation Abstracts

Challenges in qualitative interviewing about user experience in eHealth: moving beyond the superficial user interview

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Background

Study aim: To explore users' experiences with a fully automated smoking cessation program that simulates a therapeutic conversation. Main research question: What are the users' constructions of the program and their interactions with it?

Methods

Qualitative, in-depth interviews with Constructivist Grounded Theory.

What went wrong

We did not get rich data illuminating our research questions. When participants said something relevant to the research questions, this was coincidental – not the result of a good interview guide.

Possible solutions

Participants may volunteer more relevant information if one takes care in framing the interview clearly. Vignettes that represent a range of possible experiences may make it easier for the participant to position herself. A detailed description of an occasion when the program was used might give additional insights. Accepting that both interviewer and participant are involved in the knowledge construction may be necessary both methodologically and epistemologically.

Conclusion

Gathering rich qualitative data on an unexpected aspect of a mundane experience proved challenging. However, by framing the interview clearly, using vignettes and requesting detailed descriptions the co-construction of knowledge might be facilitated.

Oral Presentation Abstracts

Comparison of brief interventions in primary care on smoking and alcohol consumption in England

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Background

English clinical guidelines recommend regularly offering brief advice on smoking and alcohol consumption in primary care but incentives for doing so vary between the behaviours. This raises the question as to whether offering advice also varies between the behaviours.

Methods

Cross-sectional household surveys of 15252 adults in England during 2014. Recall of brief interventions on smoking and alcohol in the past year, socio-demographics, and smoking and alcohol consumption were assessed among smokers and excessive drinkers (AUDIT \geq 8) who visited their GP surgery in the past year.

Findings

Of 1775 smokers, 50.4% (95%CI=48.0-52.8) recalled having received brief advice on smoking. Smokers receiving advice were more likely to be older, female, to have a disability, more past-year quit attempts, greater nicotine dependence and post 16 qualifications. Of 1110 excessive drinkers, 6.5% (95%CI=5.1-7.9) recalled having received advice on their alcohol consumption. Those receiving advice had higher AUDIT scores and were more likely to be male.

Discussion

Whereas approximately half of smokers in England visiting their GP in the past year recall receiving advice on cessation, less than 10% of excessive drinkers recall receiving advice on alcohol consumption

Oral Presentation Abstracts

Beliefs, attitudes and practices of general practitioners, nurses and dietitians towards obesity: a comparative study

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Background

Literature has been indicating a lack of comparative studies concerning the beliefs, attitudes and practices of GPs, nurses and dietitians about obesity in primary care setting.

Methods

A cross-sectional survey, developed for the purpose of this study, was completed by 207 general practitioners, 258 nurses and 163 dietitians, working in primary care setting in the North of Portugal. Descriptive analysis and one-way ANCOVA were conducted.

Findings

Attitudes towards obese patients are mainly negative or ambivalent. However, dietitians are significantly different, holding more negative attitudes. They also differ by reporting higher perceived efficacy, fewer difficulties, higher engagement and lower frustration. Dietitians also use more frequently adequate practices and strategies related to behavioral change. On the contrary, GPs and nurses are ambivalent or pessimistic about their feelings and efficiency concerning obesity treatment.

Discussion

Dietitians emerge as the best prepared group to deal with obesity treatment being, apparently, less influenced by their negative attitudes. Health policies should promote healthcare professionals education, the increase of available resources and encourage multidisciplinary collaboration. More research is need concerning professionals willing to cooperate with each other.

Oral Presentation Abstracts

How do general practitioners make antibiotic prescribing decisions for patients with upper respiratory tract infection?

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Background

Over-prescribing of antibiotics is widespread and poses significant public health problems. Previous studies have identified generic factors involved in prescribing decision-making. This study used the 'Think-Aloud' method, where participants verbalise their thoughts while making decisions, to investigate how General Practitioners (GPs) make prescribing decisions.

Methods

In individual interviews, five GPs responded to seven patient scenarios by thinking aloud while making prescribing decisions. Scenarios were constructed to include features representative of real patients. Interview transcripts were coded for the information used in the decision process. An inductive approach identified further emergent themes.

Findings

Patient information used in the decision process included perceived illness severity, illness duration, and patient preferences. Duration was a key influence: when perceived as extended, decisions and associated justifications varied. Emergent themes included variation across GPs in a) interpretation of clinical features and corresponding guideline recommendations, and b) emphasis on the importance of shared decision-making.

Discussion

Over-prescribing of antibiotics may be linked to differing interpretations of patient information. Interventions aimed at improving prescribing may be more effective when tailored to take these differences into account.

Oral Presentation Abstracts

A qualitative investigation exploring how health-promoting behaviours are discussed in general practice

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Background

General practice is an essential existing network where health professionals have a captive audience to discuss and encourage patient participation in health-promoting behaviours. Currently, little research has examined the extent to which these behaviours are discussed between health practitioners and patients, and the context and content of these discussions.

Methods

Health professionals (N=20) in general practice settings participated in semi-structured interviews. Data were analysed using thematic analysis.

Findings

Health-promoting behaviours are discussed at most consultations; however, they are often brief, ad hoc, and with no formal process to the discussions. Reactive health discussions (discussions occur through discovery of a new condition/treatment of a presenting concern) or proactive health discussions (discussions occur through the need to change some aspect of the patients' health profile to prevent future health concerns) form the context of these discussions. Information giving was the common technique used to help change patients' behaviour with little elaboration or follow-up on these health messages.

Discussion

Health practitioners are discussing health-prompting behaviours with their patients; however, advice and guidance on delivering effective behaviour-modification programs may be needed.

Oral Presentation Abstracts

Post-training evaluation of healthcare practitioners' use of skills to support patients to make lifestyle changes

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Background

UK Department of Health advocates improving the public health capability of frontline staff by training them to “make every contact count”. This study aims to evaluate the effect of training in skills to support behaviour change on practitioners' consultations with patients.

Methods

Twenty practitioner-patient consultations were observed post-training (T1=11;T2=9), followed by audio-recorded reflective-feedback interviews. Training competencies and use of behaviour change techniques were assessed, and interview transcripts were thematically analysed.

Findings

Moderate-to-high levels of competence in skills' use were observed; this, and the use of BCTs, increased over time. Interpretation of emergent themes suggested that practitioner motivation to utilise the skills, reflect on their use, and identify barriers, facilitators and areas for improvement was underpinned by perceived value of the skills in supporting patients to make changes.

Discussion

Training which incorporates reflection skills and follow-up support facilitates the embedding of skills to support behaviour change into routine practice. This has implications for health psychologists working in public health who aim to equip frontline staff with skills to “make every contact count” and ultimately improve population health.

Oral Presentation Abstracts

Expecting the best and the worst: co-occurrence and temporal stability of optimism/pessimism in breast cancer

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Dispositional optimism is a key personality resource of resiliency among women with breast cancer. We examined a) whether future outcomes expectancies potentially include independent and concurrent positive and negative dimensions, b) the temporal stability of dispositional optimism, c) the predictive impact of Optimism/Pessimism on emotional distress

Methods

Design: a prospective cohort study of 750 women with breast cancer initiated shortly after surgery and followed up for two years. Assessments: LOT-R, HADS, treatment-related and demographic variables. Analysis: Structural Equation Modelling including Confirmatory Factor Analysis, Latent Profile Analysis, and Latent Growth Curve modeling.

Results

A longitudinal invariant bi-dimensional structure of LOT-R was confirmed, as was the temporal stability of optimism/pessimism over two years. Three latent profiles labeled Optimists, Pessimists, and Ambiguous were discerned. Baseline optimism inversely predicted emotional distress two years later. Women with higher education displayed higher degrees of pessimism and anxiety.environment.

Discussion

The co-occurrence of positive and negative future expectancies may indicate a caution defensive coping effort among women with breast cancer. Stability of dispositional optimism/pessimism emphasizes the importance of systematic efforts to enhance this source of resiliency.

Oral Presentation Abstracts

Attachment orientation, adherence to treatment, and psychological adjustment in individuals with skin conditions

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Background

It has increasingly been recognised that attachment orientation is associated with adjustment to chronic health conditions. This study aimed to test the mediating role of coping in the link between attachment and adjustment (indicated by appearance concern and adherence to treatment), in people with skin conditions.

Methods

Attachment orientation (ECR), coping (Brief COPE), appearance concern (DAS 24) and adherence to treatment were assessed through a cross-sectional online survey in 207 adults with skin conditions. Moderated-mediation model was used to test the hypotheses.

Findings

Defeatism coping partially mediated the link between attachment and appearance concern; insecure attachment was associated with use of defeatism coping and greater appearance concern. Additionally, higher attachment avoidance was directly associated with greater appearance concern. High attachment avoidance was linked to lower adherence to treatment but this association was not mediated by coping.

Discussion

An insecure attachment orientation is linked to poorer adjustment to skin conditions which can be partially explained by the use of defeatism coping strategies. Future interventions to improve adjustment in skin conditions should focus on the needs of people with insecure attachment.

Oral Presentation Abstracts

Can conscientiousness predict engagement with UK health behaviour guidelines?

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Background

There is growing evidence for a relationship between conscientiousness and health behaviours. However, it is unclear whether conscientious individuals meet health behaviour guidelines or are simply 'healthier' than their counterparts. Furthermore, a focus on individual health behaviours has led to a lesser understanding of conscientiousness and healthy lifestyles more generally. Therefore, this study examined conscientiousness alongside engagement with a number of important health behaviours.

Methods

879 adults completed an online questionnaire measuring conscientiousness, its lower order facets, and the behaviours smoking, alcohol intake and fruit and vegetable consumption.

Findings

Analyses revealed that total conscientiousness and its facets were positively associated with adherence to guidelines for each of the behaviours – and with an overall guideline adherence index. The results also identified the facet of industriousness as being the most important predictor of adherence.

Discussion

Low conscientiousness individuals appear to be less likely to engage in recommended health behaviour guidelines and this cumulative effect may have a significant impact on their health. This suggests that those low in conscientiousness may be a vulnerable population and require further assistance to meet guidelines.

Oral Presentation Abstracts

The impact of resilience on adolescents' self-esteem in Norwegian adolescents

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Background

The present study investigates gender differences on resilience and self-esteem as well as the association between five resilience dimensions (personal competence, structured style, social competence, social resources, family cohesion) and self-esteem, controlled for age and perceived stress.

Methods

The cross-sectional sample consists of 1239 adolescents 13-18 years from Mid-Norway. The participants responded on the Rosenberg Self-esteem scale, The Adolescent Stress Questionnaire and The Resilience Scale for Adolescents.

Results

Boys reported significantly higher mean scores than girls on self-esteem and on all resilience dimensions except social competence. Girls had higher mean scores than boys on perceived stress. Stress was significantly negatively associated with self-esteem in both genders, especially in girls. All resilience dimensions were positively and significantly associated with self-esteem controlled for age and perceived stress for both genders. However, all associations were stronger for girls than for boys.

Discussion

The results support that resilience is an important resource in association with self-esteem in adolescents controlled for stress, especially for girls.

Oral Presentation Abstracts

The link between personality traits and health behaviour. Can we find it in IHD patients?

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Background

Individual persons' peculiarities encourage to use innovative treatment programs oriented to change unhealthy behaviour. Knowledge about patients' personality and its effect on rehabilitation outcomes would help optimize treatment techniques. The aim of this work is to find links between ischemic heart disease (IHD) patient's personality traits and health behaviour.

Methods

Eighty IHD patients from rehabilitation hospital participated in our study. Validation of patients' suitability for investigation was done looking at these criteria: disease, new arrivals, agreeableness. "Readiness to change questionnaire" was used to evaluate health behaviour and NEO-FFI – personality traits.

Findings

Statistically significant positive Spearman's correlations were found between neuroticism and physical activity ($r=0.377$), agreeableness and diet ($r=0.320$). Kruskal-Wallis criteria showed statistically significant difference in physical activity change stages ($p=0.022$) of neuroticism. Mann-Whitney revealed that these differences are between precontemplation and action ($p=0.025$), contemplation and action ($p=0.014$).

Discussion

Our study confirmed links between personality traits and health behaviour in IHD patients. These findings prove that patients character features are important factor for rehabilitation outcome.

Oral Presentation Abstracts

Substance abuse among youth: knowledge and attitudes among medical Professionals

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Background

Substance abuse at a younger age can have serious health consequences in later adulthood. The main aims of this Swiss study were to provide an overview of substance abuse among children and youth up till the age of 16 and to collect assessments of medical professionals regarding the prevalence of these problems in a medical context and their willingness and ability for intervention.

Methods

The study comprised an online questionnaire survey of 1'200 Swiss medical professionals, 916 medical doctors and 284 nurses. Role security and therapeutic commitment were measured using an adjusted version of the SAAPPQ.

Findings

Substance abuse is most frequently reported of by school physicians and pediatricians, less by General Practitioners. Regression analysis suggests that both role security and therapeutic commitment are influenced by frequency of contact ($B = 1.79, p < .001$), and medical context (pediatric vs. non-pediatric) ($B = 1.11, p < .05$).

Conclusion

Medical professionals feel responsible but could benefit from different kinds of support including postgraduate training to identify risk groups, to use special instruments and to apply systematic procedures.

Oral Presentation Abstracts

Planning to be routine: automaticity as a mediator of the planning-behaviour relationship in healthcare professionals

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Background

Clinicians often have strong intentions to provide evidence-based care to people with type 2 diabetes. Intentions are an important predictor of behaviour, but do not guarantee enactment. Action planning (AP) and coping planning (CP) can help with intention enactment by creating cue-response links that promote automaticity. This study aimed to investigate whether the relationship between AP or CP and clinician behaviour operates indirectly through measures of automaticity.

Methods

Prospective correlational design with six nested sub-studies. Physicians and nurses (n = 427 from 99 UK practices) completed measures of AP, CP, and automaticity at baseline and self-reported their enactment of guideline-recommended advising, prescribing and examining behaviours 12 months later. We used bootstrapped mediation analyses.

Findings

Eleven of the 12 analyses showed either a full or partial mediation effect. AP operated indirectly on behaviour via automaticity for five of the six behaviours and CP for all six clinician behaviours.

Conclusion

The mechanism of automaticity creation inherent to planning was supported across six different behaviours and suggests that planning may be an effective strategy for promoting habitual behaviour in clinicians.

Oral Presentation Abstracts

Does acculturation orientation relate with doctor-immigrant patient relationships and immigrant health literacy?

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Background

Immigrants often have worse health than non-immigrants. Acculturation orientation (AO) - adaptation to a new culture or maintenance of a previous culture - can have an impact on immigrants' interactions with healthcare professionals, and their health literacy, both of which are important for the immigrant's health.

Methods

N=170 immigrant patients (M=54.38 years, SD=17.94, Range=23-96, 74.3% female) recruited from a hospital in Canada, participated in a paper & pencil questionnaire assessing AOs, different aspects of health literacy, and quality of life. Analyses were performed using SPSS 20.

Findings

AOs were associated with patients' perceived expectations of their doctor ($r=.56/.24/.32$). AO was associated with health literacy: adaptation was positively associated with stage of change of physical activity ($F(5,62)=2.945$ $p<0.05$), as well as physical activity and nutrition motivation self-efficacy ($r=.20/.17$); and less adaptation was negatively associated with physical activity motivation and maintenance self-efficacy ($r=.19/.18$). Improved integration was associated with increased quality of life ($r=.21$).

Conclusion

AOs should be considered when investigating ways to improve immigrant health, and when designing interventions to improve doctor-immigrant patient relationships and immigrant health literacy.

Oral Presentation Abstracts

Grief reactions and impact of patient death on pediatric oncologists

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Background

To examine pediatric oncologists' grief reactions to patient death, and the impact patient death has on their personal and professional lives.

Methods

The grounded theory method was used. Twenty-one Canadian pediatric oncologists at different stages of their career were recruited and interviewed about their experiences with patient death.

Findings

Oncologists reported a range of reactions to patient death including sadness, crying, sleep loss, exhaustion, and a sense of personal loss. They also reported self-questioning, guilt, feelings of failure and helplessness. The impact of these deaths had consequences that ranged from irritability at home, feeling disconnected from family members and friends, and becoming more desensitized towards death, to gaining a greater and more appreciative perspective on life. Professional impacts included concern about turnover or burnout at work and improving holistic care as a result of patient deaths.

Conclusion

Grief over patient death is a robust part of the pediatric oncology workplace and has an impacts on pediatric oncologist's personal and professional lives. Interventions that focus on how to help oncologists deal with these reactions are needed

Oral Presentation Abstracts

Do patients and physicians think the same about communication in cancer care?

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Health communication needs to lead patients' needs and expectancies. This research gives the floor to patients with severe cancer and to their physicians. It aims to define the ingredients of effective doctor–patient communication.

Semi-structured interviews were conducted with 15 patients with severe cancer (Mean age = 54.25 years, SD = 15.25, 62.5% female) and 15 physicians (Mean age = 48.4 years, SD = 11.72, 60% female). We conducted content analyses with IramuteqR software.

Results indicate that patients expected basic and interpersonal abilities from their physician. For patients it seems important to recognize their individual specificities and to build a relationship as a partnership. The patients seemed to privilege concrete behaviors, which could be viewed as an indirect source of support. Physicians expressed their difficulty to give clear and comprehensive information, to identify patients' needs and to build a relationship in a consultation. The organizational constraints and personal resources were highlighted to explain those difficulties.

The different expectations and experiences so far collected suggested how a physician, according to the patients, can pursue a specific communicative in cancer care.

Oral Presentation Abstracts

Motivations to care and health motivations: a qualitative study exploring the experience of family caregivers

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Background

The COM-B system adapted to family caregivers analyses health capability through capabilities, opportunities, and motivations. Focusing on motivations, this study investigated the motivations to be a family caregiver and the motivations to maintain one's own health.

Methods

Semi-structured interviews were conducted with 14 caregivers of stroke victims (France: n=8; Luxembourg:n=6; 50% male; age 63.6 resources to attain optimal health. Verbatims about their motivations to care for their relative and their motivation to maintain their own health were open-coded. Items were built and validated by consensus with an expert group.

Findings

Motivations to care for a relative included the sense of duty, fear of guilt or deception, perceived need and feelings like love. The motivations to maintain personal health were intrinsic (self-; family-oriented), related to caregiving, and extrinsic (induced by relatives and material needs) and encompass amotivation.

Conclusion

It is relevant to integrate feelings, anticipated regret, moral norms and health value to the COM-B system adapted to family caregivers. Identifying their contribution to health capability will help orient psycho-educational interventions implementation.

Oral Presentation Abstracts

Implications of stroke for caregiver outcomes: findings from the ASPIRE-S study

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Background

Informal caregivers are vital to long-term care of stroke survivors. However, caregivers may not receive supports they require from hospitals and community health services, with implications for carer outcomes. This study examined caregiver well-being and satisfaction with services in the context of stroke.

Methods

Data was collected as part of the ASPIRE-S study, a prospective study of secondary prevention and rehabilitation 6-months post-stroke. Carer assessment included measuring demographics, satisfaction with care, psychological distress and vulnerability, using established measures. Logistic regression analyses were performed using STATA 12.

Findings

Analyses from 162 carers showed dissatisfaction (37.9%) with community and hospital services, and notable levels of anxiety (31.3%) and depressive symptoms (18.8%). Caregiver anxiety was predicted by stroke survivor anxiety (OR=3.47, 95% CI 1.35-8.93), depression (OR=5.17, 95% CI 1.83-14.58) and cognitive impairment (OR 2.35, 95% CI 1.00-5.31). Caregiver depression was predicted by stroke survivor anxiety (OR=4.41, 95% CI 1.53-12.72), and depression (OR=6.91, 95% CI 2.26-21.17).

Conclusion

Findings indicate that caregiver and stroke survivor well-being are interdependent. Implementation of early interventions directed at psychological factors are likely to reduce risk of negative outcomes.

Oral Presentation Abstracts

Loneliness predicts dementia-caregiver burden better than extent, nature and length of caregiving or support service-use

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Background

Caring for a spouse with dementia can lead to high levels of burden and stress, which may ultimately compromise caregivers' psychological health and quality of life. We examined contributing factors to caregiver burden to inform the development of targeted caregiver interventions.

Methods

226 spousal dementia caregivers completed standardised psychological (depression, anxiety, self-efficacy), social (loneliness, social isolation), caregiving (length and extent of caregiving, support service-use) and burden measures, as well as measures of care-recipient symptom severity and disability, as part of a longitudinal study on caregiver cognitive functioning.

Findings

Burden was not related to length, nature or extent of caregiving, or support service-use. Depression, self-efficacy for symptom management, and symptom-related distress significantly explained 55% of the variation in caregiver burden; however, emotional loneliness and social isolation made additional unique contributions ($\Delta R^2=.03$).

Conclusion

Higher levels of burden are primarily related to caregivers' psychological wellbeing, social isolation and loneliness, rather than level of disability, length or extent of caregiving. Interventions need to address the impact of dementia care on loneliness and social isolation to protect caregivers from the stresses associated with caring.

Oral Presentation Abstracts

The impact of carer stress on institutionalisation of care recipients: systematic review and meta-analysis

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Background

In the caregiving literature there is a belief that higher levels of carer stress could undermine the sustainability of homecare. However, this has not been systematically analysed. Therefore we systematically reviewed and meta-analysed the prospective association between carer stress and subsequent institutionalisation of older carerecipients.

Methods

Systematic literature search of prospective studies measuring carer stress at baseline and institutionalisation at follow-up. The standardised mean difference between stressed and non-stressed carers was the primary measure of effect.

Findings

The search yielded 6,963 articles. After exclusions 54 papers were analysed. The meta-analysis found that carer stress has a negligible effect on institutionalisation of care recipients (SMD=.05, 95%CI=.04-.07; I²=79.2%; p<.001). The sensitivity analysis found that estimates reduce over time, with larger and better quality studies.

Conclusion

It appears that over time larger and better quality studies found less of an effect of carer stress on institutionalisation. The results suggest a need to re-examine the belief that higher levels of carer stress could undermine the sustainability of homecare.

Oral Presentation Abstracts

Emotional connection to help couples cope with cancer: the role of verbal and nonverbal exchanges

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Background

Cancer is a significant stressful situation that could lead to emotional disruption for patient and its partner. Intimacy, defined as a process in which one person expresses feelings to another and results of the other's response to this revelation (Reis & Shaver, 1988), has identified as a potentially factor of psychological adjustment to cancer (Manne et al., 2004). The quality of couple interactions (e.g. self-disclosure, physical proximity) could improve intimacy and determine their adjustment to cancer. This research aims to determine the impact of emotional connection between partners on their 1) perception of intimacy and 2) adjustment to digestive cancer.

Methods

Twenty couples interacted about an emotionally significant time during the course of cancer after completing self-report questionnaires (intimacy, couples adjustment) and behavioural analysis of emotional connection was conducted

Findings

Preliminary results indicate that indices of emotional connection (gaze, posture, touch, verbal exchanges) have a positive impact on intimacy and partners' adjustment to cancer.

Discussio

Results may have clinical implications for couple's intervention in order to improve relationship closeness and couples' quality of life during the disease.

Oral Presentation Abstracts

Improving self-regulation of patients with chronic diseases: A Common Sense Model-based intervention

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Background

With the aim of providing medical information tailored to patients' specific information needs, we developed a CSM-based intervention that targeted patients' perceptions about illness and treatment and individual coping behaviors and their appraisal.

Methods

Following the development of measures (1) and refinement of the intervention concept in expert groups (2) the intervention was implemented and evaluated in four rehabilitation centers (3). Formative evaluation was based on a sample of N=105 patients and N=58 health professionals and used a combined qualitative and quantitative approach.

Findings

The evaluation provided evidence on the feasibility and acceptance of the intervention. The results indicated good treatment integrity and both patients and clinicians evaluated the intervention as positive in terms of promoting a patient-centered treatment. However, in-depth review of the implementation process also revealed significant barriers to implementation.

Conclusion

Corresponding to a current emphasis in health psychology, the intervention implements a strong patient-oriented approach. As the results also indicate potential for further development (e.g. consideration of implementation barriers), refining the intervention is still an objective for future research.

Oral Presentation Abstracts

Development of a CHW-led intervention for non-western immigrants in the Netherlands with cardiometabolic risk

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Background

A Community Health Worker (CHW)-led intervention was developed aimed at improving life-style behaviours of non-western immigrants in the Netherlands with a high risk for cardiometabolic disease. Methods: An intervention mapping approach was applied to develop the intervention. This included (1) meta-analyses extracting effective modes of delivery and content of existing CHW-led interventions, (2) qualitative research assessing personal, cultural, and environmental determinants of healthy lifestyles, (3) expert- and target group meetings discussing the intervention content and delivery mode. Program (performance) objectives were matched with behaviour change techniques (BCTs).

Methods

Findings resulted in a CHW-led intervention consisting of a home visit to explore life- and health goals and to map social support, telephone coaching, and four group sessions that especially focused on skills-related BCTs, such as goal setting, barrier identification, self-monitoring, and mobilizing social support. The content included surface and deep structure strategies to address culture-specific needs.

Results

Findings resulted in a CHW-led intervention consisting of a home visit to explore life- and health goals and to map social support, telephone coaching, and four group sessions that especially focused on skills-related BCTs, such as goal setting, barrier identification, self-monitoring, and mobilizing social support. The content included surface and deep structure strategies to address culture-specific needs.

Discussion

Intervention Mapping provided a useful framework to design a culturally sensitive CHW-led intervention for non-western immigrants in the Netherlands.

Oral Presentation Abstracts

Quality of life and self-efficacy: a meta-analysis and systematic review of cardiac interventions

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Background

The aim of the study was to meta-analyse the associations between quality of life (QoL) and self-efficacy (SE) among cardiovascular patients and to review the effects of cardiac rehabilitation interventions on QoL and SE

Methods

Using methodology of systematic review we retrieved 26 studies which met the inclusion criteria. Original trials included 4390 participants. Studies which provided information about the associations between QoL and SE (n= 9) were included into meta-analysis and 17 studies reporting on cardiac rehabilitation interventions were systematically reviewed.

Findings

Results of meta-analysis indicated significant moderate association between QoL and SE. 29% out of 17 interventions referred to cardiac rehabilitation and education, 24% to self-efficacy for exercise, and 47% to selfmanagement for self-care. In 9 trials significant improvement for QoL and SE was found, whereas in 8 trials the effect occurred only for either SE or QOL indicators.

