

### **Clinical applications of neurofeedback**

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Neurofeedback or Electro Encephalo Graph (EEG) Biofeedback, is a specialised field of biofeedback therapy with more than 30 years of research and clinical applications. Research has shown neurofeedback to be effective with a wide range of diverse conditions including attention deficit hyperactivity disorder (ADHD), anxiety, depression, post-traumatic stress disorder (PTSD), learning difficulties and sleep disturbances amongst others. This symposium will explore different aspects of the clinical application of neurofeedback, encompassing its theoretical underpinnings, the rationale for its application and available research findings on its effectiveness with the population of refugees' survivors of torture and trauma in the New South Wales (NSW), children diagnosed with ADHD and children with autistic spectrum disorders.

### **Neurofeedback with torture and trauma survivors: Theoretical and clinical aspects of an innovative approach to the treatment of chronic PTSD**

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One of the most recent applications of neurofeedback (NF) is in the area of refugee trauma. The NSW service for the treatment and rehabilitation of torture and trauma survivors (STARTTS) has commenced three years ago a pilot project utilizing NF therapy with a group of refugee children who were exhibiting severe symptoms of the post-traumatic stress disorder (PTSD) and were not responding well to other interventions. This paper aims to show that NF is an effective adjunct treatment to trauma counselling in reducing post traumatic anxiety and attention difficulties in traumatized refugee children. From the pool of refugee children and adolescents referred to STARTTS, twenty children were referred for NF treatment. The children were assessed using the Conners' Teacher Rating Scale, the Test of Variables of Attention (TOVA) designed to measure attention and impulse control, as well as a detailed clinical interview specially designed by STARTTS for refugee children (Refugee Comprehensive Assessment Tool: Children R-CAT:CH). 50% of the children were also assessed by the Quantitative Electro Encephalograph (QEEG) confirming that for this sample of children attention difficulties and anxiety were the underlying themes across the measures. Out of the data obtained through this process, comprehensive treatment protocols that specifically target both inattention and anxiety in refugee children have been developed. In this paper we discuss the assessment, treatment and treatment outcomes of twenty refugee children presenting with attention difficulties and high anxiety.

### **Effectiveness of neurofeedback as a treatment for attention-deficit/hyperactivity disorder (ADHD): A clinic outcome study**

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The aim of this research was to investigate the effectiveness of neurofeedback on symptoms of attention deficit hyperactivity disorder (ADHD), in children with ADHD, with or without additional comorbidities in a Melbourne clinic. From a potential subject pool of 227 individuals, 95 subjects were identified that satisfied the inclusion criteria for this study – initial deficits on the Test of Variables of Attention (TOVA; Lark, Dupuy, Greenberg, Corman, & Kindschi, 1996) and completion of training. Four groups of ADHD were identified; ADHD Inattentive, ADHD Impulsive or Combined Type, ADHD with Oppositional Defiant Disorder and ADHD with Asperger's Disorder. Pre-Post treatment analysis showed statistically and clinically significant improvements for all groups on TOVA variables. The percentage of subjects improved (on the TOVA) after neurofeedback treatment were 88% for the ADHD Inattentive, 90% for the ADHD Impulsive or Combined Type, 73% for the ADHD with Oppositional Defiant Disorder and 74% for the ADHD with Asperger's Disorder. Similar improvements were also noted on a parent rated symptom checklist adapted from the Vanderbilt Scales (Wolraich, Lambert, Doffing, Bickman, Simmons, & Worley, 2003). Results from a 14-month follow-up analysis on 18 subjects indicated that 94% maintained their scores on the TOVA, while 78% of subjects showed improvement on the TOVA. This study demonstrated that in a clinical setting neurofeedback treatment is very effective in ameliorating symptoms of ADHD, and that improvements maintain for at least 14 months. This study supports findings from other studies that neurofeedback is an effective treatment for ADHD, and that positive results hold at long term follow-up.

The amount of improvement seen compares favourably with stimulant medication, and strongly suggests that neurofeedback is a clinically relevant treatment for ADHD.

### **Neurofeedback for autistic spectrum disorder (ASD)**

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Neurofeedback has been successfully used in the treatment of a variety of disorders in adults and children, including ADHD, affective disorders, and seizure disorders. Recent research and the authors' own clinical experience suggests that neurofeedback may also be a worthwhile intervention for people with Autistic Spectrum Disorder (ASD). Current neurophysiological research suggests that ASD may be associated with functional disconnectivity between brain regions and inappropriate functioning of the motor neuron system, possibly reflected in mu rhythm activity. This paper will provide a review of published research into the efficacy of neurofeedback as an intervention for ASD as well as exploring theoretical underpinnings for this efficacy from recent findings in the field of neuroscience. Data from a clinical setting will be presented that demonstrate the impact of neurofeedback on electroencephalogram (EEG) measures, response to the computerized continuous performance test, the Test of Variables of Attention, and behaviour. It will be shown that behavioural changes are associated with improvements in TOVA scores, and significant changes in EEG measures of power and coherence, as well as behavioural categories of anxiety, tantrums, and sleep. These results indicate that improvements following neurofeedback training are associated with changes in brain function. Data will also be presented from a pilot study that examined the efficacy of neurofeedback as a school-based intervention for a group of more challenging students with ASD in a special school setting. Observation of pre-determined classroom behaviours across the course of the intervention demonstrated a 64% reduction in autistic behaviour for the group over one school term. These results are similar to those reported in the literature and indicate that not only is neurofeedback an effective intervention for people with ASD, but that there may be benefits associated with providing the intervention within an educational setting.

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### **Exploring the influence of individual illness beliefs and strategies to influence health choices and health outcomes**

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People use a range of cognitive, behavioural and emotional strategies to either accept or avoid taking responsibility for their own mental and physical health. In this symposium, three papers are presented which discuss the role of individual illness beliefs and/or strategies used to influence health choices and health outcomes. In the physical health domain, Victoria Hamilton presents data showing the powerful effects of both cognitive biases and emotions on health screening behaviour, in particular screening for colorectal cancer. In the mental health domain, Jim Kantidakis explores the role of illness beliefs associated with Crohn's Disease and its relationship to coping styles and psychological well-being. Glen Bates examines expectations, social anxiety and self-efficacy as predictors of the choice to use alcohol to cope with stress in social situations.

### **Emotions and cognitively biased thinking in patient colorectal cancer screening decisions: A pilot study**

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A large literature on health promotion and prevention has sought to explain cancer-screening decisions with major social-cognitive health behaviour models, or an amalgamation of their components. Emotions are gaining eminence in more recent literature, while well-known heuristics (such as availability, representativeness, and anchor and adjustment) in cognition remain under-investigated. This study is a preliminary attempt to understand the optimal predictors in colorectal cancer screening decisions from a range of cognitive, emotion, and social factors, with the aim of establishing important relationships and scale properties for investigation in future community samples. A survey was conducted in a medium sized sample of convenience, with participants completing a range of items about their screening and health history, medical embarrassment, disgust, fear, and screening biases, as well as more frequently examined variables in this literature: risk perception, test efficacy, knowledge, and self-efficacy. Social

norms and support were also measured as potential social predictors. Outcome variables included screening intention and decisional conflict. Using correlation, factor analyses and regression, the results suggested that key factors in screening decision while accounting for age and screening and health history, were disgust, judgement concern (a factor of medical embarrassment), and representativeness beliefs about bowel screening. The results suggests that further exploration of these variables in a community sample is warranted, and that emotions and cognitive biases may account for variance in patient decisions to screen, over and above traditional cognitive constructs.