Conclusion

Enhancing SE may improve QoL among cardiac patients. Cardiac interventions directed at improving SE for exercise and self-management for self-care were effective at increasing either QoL or SE.

Oral Presentation Abstracts

Systematic adaptation of an evidence-based, computer-tailored physical activity intervention for cancer patients using Intervention Mapping

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Background

Despite positive effects of physical activity (PA) for colorectal and prostate cancer patients, most do not meet PA guidelines and report a need for information and counseling. An evidence-based computer-tailored PA intervention for older adults is systematically adapted to fit the patients' needs.

Methods

Adaptations were made using Intervention Mapping, a protocol for developing and adapting evidence-based programs. Interviews with patients (N=29) and cancer professionals (N=15), a pretest of new materials (29 patients, 10 professionals) and a small-scale pilot (N=18) were conducted.

Findings

Interviews provided input for change objectives, intervention methods, program components and delivery channel. New materials were valued 5.6 to 7.7 (scale 1-10). Professionals reviewed the advice safe and feasible. Materials were further adapted according to patients' and professionals' suggestions. Pilot participants increased their PA days from 4.1 to 5.6 ($p=.018$) and appreciated OncoActive+ with an 8.6 (SD=.924).

Conclusion

The systematic adaptation of an evidence-based intervention, with involvement of patients and professionals, resulted in a suitable intervention for the new population. Currently, a randomized-controlled effectiveness trial is conducted.

Oral Presentation Abstracts

Play seriously: systematic review of effectiveness of active video games in physical rehabilitation

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Background

“Gamification” in health promotion has obvious potential for development. The study aim was to assess physical functioning, adherence to treatment and the use of empirically-based behavioral change strategies in serious gaming for physical rehabilitation.

Methods

A literature search was performed on ISI WOS, PubMed, PsychInfo, Cochrane, and Health Game Research Portal. The criteria for inclusion were: age >18; physical rehabilitation (following stroke/injury/other impairing incident, targeting limb and/or muscle training), met at least two games features, measures of adherence were present. The primary outcome were measures of mobility-related physical functioning. Game contents were coded following the health behavior change taxonomy. Secondary outcomes included adherence and satisfaction with treatment.

Findings

The results were inconclusive regarding long-term efficiency (also in terms of adherence) of serious games in physical rehabilitation, due to variability of quality and outcomes of studies. Most of them are not empirically or theoretically driven so there is little insight on the change mechanisms incurred by active gaming.

Discussion

Serious games may be promising outlets for interventions if they are based on solid empirical research and change mechanisms are pinpointed.

Oral Presentation Abstracts

'Do no harm': has 30 years of health psychology helped or hindered the nations' health?

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Background

Health Psychology aims to improve patient health outcomes through research and practice.

Methods

This paper will present a bibliometric analysis of a number of data bases (media data, academic journals, citation indices, NHS data) to explore the association between 4 research areas in health psychology and key health outcomes. In particular, it will focus on research exploring help seeking and early warning signs, adherence to medication, the doctor patient relationship and behaviour change.

Results

The paper will argue that although we aim to promote health, many of our research perspectives may do harm by flooding the health care system with the worried well (who are seeking help for trivial problems), creating side effects to medication (by promoting adherence to drugs with poor NNTs), eradicating the placebo effect (by encouraging patient centred care) and not changing behaviour (by creating a one size fixes all approach).

Discussion

It will conclude that health psychology researchers need to maintain a critical eye on the wider context of health care in order to avoid violating the first ethical principle of 'do no harm'.

Oral Presentation Abstracts

Selecting BCTs for intervention in acute coronary syndrome delay: combining systematic review and Delphi Methods

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Background

Evidence from behaviour change technique (BCT) based systematic reviews is often limited in size, homogeneity or quality. We present an example of supplementing the best available published evidence with Delphi methods to select the most promising BCTs for an intervention to reduce delay in Acute Coronary Syndrome.

Methods

Systematic review of interventions targeting pre-hospital delay in acute conditions to identify effective BCTs. Delphi consensus methods asking 11 BCT experts to rate essential techniques from BCTTv1 for intervention inclusion and to identify the theoretical mode of action.

Findings

Thirty-three identified studies were too heterogeneous to quantitatively link the 23 identified BCTs to effectiveness. Most frequently identified BCTs were 'information provision' (n=28), 'instruction provision' (n=24) and 'action planning' (n=17). BCT experts rated 'action planning', 'salience of consequences' and 'problem solving' as essential. Mapping of BCTs to theoretical constructs further informed BCT selection and theoretical coherence.

Discussion:

The specified methods overcome limitations of inconclusive review findings by combining best available evidence from the literature with theory and expert consensus evidence to ensure a systematic and transparent intervention development process.

Oral Presentation Abstracts

Identification of behaviour change techniques (BCTs) applied in chronic illness self-management intervention: challenges and solutions

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Background

A cross-behaviour taxonomy of 93 BCTs (taxonomy v1) has been developed, providing a systematic method for specifying intervention components. This study aims to explore its applicability to chronic illness management (CIM) interventions.

Methods

Sixteen experts in CIM participated in an online survey, rating each of the 93 BCTs from taxonomy v1 in terms of perceived relevance to CIM interventions (response options: not relevant, of little relevance, moderately relevant, very relevant, don't know). A subsequent consensus panel meeting was held to discuss the applicability of taxonomy v1 to CIM.

Findings

Consensus regarding the relevance of BCTs from taxonomy v1 to CIM was not reached for 44% of BCTs. Numerous issues relating to this were raised (e.g. definitions of BCTs are directive but CIM techniques are often more collaborative, CIM techniques often target behaviour change via emotional adjustment to illness) and potential ways forward to increase relevance identified (e.g. agree CIM definition, adapt the taxonomy for CIM).

Discussion:

The development of a guide to increase the relevance of BCTs in taxonomy v1 for CIM may improve its applicability to CIM interventions.

Oral Presentation Abstracts

Implicit processing of symptom and illness-related information in chronic fatigue syndrome: a systematic review

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Background

Cognitive behavioural models propose that the way in which people with Chronic Fatigue Syndrome (CFS) process information, specifically how they attend to and interpret illness related information, may play an important role in symptom maintenance. This systematic review investigates whether people with CFS have implicit biases in how they process information.

Methods

Electronic databases were searched using CFS and experimental methodology search terms. Twelve studies measured attention and interpretative bias for illness related information in CFS.

Findings

The evidence for implicit biases was dependant on the methodology employed as well as the type and duration of the stimuli presented. There was preliminary evidence to suggest that people with CFS have illness related top down processing biases which affects how information is interpreted and attended to.

Discussion

A clinical implication of these findings is that such processing biases may maintain negative illness beliefs and symptoms in people with CFS. This review highlights methodological issues in experimental design and makes recommendations for future research to forge a consistent approach in implicit processing research.

Oral Presentation Abstracts

Statistical non-significance vs. practical relevance in intervention evaluation of sexuality education programs

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Measuring effectiveness of sexuality education for high-risk target populations using quantitative measures is difficult. The lack of significant results erroneously indicate a lack of effectiveness. Reasons for lack of significant results are paramount, and include participants' trouble with self-report questionnaires, scarcity of risk-behavior, and a difference between intervention-as-intended and intervention-as-realized.

In an attempt to supplement promising (yet non-significant) results of a quantitative evaluation, in-depth interviews were held with 13 participants of an group counseling intervention for girls with high-risk for sexual abuse, disease, and forced prostitution ('loverboys').

Participants who joined the group counseling voluntarily differed from those who participated involuntarily in reported effects on knowledge, intention and behavior, in that voluntary participants attributed changes in determinants and behavior to the group sessions, whereas involuntary participants did not. Involuntary participants did report changes, however.

With the results from the interviews, the effectiveness of the intervention can be better valued than with the quantitative results alone. This adds to the discussion of the use of qualitative research in effectiveness evaluation studies.

Oral Presentation Abstracts

How large should a pilot study be?

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Background

Pilot studies are used to identify unforeseen problems or flaws in the procedures and instruments to be used in a subsequent larger trial. But how many participants have to be included in a pilot study in order to be reasonably sure that important problems and flaws will be detected? The aim of this paper is to present a method for sample size calculations in pilot studies.

Methods

A formula has been worked out to calculate the sample size needed to be able to identify, with a chosen level of confidence, problems that may arise with a given probability.

Findings

A simple formula that can be used to calculate the sample size needed for a pilot study. For example, if a problem exists with 5% probability in a potential study participant, the problem will almost certainly be identified (with 95% confidence) in a pilot study including 59 participants.

Discussion:

This method can be used to determine the necessary sample size so that the problem is likely to be observed at least once during the course of the pilot study.

Oral Presentation Abstracts

What can modern psychometric techniques add to health psychology research methods?

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Traditional psychometric methods have provided a useful and conventional framework of developing and evaluating self-report instruments. Nevertheless, the Classical Test Theory (CTT) underpinning traditional psychometrics is a theoretical non-testable theory comprising assumptions that are usually easily met by scale data. Therefore, utilising the CTT could potentially lead to weak conclusions regarding the psychometric properties of instruments used in patient research and subsequently contribute to type 1 and type 2 errors. Modern psychometric techniques such as the Rasch Measurement Theory (RMT) addresses all limitations of traditional psychometrics. Firstly, the RMT paradigm offers a testable model that can be utilised to verify the measurement properties of scales rigorously. Secondly, the RMT enables the development of linear interval-level measurement on the basis of ordinal-level raw data. Thirdly, within the RMT, item and person location estimates can be provided and this can lead to adaptive testing through the use of item subsets to reach measurement and fourthly, RMT enables individual-level measurement. Psychometric evaluation examples of questionnaire-based patient data are reviewed to designate the advantages of using both traditional and modern psychometric techniques.

Oral Presentation Abstracts

The Hospital Anxiety and Depression Scale (HADS): structurally unsound and unfixable

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The Hospital Anxiety and Depression Scale (HADS) is a widely used self-report measure for screening and assessing medical patients for anxiety and depressive symptoms. Recently, doubts were raised about highly variable factor structure, discrepant cutpoints, and inability to distinguish between anxiety and depression. To salvage large amounts of published studies and unpublished data, proposals are being made to reconceptualize the HADS as a unidimensional measure of general distress. We demonstrate that problems are intrinsic and unresolvable, due to decisions made by the original developers. The HADS was constructed with concerns about avoiding careless responding and acquiescence. Developers found a self-defeating solution in presenting respondents with overwhelming cognitive demands, posed by items that shifted from anxiety versus depression, as well as the direction and content of both items and response keys from each item to the next. These problems are hiding in plain sight. Discrepancies in structure, cutpoints, and discriminant validity reflect a high level of respondent confusion and misresponse. Much can be learned from problems of the HADS for designing valid and reliable measures consistent with more clearly defined purposes.

Oral Presentation Abstracts

What is in a nudge: putting the psychology back in nudges

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Background

Nudges are broadly defined as subtle rearrangements of a choice context that gently suggest the preferred choice. Their increasing popularity has attracted attention from researchers, policy makers, and practitioners alike. However, many debates have been raised, principally regarding the ethics of using nudges in the public health domain and regarding the clarity of the original definition, with multiple amendments and types of categorizations suggested. Moreover, most suggestions have mainly focused on the ethical aspects of nudges and ignored its psychological components.

Discussion

Elaborating on the original definition, we provide a blueprint of six elements that can be used to define, categorize, and design nudging interventions: (1) a deliberate intention to influence, (2) exploiting an automatic and non-conscious processing, (3) freedom of choice, (4) goal dependence and motivation independence, (5) approach orientation, and (6) choice specificity. This empirical and psychological definition of nudges has important implications for researchers and practitioners, and also provides insights into many debates surrounding nudges, like ethical appropriateness, effectiveness, and public approval.

Oral Presentation Abstracts

A fuzzy nudge for fizzy drinks

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Background

The present empirical studies test the effectiveness of a nudge aimed to reduce soda consumption. Based on the center stage effect, we hypothesized that people would choose smaller cups of soda when the small cup size was presented in the middle of a choice set (medium-small-large) rather than at the edge (small-medium-large). Additionally, health goals were taken into account, and it was expected that the nudge would only be effective for people who have the goal to be healthy.

Methods

In 2 studies participants were randomized into a nudge or a control condition and asked to select a soda cup. Health goals were assessed before participants came into the lab. Logistic regression analyses were performed to analyze the results.

Findings

Participants in the nudge conditions were significantly more likely to choose the small cup compared to those in the control conditions. The effect tended to be stronger for people with stronger health goals.

Discussion:

Simple adjustments in the presentation order of cup sizes can significantly affect unhealthy soda consumption. The influence of personal goals on effectiveness will be discussed.

Oral Presentation Abstracts

Affect misattribution as a learning mechanism in evaluative conditioning on alcohol cognition and intention to drink

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Alcohol cognition are acquired via two distinct but partially overlapping systems: a conscious deliberative system (reflexive) and an non-conscious associative system (impulsive). In this view, alcohol consumption is due to a failure in regulating impulses toward alcohol. Our objective is to develop an evaluative conditioning procedure impacting specifically the impulsive system, by bolstering affect misattribution.

Participants (n=137) went through a 2 (contingency awareness: inclusion vs exclusion) x2 (stimulus presentation: simultaneous vs sequential) x2 (valence of US : neutral vs negative). Implicit and explicit attitudes and behavioral intentions have been assessed after and one week after the protocol. Since affect misattribution depend on source confusability, simultaneous presentation will have a stronger effect on implicit attitudes and lead to less contingency awareness.

Results show that negative conditioning in the simultaneous condition have a stronger impact on implicit but not on explicit measures and on behavioral intention at one week. A stronger attitude parameter in the simultaneous condition has been obtained.

Relevance of dual-process models and the effectiveness of conditioning in alcohol use will be discussed.

Oral Presentation Abstracts

Do negative emotions affect eating? A meta-analysis

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Despite many empirical studies on emotional eating (eating in response to negative emotions), the very basic question of whether negative emotions affect eating, and in whom, remains unclear. The current meta-analysis assessed the state of knowledge concerning the effect of negative emotions on eating in the non-eating disordered population. To this end, published reports on experimental studies that investigated the causal effect of negative emotions on eating behavior in non-eating disordered participants were included ($k = 20$). The moderating impact of individual differences in restrained eaters ($k = 10$), unrestrained eaters ($k = 9$), and obese individuals ($k = 5$) was assessed. Results revealed that the general main effect of negative emotions on food intake was not significant ($d = .068$). Additionally, there was no significant effect for restrained/unrestrained eaters ($d = .219 / d = .168$), or obese participants ($d = -.101$). These findings indicate that negative emotions do not affect eating patterns in non-eating disordered samples. However, qualitatively good studies are called for in order to achieve more homogeneous effect sizes for the individual difference measures.

Oral Presentation Abstracts

Inhibitory self-control moderates the effect of modified implicit food evaluations on snack intake

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Background

This study examined whether inhibitory self-control moderated the effects of a modified implicit association test (IAT) on implicit evaluations of unhealthy snack food and subsequent consumption.

Methods

148 women completed a 2 (intervention condition: positive, negative) x 2 (time: pre-, post-training assessment) mixed factorial design experiment. The intervention trained participants to pair unhealthy food stimuli with either positive or negative stimuli. Measures included IATs assessing implicit unhealthy food evaluations, a tastetest assessing unhealthy snack consumption, and an inhibitory self-control scale.

Findings

Implicit evaluations of unhealthy food became more negative following the food negative pairing intervention; however, there was no corresponding change in the food positive condition. The effect of training on snack consumption was moderated by inhibitory self-control: only participants low in inhibitory self-control showed lower snack intake following the food negative training.

Discussion

Findings are consistent with dual-process models, which predict that self-control capacity renders impulses less influential on behaviour. Furthermore, they suggest that retraining implicit food evaluations could reduce unhealthy eating, particularly among individuals with low inhibitory self-control.

Oral Presentation Abstracts

Identifying techniques for modifying impulsive influences on eating behaviour: a systematic review

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Background

This systematic review aimed to identify and summarise the evidence base for impulse management techniques currently being used to modify eating behaviour in both laboratory and intervention studies.

Methods

Searches were conducted in MEDLINE, PsycINFO, CINAHL, AMED, Web of Science in September 2014 for studies published in English since 1993, evaluating an intervention or technique specifically designed to manage eating-related impulses, and reporting an eating-related outcome, such as craving, weight, or food consumption.

Results

From 4623 citations identified, 94 studies were included. The range of techniques identified were categorised into post-impulse, pre- or peri-impulse, and unclear. There was evidence from RCTs, crossover, and mixed factorial studies that impulse management techniques, including inhibition training, implementation intentions, and mindfulness techniques, reduced post-treatment craving and food-intake in the short term. Evidence for maintenance of effects, and impacts on weight loss, was limited due to a lack of studies.

Conclusions

This review highlights a range of techniques for supporting changes in eating behaviour through impulse management and summarises the evidence base that may inform different intervention options.

Oral Presentation Abstracts

The effect of approach bias and inhibitory control training on behavioural food choice: an intervention

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Background

Previous studies have effectively reduced unhealthy eating by re-training either approach biases or inhibitory control. This study aimed to determine whether the combined effect of approach bias and inhibitory control training is more effective than either intervention alone.

Methods

Undergraduate women (N = 78, 18-27 years) were randomised to the conditions of a 2 (Approach bias: training, control) x 2 (Inhibitory control: training, control) experimental design. Food choice was assessed by a Behavioural Choice Task. Trait impulsivity was also measured, via self-report.

Findings

Participants in the approach bias training group showed an avoidance bias for unhealthy food, while the control group showed an approach bias. This training was more effective when combined with inhibitory control training, and training effects were more pronounced for individuals high on trait impulsivity. Training effects also translated into healthy eating behaviour, with the approach bias training group making healthier food choices when presented with healthy and unhealthy foods.

Discussion:

Results support dual-process models of health behaviour and suggest the need for a combined intervention aimed at encouraging healthy food intake.

Oral Presentation Abstracts

Neurofeedback against subclinical binge eating in women: a randomized controlled trial with two control groups

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Background

Binge eating episodes are common phenomena among women, posing a vulnerability factor for the development of obesity and associated health problems. Especially stress and food cue confrontation elicit binge eating. Based on these factors and associated neurophysiological patterns, a cue-exposure neurofeedback (NF) protocol was developed as an intervention to reduce bingeing. Effectiveness of the ten-session NF was evaluated in comparison to a mental imagery treatment (MI) and a waitlist group (WL).

Methods

Female participants (N=75) were randomly assigned to NF, MI, or WL, reporting binge eating episodes, stress, dietary and somatic self-efficacy before and after the treatment or waiting period. Completer data (NF/MI: each n=18; WL: n=21) were analyzed with ANCOVAs and post-hoc tests.

Findings

Only NF resulted in a significant reduction of bingeing and an enhancement of dietary self-efficacy compared to the WL ($g_s > .65$). Still, both interventions yielded beneficial effects on perceived stress and somatic self-efficacy, accompanied by high acceptance ratings.

Discussion

Due to specific effectiveness, neurofeedback may serve as a promising approach to reduce bingeing and prevent negative health effects associated with this eating disturbance.

Oral Presentation Abstracts

Failure of vaccination messages: how mothers perceive vaccination messages and make decisions about child vaccination

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Background

In 2014 Nyhan et al. tested effectiveness of messages designed to reduce vaccine misperceptions and increase vaccination rates for measles-mumps-rubella (MMR) and found that none of four interventions increased parental intent to vaccinate future child. Objective of present study was to apply qualitative methods to explore how parents perceive such messages.

Methods

8 Focus Groups with students and mothers of small children (N=76). Participants were presented with interventions used in original study. They were asked to assign values of trustworthiness to those messages and provide reasons, followed by group discussion. Data were transcribed, coded and analyzed using Thematic Analysis.

Findings

Findings of original study were confirmed: attempts to persuade parents to vaccinate their children were not considered trustworthy. We argue that personal narratives and persuasive texts work differently when delivered by anti-vaccination promoters and by authorities.

Discussion

Vaccination messages delivered from position of authority lack persuasive power. When authorities try to emulate persuasive techniques employed by alternative and social media effect may be counterproductive. New approaches to vaccination messages are needed to offset effective anti-vaccination narratives. (VEGA Grant 2/0154/13)

Oral Presentation Abstracts

Acceptability of financial incentives for breastfeeding: thematic analysis of comments to UK online news reports

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Background

Financial incentive interventions to encourage healthy behaviours are increasingly common. Previous literature lacks an empirical grounding on whether or not incentives are acceptable and why. We sought to gain an insight into the factors related to acceptability of financial incentive interventions for health behaviours and to understand preferred formats for financial incentives.

Methods

Eight focus groups were conducted with 74 members of the UK public. Audio recordings were transcribed verbatim with thematic analysis to identify key themes.

Findings

Five themes were identified: the nature of fair exchange; effectiveness and cost-effectiveness; impact on individuals and wider society; acceptable recipients; and 'other issues'.

Discussion:

Participants were distrusting of financial incentive interventions. However, they were more likely to be deemed acceptable if they were fair to recipients, if they were closely monitored and evaluated, if they were shown to be effective and cost-effective, and if health education is also provided. Participants preferred positive rewards, and those in the format of shopping vouchers rather than cash incentives. These results highlight clear suggestions for how to design acceptable health promoting financial incentives.

Oral Presentation Abstracts

Introduction of 'opt-out' smoking cessation referrals in pregnancy: a qualitative evaluation of staff views

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To evaluate staff views on the implementation of an intervention involving routine carbon monoxide (CO) testing for pregnant women and 'opt-out' (whether requested or not) referrals to stop smoking services (SSS) with CO>4ppm. Interviews (n=17) with six antenatal clinic staff involved in 'opt-out' referrals at two times - before and during implementation; and five SSS staff, six-months afterwards. Data were analysed using framework analysis. Three main themes were identified: implementation; impact of referrals; future directions. Generally, staff felt referrals were less arduous to implement and better received than expected. The majority believed the intervention helped engage women motivated to quit and offered a unique chance to impart smoking cessation knowledge to hard-to-reach women, who might not otherwise contact SSS. Some improvements to the intervention were suggested. Results indicate that, with training and support, routine CO testing and 'opt-out' referrals can be successfully incorporated into the workload of antenatal and SSS staff. 'Opt-out' referrals could potentially help SSS engage hard-to-reach women and deliver consistent message about dangers of smoking in pregnancy.

Oral Presentation Abstracts

An Interpretative Phenomenological Analysis on smokers' reasons for discontinued use of the e-cigarette

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Background

E-cigarette use has risen substantially in the UK in the last 10 years. Thus far, e-cigarettes have been shown to be less harmful than traditional cigarettes and initial research has shown that smokers use e-cigarettes for many reasons, though there is limited research on reasons for discontinued use. The purpose of this study was to explore smokers' experiences of using e-cigarettes including the reasons for use and discontinued use to better understand the factors that may hinder the conversion from smoking to 'vaping'.

Methods

Semi-structured interviews were conducted with six participants and the transcripts were subject to interpretative phenomenological analysis.

Findings

Findings suggest participants have internal struggles which may hinder the conversion from smoking to 'vaping'. These struggles were focused around areas such as 'Identity Conflict'; 'Low quitting self-efficacy'; 'Conflicting attitudes towards cigarettes and e-cigarettes'.

Discussion

Smokers seem to have difficulty resolving their thoughts and feelings about cigarettes and e-cigarettes which may have an impact on their continued use of the e-cigarette and thus their quitting success.

Oral Presentation Abstracts

Exploring factors important for a cognitive 'turning point' necessary for weight loss in obese adults

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Background

Weight loss is desired by many overweight and obese individuals but is very difficult to achieve and maintain. Many remain overweight or obese for years, however, medical records show that a small percentage of people in this group do achieve substantive weight loss. This study sought to explore the cognitive factors important for reaching this 'turning point' and achieving successful and substantial weight loss.

Methods

An explorative design was followed, using semi-structured interviews for the data collection. The sample consisted of fifteen obese NHS patients and thematic analysis was used to analyse the data.

Findings

Factors reported as important to leading to this cognitive turning point included psychological aspects particular to the individual (will power), receiving negative health news from their GP, and the meaning this information held for them (deteriorating health, possible death, and loss of control over their health).

Discussion

These results show that using shock tacks by the health professional may be helpful for some obese people in creating the cognitive shift or 'turning point' necessary to encourage people successfully adherence to a weight loss programme.

Oral Presentation Abstracts

Is a tan worth a thousand words? Holidaymakers' perceptions and experiences about sun-protection

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Background

Little is known about how people perceive sun-protection and sun-exposure during holidays and how sun-protection messages are experienced. This study aimed to investigate perceptions of sun-related experiences and the determinants of sun-protection behaviours during holidays.

Methods

Semi-structured interviews based on the Theoretical Domains Framework were conducted with 17 respondents. Data were analysed using thematic analysis. Holidaymakers' intentions and perceptions about barriers and facilitators for sun-protection were assessed.

Findings

Respondents showed a desire to tan and attributed a high value to acquiring a tanned appearance. Harming effects of sun-exposure were universally recognized. Most respondents knew how to sun-protect, but several key barriers were identified: impact on holiday experiences, fear of social consequences, inconvenience of sun-protection and lack of environmental resources. Some self-regulatory strategies were identified by participants as facilitators (e.g. coping and facilitation planning).

Conclusions

The importance attributed to a tanned appearance seemed a strong motivator for sun-exposure amongst the holidaymakers interviewed. Suggested public health messages include highlighting the harmful effects of sunlight on appearance and the need to use other ways of achieving a tanning appearance (e.g. self-tanning).

Oral Presentation Abstracts

Generalised avoidance of lifestyle physical activity in overweight pedestrians: a review of stair usage

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Objective

Increased stair climbing is a public health target yet the overweight avoid stairs by choosing the escalator more than healthy weight pedestrians. These studies tested for generalised avoidance of stairs by overweight pedestrians.

Methods

Following inconclusive evidence in previous workplace studies, new observational data were obtained. Stair and lift choices were coded in seven buildings (N=26,941), when a lift was the alternative to stairs outdoors (N=7,433) and in two further outdoor sites where the alternative was a ramp (N=17,664).

Results

In studies reporting effects of demographics (N=197,769), the only study coding weight-status found more stair avoidance by the overweight. In follow-up observational studies, the overweight avoided both stair climbing and descent more frequently than those of healthy weight. Avoidance of stairs generalised to a choice between stairs and a ramp to ascend. In addition, female pedestrians and those carrying large bags avoided stairs more than their comparators.