**Adjustment to Inflammatory Bowel Disease: Exploring possible mediating role of illness beliefs and coping styles on the relationship between disease activity and quality of life**

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Research indicates that Inflammatory Bowel Disease (IBD) is associated with significant reduction in quality of life. Despite this, research exploring the possible mediating role of individual illness beliefs and coping styles and other psychological factors on the relationship between disease activity and quality of life is limited. The aim of this study was to explore these possible mediating relationships as is predicted by the socio-cognitive Common Sense Model (CSM) developed by Leventhal (1980). Using online and traditional survey collection methods, over 200 individuals diagnosed with IBD completed a series of questionnaires assessing disease activity, illness beliefs, coping styles, locus of control, self efficacy, mindfulness and Quality of Life. Based on the CSM, it was hypothesised that disease activity would have an adverse relationship with illness perceptions, and individual quality of life. It was also hypothesised that illness perceptions would mediate the relationships between disease activity and coping style, locus of control, self efficacy, and mindfulness, and that coping styles, locus of control, self efficacy and mindfulness would mediate the relationship between illness perceptions and quality of life. Review of the results and there theoretical implications relating to the treatment of the psychological aspects of IBD improving quality of life will be reviewed.

**Predictors of excessive use of alcohol in different social situations; the role of expectancies, self-efficacy and social anxiety**

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Previous research has shown that excessive alcohol use is linked to expectancies of alcohol, self-efficacy to refuse alcohol and social anxiety. However, little work has been done on how the impact of these factors may vary according to types of social situation. This study explored the impact of the three factors on the overuse of alcohol to cope with stress in informal social interactions and in performance situations. Data were obtained from a general community sample of 200 people via an online questionnaire. Findings showed that whereas social interaction anxiety was a predictor of excessive use of alcohol in each situation, the influence of self-efficacy and expectations varied according to the situation type with self-efficacy being a mediator of the effects of expectancies in a performance situation but not in an informal situation. Implications of the findings are discussed in relation to the design of interventions to curb risky use of alcohol.

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**My mother was depressed, I am depressed and my child is depressed. What do we know about depression in clinical practice?**

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Depression represents one of the most common presenting syndromes in clinical practice. One in four females and one in six males are reported as experiencing the mood disorder in their lifetime (BeyondBlue, 2006). With as many as 20% of the adult Australian population estimated to be depressed at any given time, the ability to effectively treat depressive symptomatology is a professional concern (Oakes, 1999). While there has been a declining rate of depression and suicide in older adults, the rates of depressive disorders, substance abuse and suicide has risen among younger persons. The treatment methods available include pharmacotherapy and various forms of psychotherapy. The efficacy of psychotherapeutic treatments specific to depressive mood disorder has been shown to be comparable to that of pharmacologic treatments. Depression-specific approaches include cognitive behavioural,

behavioural, short-term psychodynamic and interpersonal (IPT) therapies (Erbaugh, 2006). However, combining psychological treatment with anti-depressant medication has been shown to be the most effective method of treatment (BeyondBlue, 2006). In this symposium the presenters will explore four different cases: a) an older woman with a history of chronic depression including ECT; b) a couple unwilling to cope with a depressive partner; c) a young woman with a history of depression, anxiety and eating disorder; and d) a middle aged male with recurrent major depressive and generalised anxiety disorders. The therapeutic modalities used, the interventions applied and the treatment outcomes achieved will be the focus of the symposium.

### **Crying for the moon: Psychotherapy and the depressed older woman**

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This paper speaks to the possibility of using the psychotherapeutic conversation as a process to create a different psychological account of the losses and challenges associated with ageing. The case presented describes the psychotherapy of a woman with a history of clinical depression, electro convulsive therapy and in-patient treatment. She complained of feelings of intense loneliness in her world and in her relationships with others. The praxis, or experience of being in the therapeutic frame, is likened to a process of mourning, which passes through a stage-related process. Phase one: Urge to recover lost object and Phases Two and Three: Disorganisation and reorganisation, with the first phase of mourning being one of Protest, the second Despair, and third Detachment (Bowlby, 1961). The treatment, together with changes in medication, assisted her to gain insight into past losses, understand her internal working models and gain some resolution of her past and more recent traumas.

### **Projective defenses in the treatment of depression: A structured approach for relationship and couple therapy**

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Depression in adults has been characterized by feelings of deadness, a lack of vitality and emotional withdrawal. Meares (1992) suggests that the seeds for depression are sown early in life through a failure of attunement by the caregiver to the tender feelings of the infant, which leads to low self esteem and an undeveloped inner world. Partners in a couple seek to find the empathic response from the other that will redress these failures. This paper presents a treatment plan with a focus on relieving depressive symptomology through understanding the origins and effects of the use of projection as a defense in intimate relationships. In the case described, the defense of projection continually frustrated the goal of empathic response and created tensions that threatened to destabilize the relationship and increase the incidence of depressive episodes. A process of working through six steps (adapted from Veldtheim, 1998) in a structured way enabled the couple to recognize their projections and cease the blaming/victim position which became established over the four years they had been together. Strengths in the steps included connection with the child aspect of the partners (which is where the use of defense began) and clearly written notes that created a strong visual impact. The consequent improved capacity for empathic attunement in the couple led to a reduction in depressive episodes, and disrupted a distressing pattern of arguments.

### **Brief Psychotherapy for the treatment of a man with recurrent major depressive and generalised anxiety disorders: The use of functional analysis in describing the client's symptoms**

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In this case study the authors described the application of a brief psychotherapy for the treatment of a 42-year-old man with a diagnosis of Recurrent Major Depressive and Generalised Anxiety Disorders. The aim of the paper was to assess the application of an integrative approach to psychotherapy in which the therapist applied concepts and interventions of Cognitive Behavioural (Neenan, & Dryden, 2000) and Psychodynamic (Ivey, 2006) therapies to achieve the treatment objectives. The function of the client's presenting symptoms, constant ruminations, depression, anxiety and binge eating behaviours as a form of self-harm were analysed using function analysis (Sturmey, 1996) Psychodynamic Psychotherapy was used to assess the links between these symptoms and the client's traumatic family-of-origin history, which revealed connections to the client's lack of self-worth and sense of worthlessness. It was hypothesised

that affective misattunement at a young age (repeated emotional misconnections with a primary caregiver during childhood) was a contributing factor to the client's low self-esteem and self-worth. Cognitive Behavioural Therapy interventions were used to address the client's symptoms of depression, anxiety, obsessive ruminations and binge eating behaviours. A number of the interventions discussed were a success and improved the client's mood and binge eating behaviours. Also, this case illustrated how a strong therapeutic alliance provided the client with a new corrective emotional experience where for the first time he felt listened to and understood.

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### **Psychological and clinical aspects of the rehabilitation of people with neurotrauma**

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A healthy and functioning central nervous system (CNS) is critical for sustaining a high quality of life. Unfortunately, traumatic injury to the brain or spinal cord usually has devastating consequences, such as reduced cognitive capacity, changed personality, reduced social and vocational access, and increased risks of pain and negative mood states. Neurotrauma (such as traumatic spinal cord injury or traumatic brain injury) presents a serious challenge for rehabilitation psychology in its attempts to manage the many life problems that occur as a consequence of the injury to the CNS. This symposium will present a series of papers that have investigated the impact of neurotrauma from a psychological and psychosocial perspective, and pertinent issues faced by psychologists working in the area of neurotrauma will be raised and discussed. This symposium will be of interest to psychologists working in or researching the field of neurotrauma.

### **The problem of fatigue in people with neurotrauma**

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Fatigue is a common complaint in Australian society in which many individuals have a substantial sleep debt. However, fatigue is especially prevalent in disorders such as cancer, coronary heart disease and is believed to be a major problem associated with neurological injury such as traumatic brain injury and traumatic spinal cord injury (SCI). Traumatic SCI is a high cost low prevalence disorder that is associated with serious life impacts such as restricted access and limited movement, chronic pain, sleep disruption, social isolation, and depressive mood. This paper will estimate the risk of elevated fatigue in adult people with traumatic SCI by assessing fatigue in people with SCI and making comparisons to adult able-bodied controls. Findings support the hypothesis that traumatic SCI is associated with elevated levels of fatigue. Furthermore, fatigue was found to be more prevalent in SCI people with elevated levels of depressive mood. Implications for the assessment of fatigue during rehabilitation will be discussed as well as initiatives for the psychological management of this disorder.