Conclusions:

A generalised avoidance of stair usage occurs in overweight pedestrians when an escalator, a lift or a ramp provides an alternative.

Oral Presentation Abstracts

Centering Pregnancy group care or individual care? Examining factors of prenatal care decision

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Background

CenteringPregnancy (CP) is interactive group-based prenatal care that had positive effects on perinatal outcomes. However, some women decide to quit or refuse to participate in CP. This study examines factors important in deciding to participate, reject or quit CP.

Methods

The sample consisted of 196 pregnant women that were invited to participate in CP. At 28-weeks pregnancy they were asked whether they participated and reasons for non-participation. At 12-weeks pregnancy, demographic, psychosocial, and lifestyle factors were asked.

Results

At 28-weeks pregnancy 33% started CP and 67% did not. Of CP-participants, 6 women quitted. Compared to CP-rejecters, stress was higher among both CP-participants and CP-quitters (respectively, $p = .031$; $p = .026$). Active and problem focused coping was stronger among CP-participants than CP-rejecters (respectively, $p = .013$, $p = .029$). Reasons for non-participation differed between CP-rejecters and CP-quitters ($p = .011$). CP-rejecters often disliked a group (39%), while CP-quitters were more varied.

Conclusion

Coping behavior and exposure to stress appear to be important in the decision regarding CP-participation and need attention when motivating pregnant women in starting with CP.

Oral Presentation Abstracts

Improving health promotion related to fetal alcohol spectrum disorder (FASD), the need for a framework

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Background

Alcohol use during pregnancy is one of the leading preventable causes of intellectual or developmental disability. This situation clearly warrants intervention. The complexity of intervention development concerning FASD is overlooked in health promotion. Evidence-based health promotion intervention aimed at the field of FASD is a complex process. The field of FASD needs to use systematic approaches for adapting evidence based behavioural interventions (Bartholomew, et al. 2011). Intervention Mapping provides planners with a systematic method for designing interventions.

Methods

The IM framework is a six step systematic approach for designing, implementing and evaluating health promotion programmes. This framework was used in the present study.

Results

The needs assessment or situation analysis of the problem concerning FASD will be presented.

Conclusion

Alcohol use during pregnancy is an important health problem. The Intervention Mapping framework is useful as a blueprint for designing, implementing, and evaluating an intervention model for FASD. The first step in this process showed that current data remains insufficient of the existence of the problem and what it entails.

Oral Presentation Abstracts

A new way to explore illness experience: the case of an uncertain illness

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The aim of this presentation is to illustrate a new way to use qualitative methods in order to explore illness experiences, to differentiate among them, and to propose personalized interventions. A study of an uncertain illness, in this case, eye floaters, is presented as an exemplification. Patients suffering from eye floaters perceive flashes and spots in their perceptive field, but they do not necessary have a pathology of the eye. Eye examination and echography, individual semi-structured interviews, and dependency grids were carried out with 11 Italian patients. A grounded theory analysis showed that the illness experience depended on the perception of the disease, the personal explanation, the solutions tried, the trust placed in medicine, self-construction, and the dispersion of dependency. On the basis of these categories, cases that had similar experiences were grouped, and four ways of experiencing illness were identified: possibility, focus on illness, denial and guilt. To each experience corresponded a different health status and a different intervention possibility. Further studies using the same methodology highlighted the usefulness of the presented method in rethinking illness experience.

Oral Presentation Abstracts

Executive functioning and working memory differences between insomnia patients and normally sleeping persons

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Background

Insomnia patients often report cognitive impairment. Diagnostic criteria for insomnia also imply the presence of neuropsychological deficits. Research, however, remains equivocal regarding this matter. The objective of this study was to investigate neuropsychological functioning in insomnia.

Methods

Thirty-six participants diagnosed with insomnia were closely matched for gender, age, years of education, and ethnicity to a control group of 36 normally sleeping community contacts. All participants completed a valid, reliable and standardized insomnia questionnaire and a neuropsychological testing battery, which included measures of executive functioning (WCST, color-word and trails subtests of the DKEFS) and working memory (Letter Number Sequencing and Digit Span subtests of the WAIS-IV).

Findings

Results pointed toward a mild executive functioning and working memory deficit in insomnia patients.

Discussion

Results can be interpreted within the framework of “compensatory effort” and increased “mental load”. Tasks of increased “mental load” may be more suitable for revealing cognitive difficulties in insomnia. Clinical implications include establishing more refined diagnostic criteria for insomnia and offering appropriate treatment for patients in high-risk occupations, where impairment may lead to accidents and lower work productivity.

Oral Presentation Abstracts

Coping mediates the relationship between personality traits and life satisfaction in patients with rheumatic diseases

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Objective

Based on Bolger and Zuckerman's (1995) framework for studying personality in the stress process, this study investigated the influence of personality on life satisfaction and the mediating role of coping in chronic patients.

Method

In a cross-sectional design, 158 patients with rheumatic diseases completed questionnaires assessing the Big-5 personality traits (BFI-10), coping (EFK) and life satisfaction (HSWBS). Data were analyzed by a complex multiple mediation analysis with the Big-5 personality traits as predictors, coping strategies as mediators and life satisfaction as outcome.

Results

The analysis revealed no direct, but a number of indirect effects of the personality traits on life satisfaction through coping. Neuroticism had a negative indirect effect on life satisfaction through less problem oriented coping and more depressive coping. Additionally, extraversion, conscientiousness and agreeableness had positive indirect effects on life satisfaction through more problem oriented coping, less depressive coping and/or seeking more social integration

Implications

Patients scoring high on neuroticism are most likely to benefit from self-management trainings as they are prone to use dysfunctional coping strategies too often and functional coping strategies too seldom.

Oral Presentation Abstracts

Lifestyle factors, resources and barriers for return-to-work after time-limited pension for reduced earning capacity

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Background

Return-to-work (RTW) rates are low in people who draw a time-limited pension for reduced earning capacity (PREC) due to health issues. Studies point out that RTW intentions do not automatically result in problemsolving behavior, especially in subjects with mental disorders. This study aimed at identifying RTW-related expectations and barriers in people with physical and/or psychological challenges.

Methods

Structured, computer-assisted telephone interviews were conducted with 452 individuals receiving a PREC for on average 42 months, including questions on symptoms, social-cognitive resources, barriers, lifestyle factors and RTW-aims.

Results

Participants with predominantly psychological complaints (PSY) did not differ from participants with mostly physical illnesses (PHY) regarding their plans for RTW or social support. However, PSY were younger at PREC onset, less likely to have participated in medical rehabilitation, and reported lower work-related self-efficacy and poorer self-regulation (all $p < .01$). Both groups exhibited high lifestyle risks like physical inactivity and a high body mass index.

Discussion

Our results suggest that mental (co)morbidity is associated with fewer work-related psychological resources and different RTW expectations. These factors should be considered in RTW interventions.

Oral Presentation Abstracts

The effects of laughter yoga on glycemic control in diabetes patients: a randomized controlled trial

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Background

Previous studies have shown that laughter is associated with psychological and physical health status. However, the effects of laughter yoga on psychological and physical health benefits are not elucidated. We sought to examine the effects of laughter yoga program on glycemic control and anthropometric measurements in diabetes patients.

Methods

A convenience sample of 42 patients with type 2 diabetes mellitus was randomized into laughter yoga program and control groups. The primary outcomes were changes in hemoglobin A1c (HbA1c) levels, body weight, and waist circumference between baseline and week 12 in this randomized controlled trial.

Results

Over 12 weeks, HbA1c levels improved in the laughter yoga group, but not in the control group. The mean HbA1c levels changed from 7.12% to 6.86% for the laughter yoga group ($p < 0.01$) and from 7.23% to 7.11% for the control group ($p = 0.84$). Waist circumference also tended to improve in the laughter yoga group but there were no changes in body weight in the both group.

Conclusion

Twelve weeks laughter yoga program for patients with diabetes mellitus may result in improved glycemic control.

Oral Presentation Abstracts

Why medication or tobacco consumption enhance the life satisfaction of cardiovascular patients?

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Background

While life satisfaction (LS) promotes the health of cardiovascular patients, LS may be affected by a range of primary and secondary determinants. We analysed LS and its relationships with cardiovascular risk factors and unhealthy behaviours.

Methods

In 2013, 3,632 survivors who underwent coronary angiography in 2008-2009 at the Luxembourgish National Institute of Cardiac Surgery and Cardiological Intervention (INCCI), living at home were asked to estimate, five years after, their LS [1-10] and other health-related variables. Data were analysed via multiple regression models including interaction effects.

Findings

LS of the 1,289 participants (age: 69.2 workers, had secondary education and a 36,000€ or more/year income. The interactions between hypercholesterolemia and hypertension (regression coefficient= 0.628) and with smoking ($rc= 0.941$) were positively related with LS, but physical inactivity was negatively associated ($rc= -0.630$).

Discussion:

Taking medications or maintaining tobacco consumption produces better LS than being ambivalent towards physical activity. Further research is needed to evaluate the efficacy of health interventions eliciting and promoting the behaviour change wheel based on capabilities, opportunities, and motivations.

Oral Presentation Abstracts

Gender differences in common mental disorders in Pakistan

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Aim

The study aimed at exploring the Gender Difference in Common Mental Disorders in Pakistan. Design: Within Group Research Design was used.

Method

Data was collected from 219 (M=35, F=184) participants experiencing mild and transitory medical conditions. Symptom Checklist-R (Rahman, Dawood, Rehman, Mansoor, & Ali, 2009) and GHQ-28 (Goldberg, 1978) were administered on them to identify Common Mental Disorders.

Results

Results revealed the presence of significant Gender Differences with females scoring significantly higher on the scales of Depression, Somatization, Anxiety and Low Frustration Tolerance. Overall Psychological Distress was also found to be higher in women in comparison to men. This signified that women tend to experience more Common Mental Disorders than males. In addition, men's mental well-being was significantly better than that of women. Overall this research signified a need of General Practitioners to realize and understand that Common Mental Disorders are common in individuals presenting in primary health clinics. Also there is need for timely identification of such at risk individuals so that interventions could be implemented accordingly

Key Words

Common Mental Disorders, Gender Differences

Oral Presentation Abstracts

Menopausal symptoms, vitality, body image, exercise behaviour and wellbeing: a mixed methods study

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Background

The aim was to examine the relationships between menopausal symptoms, appearance evaluation, exercise behaviour, and wellbeing (subjective vitality, life satisfaction and self-esteem) using a mixed methods approach.

Methods

A nationwide survey was carried out with women experiencing the menopausal transition (n=271; mean age=53) analysed using Structural Equation Modeling. A selection (n=12) were then interviewed about their experiences, which were analysed in context of the model.

Findings

Menopausal symptoms were directly associated with appearance but not exercise. However, as hypothesised, when mediated by subjective vitality, menopausal symptoms were related to both appearance and exercise. Exercise was associated with appearance but was not directly related to self-esteem or life satisfaction. However, there was an indirect effect as appearance was associated with self-esteem and life satisfaction.

Discussion

The qualitative findings provided contextual detail into the relationships, and other factors that may influence the associations in the model. In addition to the variables included in the model, perceived control, ability to cope, and motivations to exercise may be important to consider. Therefore we recommend that these constructs are included to further develop this model.

Oral Presentation Abstracts

Improving comprehension in informed consent for medical procedures through dynamic testing

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Multimedia presentations have been developed in an effort to standardize informed consent for surgical procedures and to reduce the burden on health care systems and providers. The goal of this proof-of concept study was to determine whether dynamic testing of a patient education video on thyroidectomy would lead to greater knowledge. Students at a New York City university were recruited to participate. The 20-minute video was divided into four segments of 5 minutes each. Participants (n=120) were randomly assigned to one of three conditions: 1) dynamic testing (after the segment) + feedback (correct vs. incorrect answers); 2) dynamic testing only; and 3) control (no dynamic testing). At the completion of all four segments, participants completed a knowledge posttest. Participants in the testing + feedback group scored higher on the posttest compared with those in the testing only or control group ($p < .01$). Controls found the experience more mentally taxing than the testing + feedback group ($p < .05$). Providing dynamic feedback with educational health videos can reduce mental fatigue and enhance short-term retention of risk information.

Oral Presentation Abstracts

Capital & province quality of life: social support and psychological well-being Predictors

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Background

The objective of this study was to investigate the relationship among Perceived Social Support, Psychological Well-being and QoL sub-domains in capital and province inhabitants. The aim was to explore the dimensions predicting QoL in the two populations, looking for differences.

Methods

A between groups questionnaire design was used. The sample consisted of 109 healthy Greek adults from Eastern Central Greece. The groups were divided into Capital and Province, with age range 19-81. The measures employed included World Health Organization Brief Quality of Life Assessment Scale, Depression Anxiety Stress Scale and Multidimensional Scale of Perceived Social Support.

Findings

Multiple Regression analyses revealed that for the Capital group, Significant Others predict total QoL and Stress predicts the Psychological & Physiological domains. For the Province group, Significant Others & Family predict Social Relations and Depression predicts the Psychological & Physiological domains as well as Overall Health & total QoL.

Discussion:

The findings revealed community size differences involved in QoL. These suggest the need for further research and tailored interventions, targeted at particular groups even when considered to belong to the same population.

Oral Presentation Abstracts

Psychological well-being and social status in China and Germany: testing the local-ladder effect

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Social status can be conceptualized as socioeconomic status (e.g., income, education level) or sociometric status (e.g., social network, respect, support among friends). Both forms predict subjective well-being. In the present study, the relative strength of the subjective well-being – social status relation in a sample from China and Germany is investigated.

In a Chinese (N = 313) and a German sample (N = 1,307) status (socioeconomic, sociometric), perceived living standard, and subjective well-being was assessed via self-reports.

In both samples, sociometric status was more strongly related to life satisfaction, positive affect, sense of purpose and perceived living standard than socioeconomic status. In addition, perceived living standard partly mediated the relation between sociometric status and well-being.

Overall, in both samples individuals' sociometric status matters more to their well-being than does their socioeconomic status, supporting the notion of a local-ladder effect.

Oral Presentation Abstracts

Commuting and psychological wellbeing in London: to walk or drive?

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The study explored the relationship between commuting modes and psychological wellbeing (PW) in 2,756 London commuters from wave two of the UK Household Longitudinal Study (2010/2011). Independent-samples t-test revealed significantly higher PW scores in outer- (M = 6.96, SD = 8.80) than inner-Londoners, M = 4.23, SD = 9.83; $t(2754) = -7.67, p < .001$. Chi-square tests for independence indicated significant commute differences. Comparatively, inner-Londoners reported more active ($\chi^2 [1, n = 2,756] = 31.94, p < .001$) and public transport ($\chi^2 [1, n = 2,756] = 52.43, p < .001$) travel, and lesser car use ($\chi^2 [1, n = 2,756] = 141.88, p < .001$). Multiple hierarchical regressions revealed that active commute (R² change = .006, F change (1, 1050) = 7.04, $p < .01$) in inner London was positively associated with PW, whilst the same is true for driving (R² change = .004, F change (1, 1524) = 6.08, $p < .05$) and public transport (R² change = .005, F change (1, 1524) = 7.24, $p < .01$) commute in out London. These findings suggest that commuters' PW could potentially be improved through commuting modifications.

Oral Presentation Abstracts

Beneficial effects of dance in natural environments as a function of objectively measured physical engagement

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Psychological benefits of jogging or walking in natural environments have been well documented. Effects of dancing outdoors still require evidence. Using different environments, we tested how engagement in this social and accompanied by music form of activity may lead to emotional restoration. Sixty-six regular dancers participated in a salsa-solo session either indoors (dance room) or outdoors (park). Their level of restoration was assessed with self-reports of emotions and stress before and after the session. Additionally, physical engagement was measured with accelerometers. The dancers in the park felt more relaxed and calm after the salsa session, but no differences were observed in the perceived physical fatigue in two groups. However, an objectively measured engagement was much higher among the dancers in the park. Moreover, the engagement fully mediated the beneficial effect of outdoor environment on the level of restoration. Although dance is usually performed indoors, natural environments seem to amplify its merits for psychological restoration. The results encourage further research on the physical engagement as a mediator of the effect of restorative environments on people's well-being.

Oral Presentation Abstracts

The protective properties of self-concept organisation in response to discrimination and general life stress

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Extensive evidence shows that discrimination can negatively affect health, however less is known about the factors which may ameliorate this effect. As discrimination is a stressor, resiliency research from the general stress literature can inform our understanding of these factors. This study sought to replicate findings that self-concept organisation buffers the effects of general life stress on wellbeing and to test whether the same would be observed for discrimination-related stress. A cross-sectional design (n = 229) was used to assess the relationships between discrimination, general stress, depression and self-organisation variables (self-complexity, compartmentalisation, differential importance, self-concept clarity). Regression analyses showed two moderation effects, with high self-clarity reducing the negative effects of both forms of stress on depression and low compartmentalisation reducing the negative effects of general life stress. Compartmentalisation was associated with more depression regardless of stress level. The potential of self-organisation to inform behaviour change in therapeutic interventions will be discussed using an Acceptance and Commitment Therapy perspective. This will include the use of values-based exercises to help foster self-clarity and acceptance-based strategies to reduce compartmentalisation.

Oral Presentation Abstracts

Uniqueness seeking leads to greater risk-taking

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Background

Previous studies have found a correlation between risk-taking and need for uniqueness (NFU). However, there is currently no experimental evidence for such a relation. We report two studies showing that NFU leads to greater risk-taking.

Methods

In both studies we measured need for uniqueness. Participants were confronted with a risk-taking task (Slovic, 1966). Prior to the risk-taking task, they were randomly assigned to three experimental conditions where the risk-taking norm (low, moderate, high) was manipulated by giving false information about the majority's decision. In study 2, prior to the risk-taking task participants received fictitious test feedback labeling them as either different vs. similar to the majority of previous participants.

Findings

Study 1 (N = 299) showed that NFU predicts a significant increase in willingness to take more risk than the induced norm (controlled for sensation seeking). Study 2 (N = 295) replicated this result and showed that induced similarity to others increases risk-taking by participants with high NFU.

Discussion:

This study provides the first experimental evidence for a causal link between need for uniqueness and risk-taking.

Oral Presentation Abstracts

Self-determination measures as predictors of condom use self-efficacy among young South African women

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Background

Practicing safe sex remains a problem for women in South Africa and is often associated with low confidence levels to use condoms. This paper identifies correlates of condom use self-efficacy

Methods

Baseline data from a cross-sectional study conducted among young women (n = 238) from the Eastern Cape, South Africa were used. Bivariate correlations and multivariate linear regression analyses were conducted to determine the associations of self-determination theory and gender variables with self-efficacy towards condom use in general and risky situations.

Results

Findings showed positive associations for gender equality beliefs and HIV knowledge with self-efficacy in both situations. General self-efficacy was also positively associated with power balance attitudes, negative intimate partner violence beliefs, and positive growth perspective while the association with hopeless personal perspective was negative. Surprisingly, perceived social support was negatively associated with self-efficacy to use a condom in risky situations.

Conclusion

Self-determination and gender variables seem to be important sources of young women's confidence to practice safe sex. The implications of these findings for future interventions will be discussed.

Oral Presentation Abstracts

Understanding interpersonal communication: conversational valence, peer popularity, peer preference, self-persuasion, other-persuasion, and binge drinking determinants

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Background

Although research has shown that interpersonal communication about health issues influences health campaign effects, little is known about aspects that may influence these effects. In the context of binge drinking, this study investigates conversational valence, peer popularity, peer preference, self-persuasion, and other-persuasion in interpersonal communication and their effects on variables identified in the theory of planned behavior (TPB).

Methods

Undergraduate students (N = 115) participated in a two-wave study. TPB variables and peer popularity were assessed at the first wave. One month later, participants, in dyads, discussed alcohol consumption followed by an assessment of conversational valence, peer preference, and again TPB variables.

Findings

Individuals' TPB variables were influenced in line with conversational valence. For example, a positive conversational valence resulted into more positive binge drinking attitudes. It was also demonstrated that participants were not only influenced by others but also by themselves. An interaction effect between peer popularity and conversation valence was revealed. Peer preference yielded no significant effects.

Discussion

These findings suggest that conversational valence, other-persuasion, self-persuasion, and peer popularity are relevant aspects of interpersonal communication.

Oral Presentation Abstracts

Testing the effects of an alcohol and a safe sex prime on perceptions and Behaviour

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Background

Experimental manipulation of an alcohol and a safe sex prime tested for the possibility that the indirect experience of salient alcohol-related cues would influence related perceptions and behaviour without actual alcohol consumption.

Methods

A 2 (alcohol prime: alcohol words vs. no alcohol words) X 2 (safe sex-related prime: safe sex message vs. no message) between participants design was employed. Participants were 80 university students - sexually-active alcohol users. Measures included the AUDIT-C; CARE-R; sex-related alcohol expectancies; perceptions of: sexuality, sexual intent, attraction, and behaviour, and disinhibition; and a behavioural measure of proximity.

Findings

Participants exposed to only a safe sex prime rated an experimental stooge as being significantly more inhibited than participants in conditions with an alcohol prime or no prime. Results of a behavioural measure of proximity found that participants primed with an alcohol and/or a safe sex cue sat significantly closer to a potential partner than participants exposed to no prime.

Discussion

Perceptions and behaviours of sexually-active alcohol users may be influenced by alcohol and safe sex environmental stimuli.

Oral Presentation Abstracts

Sexual risk reduction interventions in young people: a systematic review

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Background

Young people are at high risk of contracting STIs. In order to identify effective in-service interventions for this group, a systematic review of RCTs of waiting-room-delivered, self-delivered and brief-healthcare providerdelivered interventions was conducted.

Methods

MEDLINE, PsycInfo, EMBASE, CINAHL and Cochrane databases (including CENTRAL and DARE) were searched from January 2000 to October 2014

Findings

17,916 articles were screened. 22 RCTs met our inclusion criteria, were quality appraised independently by two reviewers using the Cochrane Risk of Bias tool, and were found to be of generally high quality. Increased effectiveness for reducing risky sexual behaviour compared to control was found in 4 out of 6 RCTs for interactive digital interventions, 1 out of 6 RCTs for one-to-one counselling, and 3 out of 5 RCTs of interventions involving video. Significant improvements in STI events compared to control were found in 5 RCTs of interventions that contained either video (both with and without counselling), brief one-to-one counselling or a STI home test kit.

Discussion

These potential effective interventions can be used to guide development of in-service STI preventive interventions for young people.

Oral Presentation Abstracts

Does prenatal stress increase the risk for childhood asthma?

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The prevalence of childhood asthma has dramatically risen in the past decade and already exceeds 10% in many western countries. Several studies have linked prenatal maternal stress to the development of asthma in children. Yet, these studies are correlational, confounded, do not limit the time of stress to the prenatal period and thus cannot prove causality.

The 2006 conflict between Hezbollah and Israel created a unique natural experiment that neutralized most of the potential confounding parameters and confined the time of experienced stress. In a moderately sized study (n=92), we have found that the prevalence of asthma more than tripled in children whose mothers were pregnant and lived under massive missile attack during the war (high-stress group) as compared to children whose mothers were pregnant a year before/after the war or lived in areas not under missile attack (2*2 design). In addition, birth weight, a potential mediator, was more than 300 gr lower in the high-stress group. These findings stress the importance of psychological interventions during pregnancy as prophylactic measures for asthma

Oral Presentation Abstracts

Fatigue and associated clinical, psychological and social factors in paediatric multiple sclerosis: a systematic review

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Background

This review aimed to investigate and evaluate the evidence for associations between fatigue and clinical, psychological and social factors in children and adolescents with MS

Methods

Empirical studies that examined fatigue in relation to at least one clinical, psychological or social factor in paediatric MS were included. Studies were identified by searching online databases, hand-searching reference lists, and requesting unpublished literature from key authors. Nine studies are presented in a narrative synthesis.

Findings

Clinical factors appeared to be largely unrelated to fatigue, whereas associations between fatigue and tests of neurocognitive functioning were mixed. Findings relating to fatigue and psychiatric disorders were also mixed. However, fatigue and depressed mood consistently correlated. A small number of studies indicated an association between fatigue and reduced quality of life and school performance.

Discussion:

Fatigue is a concerning symptom of paediatric MS, yet the evidence to date does not adequately explain its causes or impact. Future research should endeavour to identify clinical and psychosocial factors associated with fatigue in paediatric MS, so that interventions targeting potentially modifiable factors of fatigue may be developed.

Oral Presentation Abstracts

Not seeing eye-to-eye: differential reporting of chronic pain by children and their parents (PRIME C)

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Background

The Prime C study investigated the prevalence, impact and cost of chronic pain among 5 – 12 year olds in Ireland, using child self-report and parental report. Data suggests parents may underestimate and under-report extent and impact of chronic pain for their children.

Methods

A quantitative survey was used to assess location, quality and intensity of pain.

Findings

Data collected from 3113 children (54.23% female). Among parents, 4% (n=64) reported that one or more of their children had chronic pain compared to 10% of children's self-reported pain. Only 23% of children who selfreported chronic pain had a confirmatory parental report. Similarly, when parents stated that their child had chronic pain this was not reported by the child themselves in 20% of cases. Majority of these children were reported (by teachers and parents) as living with chronic, painful conditions, yet the children did not report any associated chronic pain.

Discussion

There are significant inconsistencies between children's self-report and parental reports of pain, indicating a need to further understand this mismatch of views.

Oral Presentation Abstracts

Understanding adolescent adjustment to maternal cancer

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Background

The objective of this study was to understand adolescent adjustment to maternal cancer. It also includes the maternal perspective on the adolescent's experience, an area that has received scant attention to date.

Methods

In this qualitative study ten adolescents between 14 and 19 years of age and ten mothers with cancer diagnosis in the previous two years participated in semi-structured interviews. Interviews were transcribed and analysed using thematic analysis.

Findings

Adolescent interviews identified that the experience for adolescents is not a linear process but is linked to phases of maternal illness: adjustment, treatment and after treatment. Use of varied coping strategies, conflict and role changes and benefit finding featured in the themes. Maternal interviews identified themes which included a process/developmental account of adolescent adjustment, disclosure and conserving the family.

Discussion

This study provides an important insight into adolescent adjustment to maternal cancer including difficulties, challenges and positive growth. Maternal and adolescents perspectives allow identification of similarities and discrepancies in the experience which provides information that may be used to enhance the adjustment of adolescents and their families.