### **What do people with spinal cord injury value most: Priorities as a function of self efficacy**

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Sustaining a spinal cord injury (SCI) can have a serious negative impact on a person's lifestyle and independence. Research is therefore needed that investigates strategies for improving the quality of life (QOL) of people with SCI. The consequences of SCI (e.g. loss of motor and sensory function, bladder, bowel, and sexual dysfunction problems, chronic pain, risk of depression, and poor vocation prospects) are known to impact negatively on a SCI person's QOL. Self-efficacy (SE) measures a person's belief in his/her ability to perform a particular task or behaviour in the future. Low self-efficacy scores have been found to be related to reduced quality of life (QOL) in person with SCI. This paper presents research that examined the importance of physical and social functions to people with SCI and determined the relationship of their function priorities with their level of SE. Results showed that SCI persons with higher self efficacy ranked arm function and sexual function as significantly more important compared to people with low SE ( $p < 0.05$ ). People with high SE viewed walking, bowel/bladder control and sexual function as more important than those with lower SE. People with low SE ranked regaining mood, social and work function as more desirable compared to those with high SE and also scored less well on a measure of community integration. Implications for the rehabilitation of people with SCI will be discussed.

**Social support in rehabilitation: Theory, measures and contribution to outcomes**

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Effective social support is potentially one of the most important processes for rehabilitation professionals to understand. Yet research into the nature and extent of effective social support within various key rehabilitation populations is relatively rare. This paper introduces some relevant theory from social psychology, and then reports on the results of a systematic review of the relationship between social support and rehabilitation outcome in two populations – those with workers compensation claims, and those recovering from traumatic spinal cord injury.

**Measuring symptoms of depression and anxiety in people with spinal cord injury: A systematic review**

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Spinal cord injury (SCI) is a devastating condition with far reaching consequences. Psychosocial factors are known to influence functional outcomes in this population, but are less systematically addressed in the rehabilitation process. Being able to identify reliably and monitor changes in important psychological factors, such as depression and anxiety, is therefore critical to improving outcomes. However, the choice of measures for this task is compromised by lack of reliability and validity data for the use of common measures in SCI populations. The physical consequences of SCI often result in inflated scores on some measures that are reliant on physical symptoms of anxiety and depression. This paper will describe a systematic review of available measures of anxiety and depression in SCI populations. Relevant databases (MEDLINE, PsychInfo and others) were searched using keywords such as depression, anxiety, mood, paraplegia and tetraplegia. Papers were selected based upon abstracts and reviewed by the authors. Information was abstracted concerning the reliability and validity data available. Recommendations for the use of measures of depression anxiety will be made based upon the findings, and limitations regarding their use described. The review concluded that there is currently no gold standard measure of depression or anxiety available with sufficient data from Australian samples, and that therefore measures should be selected cautiously and their limitations borne in mind when describing results either for individuals or groups.

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**What cultural competence/safety looks like (and means for psychologists' registration, research and practice)**

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This symposium brings together three papers that focus on issues of cultural competence and the related concepts of cultural awareness, cultural safety/security and cultural proficiency. Each paper applies a critical lens to the respective contexts of professional training, psychological research and practice, and organisational policy. Each is concerned with improving professional effectiveness with Aboriginal and Torres Strait Islander clients, and more broadly, promoting self-determination and social justice for Indigenous peoples. Finally, the papers draw on the cognate fields of clinical medical education, critical ethnography and organisational development to examine implications for psychologists in Australia arising from all these considerations.