Oral Presentation Abstracts

How can siblings of chronically ill or disabled children be supported?

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Background

Burdens and resources of healthy siblings of chronically ill/ disabled children have been rarely investigated; results show a decreased quality of life and a higher risk for developing mental health/behaviour problems. The study aims to grasp the need for and what kind of support should be offered.

Methods

20 participants (10 actually adult siblings and 10 experts) were asked by using semi-structured interviews with regard to burdens and resources as well as whether and how primary-prevention interventions should be offered. Interviews were analyzed using qualitative content analysis.

Findings

Siblings reported (positive/ negative) impacts the ill child had on their lives and expressed that a group-offer would have been good at that time. It is consistently estimated that providing support is important. The experts described similar burdens, but also resources. Child-friendly teaching of coping strategies and resource-activation were described as important elements of support.

Discussion:

Results of the interviews showed that it is important to implement support for siblings of chronically ill / disabled children to offer age-appropriate education and to strengthen life skills.

Oral Presentation Abstracts

Health Care Climate, Posttraumatic Stress Disorder and its implications on Mothers' Attachment to their Baby

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Only a few studies focused on posttraumatic stress disorder (PTSD) following childbirth and its effect on mother-baby attachment. Existing data evidence a negative influence in mother-baby bond, resulting on inferior attachment levels in women meeting full/partial criteria for PTSD (Davies, Slade, Wright, & Stewart, 2008) and avoidant or anxious attachments (Ayers, Eagle, & Waring, 2006). The objective is to analyze the relation between perceived health care climate, mother's childbirth PTSD and post-natal attachment. In this cross-sectional study 219 mothers aged from 18-47, mostly married, with a 1-12 months child, answered PPQ-Perinatal Posttraumatic Questionnaire, MHCCQ Modified Health Care Climate Questionnaire and MPAS-Maternal Post-natal Attachment Scale. Results showed that education and health care climate predict PTSD symptoms. Age, PTSD symptoms and climate predicts mothers' attachment. We conclude that PTSD symptoms have a negative effect on mother-baby relationship, particularly for younger mothers. Due to its relevance on mother-baby future bond, further research should address other contextual and individual variables which may increase or have a buffering effect on mothers' vulnerability to PTSD.

Oral Presentation Abstracts

Early parental loss, grief counseling and maladaptive coping in adulthood

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The stress of early parental loss (loss) may increase the risk of depression, anxiety and health-related problems in adulthood. However, few studies have investigated coping in adults who have experienced loss and utilized grief counseling (counseling). This study compares adult maladaptive coping strategies according to loss and counseling. We identified persons above 18 years, who had lost a parent before age 30, and who had received counseling at one of four major counseling centers in Denmark. Two registry-based comparison groups were identified: bereaved adults who had not received counseling and non-bereaved adults. All participants (N=2426) completed a questionnaire including coping measured by the Brief COPE. Multivariate regression analyses adjusted for gender, age at loss, gender of parent lost, education and perceived family support were performed. Bereaved adults reported significantly higher substance use, behavioral disengagement and emotional eating compared to non-bereaved adults. Counseling participants reported significantly higher substance use and self-blame than non-participants. This study suggests higher maladaptive coping in adults who have experienced early loss, even after counseling, providing ground for further research.

Oral Presentation Abstracts

Dyadic adjustment, psychological distress and parenting alliance during transition to parenthood

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Background

Transition to parenthood is a developmental period of the family life cycle that strongly impacts marital relationship. The purpose of this investigation was to study marital change during transition to parenthood and to examine the role of antenatal psychological distress and parenting alliance.

Methods

56 participants (28 couples) completed questionnaires on 3rd trimester of pregnancy and two months after childbirth, measuring: dyadic (marital) adjustment, psychological distress and parenting alliance.

Findings

In our sample, dyadic adjustment improved throughout transition to parenthood ($t=-3.11$; $p=.003$). Linear regression showed that antenatal dyadic adjustment ($\beta=.66$, $p<.001$) and psychological distress ($\beta=-.22$; $p=.027$) had an important effect on postnatal dyadic adjustment ($R^2_{\text{adjust}}=.55$).

Furthermore, parenting alliance was a mediator in the relation between antenatal and postnatal dyadic adjustment. Therefore, the more developed the parenting alliance, the higher is the dyadic adjustment after childbirth.

Discussion

Antenatal dyadic adjustment had an important impact on marital relationship and parenting after childbirth. Understanding the factors underlying marital change would allow to adequately support couples throughout transition to parenthood, promoting family health.

Oral Presentation Abstracts

Anticipated regret and health behavior: a meta-analysis

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Objective

Regret is a cognitive emotion that is unique to decisions and that people seek to avoid. We sought to understand anticipated regret's role in motivating health behaviors.

Methods

We systematically searched electronic databases for studies of anticipated regret and behavioral intentions or health behavior. We used random effects meta-analysis to synthesize effect sizes from 81 studies (n=45,618).

Findings

Anticipated regret was associated with both intentions ($r = .50$, $p < .001$) and health behavior ($r = .29$, $p < .001$), such that greater anticipated inaction regret predicted stronger intentions and behavior, while anticipated action regret showed the opposite association. Anticipated regret generally was a stronger predictor of intentions and behavior than other anticipated negative emotions and risk appraisals.

Discussion:

Anticipated inaction regret has a stronger and more stable association with health behavior than previously thought. The field should give greater attention to understanding how anticipated regret differs from similar constructs, its role in health behavior theory, and its potential use in health behavior interventions.

Oral Presentation Abstracts

Applying the Extended Theory of Planned Behavior to health behaviors: metaanalysis and empirical test

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The Extended Theory of Planned Behavior (eTPB) includes sub-components of attitudes (instrumental/affective), norms (injunctive/descriptive) and perceived behavioral control (self-efficacy/perceived control) to predict intentions and action. A meta-analysis (Study 1) and empirical test of the eTPB (Study 2) in relation to health behaviors are reported. In relation to intentions, Study 1 showed self-efficacy and affective attitudes had large, while other constructs had small-medium sized correlations; regressions showed all constructs except perceived control were significant predictors. In Study 2, regressions controlling for past behavior, showed similar patterns. In relation to action, Study 1 showed intentions, self-efficacy and affective attitudes had medium-large, while other constructs had small-medium sized correlations; regressions showed intentions, self-efficacy, affective attitudes and descriptive norms were significant predictors. In Study 2, regressions controlling for past behavior showed intentions, affective attitudes, injunctive norms and descriptive norms (protection behaviors), or intentions, self-efficacy, affective attitude and descriptive norms (risk behaviors), were significant predictors of action. eTPB has utility in predicting health behaviors and suggests novel relationships informing intervention studies.

Oral Presentation Abstracts

Towards optimal effectiveness of tobacco packaging communications: determinants and beliefs predicting smoking initiation and cessation

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Background

Although threatening health communications have been found to be ineffective or even backfire, they remain popular. Identifying alternatives to warning labels on tobacco packaging requires first identifying the determinants and beliefs that predict whether people start to smoke or successfully quit. The current literature synthesis provides this starting point for developing effective tobacco packaging communications.

Methods

A query was entered into PsycINFO and MedLine. Hits were screened by two independent screeners in two rounds, and 114 hits were retained for extraction. Qualitative and quantitative results were extracted and integrated qualitatively or, where appropriate, meta-analysed with the R metafor package using random-effects models.

Findings

Quantitatively, in addition to risk perception, a number of other predictors emerged, including self-efficacy, attitude, and subjective norm. In addition to quantitative evidence, a large number of beliefs that potentially predict smoking initiation and cessation were identified.

Discussion

On the basis of the identified determinants and beliefs, tentative recommendations are made regarding specific theory- and evidence based communications on tobacco packaging. In addition, a list of beliefs requiring quantitative verification is presented to guide future research.

Oral Presentation Abstracts

What is the psychological impact of self-weighing? A meta-analysis

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Background

Many interventions addressing weight-related problems (e.g., obesity) promote self-weighing. However, while self-weighing has been associated with weight loss, there is mixed evidence regarding the psychological impact of this behavior.

Methods

Twenty four studies (N = 11,490) were identified that included a measure of the frequency of self-weighing and one or more psychological outcomes. Psychological outcomes were divided into those pertaining to (i) affect (e.g., depression, anxiety), (ii) psychological functioning (e.g., self-esteem), (iii) body-related attitudes, and (iv) disordered eating.

Findings

There was no association between self-weighing and affect ($r+ = .00$, 95% CI: $-.08$ to $.08$), body attitudes ($r+ = .05$, 95% CI: $-.04$ to $.15$), or disordered eating ($r+ = .01$, 95% CI: $-.13$ to $.14$). There was, however, small-sized negative association between self-weighing and psychological functioning ($r+ = .09$, 95% CI: $-.15$ to $-.03$).

Discussion

The present findings suggest that, for the most part, self-weighing is not associated with adverse psychological outcomes. Effect sizes were, however, heterogeneous and subsequent analyses will focus on identifying moderators of the relationship between self-weighing and psychological outcomes.

Oral Presentation Abstracts

The impact of changing attitudes, norms, and self-efficacy on health-related intentions and behavior: a meta-analysis

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Background

Health behavior theories converge on the hypothesis that attitudes, norms, and self-efficacy are important determinants of intentions and behavior. The present review analyzed whether changing attitudes, norms, or self-efficacy leads to changes in intentions and behavior in studies that used random assignment, manipulation checks, and post-intervention measures of outcomes.

Methods

Literature searches obtained 193 experimental tests that met the inclusion criteria, which were meta-analyzed via STATA.

Findings

Experimentally induced changes in attitudes, norms, and self-efficacy all led to medium-sized changes in intention ($d+ = .50, .41, \text{ and } .50$, respectively), and engendered small to medium-sized changes in behavior (norms- $d+ = .20$; attitudes- $d+ = .37$; self-efficacy- $d+ = .46$). These effect sizes generally were not qualified by the moderator variables examined (e.g., study quality, methodological characteristics).

Discussion

The present review (a) indicates that correlational studies (and related eta-analytic syntheses) overestimate the effect of cognitions on intentions and behavior, (b) lends novel, experimental support for key predictions from health behavior theories, and (c) demonstrates that interventions that modify attitudes, norms, and self-efficacy are effective in promoting health behavior change.

Oral Presentation Abstracts

A pilot trial of three very brief interventions for physical activity in primary care

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Background

Very brief interventions (<5 minutes) for physical activity have substantial public health potential but there is uncertainty about their potential effectiveness and cost. Our pilot trial assessed these for three promising interventions as part of preventative health checks.

Methods

394 adults (mean (SD)=53 (9.1) years, 59% female) were randomized to a Motivational (n=83), Pedometer (n=74), or Combined (n=80) intervention following the health check, or Control (n=157). At 4-week follow-up we assessed physical activity by accelerometers and self-report, beliefs about increasing activity, and cost.

Findings

We found no significant differences in objective or self-reported activity across groups. Probability of a positive effect on physical activity was higher for the Motivational and Pedometer interventions. Participants in all intervention groups reported stronger intentions to increase activity compared to Control. Average cost of the interventions varied between £6.83 and £20.98 per patient.

Discussion

Very brief interventions for physical activity in primary care are inexpensive and can potentially increase physical activity. A fully-powered trial is assessing cost-effectiveness and estimated public health impact of the Pedometer intervention.

Oral Presentation Abstracts

Effects of an oral hygiene skills training on self-efficacy and decisional balance

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Background

Self-efficacy and decisional balance are related to self-reported and clinical oral health, but the effect of oral hygiene skills training on these psychological parameters is rarely examined. This study assessed the effect of an oral hygiene skills training on these two parameters.

Methods

In a randomized controlled study 76 participants with fixed dentures received training either only on basics of toothbrushing or additionally on the Fones- or Bass-technique. Self-efficacy, decisional balance, oral hygiene skills (plaque after toothbrushing) and oral health (gingival bleeding) were assessed at baseline and 12 weeks after training.

Findings

Self-efficacy and decisional balance were not related to oral hygiene skills at baseline. Groups differed in pros of toothbrushing ($p < 0.05$) after 12 weeks; best values in the Fones group.

Discussion

These results showed that self-efficacy and decisional balance should be assessed in oral hygiene skills training as well. Additionally, findings of our working-group indicated that the influence of the training on the assessed parameters varied between different kinds of samples. This should be considered in further trainings.

Oral Presentation Abstracts

The effects of stage-matched and stage-mismatched interventions on cervical cancer screening

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Background

The study investigated the effects stage-matched and stage-mismatched interventions for women in the motivation phase (pros and cons) and volitional phase (cues to action). Additionally, we tested if matching the interventions to age-specific pros and cons would increase the effectiveness of behavior change interventions.

Methods

A longitudinal experimental design study was used (6 experimental groups and 1 control group). Women (N = 1936) reported their behavior, beliefs and intentions to attend cervical cancer screening (CCS).

Findings

Results indicated that the stage-matched and stage-mismatched interventions performed equally well in terms of their effects on intention and behavior. Similar effects of age-matched and age-mismatched interventions were obtained.

Discussion

Brief interventions may have similar, small effects, on intention and self-reported behaviors, regardless their stage-matching status.

Oral Presentation Abstracts

Acknowledging uncertainty about long term effects of the HPV vaccination: effects on HPV vaccination intention

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Background

Being a relatively new vaccine, there remains uncertainty regarding the potential long term effects of the Human Papillomavirus (HPV) vaccination targeting 12-year-old girls. Therefore, in an experimental web-based study, we investigated the effects of acknowledging versus ignoring this uncertainty. A message in which uncertainty was acknowledged was expected to be more persuasive than a message in which uncertainty was ignored.

Methods

695 mothers of girls-to-be invited to the HPV vaccination round of 2014 were derived from the National Immunization Register. Participants were randomly assigned to one of two conditions: 1) acknowledging or 2) ignoring uncertainty about potential long term effects .

Findings

Acknowledging uncertainty resulted in a lower intention towards receiving the HPV vaccination than ignoring it.

Discussion

This study implies that it seems better to ignore uncertainty regarding potential long term effects of the HPV vaccination on the short term. However, based on inoculation theory we recommend future communication to acknowledge this uncertainty, because this will build resistance to future counterarguments and therefore has more positive long term effects than when uncertainty is ignored.

Oral Presentation Abstracts

Increased latrine cleanliness after an intervention tailored on psychological determinants: a longitudinal study in Burundi

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Background

Access to improved and clean sanitation is fundamental for the prevention of diarrhoea.

Methods

A baseline survey in rural Burundi had revealed the relevant psychological determinants underlying cleaning behaviour, namely satisfaction with cleanliness, self-efficacy and commitment. Through a follow-up survey, we evaluated promotional household visits targeting these determinants in order to improve latrine cleanliness. Households receiving a promotional visit about water related behaviours served as controls.

Findings

Wilcoxon's sign ranked test revealed that, after the intervention, latrine cleanliness, measured by short observations, had increased in the intervention group (N = 171; Z = -3.06; p = .002; r = .23), whilst there had been no change in the control group (N = 104; Z = -1.38; p = .167; r = .14). Results of a logistic regression showed that intraindividual differences in the psychological factors satisfaction with cleanliness, self-efficacy, perceived effort and perceived difficulty could explain the increase in the household's latrine cleanliness. Differences in "commitment" were not relevant.

Discussion

The results confirmed that interventions tailored to relevant psychological determinants were able to effectively increase latrine cleanliness.

Oral Presentation Abstracts

A resilience-based alcohol education intervention for adolescents in the UK

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Background

Alcohol education often encourages avoidance of excessive drinking, but is rarely designed to help young people to develop the skills required to manage alcohol in social situations. A resilience-based approach could help young people to limit alcohol intake by encouraging the development of skills to manage alcohol in social situations.

Methods

We developed a two-lesson school-based intervention designed to model, and facilitate discussion of, moderate drinking. A prospective longitudinal design was used to examine the intervention impact on personal resilience, drink-refusal self-efficacy (DRSE), and intended and actual alcohol intake. The sample consisted of 16-18 year olds in intervention schools and 2 control schools (total N = 500).

Findings

Analyses provide important information about students' responses to the new classroom materials. Comparisons between intervention and control schools indicate that these new lessons may have an important impact on resilience, DRSE, and alcohol intake.

Discussion

Resilience-based interventions employing realistic models of behaviour may be an important complement to existing alcohol education in facilitating healthy behaviours among young people, particularly in cultures of normative alcohol use.

Oral Presentation Abstracts

Temporal consequences and message framing - evidence for interactions in two samples and two behaviours

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Background

Message framing interventions have not yet consistently investigated how temporal consequences (short-term versus long-term) affects persuasion outcomes on (antecedents) of health behaviours, despite the fact that Construal Level Theory predicts that temporal distance affects if positive (or negative) consequences should be more persuasive.

Methods

Data were collected in 278 adults (study 1, fruit intake) and 193 adolescents (study 2, hearing loss prevention). Participants were randomly allocated to read one of four messages and reported on intentions, attitudes, and risk perceptions. Data were analyzed using univariate analysis of variance (study 1) and repeated measures analysis of variance (study 2).

Findings

In study 1, gain-framed messages were more persuasive when combined with long-term outcomes, whereas loss-framed messages were more persuasive when combined with short-term outcomes. In study 2, lossframed messages were also more persuasive when combined with short-term outcomes, but no persuasive effect was found for gain-framed messages.

Discussion

Combining temporal consequences with message framing results in more persuasive messages. Adolescents may not be as susceptible for long-term outcomes, potentially because of their lack of temporal discounting.

Oral Presentation Abstracts

Question-Behavior-Effect: impact of interviews and mHealth methods on colorectal cancer screening

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Background

Examine the effectiveness QBE in increasing cancer screening in two delivery modes: telephone interview and text-messaging.

Methods

Study 1: 14,472 participants were randomly assigned to a telephone interview or control. Study 2: Following an invitation letter, text-message reminders were sent to 50,000 participants, randomized into five groups: four experimental, one control. Messages were interrogative or declarative, each with/without reference to social context.

Findings

Uptake was higher in the experimental groups than in the controls in both studies. In study 1, uptake was higher the interview group than in the control's in all analyses and at all-time points, with effect size range 0.05 to 0.19. In study 2, all versions but one (the declarative) had a significant effect compared to the control; participation was the highest in the interrogative and interrogative-with-social-reference conditions with effect size of 0.05-0.06.

Discussion

The routine use of the inexpensive text-messaging mode is recommended. Though increased screening was modest, absolute numbers in population-level translate into a clinically significant change.

Oral Presentation Abstracts

Can answering questions change health behaviours? A systematic review and meta-analysis

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Questioning behaviour and/or cognitions (question-behaviour effect; QBE) may change health behaviours. The present review aims to consolidate QBE studies regardless of behaviour domain and design.

Three databases were searched for papers (1980-April 2014). Included papers measured cognitions and/or behaviour without another intervention vs an unassessed control. Effect sizes were calculated using meta-analysis. Meta-regressions assessed moderator and effect size associations.

96 studies were included from 381 screened papers. Results supported a small significant QBE ($g=.14$, $p<.001$). Bias was a significant moderator, low risk of bias studies had a smaller effect ($g=.07$) than unclear/high risk of bias ($g=.22$). QBE was found to increase healthy behaviours ($g= .16$, $p<.001$), and reduce some health risk behaviours ($g= .08$, $p= .04$).

This review shows QBE as a somewhat effective intervention to increase healthy behaviours. Small effects in low risk of bias studies warrant caution in determining its effectiveness. The limited evidence in risk behaviours suggests it is generally ineffective in reducing these behaviours. Further high quality studies and focus on risk behaviours are needed.

Oral Presentation Abstracts

Longitudinal profiles of personal work goals associate with work engagement in a six-year study

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Background

The research addresses the impact of personal work goals on work engagement among managers. Goals were investigated with a four-wave longitudinal data (2006-2012) and were classified on the basis of contents into categories of competence, progression, well-being, job change, job security, organisation, and financial goals (Hyvonen et al., 2009).

Methods

The study was conducted among 276 young Finnish managers who were all under 36 years in 2006. Patterns of goal contents were examined using the latent class analysis (LCA). After deciding the best LCA solution, differences in work engagement between the patterns were investigated with ANCOVA.

Results

Three longitudinal goal profiles were identified: Development and success (n = 114), Career progression (n = 114), Well-being and stability (n = 68). The profile of Development and success related to significantly higher work engagement at the last measurement. In turn, the profile of Well-being and stability related to the lowest work engagement. Promoting personal work goals related to the professional development and success of employees can have beneficial implication on employees' occupational health in the long term.

Oral Presentation Abstracts

Predicting meaning of work and organizational commitment across age groups

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Background

This study examines the predictive value of job demands and resources on Meaning of work and Organizational commitment across three different age groups; young workers (< 30 years), middle aged workers (30-49 years) and older workers (> 50 years).

Methods

Data was collected from a survey of employees at a Norwegian university (N= 5637). Hierarchical multiple regression analysis was used to test the relationship between the antecedent variables and Meaning of work and Organizational commitment in the three age groups separately. Age differences in the experience of these two variables were tested by one-way ANOVA.

Findings

In general, both job demands and resources are related to Meaning of work and Organizational commitment. However, the relative importance of demands and resource varied across the different age groups. Overall, older workers reported highest scores on Meaning of work and Organizational commitment.

Discussion

Differences in the antecedents of Meaning of work and Organizational commitment across age groups suggest that different interventions should be considered when aiming to improve meaning of work and organizational commitment among younger, middle aged and older workers.

Oral Presentation Abstracts

Exploring positive experiences in the work environment in Norwegian nursing homes – a mixed methods study

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Introduction

Workplace empowerment and job satisfaction in health care have been found related to higher quality care and lower patient risk. The aim was to explore how do health care workers in Norwegian nursing homes perceive positive factors in the work environment?

Methods

The research question was examined using multiple methods. 11 workers participated in an in-depth interview. 105 workers responded to questionnaires (The Systematizing Person-Group Relations Instrument (SPGR), and the Sense of Coherence (SOC)). Analyses of qualitative data were conducted using grounded theory and the qualitative using correlation measurements.

Results

Significant correlation between a strong SoC and high scores on the synergy in the SPGR were found. Interview revealed that better planning, empowerment and predictability made the workers more attended for the patients.

Conclusions

Using humor and positive thinking in the work environment was found to be important to give the workers opportunity to attend to the patients in a god a way. Nursing home organizations must promote positive health and a healthy work environment to achieve a meaningful working life for health care personnel in nursing homes.

Oral Presentation Abstracts

Working in institutional care: higher quality of work is associated with higher quality of care

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Background

This study examines whether, on a unit-level, quality of work (psychosocial job characteristics and organizational factors) is associated with quality of care provided. Furthermore, on the basis of the energy depleting process and motivational process described by the Job Demands-Resources model it is tested whether this association is mediated through employee fatigue and commitment.

Methods

About 45,000 employees working in 845 units of organisations providing care for mentally and/or physically disabled filled in self-report questionnaires assessing quality of work, fatigue (CIS-20), organisational commitment, and quality of care provided by their unit.

Findings

Aggregated data on unit level yielded significant associations between quality of work aspects and quality of care provided. Higher quality of care was related to higher staffing resources, better work procedures, higher job control, and more social support between colleagues. Mediation analysis confirmed a partial mediating role of employee fatigue and organisational commitment in the quality of work – quality of care relationship.

Discussion

The findings suggest that improving quality of work may enhance quality of care, partially through improving health/energy and motivation of employees.

Oral Presentation Abstracts

Effectiveness of a multi-module eHealth intervention on work-related outcomes among working cancer survivors

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Background

Cancer survivors are eager to stay working but often experience disease-related problems. This study assessed the effectiveness of a work-module within a multi-module eHealth intervention (KankerNazorgWijzer) meant to help dealing with impaired cognitive, physical, emotional functioning and practical issues.

Methods

A RCT (n=463) compared Usual Care (UC) and the intervention (ExpC) among cancer survivors. Workrelated outcomes (6-months): job satisfaction, work limitations, productivity loss. We only included workers.

Findings

Most participants were women (85%) with breast cancer (79%). Baseline job satisfaction was high (M=4.1; scale 1-5) with little work limitations. Multiple regression analyses revealed no intervention effects on work outcomes (p-values >.22). Within the ExpC group work-module users reported more increase in weekly working hours compared to non-users (UC: M=6.7; ExpC: M=10.9. p=.049) and appreciated the module (M=7.0; scale 1-10).

Discussion

Preliminary results suggest the intervention is appreciated but not effective in improving work functioning. Lack of effects might be related to sample characteristics (part-time, few work-limitations). It is worthwhile to test the module in cancer populations experiencing more problems.

Oral Presentation Abstracts

Pediatric pain program outcomes: differences and similarities between discrete primary clinical diagnoses of chronic pain

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Background

Although treatment studies often include multiple types of pain, researchers call for examination of discrete conditions (Palermo, 2012). We hypothesized patients with differing types of pain would show improvement following participation in our pain program.

Methods

Adolescents (N=213) in a 3-week interdisciplinary pain program with a diagnosis of generalized pain (GP; N=58), abdominal pain (AP; N=67), or headaches (HP; N=88) were included in the pre/post treatment design.

Measures included

Functional Disability Inventory (FDI), Pain Catastrophizing Scale (PCS), Center for Epidemiologic Studies Depression Scale (CESD), and Multidimensional Anxiety Scale for Children (MASC-2).

Findings

Differences on the FDI, PCS subscales, and self-reported pain level were evident at admission and discharge between conditions ($p < .05$). All conditions showed significant improvements in FDI, PCS, CESD, and MASC-2 ($p < .01$) except for PCS Magnification in GP and PCS Helplessness in AP ($p > .05$).

Discussion

Psychological adjustment, functional disability and response to an interdisciplinary pain treatment program differ between youth in discrete conditions. These findings help us understand youth with chronic pain and their response to treatment.

Oral Presentation Abstracts

Depressive symptoms in patients with COPD as predictors of efficacy of pulmonary rehabilitation

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Background

Pulmonary rehabilitation (PR) aims to improve exercise capacity in patients with chronic obstructive respiratory disease (COPD). However, not all patients do benefit from PR. In the present study we examined whether depressive symptoms are associated with improvement of endurance exercise capacity.

Methods

78 patients with COPD who participated in PR. Age 56 \pm 10 years, FEV1%predicted 42% baseline lung function, body mass index (BMI), incremental and endurance shuttle walk tests (ISWT/ESWT) and depression test (BDI-II) were performed. The ESWT and BDI-II were repeated after PR.

Findings

ESWT and BDI-II change after PR; Δ ESWT was 182 \pm 110 m (p=0.006), BDI-II pre PR was 10.6 \pm 6.7 (p=0.09) BDI-II post PR (p=- 0.19) and Δ BDI-II (p=-0.07) were not correlated with Δ ESWT.

Discussion

Depressive symptoms do not predict response to exercise training. Change in depressive symptoms and response in exercise capacity after PR seem to be two distinct processes.

Oral Presentation Abstracts

Expressive writing intervention for newly diagnosed cancer patients

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Distress at the time of cancer diagnosis predicts distress during the cancer trajectory. This study examined the impact of home-based expressive writing intervention (EWI) on distress among newly diagnosed cancer-patients and whether EWI would be particularly beneficial for individuals with high social constraints in expressing their cancer-related emotions.

Newly diagnosed prostate cancer patient (N=76) were randomized to: 1) EWI group who wrote, three-times at home, over a three-week period about their concerns regarding their cancer; 2) Control Group who wrote about facts regarding their cancer. Anxiety/depression (HADS), Impact of Events (IES), and Social-Constraints Scales were administered at baseline and 3 and 6 months post- intervention.

ANCOVA revealed a significant group effect ($p=0.005$) and a significant group \times social constraints interaction ($p=0.001$) for IES. The EWI had lower symptoms at both follow-ups and EWI buffered the adverse effects of social constraints on symptoms. Identical results were obtained for HADS.

Home-based expressive writing reduces distress among newly diagnosed cancer patients particularly for those that feel constraints in expressing their cancer-related emotions. This suggests the importance of providing patients with early interventions allowing emotional expression.

Oral Presentation Abstracts

Psychosocial interventions for cancer-related fatigue in post-treatment cancer survivors: a systematic review of the literature

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Cancer-related fatigue (CRF) is a persistent, distressing symptom that can extend into long-term survivorship. A systematic literature review using Cochrane methodology was conducted to evaluate psychosocial interventions to reduce fatigue in samples comprised exclusively of post-treatment cancer survivors. Databases were searched extensively and two authors independently screened titles and abstracts for their eligibility for inclusion. Randomised controlled trials which evaluated psychosocial interventions for adults with post –treatment CRF were included. Two authors independently extracted data using a standard data extraction form and assessed the risk of bias of selected studies.

The search returned 6,380 papers. Following an assessment of the titles and abstracts, 12 papers remained. These included interventions employing CBT, sleep hygiene and psychoeducation techniques. The review highlighted heterogeneity in terms of sampling, methodology, and study quality. The findings suggest that psychosocial interventions were effective in addressing cancer-related fatigue. However, few interventions for CRF specifically target cancer survivors who are post-treatment.

This review was the first to evaluate if psychosocial interventions are effective for post-treatment CRF and indicated a need to embed psychological theory in the design process.

Oral Presentation Abstracts

Features of physical activity interventions associated with effectiveness in musculoskeletal disorders: systematic review and meta-analysis

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Background

Physical activity (PA) can help manage age-related decline in musculoskeletal (MSK) function. However the features of effective interventions to promote PA remain unclear.

Methods

Systematic review with meta-analyses were conducted to examine the effectiveness of PA interventions in adults with MSK disorders. Univariate meta-regression and sub-group analyses guided by incidence/concurrence matrices explored the association between intervention features (behaviour change techniques (BCTs) and modes of delivery).

Findings

Thirty-five trials were included. Overall interventions effectively increased PA (SMD=0.40, 95%CI 0.14-0.65, p=0.002). Greater increases in PA were associated with interventions with fewer sessions (beta=-0.022, 95%CI -0.044 to -0.0002, p=0.04) and those that were self-management-based rather than instructor-based (p=0.002). Most common BCTs were behavioural practice-rehearsal (75%), demonstration of the behaviour (67%) and goal setting (behaviour) (33%). In over 90% of cases, 'behavioural practice-rehearsal' was used together with 'graded task', 'demonstration of behaviour', and in instructor-based interventions. Neither the number of BCTs nor any individual BCT was associated with increased effectiveness.

Discussion

PA interventions can be effective in MSK disorders. Considering the concurrence of intervention features is important for understanding potentially synergistic effects.

Oral Presentation Abstracts

Food Choice in 12-13 years old adolescents: an extended Dual Process Approach

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Background

The present study used a dual-process approach in order to explore the role of reflective and impulsive processes, as well as the interaction effect of executive functioning on a food choice task in a sample of adolescents.

Methods

285 adolescents completed a questionnaire assessing reflective (intention and PBC over eating) and impulsive measures (temptation to eat) and a computer task measuring executive function (inhibitory control). Food choice was assessed using a Behavioural Choice Task.

Results

Hierarchical linear regression analysis showed that reflective measures explained 17% of the variance in food choices in step 1. By adding temptation in step 2 an additional 13% was explained. In the last step, the interaction between temptation to eat unhealthy snacks and the inhibitory control significantly predicted food choice.

Conclusions

Temptation to eat seems to have a stronger impact on an immediate food choice task when compared with intentions and PBC. Adolescents with greater inhibitory skills were better at resisting temptation to eat unhealthy food. These results demonstrate that imparting executive functioning skills to adolescents might support healthier choices.

Oral Presentation Abstracts

The intention-behaviour gap does not differ according to socioeconomic status in French adolescents

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Background

Socio-economic status (SES) has been shown to exert both a direct and indirect (via socio-cognitive variables) effect on health behaviour, in various behavioural domains. Recent research has also demonstrated that SES moderates the strength of the relationship between socio-cognitive variables (intentions) and behaviour.

Purpose

This study aims to explore whether, as has been demonstrated for other health behaviours, the intention-behaviour gap is more pronounced for those of lower SES, in a sample of French adolescents.

Methods

Effects were tested on data from a longitudinal questionnaire study (CAPSCA) examining healthy eating behaviour in French adolescents (N=1132). SES, socio-economic status and socio-cognitive variables were measured at baseline and healthy eating behaviour two years later.

Findings

Controlling for SES, sex and socio-cognitive variables, there was no significant interaction between SES and intentions on healthy eating behaviour, $b=0.06$, $t(1114)=1.26$, $p=.21$.

Discussion

We discuss how the absence of a moderating effect of SES on the intention-behaviour gap in this sample could be due to environmental factors specific to the French school system, the behavioural context examined here, or the measurements used.

Oral Presentation Abstracts

The use of condoms among HIV-positive men, stigmatization, and the Health Action Process Approach

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Background

The goal of the study was to test the associations between the frequency of condom use among people living with HIV, the cognitions included in the Health Action Process Approach (HAPA), and the aspects of stigma of living with HIV (negative self-image, disclosure-related stigma, public attitudes stigma, and personalized stigma).

Methods

A total of 102 HIV-positive men, recruited in Centre for Prophylaxis and Treatment of Infectious Diseases and Drug Addiction (Poland) participated in the study. The mean age was 37.6 years (SD = 9.35).

Findings

Across the HAPA constructs, outcome expectancies were the strongest correlates of the frequency of condoms use in anal contact in stable relationships. Regarding stigma dimensions, lower levels of disclosure-related stigma were associated with more frequent use of condoms in anal intercourses during sex with casual partners.

Discussion

This study points to the role of condom use-related outcome expectancies, referring to protection from sexually transmitted infections and effects on sexual satisfaction.

Oral Presentation Abstracts

Why do people use dietary supplements? Exploring the role of psychological and socio-cognitive factors

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Background

Worldwide, the use of dietary supplements is increasing. However, there is still no scientific consensus whether supplements are necessary to meet one's daily nutritional needs. This study attempted to explore psychological and socio-cognitive motives for (non)usage, applying the Integrated Change Model as theoretical background.

Methods

In total 11 focus group discussions were held among users (n=28) and non-users (n=19) separately. A theory-based structured interview guide with open ended questions was used during each session. Interviews were audiotaped, then transcribed and analyzed following the principles of framework analysis.

Findings

Some themes identified were: lack of confidence towards the nutritional knowledge of general practitioners and dieticians, skepticism towards the practices of food industry in general (e.g. sprayed fruits and vegetables) and the nutritional value of food. Additionally, many people had several misconceptions about how supplements are produced and controlled.

Discussion

This study contributes to the understanding why people use dietary supplements. This information can be applied for setting up communication strategies adapted to the characteristics and needs of consumers.

Oral Presentation Abstracts

A systematic review of self-regulation mediators of success in obesity interventions: the SPOTLIGHT project

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Background

This review examined individual self-regulation mediators of medium/ long-term weight control, physical activity, and energy intake in clinical and community behavior change obesity interventions.

Methods

Studies were identified through electronic database searches. Studies reporting on experimental designs were eligible if: a) reported intervention effects in overweight/obese adults on at least one of the hypothesized mediators (self-regulation factors), and b) the association between these and outcomes of interest (weight change, physical activity, energy intake). Methodological quality and content of studies were extracted. Data was analyzed by means of narrative synthesis.

Findings

Thirty-five studies testing 42 putative mediators were included. Ten studies included formal tests of mediation. Identified mediators for medium/long-term weight control were higher levels of autonomous motivation, self-efficacy/barriers, self-regulation skills, flexible eating restraint, and positive body image. For physical activity, significant putative mediators were high autonomous motivation, self-efficacy, and use of self-regulation skills. For dietary intake, no consistent mediators were identified.

Discussion

Despite limited evidence, this review identified important self-regulatory mediators of change in obesity-related behaviors in overweight/obese individuals that can contribute to improve future interventions' design and efficacy.

Oral Presentation Abstracts

What influences nurses eating and physical activity behaviours? A theoretical domains framework informed investigation

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Background

Our understanding about the determinants of nurses eating and physical activity is limited. The aim of this study was to assess nurses' perceptions of the relative importance of domains within the theoretical domains framework (TDF) in influencing their eating and physical activity behaviours for weight management.

Methods

Semi-structured qualitative interviews with 16 nurses to explore factors that behavioural theories suggest may influence nurses' eating and physical activity for weight management followed by a survey of 245 nurses to confirm and generalise the qualitative findings were undertaken. Important theoretical domains were identified using a hybrid process of inductive and deductive content analysis of the qualitative data and descriptive statistics of the survey data. The TDF guided data collection and analysis.

Findings

Shift work (theoretical domain of "environmental context and resources") and lack of planning strategies ("behavioural regulation") were identified as important barriers. Important enabling influences included beliefs about benefits ("beliefs about consequences") and routine ("behavioural regulation").

Discussion

Findings suggest that future efforts to change nurses eating and physical activity for weight management should consider targeting environmental and intrapersonal level factors.

Oral Presentation Abstracts

Day-to-day variations in health behaviors and daily functioning: two intensive longitudinal studies

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Health behaviors tend to show a high variability over time within the same person. However, most existing betweenperson research can only assess a snapshot of a person's behavior. Two longitudinal studies examine the natural daily variability in health behaviors and their implications for affect and academic performance.

In two intensive longitudinal studies with up to 65 assessment-days over one academic year, university students (Study 1: N = 292; Study 2: N = 304) reported sleep quality, physical activity, snacking, learning goal achievement, positive and negative affect.

Multilevel structural equation models showed that on days on which participants reported better sleep quality or more physical activity than usual, they also reported increased positive affect, decreased negative affect, and better learning goal achievement. Higher snacking was only associated with increased positive affect. Affect was a mechanism underlying the relation between health behaviors and learning goal achievement. Importantly, sleep quality was a stronger predictor for affect and learning goal achievement than physical activity or snacking.

These findings have important implications for low-threshold interventions targeting the improvement of daily functioning.

Oral Presentation Abstracts

Job search, work volition, and stigma for unemployment among unemployed adults in Japan

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The economic turndown in the last two decades resulted in higher unemployment rate than ever in Japan. Due to long-believed lifetime employment system in Japan, not much has been known for job search behaviors and their psychological correlates among unemployed individual. In an aim of exploring relationships among job search behaviors, work volition, and stigma for unemployment among unemployed adults, an online survey was conducted with 400 unemployed individuals. Participants were asked to rate scales of job search behaviors and support, stigma attached to unemployment, work volition, and mental health indices. Two hundred and eighty two adults (70.5%) reported that they had not engaged in any job search activities for the past three months. We thus sought to examine job search preparation, performing correlational analyses with these 282 individuals. It was revealed that job search preparation was weakly correlated with job search support. Work volition and job search self-efficacy were negatively correlated with stigma for unemployment and scores of GHQ. The findings suggested the need for changing stigma for unemployment as well as negative health states.

Oral Presentation Abstracts

Impact of military life stressors on health and well-being of single-parent military families

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Background

Single-parent military families experience various unique stressors associated with the demands of military life. However, there has been minimal research examining the impact of military life on the well-being of singleparent military families in Canada.

Methods

An electronic survey was completed by single Canadian Armed Forces members (N = 552) who had dependents of 19 years old or younger.

Findings

This study showed that CAF single-parent families encounter many challenges, including financial strain, stressors related to relocation and deployment, and poor work-life balance. Moreover, military stressors have a negative impact on the health and well-being of both single parents and children. However, important protective factors were also identified, including the availability of peer and organizational social support and active parental coping.

Discussion

This research will allow the military organization to help families to maintain and even enhance resiliency in the face of the stressors associated with military life. Various recommendations for mitigating the impact of militarylife- related stressors, such as increasing awareness of family assistance programs and developing a policy that establishes consistent practices for flexible work arrangements, are offered.

Oral Presentation Abstracts

The job-demand-control model for predicting German university students' subjective stress

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Background

According to Karasek's job-demand-control model (1979) an employee's possibility to control his work (decision latitude) and the job's demands characterize the working situation as a straining or senseless respectively as an active or passive job. This is also influenced by the social support by coworkers and the employer. The model was transferred to the situation of German university students and the job content questionnaire (JCQ) was adapted. This study's purpose is to test Karasek's main hypotheses of subscales' relationships in explaining students' subjective stress.

Methods

Self-reported data from 1,523 German university students aged 23 years was analyzed in a descriptive way and by correlation and multiple regression analyses.

Findings

Like Karasek suggested, stress is negatively correlated with decision latitude (-.18**) but strongly positively associated with psychological demands (.58**). Overall, 37% ($p < .001$) of students' stress is explained by JCQ subdimensions decision latitude, psychological demands, social support and expectations for the future.

Discussion

Students' daily living situations in the light of the Bologna reform are discussed in order to derive preventive starting points.

Oral Presentation Abstracts

Quality of life following cancer treatment: impact of illness perceptions, distress, fatigue, and cognitive failures

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Background

We describe the interplay between several psycho-emotional factors leading to a lower quality of life (QoL) in cancer survivors. The Antecedent-Beliefs-Consequences framework of cognitive behavioural therapy facilitated understanding the association between illness perceptions (IPs), distress, fatigue, cognitive failures, and QoL.

Methods

Through a cross-sectional design, cancer survivors (n=57) were compared to matched controls on IPs, distress, fatigue, cognitive failures, and QoL. Patients were on average 2.7 years following treatment for lymphoma, breast cancer, germ cell tumours, and sarcoma.

Findings

All factors differed between groups. QoL was influenced by the perception of symptoms and illness duration (27.1%), distress and fatigue (29.7%), and cognitive failures (5.6%). Anxiety mediated 95% of the impact of IPs on cognitive failures; cognitive failures mediated 45% of the impact of anxiety on QoL; depression mediated 65% of the impact of IPs on QoL.

Discussion

Negative IPs led to mood changes, which triggered cognitive failures, influencing patients' QoL. Discussing patients' perception of the duration and number of post-treatment symptoms may improve their QoL. However, longitudinal monitoring is warranted to explain whether these variables may be causally related.

Oral Presentation Abstracts

Neuropsychological outcome and quality of life in adults after neonatal surgery for congenital heart disease

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Congenital heart disease (CHD) and open-heart surgery may lead to an increased risk of cognitive and behavioural disorders in children. Our goal is to determine the long-term neuropsychological outcome of this population, now adult, operated for CHD during neonatal period, as it has never been studied before.

Sixty-five adults with CHD (ACHDs) and forty-one healthy subjects matched in age, gender and socio-cultural level had participated. The assessment, based on validated tools (tests, scales and structured clinical interview), concerns cognitive functions, mood and quality of life (QoL).

Compared to healthy adults, ACHDs present more visuospatial and executive function difficulties. Moreover, they have a higher lifetime prevalence of depression and social phobia. ACHDs have a good QoL as no difference had been observed between the groups. However, in ACHDs the presence of executive function deficits, of depression or social phobia during life is associated with a poorer QoL.

ACHD population appears to present an increased risk of cognitive and psychological impairments which could reduce their QoL. A better understanding of their outcome could contribute to the development of adapted remediation and psychotherapy.

Oral Presentation Abstracts

The associations between meaning in life and quality of life among post-stroke patients

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This study investigated the relationship between two types of meaning, adjustment to post-stroke situation, and somatic domains of quality of life in a longitudinal sample of patients with stroke.

Data was collected two times, with a 4-weeks interval between Time 1 (T1) and Time 2 (T2). Patients in post-stroke rehabilitation with speech difficulties and atony (N = 89, 46,1% women), aged 25-85 filled out the questionnaire, assessing their meaning in life, the power of meaning making, quality of life.

The results indicated mediation effects after controlling for T1 QOL indicators. Patients who reported higher levels of the meaning in life (T1) were likely to report greater adjustment (T1) which in turn was related to better quality of life in somatic domain at T2. Further, patients who reported higher levels in somatic domain of QOL (T1) were likely to report greater meaning in life (T2) which in turn predicted better sense of balance (T2). The meaning in life and meaning-making processes should be taken into account when considering post-stroke adaptation and their quality of life.

Oral Presentation Abstracts

Quality of life in patients on peritoneal dialysis: a 12-month longitudinal study

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Background

Quality of life (QOL) impairments are common in dialysis and are associated with higher morbidity and mortality, but little is known about the course of outcomes overtime, especially for patients on peritoneal dialysis (PD). This study sought to investigate QOL across 12 months in PD.

Methods

115 PD patients completed the SF-12 and Kidney Disease Quality of Life Short Form at baseline and 12 months later. Intra-individual changes in Physical (PCS), Mental (MCS), and Kidney Disease Component Summary scores (KDCS) were identified based on the minimally important clinical difference threshold.

Findings

PCS and MCS remained stable. Significant decreases were noted for KDCS-total, patient satisfaction and staff encouragement while the effects of kidney disease improved. While for most QOL remained stable, 23–48% had deteriorating QOL; No sociodemographic or medical variables were found to be associated with course of outcomes.

Discussion

Although PD offers the convenience of home-based care, it is associated with diminishing perceived quality-of-care. This highlights the need for improving health service and care for patients on home-based dialysis.

Oral Presentation Abstracts

A selfregulation intervention program for obese adults with a gastric balloon

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Background

This study describes an intervention program for obese adults (BMI: 27-40) who chose to have a gastric balloon for a period of 6 months, in order to loose weight.

Methods

This intervention program included 2 groups of participants that followed either 1) a shortterm self-regulation intervention program (SRI; N=48), or 2) no psychological consultation (N=40). In both groups participants were free to choose to consult a dietician and/or physiotherapist.

Research question

Is there a difference in weightloss between the two groups? Socio demographic variables, weight and psychological wellbeing (SCL-90) were assessed at the start of the program (T1). Psychological wellbeing was measured directly after the SRI and weight loss after 6 months (T2). Anova analyses were used.

Results

A significant difference in weightloss ($\alpha < 0.05$) and psychological complaints ($\alpha < 0.05$) between the two groups was found, in favour of the SRI group.

Discussion

The results suggest that a SRI, including phases of goal setting, planning, goal pursuit, emotion regulation, empowering social skills, anchoring, and (process) evaluation, directed at changing dietary and exercise behavior, positively affects both psychological wellbeing as weight loss.

Oral Presentation Abstracts

Interaction of physical activity and interoception in children

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Background

Previous research indicates that interindividual differences in the perception of bodily processes (interoceptive sensitivity, IS) interact with the degree of physical activity (PA) in adults. Whether there is a similar relationship between PA and IS in children has not been investigated yet. Therefore, the aim of this study was to investigate the interaction between IS and PA during physical performance tasks and in everyday situations.

Methods

IS was assessed using a heartbeat perception task in a subsample of 49 children within the health promotion program “Join the Healthy Boat”. PA was examined using a physical performance task, assessing the distance covered during a standardized 6-minute run. Everyday PA was measured by a multi-sensor device.

Findings

Children with higher IS performed better in the physical performance task. Additionally, based on energy expenditure defined as metabolic equivalents, IS was positively correlated with the extent of light PA levels in the morning and afternoon.

Discussion

IS interacts positively with the degree of PA in children supporting the idea that interoception is important for the self-regulation of health-related behavior.

Oral Presentation Abstracts

Maternal psychopathology, feeding practices and pre-schooler obesity risk: a longitudinal study

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The present study was the first to longitudinally examine associations between maternal psychopathology (depressive and anxiety symptomology, self-esteem and body dissatisfaction), pressure and restrictive child feeding practices, and risks for pre-schooler obesity (child BMI-z change) over two years.

Participants were 290 mother-child dyads from Melbourne, Australia. Questionnaires examining demographic information, mothers' psychopathology, feeding practices, and pre-schoolers' BMI data were completed. Preschoolers' BMI data was again obtained approximately two years later. Relationships were tested via path analysis and t-tests.

At two-year follow-up, path analysis found that although the proposed model was a good fit ($\chi^2 = 13.44(16)$, $p > .05$), only family income significantly predicted child BMI-z score change ($\beta = 0.13$, $p < .05$). Maternal psychopathology and child feeding practices were not significant predictors of pre-schoolers' obesity risk. Independent t-tests revealed that children of mothers with either elevated body dissatisfaction or anxiety symptoms had significantly greater increases in BMI-z change.

Results suggested maternal body dissatisfaction and anxiety may increase obesity risk in pre-schoolers. Future research into these contributors may assist in reducing the obesity epidemic and associated physical and psychological consequences.

Oral Presentation Abstracts

A network approach to understanding child and parent causal attributions in childhood obesity

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Background

Illness attributions affect psychological adjustment, while parental attributions are associated with treatment initiation, acceptability, engagement and outcome. Current knowledge of child and parent causal attributions in paediatric obesity is in its infancy. The purpose of this study was to investigate child and parental casual attributions in paediatric obesity using network analysis.

Methods

A cross-sectional design was used employing the diagram network analytic method. 56 participants (30 children, 26 parents) generated individual causal attribution maps. Network theory was used in the analysis of causal effects and results visualised using open source network visualisation software.

Findings

Separate aggregated maps were produced for children and parents. Child maps were analysed by eating style (emotional, external and restraint eating). Parent maps were analysed by child behaviour profile (externalising and internalising). An individual map was reproduced to illustrate the value of network analysis as a clinical tool.

Discussion

Investigation of child and parent attributional processes may enhance the treatment of paediatric obesity through the provision of a potential treatment target and a mechanism to individually-tailor obesity treatment for children and parents.

Oral Presentation Abstracts

Development of an evidence-based intervention improving body composition and autonomous exercise motivation in youngsters

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Background

We aim to combat obesity in youngsters (11-13y), combining biological and psychological insights. Concerning body composition, overweight youngsters have a higher muscle mass compared with normal-weight youngsters. They are stronger and better in exercises wherein the focus is on absolute strength, making them more motivated to engage in strength exercise and ultimately maintain a physically active lifestyle (DOI:10.1097/MCO.000000000000099).

Methods

Applying a theory- and evidence-based approach, we developed an intervention improving body composition and autonomous exercise motivation.

Findings

The school-based intervention consists of: 1. A guideline for Physical Education teachers to safely integrate strength exercises in PE-classes, based on current insights of strength exercises in youth. 2. A motivational intervention guideline for teachers to increase the autonomous motivation to exercise, with online and face-to-face lessons. 3. An online environment for youngsters to monitor their own progress (physically and motivationally). We will show materials and movies about the program.

Discussion

This multidisciplinary approach aims to make youngsters more motivated to be physically active, resulting in a healthier body composition. This will be evaluated in an RCT.

Oral Presentation Abstracts

Parental influences on healthy behaviors and body mass changes among adolescents with overweight and obesity

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Background

This study investigated the relationship between perceived parental behaviors (parental diet and physical activity, and parental verbal pressure), and changes in body mass index (BMI) among adolescents with overweight or obesity.

Methods

Data was collected three times, with a 2-month interval between Time 1 (T1) and Time 2 (T2), and a 11-month interval between T2 and Time 3 (T3). Adolescents (N = 100) aged 13-19 with BMI above 24.01 filled out the questionnaire, assessing their dietary behaviors, physical activity, perceived parental behaviors, and parental verbal pressure. Adolescents' weight and height was measured objectively.

Findings

Adolescents who reported higher levels of perceived parental diet and physical activity (T1) reported healthier diet, higher levels of physical activity and lead healthier lifestyle at T2 and T3, and consequently had lower BMI at T3. In contrast, there were no indirect effects of the perceived parental verbal pressure (T1) through adolescents' behaviors (T2) on their BMI (T3).

Discussion

The role of parents' healthy behaviors should be taken into account when considering adolescents' overweight and obesity prevention and treatment programs.

Oral Presentation Abstracts

Targeting Intention, Motivation and Engagement in Physical Activity Interventions (TIME-PAI): a meta-analysis examining effective components

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Background

Intention and motivation predict behavior (change); and engagement with behavior change interventions is vital to their success. However, it is not known which components of interventions are associated with increases in intention, motivation and engagement. This systematic review and meta-analysis investigates this question among interventions to increase physical activity (PA).

Methods

Intervention studies that assessed changes in a measure of intention or motivation for PA, and/or engagement with intervention materials, were coded with BCTTv1. Random effects meta-analyses, comparative subgroup analyses and meta-regressions examined the effects of BCTs and modes of delivery on changes in intention and motivation for PA, and on intervention engagement.

Findings

Overall, interventions had a significant main effect on measures of intention and motivation for PA. Several intervention components were significantly associated with changes in intention and motivation, as well as with increased participant engagement with intervention materials.

Discussion

This study identifies intervention components associated with changes in intention and motivation for PA, and with greater engagement with PA interventions. These results can help researchers develop and refine the motivational aspects of interventions to increase PA.