**Student response to an integrated model of cultural competence training**

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Cultural competence is a notion often invoked in relation to improving health professional effectiveness with Aboriginal and Torres Strait Islander clients. Although it arises from an extensive North American literature, in this country its applicability, indeed validity, is challenged by a range of other approaches. These include cultural awareness, cultural safety/security and cultural proficiency. Registration as a psychologist in New Zealand mandates professional development towards cultural competence.

Although this path holds promise for raising cross-cultural capability in Australia, there is insufficient agreement in this country on the shared principles of good practice underpinning differentially-articulated, but often overlapping, models. Nor is there an evidence base to inform standardised approaches to training non-Indigenous health professionals to work successfully with Indigenous clients and communities. There is a particular dearth of data relating to participant response to such training. This paper posits a model of health professional training that attempts to integrate best practice elements from recognised approaches – the de-Othering model. It, then, weighs its promise against an evaluation of a one-day workshop, predicated on such an integrated model, involving around 150 first year medical students. Finally, the paper considers implications for the registration of psychologists in Australia arising from all these considerations.

### **Expanding the paradigm for indigenous psychological research**

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This paper examines the contradictions between existing paradigms of psychological research and the APS guidelines for conducting research work with Indigenous and Torres Strait Islander communities. It finds that adherence to conventional strategies of conducting psychological research is in severe tension with the aspiration to conduct research in a way that gives Indigenous people more than a token voice in how research findings are obtained and used. The paper then goes on to outline a research approach and philosophy - critical ethnography (Carspecken, 1996) - that is capable of formulating and addressing indigenous research questions in a way that recognises power relations and values, privileged positions (and not so privileged positions) and the danger of subordinates accepting their social status as 'natural' when in fact their social status is neither 'natural' nor 'inevitable'. The implications for mainstream psychological research practice in Indigenous communities are elaborated.

### **Case study: Review of an organisation's cultural security**

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How organisations and services ensure that they address cultural security effectively at all levels to ensure good service to culturally different clients, particularly Indigenous clients, is considered in this paper. Two important aspects of cultural competence are addressed: individual and organisational. Organisational cultural competence provides the leadership and includes systemic levels where relevant policies and procedures need to be in place and monitored. Also, where appropriate, skills and resources and a supportive organisational culture need to be developed. Individual cultural competence involves a person's knowledge, attitudes and behaviours towards other cultural groups and organisations need to ensure that staff are willing to engage in cultural competence, ensure orientation, training and professional development opportunities that support continuous learning. Although this may seem an ambitious task for any organisation to achieve in a genuine way, a case study of a medium sized service successfully addressing all of organisation cultural competence will be presented. Concepts of cultural competence, awareness, and security are defined and the practical application of cultural competence across an organisation will also be discussed.

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### **Health issues affecting the professional practice of psychologists**

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The quality of professional practice is effected by diverse personal (medical and psychological) and contextual (social and organisational) factors impacting psychologists. The APS has commenced a process of exploring and delivering services to assist psychologists affected by such factors. The Professional Practice section of APS has included a section of self-care in the Practitioner Resources section of the APS website. This symposium reports on an exploration of health issues of psychologists and how this influences their delivery of quality service. An account of the similar self care advice provided by the Psychologist Registration Board of Victoria and the processes they use when notified of health issues effecting registered psychologists will be provided.

**Psychologists coping with their health issues: A qualitative study of diverse challenges**

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A study was conducted to explore how a range of health issues faced by psychologists can effect the delivery and maintenance of quality professional services. The results of this study will be discussed. The paper reports on interviews with psychologists managing diverse health issues (depression, chronic disease, brain injury and disability) and subject matter experts (representatives of relevant APS groups). The interviews explore the personal and physical capacities affected, influences on quality service delivery, their coping responses, and the sources of support experienced and/or sought by such practitioners. The paper will describe some methodological issues in recruiting psychologists (with health issues) to explore sensitive areas of personal and professional threat.