Oral Presentation Abstracts

Developing effective health behaviour change interventions: a novel 'Realist' methodology for formative process evaluation

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Background

Developing a novel methodology for formative process evaluation of behaviour change interventions following MRC guidelines for process evaluation of complex interventions (2014) using a Realist Evaluation approach.

Methods

A logic model (developed from Realist Review, case studies, focus groups) outlined context-mechanism-outcome chains (CMOs) of interest in bringing about intended behaviour change. Nine practitioners delivering the intervention, and 30 men in intervention participated. Session recordings were rated according to presence/absence of intended behaviour/s. 'Realist interviews' explored CMOs of interest for intended behaviour change. Framework Analysis (FA) was used; the framework built from CMOs.

Findings

This novel methodology provided rich detailed data regarding contexts, mechanisms, and outcomes of interest and their impact on intended behaviour changes. Iterative intervention development was informed by identifying behaviours happening/not-happening, and linking these with theory and data about CMOs important in that behaviour change.

Discussion

This novel method for understanding how and in what context/s mechanisms for change act to bring about behaviour change in an intervention supports development of interventions more likely to affect intended health behaviour change.

Oral Presentation Abstracts

Effective behaviour change techniques in health behaviour change interventions: a review of meta-analyses

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Background

Coding of intervention descriptions for inclusion of specific behaviour change techniques (BCTs) is becoming an increasingly popular means for identifying 'active ingredients' of interventions and to inform the design of optimally effective interventions.

Methods

An electronic search identified 16 meta-analyses that met the inclusion criteria. Data were extracted from moderator analyses to determine differences in average effect sizes associated with the presence versus absence of each distinct BCT.

Findings

The BCTs most commonly reported on were 'prompt specific goal setting' (data extracted from 15 metaanalyses; k), 'prompt barrier identification' (k=14), 'prompt self-monitoring of behaviour' (k=14), 'provide information on consequences' (k=13), 'provide feedback on performance' (k=13), 'use of follow-up prompts' (k=13), 'plan social support or social change' (k=13), 'provide instruction' (k=12), and 'prompt review of behavioural goals' (k=12). Of these, the inclusion of all but one BCT (follow-up prompts) appeared to be associated with larger effect sizes than non-inclusion.

Discussion

The results suggest that the inclusion of particular BCTs are likely to increase the effectiveness of interventions, and contribute to the emerging science of behaviour change.

Oral Presentation Abstracts

The role of temporal framing in narratives about excessive sugar consumption

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Background

Narrative storytelling can be used to convey health risk information. This research aimed to determine the influence of temporally framed narratives about excessive sugar consumption on motivation to reduce intake and behaviour at follow-up.

Methods

In study 1 (N = 69), participants read a narrative which described negative outcomes as occurring to a significant number of people every day ('day-frame') vs. every year ('year-frame'). Sugar consumption was recorded 7-days later. In study 2 (N = 294), we also included a control condition in which the outcomes were presented without a temporal frame.

Findings

In study 1, participants spent longer reading the narrative message in the 'day' vs. 'year' frame condition. For those low in eating self-efficacy, the 'day' frame was associated with greater worry and higher intentions to reduce sugar consumption. In study 2, there was greater transportation when the narrative contained the 'day' frame compared to when it contained the 'year' frame or no frame.

Discussion

The persuasive effects of narrative communications may depend on the temporal context in which the outcomes are set.

Oral Presentation Abstracts

Health warnings on plain packs do not promote quitting intention: results from two EMA studies

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Background

Fear-inducing warning labels on tobacco products are widely used, despite theory and experimental evidence suggesting that fear appeals are ineffective and may even cause denial, disengagement, or maladaptive behavior.

Purpose

To examine effects of plain packaging health warnings on quitting intentions and its predictors in smokers' everyday life.

Methods

Two Ecological Momentary Assessment studies tested whether smokers report higher risk appraisals, self-efficacy, and quitting intentions immediately after seeing a warning compared to random times of the day (Study 1, n=33), and whether smoking from plain packs results in higher quitting intentions, risk appraisal, and self-efficacy than smoking from branded packs (Study 2, n=62).

Findings

Encountering health warnings did not increase self-efficacy, risk appraisal or intention, however, self-efficacy and risk appraisal were predictors of intention.

Discussion

Health warnings on plain packs seem inefficient in increasing quitting intentions, better messages focusing on self-efficacy are needed to make the most of plain packaging.

Oral Presentation Abstracts

Early implicit effects of self-affirmation in attending to graphic anti-smoking

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Background

Threatening health information can induce counter-productive defensive responses. Self-affirmation can reduce this defensiveness to health-risk information. In the current eye-movement study we measured whether self-affirmation causes more attention allocation (i.e., more fixations) to threatening anti-smoking information among those for whom the information is self-relevant.

Methods

After being randomized to a self-affirmation manipulation, 47 smokers and 52 non-smokers were exposed to a series of cigarette packs containing either high threat or low threat smoking-related images.

Findings

A significant three-way interaction was found among smoking status, affirmation condition and image. Self-affirmed smokers made more fixations to the cigarette packs displaying high threat and low threat images than did nonaffirmed smokers. Self-affirmed non-smokers showed less fixations to the high threat and low threat images than did non-affirmed non-smokers.

Discussion

The findings indicate positive attention effects of self-affirmation on early attention allocation processes among those for whom the information is self-relevant (i.e., smokers). The use of this implicit measure of performance in the form of eye movements contributes novel data to inform our understanding of the working mechanisms of self-affirmation.

Oral Presentation Abstracts

Reception of multiple health risk feedback: do good news compensate bad news?

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In real life, people often receive feedback for various health risk factors simultaneously. Hence, the actual individual risk profile might encompass a 'mixed' risk status with an evaluated status on one risk factor (e.g. high blood cholesterol) and a normal status on another factor (normal blood glucose). The present study tested how mixed versus consistent risk feedback profiles are processed.

In a public health screening, 817 participants received feedback about their actual coronary risk status profile (blood cholesterol, blood glucose, blood pressure). Afterwards risk perceptions and perceived need to act were assessed.

Participants acknowledged their individual risk profile in their risk perceptions ($F_s > 11.8$, $p_s < .001$). Interestingly, mixed risk profiles did not induce 'attenuation' effects in comparison to consistent risk profiles. Thus, an elevated reading on a risk factor induced a higher risk perception even when simultaneously a normal reading on another risk factor was present.

People are sensitive to the risk profile when receiving multiple risk feedback and do not compensate bad news with good news indicating relative accuracy. Resulting theoretical implications for the processing of health risk information are discussed.

Oral Presentation Abstracts

Is seeing really believing? Patient responses to retinal images in routine retinopathy screening sessions

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Background

Annual diabetic retinopathy screening provides an opportunity to relay visual feedback about patients' eye health. Viewing retinal images in the screening session has become standard care, but patients' understanding of their retinopathy risk and the link between diabetes and eye health is unclear. This study explored patients' experiences of viewing images and the impact this may have on illness cognitions and diabetes management.

Methods

Twelve semi-structured interviews were conducted with patients attending hospital-based diabetic eye screening in London. Five had retinal changes detected in the screening session. Verbatim transcripts were analysed using thematic analysis.

Findings

Two themes emerged: mood alteration and images as facilitators of communication with a health professional. The images were perceived as a valued part of the screening. They facilitated communication with the health professional, but repeated exposure to retinal images could result in habituation. Patients tended to use defensive coping, downplaying the significance of retinopathy, perceiving existing changes as reversible. Viewing images didn't alter motivation to control diabetes.

Conclusion

Access to diabetic retinopathy images is valued by patients, but it may hinder effective risk communication.

Oral Presentation Abstracts

Sleep quality and the association between hypertension and carotid arterial wall thickness: Toon Health Study

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Background

Modification effect of sleep quality on the association between hypertension and carotid arterial wall thickness was investigated.

Methods

Subjects was 1,965 men and women aged 30-79 who participated in the Toon Health Study in 2009-2012 with satisfactory information. Sleep quality was evaluated by Pittsburgh Sleep Quality Index (PSQI) and defined ≥ 6 as deteriorated. Hypertension was blood pressure $>140/90$ mmHg. Carotid arterial wall thickness (CAWT) was maximum intima-media thickness ≥ 1.1 mm in the common carotid artery. Logistic regression model was used to calculate odds ratios (ORs) of CAWT for hypertension according to sleep quality. Covariates were age, body mass index, smoking, drinking, exercise, psychological stress and antihypertensive drug use.

Findings and Discussion

The association between hypertension and CAWT was more evident for those who had deteriorated sleep quality in women. The respective multivariable ORs (95% CIs) were 1.47(1.00-2.18) and 2.41(1.41-4.10) for non-deteriorated and deteriorated in total (p for interaction=0.21), and 1.31(0.71-2.42) and 4.23(2.02-8.89), respectively, in women ($p=0.05$).

Oral Presentation Abstracts

Longitudinal effects of depression on cardiovascular risk in developing children: the LOOK Study

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Background

Depression constitutes a major risk factor for cardiovascular disease (CVD) in adults. This longitudinal study investigated the effects of depression on prognostic cardiovascular measures and behavioural risk factors in a cohort of Australian children.

Methods

Between the ages of 7 and 17 years, 852 children from the LOOK study completed measures of depression (Children's Depression Inventory), endothelial function (EndoPAT), pulse wave velocity (PWV), cardio-respiratory fitness (20m multistage shuttle run) and percent body fat (DEXA).

Findings

General linear mixed models indicated that children with greater depressive symptoms had significantly lower fitness, and greater percent body fat but there was no evidence of any effect on endothelial function or pulse wave velocity.

Discussion

Children as young as 7-years are already experiencing depressive symptoms, and more so in less fit and fatter children. Although we did not uncover any direct impact on cardiovascular function, given the risks associated with low fitness and obesity, depression in childhood may be exerting an early impact on the risk of developing CVD in later life.

Oral Presentation Abstracts

Associations between cardiovascular disease and post-traumatic stress disorder

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There is a large body of evidence linking cardiovascular disease and post-traumatic stress disorder (PTSD). However, the specificities of the association between these conditions are not well understood. The following review aims to highlight the current body of research, providing a comprehensive view of the relationship between cardiovascular disease and PTSD. Patients with PTSD experience maladaptive autonomic responses, secreting increased levels of stress hormones that, over time, damage the heart and blood vessels. Such neurobiological responses also contribute to the development of co-occurring mental health problems that modify cardiovascular functions in response to internal and external stressors. Research also suggests that experiencing a heart attack, may itself trigger PTSD symptomology. Survivors may experience flashbacks of the event, and actively attempt to avoid reminders while remaining hypervigilant to the threat of a repeat heart attack. The current body of research deserves critical consideration in an effort to inform the need for enhanced screening and treatment protocols. It also serves to reiterate the substantial connection and value in integrating the body and mind in medicine.

Oral Presentation Abstracts

Neurocognitive impairment in HIV: reliability and validity of a practical screening tool

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Background

Neurocognitive impairment (NI) prevalence in HIV is estimated >50%, associated with disease severity (CD4-cell count), medication adherence, and quality of life (QoL). Early detection is paramount but assessments are resourceintensive. This study explores the reliability and validity of a 3-item NI screening tool to identify patients eligible for comprehensive NI assessment.

Methods

A longitudinal study in which 138 patients completed baseline and follow-up (14.5 months later) questionnaires including NI and QoL (sf12_v2). The CD4-cell count prior to baseline was collected from clinic records. We examined internal consistency and test-retest reliability of the NI scale; and for convergent validity we examined the association of NI with CD4-cell count and QoL.

Findings

Cronbach's alpha at baseline and follow-up (.86 to .84), and test-retest reliability were good ($\rho=.75$, $p<.001$). CD4- cell count predicted baseline and follow-up NI ($\rho=.22-.21$, $p<.01$). NI predicted mental ($\beta.378$, $p<.001$) but not physical QoL, while controlling for age, CD4-cell count and baseline QoL.

Discussion

This 3-item NI screening tool seems reliable and valid and could be considered for routine screening for NI in HIVcare.

Oral Presentation Abstracts

Cortisol levels and suicidal behaviour: a meta-analysis

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Background

Suicide is a major cause of death worldwide, responsible for 1.5% of all mortality. The causes of suicidal behaviour are not fully understood. Dysregulated hypothalamic-pituitary-adrenal (HPA) axis activity, as measured by cortisol levels, is one potential risk factor. This review aimed to estimate the strength and variability of the association between cortisol levels and suicidal behaviour

Methods

Twenty-four studies met our inclusion criteria (N = 1,862; 765 suicide attempters & 1090 non-attempters). We compared participants identified as having a past history of suicide attempt(s) to those with no such history.

Findings

Overall there was no significant effect of suicide group on cortisol ($r = .059$, $p = .242$). However, age moderated the association between cortisol and suicide attempts. In studies where the mean age was below 40 years the association was positive (i.e., higher cortisol was associated with suicide attempts) and where the mean age was 40 or above the association was negative.

Discussion

These findings confirm that HPA axis activity, as indicated by age-dependent variations in cortisol levels, may play an important role in suicidal behaviour.

Oral Presentation Abstracts

Social changes in family building: British media constructions of cross border surrogacy

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Background

Media framing can influence people's perceptions of social changes in family building, and has the potential to influence their future actions.

Objectives

To analyze the type of framing and construction used in news print articles of international surrogacy arrangements.

Methods

UK newspaper media were searched using the search engine Lexis-Nexis for articles on international surrogacy. Content analysis was undertaken to identify use of gain/loss, alarm and vulnerability frames, as well as type of construction. Four researchers independently analysed articles using a coding strategy specifically developed for this study.

Results

57 articles were analyzed. Differences in constructions between serious (mainly legal, financial), middle market (legal, social) and tabloid (social, commercialisation) newspapers were found. The middle market was more likely to cover stories concerning gay than heterosexual families, and all newspapers portrayed surrogacy negatively using loss frames for surrogates and gain frames for commissioning parent(s).

Discussion

Social changes in family formation did not always follow legal changes and framing of legal and commercial problems was prevalent. The welfare of children and surrogacy for medical reasons were minimally addressed.

Oral Presentation Abstracts

Sexual identity priming impacts men's attitudes towards sexual risk-taking behavior and sexual behavior norms

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Background

Past literature has indicated that temptation for unsafe sex, masculinity endorsements and lower condom self-efficacy are associated with sexual risk-taking behavior and, consequently, HIV risk. Additionally, researchers have found that stereotypes can have negative psychosocial consequences for members of stereotyped groups, including conformity to stereotypes. Two studies explore the role of sexual identity priming in perceptions of norms, endorsements of sexism and conforming to sexual stereotypes in males.

Methods

Two experimental (N = 84, N = 147) studies tested whether sexual identity salience impacted reported sexual risk-taking.

Findings

Differences in temptation for unsafe sex and condom self-efficacy appeared in conditions when sexual identity was made salient (Study 1). Hostile sexism predicted participants' temptation for unsafe sex, whereas benevolent sexism did not (Study 2). Additionally, temptation for unsafe sex was strongly predictive of actual reported unsafe sexual behavior.

Discussion

These data suggest that sexual identity salience may change male attitudes about unsafe sex. Because temptation for unsafe sex has been associated with unprotected sexual behavior, sexual identity awareness may provide a pathway for intervention on unprotected sexual behavior in males.

Oral Presentation Abstracts

Personal and parental religiosity influences on HIV prevention behaviour among Pentecostal Botswana youth

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Background

Religiosity is a resource for safer-sex behaviour in HIV pandemic regions. We investigated influences of personal and parental religiosity on safer-sex behaviours among Botswana Pentecostal youth.

Methods

261 youth (female = 65%) from a major Pentecostal Church in Botswana completed the Botswana Youth Health Survey (BYHS). The BYHS included questions on personal and parental religiosity (intrinsic – extrinsic dimensions), personal predispositions (impulsivity), demographic characteristics, and safer-sex behaviours.

Findings

Personal religiosity, especially choir attendance, was positively associated with safer-sex behaviours. Personal religiosity was also positively associated with safer-sex behaviours but only in younger participants and those with longer congregation affiliations. Paternal and maternal religiosity explained safer-sex engagement, but it was paternal religiosity that exerted the strongest influence, reflecting underlying patriarchal structures. Parental and personal religiosity influences on safer-sex were indirect, through impulsivity.

Discussion

Religiosity impacted safer-sex behaviours but this was not straightforward. HIV prevention efforts may need to consider family religiosity, and utilize music and song appropriately. However, little progress can be made in terms of HIV prevention if Botswana patriarchal structures remain unchanged.

Oral Presentation Abstracts

Factors associated with STIs among traditionally circumcised men in the Eastern Cape Province, South Africa

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Background

The aim of this study was to explore factors associated with STIs among traditionally circumcised men in the rural areas of Eastern Cape Province, South Africa.

Methods

Cross sectional study using interviewer administered fully structured questionnaires was conducted among 1167 men who had undergone initiation and traditional male circumcision in rural areas of the Eastern Cape Province.

Results

The mean age of the participants was 19.8 years. About 31% reported having more than one sexual partner. A total of 37.9% reported inconsistent condom use and 21% did not use condom at last sex. Overall, 8.4% reported ever having had an STI. Logistic regression analysis showed that a diagnosis with an STI was associated with increasing age, being employed, having multiple sexual partners, knowing HIV status, perceived personal STI risk and beliefs about male circumcision and STI protection.

Discussion

The study findings reveal important target points for future cultural sensitive health education aimed at decreasing STIs among traditionally initiated and circumcised men.

Oral Presentation Abstracts

Socio-cognitive predictors of primary and secondary sexual abstinence among South African adolescents

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Background

While predictors of condom use among sub-Saharan African adolescents have been studied extensively, factors related to abstinence have received far less attention. This study identified socio-cognitive predictors of primary and secondary abstinence. Furthermore, this study assessed whether these socio-cognitive determinants could be modelled according to propositions of the I-Change Model.

Methods

South African students (N=1,351) filled in a questionnaire at baseline and after 6 months. Structural equation modelling was applied to assess direct and indirect effects.

Findings

Among sexually inexperienced adolescents, negative attitudes and lack of knowledge predicted sexual debut 6 months later. Among the sexually experienced, no socio-cognitive factors significantly predicted abstinence. Positive norms and attitudes towards abstinence did, however, predict secondary abstinence intentions. Explained variance proportions were low (all $R^2 < 0.30$). Knowledge and risk perception effects were mediated via attitudes and norms. Differences between boys and girls were present.

Discussion

Socio-cognitive factors yielded low proportions of explained behavioural variance. The relation with the sub-Saharan African context will be discussed and adaptations for future studies will be proposed.

Oral Presentation Abstracts

Acceptability of financial incentives and penalties for encouraging uptake of healthy behaviours: focus groups

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Background

Financial incentive interventions to encourage healthy behaviours are increasingly common. Previous literature lacks an empirical grounding on whether or not incentives are acceptable and why. We sought to gain an insight into the factors related to acceptability of financial incentive interventions for health behaviours and to understand preferred formats for financial incentives.

Methods

Eight focus groups were conducted with 74 members of the UK public. Audio recordings were transcribed verbatim with thematic analysis to identify key themes.

Findings

Five themes were identified: the nature of fair exchange; effectiveness and cost-effectiveness; impact on individuals and wider society; acceptable recipients; and 'other issues'.

Discussion

Participants were distrusting of financial incentive interventions. However, they were more likely to be deemed acceptable if they were fair to recipients, if they were closely monitored and evaluated, if they were shown to be effective and cost-effective, and if health education is also provided. Participants preferred positive rewards, and those in the format of shopping vouchers rather than cash incentives. These results highlight clear suggestions for how to design acceptable health promoting financial incentives.

Oral Presentation Abstracts

Overcoming barriers to implementation of routine alcohol screening and brief intervention in general practice

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Background

Despite its efficacy, alcohol screening and brief intervention (ASBI) has rarely been integrated into routine clinical practice. This study aims to identify strategies that tackle barriers to ASBI implementation in general practice by involving health professionals and prevention experts.

Methods

A three-round online Delphi study among health professionals and prevention experts was carried out in the Netherlands. The first open-ended questionnaire (N=39) generated ideas about strategies to overcome barriers. In the second round (N=214), participants were asked to indicate how useful they considered each strategy. Items without consensus were systematically fed back (N=144) in round three.

Results

Results show that participants consensually supported the usefulness of 62 strategies targeting the inner and outer setting of the general practice, as well as intervention and provider characteristics. Differences between groups were found between GPs and practice nurses on the one hand and prevention experts on the other hand.

Conclusions

This explorative study identified a broad set of feasible strategies and paves the way for future research to experimentally test the identified strategies using multifaceted approaches.

Oral Presentation Abstracts

Voluntary periodic abstinence from alcohol during “Dry January” and subsequent alcohol use

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Background

Periodic abstinence from alcohol may convey physiological benefits and enhance well-being. The aim of this study was to address a lack of information about: correlates of successful completion of a planned period of abstinence; and how success or failure in planned abstinence affects subsequent alcohol consumption.

Methods

857 British adults (249 men, 608 women) participating in the “Dry January” alcohol abstinence challenge completed a baseline questionnaire and a 6-month follow-up questionnaire. Key variables assessed at baseline included measures of alcohol consumption and drink refusal self-efficacy (DRSE).

Findings

Success during Dry January was best predicted by greater DRSE, more moderate drinking at baseline, intending to stop drinking after Dry January, and fundraising during Dry January. Participation in Dry January was related to reductions in alcohol consumption and increases in DRSE among all respondents at 6 month follow-up, regardless of success, but these changes were larger among people who successfully completed the challenge.

Discussion

Periodic abstinence from alcohol can lead to changes toward healthier drinking and greater DRSE, and is unlikely to result in “rebound effects”

Oral Presentation Abstracts

Review of reviews of school-based interventions to improve sexual health and reduce alcohol misuse

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Objective

To systematically review existing reviews of school-based sexual health education and alcohol misuse education, to summarise evidence relating to effectiveness, and to identify program elements that are effective in reducing risky behaviour.

Methods

Electronic bibliographies were searched systematically. Results were pooled using a narrative synthesis.

Findings

Twenty nine systematic reviews were included in the analysis. Six categories of programs were identified. Those focusing on abstinence-only are not effective in changing behaviour; however, programs that are comprehensive, promote sexual risk reduction, or target HIV can have positive impacts on knowledge, behaviour and health. We present a list of 28 factors that may increase the effectiveness of such programs.

Discussion

There are very few studies of the effectiveness of programs focusing on alcohol and risky sexual behaviour. However, programs targeting risky sexual behaviour can be effective. We suggest that certain types of program can lead to changes in behaviour, and we present a list of characteristics that may facilitate this. We encourage intervention developers to consider this list when developing programs.

Oral Presentation Abstracts

What are good practice characteristics in interventions and policies promoting healthy diet and physical activity?

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Background

This umbrella review aimed at eliciting good practice characteristics of interventions and policies aiming at healthy diet, increasing physical activity, and lowering sedentary behaviors.

Methods

A systematic review of reviews and stakeholder documents was conducted. Data from 7 databases and resources of 7 major stakeholders (e.g., World Health Organization) were systematically searched (10 documents met inclusion criteria). Overall, the review yielded 74 systematic reviews, 16 position review papers, and 19 stakeholders' documents. This investigation was undertaken by the DEDIPAC Knowledge Hub (the Knowledge Hub on the DEterminants of DIet and Physical ACTivity), which is an action of the European Union's joint programming initiative.

Findings

53 good practice characteristics were identified and group into 3 domains proposed by the World Health Organization's framework, (1) main intervention/policy characteristics, referring to the design, targets, and participants, (2) monitoring and evaluation processes, (3) implementation issues.

Discussion

The use of the proposed list of 53 good practice characteristics may allow for identification of success vectors in the domains of main characteristics of interventions/policies, their implementation, evaluation and monitoring processes.

Oral Presentation Abstracts

Resilience and lifestyle in patients with acute coronary syndromes: a prospective one-year follow-up study

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The importance of healthy lifestyle and the control of modifiable risk factors are cardinal aspects of prevention and treatment of cardiovascular diseases (CVD). In recent decades, several studies have shown that the manifestation and clinical evolution of CVD are related to a range of negative and positive psychosocial aspects, but research on the contribution of positive factors to the changes in lifestyle in patients with CVD is notably absent.

Aim of this study was to investigate the predictive role of resilience (i.e., perceived social support, sense of coherence, self-esteem, optimism, general and disease-specific self-efficacy), in behavioral changes in acute coronary syndrome (ACS) patients, especially for dietary pattern, physical activity, smoking status and alcohol consumption.

Two-hundred and seventy-five patients (83.3% men; mean age=57.1, SD=8. 0) were enrolled. Psychological factors and lifestyle were assessed during three measurement points (baseline, 6-month and 12-month follow-ups).

Results from regression analyses showed that disease-specific self-efficacy and sense of coherence can predict lifestyle improvement after ACS. These findings underline the importance of working on resilience factors to change lifestyle in patients with CVD.

Oral Presentation Abstracts

The role of physical post traumatic growth in predicting adjustment in prostate cancer

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This study explored how growth following a physical trauma predicts adjustment (physical post traumatic growth; PPTG). This study assessed whether mindfulness moderates the relationship between post traumatic growth and adjustment and whether the relationship between resilience and adjustment is mediated by growth.

Structural Equation Modelling was used to evaluate the role of post traumatic growth (PTG) in adjustment. Men 1-10years post prostate cancer treatment were recruited (n = 241). Measures: Post Traumatic Growth Inventory, Hospital Anxiety and Depression Scale, Connor-Davidson Resilience Scale, Patient Oriented Prostate Utility Scale, and Freiburg Mindfulness Inventory.

P-PTG predicted lower distress and improved quality of life (QoL). The relationship between resilience and adjustment was fully mediated by P-PTG and PTG. Furthermore, mindfulness was found to moderate the relationship between P-PTG, PTG and QoL. This structural equation model exhibits a good fit: $\chi^2(352) = 567.40$, $p < .001$, $Q = .160$, $CFI = .93$, $RMSEA = .050$ (.042-.058) $AIC = 787.40$.

This study supports P-PTG and its value in predicting adjustment and provides insight into the relationships between resilience, mindfulness, PTG and adjustment.

Oral Presentation Abstracts

Emotional adjustment and quality of life in men undergoing prostate biopsy

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Background

The incidence of prostate cancer in men has risen and numbers undergoing a prostate needle biopsy have increased correspondingly. While biopsy can be associated with adverse side effects, evidence of its psychological impact is lacking. This study assessed the relative importance of stress appraisal, self-efficacy and personality in predicting adjustment in men facing the threat of a cancer diagnosis.

Methods

Men attending a Rapid Access Prostate Clinic for a biopsy (N=115) participated in the study. Psychological variables included global stress measured by the Perceived Stress scale (PSS) and General Self Efficacy (GSES) and Sense of Coherence (SOC). Adjustment was measured by the profile of mood states (POMS) and quality of life (EORTC QLC – C30). Demographic data was also gathered.

Findings

Hierarchical regression analyses demonstrated that the set of predictors accounted for 46% of variance on total mood and 17% on global quality of life.

Discussion

Perceived stress emerged as the strongest predictor across all subscales. This is an important finding as stress has rarely been examined in this context. Research and clinical implications are discussed.

Oral Presentation Abstracts

Frequency of laughter predicts subsequent functional ability in communitydwelling older Japanese

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Introduction

The importance of positive emotion to our health has been recognized. The aim of this study was to investigate the association between frequency of laughter (FOL) and subsequent functional ability in communitydwelling older Japanese.

Methods

A two-year prospective study was conducted among 480 residents (male: 213, female: 267) of Tosa Town aged 65 and older without disability in performing basic activities of daily living (BADL) at baseline. Measures included self-ratings of FOL, functional ability, sociodemographic factors, depression, self-rated health and medical conditions. Odds ratio (OR) and 95% confidence interval (CI) of functional decline two years later according to level of FOL at baseline were estimated using logistic regression models.

Results

52 (10.8%) participants reported a decline in BADL at follow-up. Low FOL at baseline was significantly associated with a higher risk of functional decline, even after controlling for potential confounding factors (OR: 3.2, 95% CI: 1.3-7.8).

Conclusions

Frequency of laughter might be a predictor of subsequent loss or maintenance of functional ability among older people.

Oral Presentation Abstracts

Efficacy of Mindfulness: Improving the mood states and cognitive emotion regulation on women with Multiple Sclerosis

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Background

The object of the present study has been evaluating the effectiveness of mindfulness in changing the mood states and emotion regulation strategies among women with Multiple Sclerosis (M.S.)

Methods

In this study, semi-experimental design pre-test/post-test was done with the control group. The statistical sample included 30 under treatment women with M.S. living in Tehran, and was selected by an objective-based sampling method. These participants were randomly put in 2 groups of 15 individuals including the experimental group and the control group. The experimental group was trained in 8 sessions. The measurement tools were Brums and CERQ scales. The results were analyzed using T-Test method.

Findings

The results showed that the eight training sessions improved both the experimental group's mood states and cognitive emotion regulation ($P < 0.01$).

Discussion

These results suggest that the therapeutic sessions based on mindfulness strategies increased the vigor and reduced the tension, depression, anger, fatigue and confusion levels of the participants. Also, these strategies increased the use of positive strategies (positive refocus and programming, positive evaluation, acceptance) and decreased the use of negative strategies (self-blame, blaming others, rumination, catastrophizing).

Oral Presentation Abstracts

“I might be fit, but I don’t feel like exercising” - perceived barriers to self-efficacy

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Background

The lack of physical activity (PA) among older adults cannot be fully explained by deteriorating objective health. As hypothesized by Social-Cognitive Theory, perceptions of somatic states play an important role for self-efficacy (SE) and for PA. Among older adults, self-rated health was found to be a stronger predictor of SE than objective health measures.

Methods

This 3-wave study predicted SE and accelerometer-assessed PA in N=158 community-dwelling German adults aged 65+. The predictive value of objective or more general barriers for SE and PA (chair-raise test fitness, SF-36 pain, diagnosis with arthritis or arthrosis, falls within 12 months) were compared with perceived barriers (self-rated fitness, pain, illnesses and fear of falling).

Findings

Perceived barriers had a stronger association with SE than objective or more general measures and indirectly predicted PA via SE (all bootstrapped 95% CI not including 0; controls were baselines, age, gender, education).

Discussion

PA interventions might try to explicitly address participant’s perceived barriers for PA and test their amenability to individualized feedback about remaining PA capabilities to increase SE for PA among older adults with health issues.

Oral Presentation Abstracts

Staying physically active in old age: can prospective memory deficits be buffered by planning efforts?

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Background

Even if older adults have good intentions, health problems and cognitive deficits may be barriers for regular physical activity (PA). If the cognitive resource prospective memory (PM) is low, planning competencies may help translating intentions for PA into behavior.

Methods

Longitudinal data from 310 older adults (64+) with three measurement points (across 12 weeks) were analyzed. A mediated moderation model was estimated specifying the link between intentions and PA via planning (controlling for baseline characteristics). PM was introduced as moderator of this association.

Findings

Planning significantly mediated the intentions-PA link. The moderation was also significant: Older adults with worse PM could buffer their deficits by increased planning efforts.

Discussion

Particularly in older adults with decreasing cognitive capacities, planning strategies are important to stay active and healthy. Intervention studies for older adults should, therefore, target planning strategies and, additionally, consider training PM. Results are discussed by integrating research on health psychological theories and cognitive aging.

Oral Presentation Abstracts

Active ageing: towards an integrated model of physical activity among older adults

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Background

Physical activity can significantly buffer against age-related illness and disease. Despite existing initiatives to promote active ageing, many older adults remain insufficiently active. Drawing on sound behavioural theory, the aim of the current study is to develop an integrated behavioural decision-making model to understand better older adults' physical activity.

Methods

The model is informed by a prior qualitative study (Study 1) and the extant literature. Study 1 interviewed community-dwelling older adults (N=20, age range 67-87) to explore their meanings and perceptions toward physical activity engagement, and how these were conceptualised within the process of ageing. The findings informed Study 2 (N=212), a longitudinal assessment to determine the predictors of older adults' physical activity decision-making.

Findings

Study 1 revealed that older adults hold some unique perceptions related to individual, social-cognitive, and physical environmental types of influences of their physical activity engagement. Study 2 determined the mechanisms by which these processes operate.

Discussion

Understanding the influences of and mechanisms guiding older adults' physical activity is integral in supporting active and healthy ageing of older adults.

Oral Presentation Abstracts

Intimacy and sexuality of older adults in nursing homes: the aged care staff's perspective

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Intimacy and sexuality amongst the elderly people remain important and contribute to quality of life and well-being, including those living in nursing homes. However, these issues are often considered as a taboo in institutions and are therefore not addressed adequately, preventing the fulfilment of such needs for the residents. One of the obstacles seems associated to representations among the aged care staff on these topics. This presentation covers an extensive literature review on the subject. A critical analysis on existing research on aged care staff perspective allows us to identify three main themes: their perceptions; their actual practices and implemented strategies; and finally, mainstream approaches aiming at behavioural change among health professionals regarding their attitudes on intimacy and sexuality. Our analysis highlight that staff shows mostly positive attitudes on the importance of both issues, yet practices do not necessarily reflect this position. As a result of this gap, elderly are not considered in their needs and may even be repressed for having them. Finally, few means are implemented to raise awareness to provide the staff with necessary training.

Oral Presentation Abstracts

Positive aging for all? The protective effect of positive views on aging in precarious circumstances

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Background

Precariousness, defined as lack of security for retirement, can influence aging and result in health inequalities in old age.

Methods

A mixed methods approach was used to explore differences in psychosocial resources that middle-aged individuals from precarious and financially secure backgrounds use for positive aging and whether positive views on aging can compensate for lacking resources in midlife. Data from the German Ageing Survey (N=1,888 in the secure group, N=521 in the precarious group) were analyzed to explore the relation between resources, health and wellbeing, and to compare strategies used by precarious and financially secure individuals. Semi-structured interviews with middle-aged persons (N=20) from these two categories were analyzed in order to further explain the quantitative findings.

Findings

Precarious individuals have less resources for positive aging. However, having a positive view on aging can compensate for insufficient resources. Qualitative findings showed differences in strategies for resource management and perceptions of positive aging.

Discussion

Findings underlie the importance of positive views on aging as a resource for healthy aging interventions.

Oral Presentation Abstracts

Evaluation of 'Dream, Think, Act', a self-regulation intervention to promote mental wellbeing among young people

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Background

Effect and process of a self-regulation intervention ('Droom, denk, doe'; DDD) that promotes mental wellbeing among secondary vocational students.

Methods

A clustered RCT with a pretest-posttest (at 3 & 6 months) was carried out. 74 classes (1261 students, 74 classes) were randomized to the intervention (DDD) or control condition. DDD is a 5 module classroom intervention, developed with Intervention Mapping, using methods such as goal setting, action planning, and different materials (legacy game, buddy demonstration movies and peer mentoring). Measurements include psychological wellbeing (RPWB, MHI-5, SDQ), depression (CES-D), and self-regulation skills.

Findings

No differences were observed between the conditions over time. The process evaluations shows that students were generally favorable: 64% of the students liked the class exercises. Half of the students agreed with the statement that 'they have learned important things from DDD'. 85% of the students liked helping their buddy with his/her goal. The teacher evaluations showed that program implementation was not optimal, and they evaluated the program as complex.

Discussion

No positive overall intervention effects were found. Additional implementation strategies may be needed.

Oral Presentation Abstracts

The effects of implementation intentions with imagery on sub-clinical checking behaviours

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Background

Previous research on compulsive checking shows that checkers have impaired prospective memory as well as reduced cognitive confidence and vividness in their actions. Therefore, the study's objective is to increase cognitive confidence and vividness by using two interventions: implementation intentions and imagery.

Methods

This is a quasi-experimental between subjects study with 120 participants. The independent variables were the condition group and participants' checking score. The dependent variables were the prospective memory performance, confidence and vividness scores.

Participants were classified as high or low checkers based on their checking score. Half of the high/low checkers were instructed to use the two strategies prior to the task. All participants performed a prospective memory task followed by confidence and vividness measures.

Findings

Analyses revealed that individuals in the intervention condition reported increased confidence in their actions and their memory was more vivid compared to controls. No difference in prospective memory.

Discussion

The study proposes that implementation intentions with imagery increases cognitive confidence and vividness. The findings suggest that the intervention could possibly reduce checking repetitions within a clinical population.

Oral Presentation Abstracts

The combination of action planning and coping planning to improve medication adherence in transplanted patients

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Background

Medication nonadherence increases the risk of mortality in transplanted patients. The objective of this study is to test the effect of the implementation intention to improve medication adherence in transplanted patients.

Methods

In a randomized control trial, we tested the combination of action planning and coping planning to help patients to take their treatment as the doctor prescribed it. At T1, participants were randomly allocated to a control group (n=27) or to an experimental group to form implementation intentions (n=27). The coping planning helped patients to anticipate barriers to medication adherence whereas the action planning targeted more on memory lapses.

Findings

We expect that the participants in the experimental group will score significantly higher on the medication adherence scales after having formed implementation intentions relative to the participants in the control group.

Discussion

Showing the effectiveness of action planning and coping planning to improve medication adherence may be an easy way to help transplanted patients to have better health outcomes, without any substantial human and financial costs.

Oral Presentation Abstracts

Does situation specificity affect the operation of an implementation intention intervention to increase physical activity?

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Background

Interventions that ask participants to link critical situations with appropriate responses (implementation intentions) have shown promise in increasing physical activity. Whether the specificity of the stated critical situation influences the effectiveness of an implementation intention-based intervention to increase physical activity is tested.

Methods

Office workers (N=133) were allocated to: (a) form implementation intentions using a “volitional help sheet” that provided 10 specific critical situations; (b) form implementation intentions using a “volitional help sheet” that provided a single generic critical situation; or (c) think about critical situations and appropriate responses, but not form implementation intentions.

Findings

At two-month follow-up, participants who formed implementation intentions reported engaging in significantly more vigorous physical activity than those in the control condition ($d = 0.57$). There were no significant differences between participants between the two implementation intention conditions ($d = 0.04$).

Discussion

Situation specificity did not affect the operation of an implementation intention-based intervention to increase physical activity meaning that participants may not need to be offered exhaustive lists of specific critical situations with which to form implementation intentions.

Oral Presentation Abstracts

The role of planning and action control on avoiding exposure to pollution by using masks

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Background

Beijing is one of the most air-polluted mega cities in the world with over 100 haze days every year. Wearing face masks to avoid exposure to air pollution becomes necessary for the local peoples in the winter season. The aim of the current study was to explore the volitional determinants of the use of filtering facepiece respirators.

Methods

of the current study was to explore the volitional determinants of the use of filtering facepiece respirators. Methods: In a longitudinal survey, 164 young adults from Beijing, China, completed assessments at baseline (Time 1) and two weeks (Time 2) and four weeks later (Time 3). Planning, action control and face masks wearing were measured at three time points. A latent curve growth model (LCGM) was specified to reflect possible pathways of influence.

Findings

Planning, action control and face masks wearing linearly increased with time. The slope of action control mediated between slopes of planning and face masks wearing, with the standardized mediated effect is 0.88, 95% CI [0.66, 1.20].

Discussion

Results support a mechanism with a focus on volitional process, in which action control was a more proximal predictor of self-protective face mask wearing.

Oral Presentation Abstracts

Effectiveness of an online multi-module intervention on dietary behavior, smoking cessation, and physical activity

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Background

Online interventions are proven effective in changing lifestyle behaviors and therefore can be beneficial for cancer survivors. We assessed the online 'Kanker Nazorg Wijzer (KNW)' (Cancer Aftercare Guide) on diet, physical activity, and smoking outcomes.

Methods

Survivors participated in a RCT (intervention [IC]: n = 232, 79.3% females, mean age 55.6 years; usual-care control [UC]: n = 231, 80.5% females; mean age 56.1 years). We analyzed baseline and 6 months data (n=325; 70.2%) obtained from online questionnaires using multilevel analysis.

Findings

IC reported significant higher vegetable (B = 14.08, p = .003) and whole wheat bread (B = 0.43, p = .05) consumption and a nearly significant increase in days per week activity (IC = .34 days, UC = .20 days; B = .29, p = .09). A higher proportion of smokers (11.1%) quit smoking in IC (UC = 3.1%). Comparative tests were impossible due to the small numbers.

Discussion

Preliminary results indicate the KNW to be effective in changing dietary behavior. Trend effects on physical activity might consolidate over time, simultaneously with a decrease of possible medical complaints.

Oral Presentation Abstracts

Do telecommunication interventions support medication adherence to people with/at risk of CVD? Systematic review

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Background

Medication adherence is the best available option to prevent risks from CVDs and achieve favourable health outcomes. However, only half of the people with/at such risks do take their medications as prescribed. Telecommunication interventions using voice or text messages can provide tailored support to large number of people and in the long-term. This research aims to assess whether and how telecommunication interventions support people with/at risk of CVD to take their medications as prescribed.

Methods

Systematic literature review of RCTs was conducted and a random effect model was used for the metaanalysis.

Findings

Preliminary results showed the overall effect of the interventions on outcomes measured (n=16 studies, 9450 participants) to be $z=0.59$ (CI95% -0.18, 1.05), and not statistical significant. Analysis of BCTs and sensitivity analysis will be presented.

Discussion

Telecommunication interventions are effective at supporting continuous engagement with medication adherence interventions (e.g. more than 6 months) to large number of people. However, there is a need to further explore the factors that support medication adherence using voice and text messages interventions.

Oral Presentation Abstracts

Effects of monitoring and brief messaging interventions on medication adherence for people with type2 diabetes

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Background

There is enthusiasm for interventions that monitor behaviour and send brief messages to promote medication adherence. We conducted a systematic literature review to examine the effects of such interventions in patients with type 2 diabetes, and their basis in explicit theory.

Methods

Systematic electronic searches of five electronic databases identified eleven eligible randomised trials (fifteen interventions) with 4480 patients that reported effects on medication adherence.

Findings

Three interventions were based on delivering brief messages, six on monitoring of medication adherence, and six used both strategies. Only one study presented a low risk of bias. Improvements in self-reported medication adherence were observed in six interventions, although effect sizes were generally moderate. A meta-analysis of interventions combining monitoring and messaging strategies showed no overall difference in effect size between intervention and control groups (Cohen's $d=0.05$). Only six of the interventions had any explicit theoretical basis, and even these demonstrated little use of theory.

Discussion

Although interventions based on messaging and monitoring have the potential to improve medication adherence, additional high-quality research is needed, with greater use of theories of behaviour change.

Oral Presentation Abstracts

Effectiveness of an online intervention for people with HIV and depressive symptoms: a pilot study

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Background

Many people with HIV suffer from depressive symptoms. We developed an online self-help program for people with HIV and depressive symptoms, based on previous research. This pilot study investigated the effectiveness of the program on depressive symptoms in people with HIV.

Methods

The effectiveness of the program was examined in a one-group experimental design. The self-help program contains four main components: activation, relaxation, changing maladaptive cognitions, and goal attainment. Twenty participants worked on the program for six to eight weeks. A coach provided motivational support by telephone once a week. Depressive symptoms were assessed with the PHQ-9 and the CES-D at baseline and after completing the program.

Findings

We found that participants significantly improved on depressive symptoms from pretest to posttest. Furthermore, participants evaluated the program as easy to use and very helpful to them.

Discussion

Next, a RCT regarding the effectiveness of the program will be conducted. If the intervention shows to be effective, the program will be implemented. Many patients with HIV could then be reached and psychological care may be improved.

Oral Presentation Abstracts

Health theory in mobile technology apps supporting young people's long-term condition/s management: a systematic review

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Background

Prevalence of long-term conditions is rising in young people. Mobile technologies featuring software program applications or 'apps' are well used by young people for social networking and gaming. Apps are being increasingly utilized in health contexts. This systematic review's objective was to assess the effectiveness of smartphone and tablet apps in supporting young people's management of their physical long-term condition/s.

Methods

The search strategy combined indexed and free-text terms. Two reviewers independently searched hits generated from five bibliographical databases and identified articles meeting the inclusion criteria. Data extraction and quality assessment tools facilitated consistent analysis and synthesis. Inter-rater-reliability was assessed.

Findings

The search returned 1120 hits; four articles were included (one pilot randomized-controlled-trial and three quasiexperimental studies) with a combined sample size of 46. Apps were aimed at diabetes (n=2), asthma and cancer management. Further heterogeneity e.g. outcome measures and follow-up times prevented meta-analysis. Health psychology models were notable by their absence, with only one app reporting theoretical underpinning.

Discussion

The disparity between the volume of health apps available and the sub-set based on empirical evidence is of concern.

Oral Presentation Abstracts

Predicting adherence to diet and physical activity recommendations and weight loss after bariatric surgery

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Background

Psychosocial predictors of postoperative weight loss have been much studied with inconsistent findings. Little is known about factors related to adherence to post-surgical diet and physical activity guidelines the patients are recommended to follow to sustain weight loss and avoid weight gain. Within a self-regulatory framework, we aimed to examine the relationship between preoperative psychosocial factors and postoperative behavior besides weight loss.

Methods

In this prospective cohort-study 246 patients underwent gastric bypass. Weight was measured at the hospital and the patients completed an extensive questionnaire before, and one year after surgery.

Findings

Only age, previous diet attempts and snacking were related to weight loss, while several psychosocial factors were significantly associated with eating behavior and physical activity. Some of the factors positively associated with both physical activity and adherence to diet guidelines were motivation to change behavior, planning and body image, while depression was negatively correlated.

Conclusion

Our findings suggest that a number of psychosocial factors predicted the behavior necessary for a positive long-term outcome after bariatric surgery. If focusing primarily on weight loss, valuable information might get lost.

Oral Presentation Abstracts

Investigating factors associated with hormonal therapy adherence in breast cancer survivors: a systematic review

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Background

This review aimed to identify predictors of non-adherence and non-persistence to hormonal therapy in breast cancer survivors, in order to inform development of an intervention to increase adherence rates.

Methods

Included studies measured associations between adherence or persistence and predictor variables. Studies were identified by searching electronic databases and reviewing grey literature. Eligible studies were assessed for methodological quality, data was extracted and a narrative synthesis of the results was conducted.

Findings

The search identified 54 papers. The majority of research focused on clinical and demographic factors and found inconsistent results. The most consistent results showed that receiving specialist care, having more prescription medications and fewer hospitalisations often were related to increased adherence and persistence. Very little research investigated potentially modifiable factors. There was a small amount of evidence to suggest that medication beliefs were associated with adherence, but more high quality research is needed to confirm this.

Discussion

In order to increase adherence rates, and reduce rates of cancer recurrence and mortality, future research needs to identify psychosocial predictors of non-adherence which are amenable to change.

Oral Presentation Abstracts

Diabetes locus of control, autonomous motivation, diabetic care and medication adherence in type 2 diabetes

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Background

The present research aimed to examine: predictors of medication adherence in patients with type II diabetes; moderating effect of diabetic care and mediating role of treatment motivation on the relationship between locus of control and medication adherence.

Methods

Cross-sectional correlational design was used. Sample comprise of 150 patients recruited from diabetic clinics in public sector hospitals of Lahore. Diabetes Locus of Control Scale; Treatment Self Regulation Questionnaire; Summary of Diabetes Self Care Activities; and Adherence to Refill and Medication Scale were used for assessment. Correlation analysis, moderation and path analysis were used to analyse data.

Findings

Locus of control had positive relationship with autonomous motivation which in turn had significant positive relationship with diabetic care. Diabetic care had positive relationship with medication adherence. Diabetic care had a moderating role whereas treatment motivation did not mediate between the relationship of locus of control and medication adherence.

Discussion

Findings highlight the significance of diabetes locus of control and motivation in diabetic care and treatment adherence and have important implications for individuals with diabetes and health care professionals in Pakistan.

Oral Presentation Abstracts

Associations with taking medication and their relationship with medication adherence

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Cognitive factors, like beliefs, have been studied extensively as determinants of medication (non-)adherence, while the role of affect associated with taking medicines is largely unknown. In the present study (N=525) we investigated affect by assessing patients' first spontaneous associations with taking their medicines. With use of the affective imagery method, patients freely recalled the first association that came to mind. Three raters independently categorised all responses. Results showed that the associations with taking medication were related to self-reported medication adherence: patients who associated taking their medication with negative affect had the lowest adherence scores in our sample, while patients who associated taking their medication with the necessity of their medicines had the highest adherence scores. Results further suggested that negative associations were mainly affective and positive associations were mainly cognitive in nature. Our results support the idea that first associations (including affect) should be considered an important determinant of medication adherence. Interventions to increase adherence have the potential to be more effective when the role of affect as a determinant of adherence is considered.

Oral Presentation Abstracts

Supporting adherence to asthma medication: what happens in primary care?

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Background

Clinical guidelines recommend primary care practitioners to support medication adherence. In asthma management, little is known about how practitioners deliver this routinely. Reliably assessing adherence support in routine care and uncovering relevant determinants can help identify avenues for intervention and guideline implementation.

Methods

Within a European study (ASTROLAB), 117 French general practitioners answered an online survey on 25 adherence support activities, sociocognitive determinants, professional background, and demographics. We examined items using item-response and classical test theory, and explored associations between adherence support and determinants.

Findings

Substantial variability in practitioner responses was found; some activities were reported by most practitioners (education about medication, 98%), while others were rarely performed (encourage reminders use, 23%). Twelve activities formed a unidimensional scale ($\alpha=.75$; $H=.37$; mean=7.2 [2.8; range 0-12]). Support scores were unrelated to background variables, but showed significant associations with sociocognitive determinants ($p=.19$ - .31).

Discussion

Routine adherence support can be assessed reliably in primary care via practitioner self-reports. Targeting sociocognitive variables such as self-efficacy and perceived norms could lead to better guideline implementation.

Oral Presentation Abstracts

Inner health picture as a mental model based on the executive functions control

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Inner health picture (IHP) is a mental model including a child representation about him (her) self as a health human. The purpose of the investigation was to analyze the psychophysiological mechanism which this mental model could be based on. 82 children 9.1 was determined with using the inventory (Nikolaeva, 2013). All children performed simple and complex sensorimotor reactions. The peculiarity of method was that stimuli flows consisted from two identical parts. It enabled us to appreciate the capacity to find unconsciously this pattern and to predict stimuli appearance in the second parts of the tasks. We have found out that the more IHP level is the better child performs both simple and complex sensorimotor reactions as for the first and for the second parts of the tasks. We could conclude that Inner health picture is a mental model which both includes the child's representation about him(her)self as a healthy person and is based on a system of the executive functions control. Work is supported by RGNF № 14-16-48005a(p)

Oral Presentation Abstracts

Assessing interventions to increase adherence to patching treatment in children with amblyopia: a systematic review

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Background

Amblyopia or “lazy-eye” is the most common disease affecting visual acuity in childhood. It is a serious condition leading to increased risk of blindness and left untreated it will not resolve itself. Occluding the good eye with a patch is a highly effective treatment if carried out before age 7 but adherence is a major problem. This systematic review addresses the question: How effective are existing interventions at increasing adherence to patching treatment in amblyopic children?

Methods

Electronic searches were carried out in June 2014 to identify studies that reported primary data on an intervention to increase patching adherence. Data screening, extraction and quality ratings were performed independently by two researchers.

Findings

Nine papers were included in the review. Interventions including an educational element (5) increased patching adherence and had higher quality ratings than interventions that changed aspects of the patching regime (3) or involved supervised occlusion (1).

Discussion

Interventions to increase patching should include educational elements. Future research should assess additional behaviour change strategies and qualitative research is needed to understand patching from the child’s perspective.

Oral Presentation Abstracts

Definitions of health and perceptions of health behaviours and healthy environments: parent's perspective

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³Human Sciences Research Council, South Africa

Background

The aim of this study was to explore current health behaviours and health environments among a sample of parents of adolescents receiving public mental health care in South Africa.

Methods

This qualitative study was grounded in phenomenology. The participants included 30 parents. Individual interviews were conducted by a trained researcher. The thematic content analysis approach as suggested by Georgi was used to make sense of the data.

Findings

Health was defined as having a good physical and mental constitution. The broad theme that emerged from analysing the perceptions of parents regarding what constitutes health behaviours and a healthy environment was that there were facilitators and barriers in each instance. Facilitators were internally driven (personal choice and ability to control a healthy life-style) and barriers were stated as those factors external to the individual (environmental factors, inability to control a healthy life-style and inherited medical conditions). The exorbitant cost of healthy food was cited as a primary reason for not being able to encourage family members to improve their pattern of eating.

Discussion

These findings have implications for family-based interventions.