**Managing an impaired psychologist – a supportive approach to protecting the public**

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The Psychologists Registration Board of Victoria (the Board) in implementing the legislative requirements to investigating a notification about an impaired psychologist, attempts to support the psychologist experiencing a health impairment whilst ensuring the public is protected. The processes required by legislation will be discussed including the outcomes of these investigations and the diversity of health issues reported to the board. The range of issues experienced by psychologists and investigated by the Board lead to the development of “Health Matters for Psychologists” as a resource for psychologists offering strategies for maintaining good mental and physical health. The strategies within the guide will be discussed in the symposium.

**When the tables are turned: Applying the lessons of rehabilitation psychology to psychologists with health issues**

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As the National Convenor of the APS Rehabilitation Psychology Interest Group, I have had cause to become familiar with the work of psychologists from diverse backgrounds with people undergoing rehabilitation following any number of injuries and illnesses. Occasionally the discussions turn to situations when the tables are turned on psychologists, and they become the one requiring rehabilitation services. In this presentation we will briefly review some of the general principles of rehabilitation psychology, and how they might be applied to assist psychologists with health issues. We will also touch on some of the specific considerations inherent in returning to function as a psychologist, and how they may impact upon the implementation of these principles.

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**Psychology of Relationships IG: Some positive aspects of relationships**

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In contrast to the other symposium of this interest group at the conference, this symposium presents of some of the positive aspects of relationships – two of them are concerned with couples and one looks at the therapist’s decision making. The first two papers have in common the acknowledgement of individual needs within the context of the relationship with a significant other. The first paper used a new model of relationship quality and well-being based on Self-Determination Theory and highlights that the differences between the genders and age groups, to a certain extent, are dependent on the level of commitment. The second paper has relationship quality as the outcome variable and how self-regulation mediates the relationship with need fulfilment. The research highlights the importance of “men’s work” within the relationship for perceptions of relationship quality by both the males and the females. The final paper in this symposium examines therapist decision-making during therapy. It is a qualitative study and compares experienced and novice therapists. The paper provides a description of the therapists’ procedural knowledge. The author highlights the importance of the findings for the training and development of therapists.

**Romantic partner behaviours, psychological need fulfillment and individual well-being in young Australian couples**

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There is a need for further investigation of particular mechanisms linking romantic relationships and psychological well-being in order to inform optimal couple interventions. Furthermore, age differences and the specific ways in which romantic partner behaviours are associated with young, “emerging” adults’ well-being needs further examination. The present research addressed these issues using Deci and Ryan’s (1985) Self-Determination Theory (SDT), which argues that associations between close relationship quality and well-being may be explained by the fulfillment of individual psychological needs for autonomy, competence and relatedness. Self-Determination Theory proposes that romantic partners act as one social context which may support or undermine need satisfaction. Dating, cohabiting and married couples ( $N=148$ ) who were 30 years and under, heterosexual and in a romantic relationship of at least a month participated in this study which examined a new model of romantic relationship quality and well-being based on SDT principles. Structural equation modeling showed that when multiple components of relationship quality were considered, including attachment, self-differentiation, voice and current romantic partner behaviours, psychological need fulfillment was a strong, unique and consistent co-variate of general psychological well-being and life fulfillment for both male and female members of the dyad. Z-test comparisons showed that for the younger age group and the less committed group, associations between partner behaviours and indices of individual well-being tended to be weaker for females, and stronger for males. While results were strikingly different for male and female members of younger and less committed groups, results were similar across the sexes for older and more committed couples. Partner behaviours and psychological needs are important within romantic relationships and are associated with both individual well-being and life fulfillment, though age and relationship variables such as commitment and length are important moderators of associations.