Oral Presentation Abstracts

Association between parental numeracy and children's BMI

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Background

Low numeracy skills are associated with low weight-related information processing skills and higher body mass index (BMI) in adults. However, the impact of parental numeracy on children's BMI is unknown. This study investigates the relation between parental numeracy and children's BMI. Further, we explore how children's BMI and parental numeracy skills are related to weight related information processing, namely portion size estimation skills, nutrition label- and growth charts comprehension.

Methods

Numeracy, portion size estimation skills, nutrition label- and growth charts comprehension was assessed in 326 parents using face-to-face interviews. Body weight of parents and their child was measured.

Findings

Parental numeracy predicted a higher risk of child overweight (OR = 0.62, $p = 0.010$) or obesity (OR=0.27, $p<0.001$). Lower parental numeracy skills were associated with poorer portion size estimation skills ($r=-0.13$, $p=0.018$), growth charts- ($r=0.274$, $p<0.001$) and nutrition label comprehension ($r=0.26$, $p<0.001$), with numeracy emerging as the strongest predictor for overweight and obesity.

Discussion

This is the first study identifying parental numeracy as predictor in children's overweight and obesity. Implications for prevention and intervention in childhood obesity are discussed.

Oral Presentation Abstracts

Community based prevention: does the Communities That Care (CTC) framework apply to Germany?

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¹University of Hildesheim, Germany

Background

The CTC Youth Survey, is based on a meta-analysis of longitudinal studies of youth development to identify malleable risk and protective factors for adolescent problem behaviors, e.g., substance use. CTC was developed in the U.S. and was transferred to Germany recently. This study aims at analyzing the transferability of the risk factors and their utility for the German context.

Methods

Self-reported data from N=978 students aged 12-15 years was analyzed applying sensitivity and specificity analyses as well as predictive validity using logistic regressions.

Findings

In general, the mean sensitivities of the risk factor scales ranged between 43% and 49% for the grades 6-9 and were lower than the respective specificities (73% - 77%). Favorable attitudes toward drug use and problems with family management showed good sensitivity scores; whereas, e.g., school grades and history of family problems did not. Odds ratios for the risk factors ranged from moderate to very strong.

Discussion

Although risk factors seem to be of universal validity, the measurement of those has to be adjusted thoroughly when transferred to other countries.

Oral Presentation Abstracts

Testing the Social Cognitive model of fear in smoking cessation

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Background

Fear is an emotion that probably has been essential in human survival. The emotion of fear is based on the appraisal of an impending negative outcome. In health psychology fear is the primary drive to behave healthy. In this study the role of fear in smoking cessation is addressed using the Social Cognitive model of Fear.

Methods

In three cohorts of smokers T1 fear is used to quitting activity during a period of 7 to 9 months. In a cohort of exsmokers, T1 fear is used to predict relapse over a period of 7 months. Besides fear, expected outcomes of quitting and self-efficacy were assessed.

Findings

The results show that fear at T1 significantly predicted later quitting activity in smokers. When controlling for expected outcomes and self-efficacy, the relation remained significant. However, in ex-smokers fear significantly predicted relapse.

Discussion

Fear is an essential emotion in stimulating spontaneous quit attempts, but in ex-smokers fear seems to undermine abstinence. In fear-appeals fear must be carefully targeted and dosed.

Oral Presentation Abstracts

The importance of self-efficacy and action planning for smoking cessation

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¹CAPHRI, Maastricht University, Netherlands

Background

Socio-cognitive theory forms an important basis for effective behaviour change interventions. The study aimed to prospectively assess whether the effect of a web-based computer-tailored intervention on smoking cessation is mediated by socio-cognitive constructs as proposed by the I-Change model.

Methods

Smokers (N=2099) were randomly assigned to the control, text- or video-based condition. Structural Equation Modelling was used to assess intervention effects on attitude, social support, social modelling, self-efficacy (SE), action planning (AP), and on three outcomes (i.e. seven days abstinence, prolonged abstinence, and continued abstinence) after 6 months.

Findings

Results showed significant mediation effects of the intervention (both video and text) via AP and SE on all three outcomes. No differences concerning AP and SE were found between the text and video condition. The mediated pathways accounted for the full intervention effect.

Discussion

Few smoking cessation programs assess operating mechanisms of their programs. Our results confirm the importance of SE and AP for smokers that want to quit smoking, and the efficacy of our computer tailored intervention in realizing this.

Oral Presentation Abstracts

The effect of counterfactuals as an expression of unattained goals on sexual risk taking

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Background

In the context of hedonistic goals, such as having sex, unattained goals can lead to counterfactual thoughts (CF, what would have happened if a condition in the past had been different). Previous research has shown that counterfactuals can influence future behavior, but has not focused on goal attainment processes that are associated with sexual risk. We posit that the presence of counterfactual thoughts about unattained sexual goals leads to riskier sexual behavior.

Design

Four studies (total N = 572) with MSM and heterosexual participants (age range 18-65); quasi-experimental designs (Study 1-3, coding for the presence and type of CF), and experimental designs (Study 4, 1-factorial inducing CF, 2 control conditions); sexual risk taking intentions, past STI history as dependent measures.

Findings

MSM, young adults and adults showed more future sexual risk taking intentions when counterfactuals about sexual goals were present. MSM also had more STI episodes in the past 6 month.

Discussion

This research supports the innovative notion that sexual risk taking is not necessarily a product of selfregulation failure, but a “functional” result of hedonistic goal attainment processes.

Oral Presentation Abstracts

Testing the vicarious licensing effect in healthy eating: results of two randomised experiments

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²University of Queensland, Australia

³UNSW Australia, Australia

Background

Vicarious licensing perspective suggests that seeing fellow in-group members make progress towards a shared group goal may cause high identifiers to lower their personal efforts towards that goal. The applicability of vicarious licensing to healthy eating was tested in two experiments.

Methods

Study 1 (n=87) included a manipulation of identity content: participants were shown images portraying Australians as a healthy or unhealthy nation. Choices from an online restaurant menu constituted the outcome variable. Study 2 (n=117) involved a similar manipulation in the context of female identity, using the amount of food eaten in a taste test as the outcome. Both studies included a measure of group identification. Results were analysed using multiple regression techniques.

Findings

In both studies, healthiness of the presented social images interacted with participants' group identification to predict eating behaviour. Consistent with vicarious licensing, high identifiers chose higher calorie food from an online menu and ate more food in a taste test when presented with images of their in-group members behaving healthily.

Discussion

The results suggest that vicarious licensing may contribute to unhealthy eating.

Oral Presentation Abstracts

Real-time decreases in cognitive functioning are associated with increases in high-calorie snacking: the SNAPSHOT study

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Background

Failures of dietary control and increases in weight are reliably associated with trait-level (betweenperson) deficits in the 'executive functions' (EFs) – the cognitive processes underpinning self-control. As EF also fluctuates within-people over time, the present study investigated whether people eat more high-calorie snacks at times when EF resources are depleted.

Methods

65 adults (50F, M age=38.9years) completed a trait EF questionnaire (BRIEF-A) before recording food intake and completing a computerised EF test (GoNoGo) every waking hour over 7 consecutive days using a wrist-mounted electronic diary (ProDiary). Data were analysed using multi-level modelling.

Findings

Slow reaction times on the hourly GoNoGo task (indicative of weak EF) were associated with increases in self-reported intake of high-calorie snacks ($p < .05$). Performance on the GoNoGo task significantly interacted with trait levels of EF ($p < .05$) in predicting snacking.

Discussion

Real-time reductions in EF efficiency are associated with increases in high-calorie snacking. This relationship is strongest in those with weak trait EF, indicating that individuals with EF deficits are more likely than others to snack in response to momentary reductions in EF resource.

Oral Presentation Abstracts

Are asthma patients unrealistically optimistic in the same ways as the healthy?

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Background

There is evidence that patients with psychosomatic disorders do not share the tendency to unrealistic optimism found in the healthy population when considering the risk of future health problems (unrelated to their current condition), but are more optimistic about physical threat than healthy individuals. It is hypothesised that asthma patients perceive risk similarly to the healthy population, and this may contribute to the problem of non-adherence to medication.

Methods

Asthma, CFS/ME, and healthy groups (N=211) assessed the risk of particular health threats (eg arthritis) and physical threats (eg being burgled) in the future, for themselves and for other people of the same age and gender.

Findings

There were significant differences among the groups; greater pessimism for health risk for self (versus other) was largest for asthma, and greater optimism for physical threat for self (versus other) was smallest for asthma.

Discussion

Asthma patients differ from healthy individuals in their perceptions of future risks, in a manner partially shared with patients with psychosomatic disorders. Implications for non-adherence to medication in asthma will be discussed.

Oral Presentation Abstracts

Building a theoretical model of depressive vulnerabilities, depression trajectories and poor outcomes in ACS patients

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²Royal College of Surgeons in Ireland, Ireland

Background

Depression is associated with increased mortality in patients with acute coronary syndrome (ACS). However, little is known about the theoretical causes of depression trajectories post-ACS, and whether these trajectories predict mortality. We tested a theoretical model of depressive vulnerabilities, trajectories and mortality.

Methods

A prospective observational study of 374 ACS patients was conducted. Participants completed questionnaires on vulnerabilities (interpersonal life events, reinforcing events, cognitive distortions, Type D personality) during hospitalisation and depression at baseline and 3-, 6- and 12-months post-hospitalisation. Latent class analysis determined trajectories of depression. A generalised structural equation model tested relationships among vulnerabilities, depression trajectories and 7-year mortality.

Results

Four depression trajectory categories were found: persistent (15%); subthreshold (37%); never depressed (48%). Vulnerabilities independently predicted trajectories, with effect sizes significantly highest for persistent depression. Both subthreshold and persistent depression trajectories were significant predictors of mortality (e.g. persistent depression OR=2.4, 95% CI=1.8-3.1), relative to never depressed.

Conclusions

Theoretical vulnerabilities measured during hospitalisation can identify those at risk for persistent depression and elevated mortality risk post-ACS.

Oral Presentation Abstracts

Depressive symptom trajectories in breast cancer patients and their partners: a nationwide prospective cohort study

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⁶University of Copenhagen, Denmark

Background

This study identified distinct trajectories of depressive symptoms for breast cancer patients and their partners, examined how relationship quality and medical and socio-demographic factors were associated with these trajectories, and explored whether patient and partner within couples had similar trajectories.

Methods

A total of 546 women with breast cancer and 508 male partners in Denmark completed the Center for Epidemiologic Studies-Depression Scale \leq 4 months after surgery and 5 and 12 months later. Socio-demographic and medical characteristics were retrieved from nationwide registers. A trajectory finite mixture model was used to identify trajectories.

Results

Three distinct trajectories of depressive symptoms were identified for both patients and partners. Some 13% of patients and 11% of partners had a stable trajectory of high depressive symptoms. Poorer relationship quality and previous use of antidepressants were the most consistent risk factors for trajectories with elevated depressive symptoms. Within couples trajectories were weakly correlated.

Discussion

The results draw attention to variability in trajectories of depressive symptoms. The observed risk factors can help clinicians identify and target patients and partners who might need support.

Oral Presentation Abstracts

Social participation, self-esteem and quality of life in people with multiple sclerosis

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⁶Department of Community and Occupational Health, University Medical Center Groningen, University of Groningen, Netherlands

Background

The aim of this study is to explore whether self-esteem and social participation are associated with the physical and mental domains of quality of life in people with multiple sclerosis, and whether self-esteem can mediate the association between social participation and health-related quality of life.

Methods

We collected information from 118 consecutive MS patients (response rate: 76.1%, 72.2% women), who completed the Participation Scale, the Rosenberg Self-Esteem Scale and the Short-Form Health Survey for measuring the physical (PCS) and mental (MCS) components of quality of life. Multiple linear regressions and structural equation modeling were used for statistical analyses.

Findings

Age, gender, disease duration, functional status (EDSS) and participation were significant predictors of PCS, explaining 55.4% of the variance. No mediating effect of self-esteem was found between participation and PCS. Self-esteem mediated the association between social participation and MCS (Est./S.E.=-4.872; $p<0.001$), and along with EDSS it explained 48.3% of the variance in MCS.

Discussion

Self-esteem mediates the association between social participation and MCS, but not PCS, and can be used in intervention and educational programs for patients and their caregivers.

Oral Presentation Abstracts

Predicting mental health after living kidney donation: a single-center prospective cohort study

L. Timmerman¹, M. Laging¹, R. Timman¹, W. Zuidema¹, D. Beck¹, J. IJzermans¹, J. van Busschbach¹, W. Weimar¹, E. Massey¹

¹Erasmus MC, Netherlands

Background

Living donor kidney transplantation offers advantages to patients, however, involves risks to donors. In order to promote donor safety, this study investigated factors predictive of mental health after donation, based on stress models of Lazarus (1999) and Ursin & Eriksen (2004).

Methods

Living kidney donors (N=151) participated 2.5 months before, and 3 and 12 months after donation. Using multilevel linear models we examined whether appraisals, expectations (LDEQ), knowledge (R3K-T), social support (SSL), coping (COPE-Easy), and life events predicted psychological symptoms and wellbeing (BSI; PANAS; MHCSF); and whether stress (DASS) mediated these relationships.

Results

None of the factors predicted change in mental health. Lack of social support, expectations of negative health outcomes, lower appraisals of manageability, and an avoidant coping style were related to higher psychological symptoms. The latter three were mediated by stress. Lower social support, expectations of negative health outcomes, and lower positive appraisals of donation were related to lower level wellbeing.

Conclusions

This study identified risk factors for negative psychological outcomes after living kidney donation that should guide assessment and care.

Overview Talk

Deconstructing ‘habitual behaviour’: ‘Habitual deciding’ versus ‘habitual doing’ as distinct determinants of health behaviour

Benjamin Gardner

¹King’s College London, United Kingdom

The concept of ‘habit’ is increasingly being used to predict and explain health behaviour, and commentators have suggested that habit formation may aid long-term behaviour maintenance. Yet, the dominant conceptualisation of habit within health psychology – i.e., behaviour performed automatically in response to contextual cues – masks potentially different types of ‘habitual’ behaviour. Drawing on theories of learning, perception, action phases, and the human motivational system more broadly, this talk proposes two distinct roles for the habit process in generating complex behaviours, such as physical activity. ‘Habitual deciding’ entails the automatic generation of an impulse to instigate a behavioural event (e.g. opting to exercise, as cued by a lunch break), whereas ‘habitual doing’ denotes automatically transitioning from one sub-action to another within a behavioural event (e.g. cessation of one activity cuing a subsequent activity within a well-rehearsed exercise sequence). This distinction has important implications for understanding and changing behaviour. New empirical evidence is presented which shows that the most commonly used habit measure in health psychology (the Self-Report Habit Index), which does not explicitly distinguish between the two habit types, mostly taps ‘habitual deciding’, not ‘habitual doing’. Further, across multiple health behaviours (flossing, exercise, dietary intake), effects of habit on action are attributable to ‘habitual deciding’, not ‘habitual doing’. These findings qualify recommendations that habit-formation be used as an intervention goal: making the selection of a behavioural option habitual (e.g. habitually choosing to exercise) may be more likely to result in frequent and lasting performance, than creating chains of automatic sub-actions within a higher-order behavioural sequence (e.g. doing exercises in the same order). While potentially less important for simple behaviours for which initiation and enactment are less easily separated (e.g. drinking water), the distinction between ‘deciding’ and ‘doing’ may help to focus habit-based interventions promoting behaviours comprised of multiple sub-actions.

Overview Talk

Toward a Theory-Driven Method for Defining and Measuring Complex Interventions

Tessa Hart¹

¹Moss Rehabilitation Research Institute, United States

Improving health is about changing behavior. Improving functional abilities after the onset of disability is also about changing behavior. Treatments invoking behavior change are complex, involving learning, motivation, interpersonal dynamics, and changes in knowledge, attitudes, and beliefs. Thus, fields such as Health Psychology and Rehabilitation have much in common, including a central dilemma: How to characterize and measure these complex interventions. We must do so, in order to advance science and practice, but how?

In Health Psychology, Michie and colleagues are developing a Behavior Change Treatment Taxonomy in order to characterize treatments in a more precise and rigorous way. This is a “bottom-up” approach, with expert consensus driving the labeling and clustering of interventions. Mapping the treatments to theories is a desired, but secondary step in the process.

In this talk I will introduce a parallel effort undertaken by a multi-disciplinary group of scientist-practitioners in rehabilitation medicine: the Rehabilitation Treatment Taxonomy (RTT). We use a “top-down” approach, in which the labeling, classification, and specification of interventions is based on the treatment theories that underlie them. After an introductory section outlining the problem and showing the parallels among disciplines with similar concerns, I will define treatment theory and explain its ‘tripartite structure.’ According to the RTT, all interventions may be decomposed into ‘treatment components’ consisting of 3 parts: (1) the target, a specific, measurable aspect of functioning in which change is desired; (2) active ingredients, the specific, measurable actions performed by/ enabled by a clinician to effect the desired changes; and (3) the mechanisms of action by which active ingredients are hypothesized to effect changes in targets. I will describe our progress to date in achieving groupings of treatment components that are quasi-orthogonal with respect to targets and essential active ingredients, and in developing a manual for specifying rehabilitation treatments according to the tripartite structure of treatment theory.

Throughout the talk, I will use examples of rehabilitation treatments intended to promote positive behavior change, to emphasize the parallels between the goals of this group and the investigators working toward the definition of like treatments in Health Psychology. I will also draw comparisons among different ways of conceptualizing the problem of treatment definition throughout, so as to encourage discussion of their commonalities, distinctions, and relative merits of each.

Roundtables and Debates

Conceptualization and Challenges in Caregiving Research

Tracey Revenson¹, Aleksandra Luszczynska², Konstadina Griva³, Mariet Hagedoorn⁴, Efharis Panagopoulou⁵, Valerie Morrison⁶, Noa Vilchinsky⁷

¹Hunter College and the Graduate Center, The City University of New York, United States

²University of Social Sciences and Humanities, Poland

³National University of Singapore, Singapore

⁴University Medical Center Groningen and University of Groningen, Netherlands

⁵Aristotle University of Thessaloniki, Greece

⁶Bangor University, United Kingdom

⁷Bar-Ilan University, Israel

Purpose

This roundtable is a product of the EHPS networking grant on Ameliorating Caregiver Stress: Integrating Dyadic Coping and Cultural Frameworks. The roundtable offers an opportunity to discuss concepts, challenges, and future directions in caregiving research .

Objectives

We propose an integrated contextual framework that synthesizes concepts and challenges in caregiver research and brings attention to cultural influences and dyadic processes. The framework accounts for intra- and inter-individual associations between illness demands and challenges, distress and well-being, perceptions, emotions, coping, and motivational factors within a wider context.

Rationale

As more and more people of all ages are living with chronic illnesses, greater numbers of family and friends become caregivers. A major focus of the field of health psychology is to maximize quality of life among those living with illness and those caring for them. As health care systems around the world become limited in what people can afford, informal supports – primarily family and close friends – are being called on to care for ill people. Yet, the task of providing care may take a toll on the physical and mental health of informal caregivers, including depression, social and family strains, increased physical illness, and diminished quality of life.

Summary

After a presentation of the conceptual framework by the co-chairs, Aleksandra Luszczynska (Poland) and Tracey Revenson (USA), each presenter will briefly discuss a component of the framework. Konstadina Griva (Singapore) will outline the health challenges that trigger the need for caregiving. Mariet Hagedoorn (the Netherlands) will differentiate between dyadic coping and caregiving. Efharis Panagopoulou (Greece) will describe the emotional correlates of caregiving processes and outcomes. Val Morrison (United Kingdom) and Noa Vilchinsky (Israel) will discuss the external moderating influences of personality and cultural beliefs. The audience will be invited to contribute to discussions of definitions of caregiving, measurement of key concepts, integration of dyadic coping models, frameworks for research and interventions, and sociocultural, biological and psychological influences.

Keynote Speech

Pathways to Health and Longevity

Howard Friedman¹

¹Department of Psychology, University of California – Riverside, USA

Synopsis

Health researchers usually think they are asking the question, “Why do people become ill?” but they are often really studying “Who becomes ill?” There is astounding variability in susceptibility to illness and in the speed and likelihood of recovery. Longitudinal research reveals why it is not random who enters and sustains healthy pathways.

Abstract

Why do some people thrive well into old age while others become ill or die young? Health researchers often think they are asking the question, "Why do people become ill?" when they are really studying "Who becomes ill?" There is astounding variability in susceptibility to illness and in the speed and likelihood of recovery. This talk focuses on our work with the longest continuous cohort study ever conducted, a group of over 1500 boys and girls who were first studied as children in the 1920s and have been followed ever since.

One of the participants, now age 104, is still working, recently told me that his wife had just turned 99, and asked when I was coming back to visit him. Are such matters relevant to a healthy long life? Examining multiple influences across time uncovers important long-term pathways through which personality and social relationships relate to well-being and long life. It also reveals the flaws in centenarian studies and the weaknesses of society's approaches to health promotion and health behavior change. Surprisingly, many aspects of flourishing or stumbling are not random or environmentally determined but involve long-term patterns partly brought on by the individuals themselves. The Longevity Project is an 8-decade study of these pathways to longevity- who thrives and lives long, and why.

Keynote Speech

Building the science of behaviour change

Susan Michie¹

¹Director of the Centre for Behaviour Change, University College London, UK

Synopsis

Interventions to change behaviour have great potential to improve global health and well-being. Despite some notable successes, most interventions have not led to hoped-for results. We need better answers to the variants of 'The Big Question': What interventions are effective in changing what behaviours for whom in what circumstances, and how? A vision of a more systematic and coordinated approach to behavioural science will be presented, along with examples of work contributing to this.

Abstract

Interventions to change behaviour have great potential to improve global health and well-being. Despite some notable successes, most interventions have not led to hoped-for results. We need better answers to the variants of 'The Big Question': What interventions are effective in changing what behaviours for whom in what circumstances, and how? This will require a more systematic and coordinated approach to behavioural science.

This presentation will describe a programme of work that aims to build on what has been achieved thus far to create the kind of methodological, theoretical and empirical foundation needed to answer the big question more reliably than hitherto. The work centres on creating a populated behaviour change 'ontology' that links interventions (content and delivery), usage (extent and type), context (target population, other behaviours, setting), mechanisms of action (modifiable factors mediating behaviour change), and behavioural outcomes.

A start has been made in terms of intervention content, with a taxonomy of 93 'behaviour change techniques' that can be specified in ways that cut across behavioural domains. Work has begun on developing a framework for mechanisms of action based on 83 behaviour change theories containing more than 1000 differentiable constructs. There is also the beginning of a taxonomy of behaviours identified from more than 5000 studies of behaviour change and organised within the WHO's International Classification of Function (ICF) framework.

The enormous volume of research being published on behaviour change, estimated at more than 2000 articles each day, cannot be synthesised effectively and used to populate the behaviour change ontologies by hand. Collaboration is beginning with computer scientists to develop automated systems for extracting relevant information from articles using natural language processing and machine learning to populate the ontologies and build an interface to allow users to interrogate the ontologies with any variant of The Big Question. To the extent that this ambitious programme can be realised and is successful, progress in establishing the science of behaviour change should proceed more rapidly and intervention designers should be able to construct interventions to meet their needs with greater confidence that they will deliver the intended results.

Keynote Speech

You are greater than what you sense, think and feel: An Acceptance & Commitment Therapy application to Behaviour Medicine

JoAnne Dahl¹

¹ Department of Psychology, University of Uppsala, Sweden

Synopsis

First generation behaviour medicine focused on applying behaviour analysis and behaviour principles of treatment to control and reduce symptoms of mainly chronic illness such as epilepsy, asthma or prevent illness such as heart disease. Third wave behaviour therapies such as Acceptance and Commitment therapy (ACT) focus mainly on acceptance of symptoms which turns out to be a more effective means in reducing symptoms and increasing quality of life. This presentation offers an illustration of the evolvement from control and symptom reduction to acceptance, increase in life quality and symptom reduction for a number of physical illnesses. Learning how to get 'bigger than' your symptoms is key.

Abstract

First generation behaviour medicine focused on applying behaviour analysis and behaviour principles of treatment to control and reduce symptoms of mainly chronic illness such as epilepsy, asthma or prevent illness such as heart disease. Third wave behaviour therapies such as Acceptance and Commitment therapy (ACT) focus mainly on acceptance of symptoms which turns out to be a more effective means in reducing symptoms and increasing quality of life. This presentation offers an illustration of the evolvement from control and symptom reduction to acceptance, increase in life quality and symptom reduction for a number of physical illnesses. Learning how to get 'bigger than' your symptoms is key. The presentation offers examples from my own research in epilepsy, asthma, stomach disorders, chronic and acute pain and obesity. Self as context as a specific perspective taking has shown to a key element in helping clients to get 'bigger than' symptoms and from that perspective become aware of relational frames of thoughts, feelings and sensations making up these symptoms. Once the client becomes aware of these ingredients involved in what she call symptoms, she can open up to the actual physical sensation and curiously study its true nature. Becoming aware of the difference between the actual physical sensation involved in symptom and one's thoughts and fantasies entailed in the symptoms helps the client to open up to and accept what is here and now.

Keynote Speech

Health Psychology and Organ Donation

Ronan O'Carroll¹

¹Division of Psychology, School of Natural Sciences, Stirling University, UK

Synopsis

There is an insufficient supply of donor organs to meet the demand for organ transplantations worldwide. There is therefore an urgent need to identify and overcome the barriers to registration. In this talk I will review the evidence regarding barriers to people registering as posthumous organ donors. I will argue that emotional factors play a significant role, and will review interventions that attempt to overcome these barriers and thus increase organ donor registrations. I will also review living donor organ donation and “opt-in” versus “opt-out” schemes.

Abstract

There is an insufficient supply of donor organs to meet the demand for organ transplantations worldwide. In US, over 120,000 residents are on the waiting list for a solid organ transplant, and 18 patients are dying per day before they receive a transplant. This is despite the fact that advances in transplant surgery and immunosuppressant medication means that most recipients would have an excellent outcome. In the UK over 90% of the general public approve of organ donation but only 32% in the UK have registered as posthumous organ donors. This is a good example of the intention-behaviour gap. There is therefore an urgent need to identify and overcome the barriers to registration. In this talk I will review the evidence regarding barriers to people registering as posthumous organ donors. I will argue that emotional factors play a significant role, and will review interventions that attempt to overcome these barriers and increase organ donor registrations. I will also briefly review living donor organ donation and “opt-in” versus “opt-out” transplant schemes.