**Need fulfilment and behavioural self-regulation as predictors of intimate relationship quality**

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Couples in intimate relationships face the ongoing challenge of maintaining a healthy balance between meeting individual needs and attending to the development of the relationship. Existing research suggests need fulfilment in intimate relationships can predict relationship quality. This paper explored the extent to which behavioural self-regulation in intimate relationships mediated the association between need fulfilment and relationship quality in a community sample of 128 heterosexual couples. Participants completed measures of perceived need fulfilment, behavioural relationship self-regulation and relationship quality, and the data were analysed using path analysis and the Actor-Partner Interdependence Model (APIM). With the couple as the unit of measurement, the APIM suggested that increased relationship quality resulted from individuals’ perceptions of their partner fulfilling their personal growth needs in the relationship. For males, perceptions of their own work in the relationship partially mediated the association between need fulfilment and relationship quality. Males’ self-regulation was also a significant predictor of female relationship quality but there was no support for the mediation. These results illustrated the importance of men’s work within the relationship to both male and female relationship quality, pointing to fundamental differences in how male and female relationship quality manifests. The implications of the research are discussed from a number of perspectives including social exchange theory and evolutionary-based behavioural orientations.

**How do highly experienced and novice family therapists decide ‘what to do next’ in therapy: An investigation into expertise in-the-moment**

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It is generally accepted that the process of conducting day-to-day family therapy is a highly complex cognitive-affective task, which is carried out in a context of ambiguity, uncertainty and often with unclear outcomes. A lengthy project exploring elite practice in family therapy was undertaken, and this presentation reports the results of one of the qualitative investigations into the in-the-moment dynamic thinking processes of practitioners. The aim of the study is to explore the in-the-moment mental events of six novice and seven elite practitioners. The Think-Aloud video-assisted interview method was used to

collect 215 segments of textual material describing the sensory-perceptual-affective-cognitive constellations of in-the-moment mental events, and the unfolding experience of therapists while making many rapid 'in-the-moment' (Stern 2004) micro-decisions. A modified Grounded Theory approach was used to analyse the data and four core categories were generated, i) the session as a 'balancing act', ii) 'sensing' the relationships, iii) 'noticing and promoting' change and, iv) engaging in 'reflection-evaluation'. Each category includes a number of subcategories that together provide a snapshot of the novice and elite practitioner's procedural knowledge. The comparison between novice and elite practitioners on these categories contributes towards an account of the processes mediating expertise in family therapy, and offers another perspective on how mental health practitioners decide 'what to do next' whilst in a context of complexity, ambiguity and in the immediacy of practice. The implication of these findings on training and professional development in psychology and family therapy will also be briefly addressed.

### **Psychology of Relationships IG: Some less than positive aspects of relationships**

FALLON, B.J. (Australian Catholic University)

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In this symposium by the APS Psychology of Relationships Interest Group three papers have as their focus some aspects of relationships that are less than positive. While most of us would no doubt wish for the best in relationships, we are aware that there are individual and contextual factors which can result in less than the desired outcomes and experiences. Notwithstanding the phenomenal increase in the frequency and rapidity of communicating with others, loneliness appears not to have decreased. The first paper in this symposium has as its focus the role which loneliness plays in mediating the relationship between rejection sensitivity and depression. The research has implications for interpersonal functioning and for psychological practice. The second paper reports qualitative research undertaken with children and parents who attended a post-separation programme. The research has a particular focus on the harmful effects of parental conflict on the children's adjustment and well-being. The final paper in this symposium looks at some of the plusses and minuses of mothers in paid employment who are partnered or single. The effects are not always as straight forward as would be expected when examining how self-efficacy, coping, and support effect the experience of the work/life interface.

### **Down and out: Exploring the influence of loneliness on the relationship between rejection sensitivity and depression**

MUSGROVE, E., & BOWLES, T. (Australian Catholic University)

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Past research shows that rejection sensitivity (RS) and depression are highly correlated. In accordance with the RS model, anxiously expecting rejection reflects a cognitive-affective processing disposition which infers vulnerability to depression. However, few studies have outlined the specific mechanisms by which RS functions as a risk factor for depression. Posited within the context of the value-expectancy model of depression, it was hypothesised that loneliness would mediate the relationship between RS and depression. Participants were 164 adults gathered from a student population, aged between 18 and 54 ( $M=20.1$ ,  $SD=5.10$ ). Results indicated that RS, loneliness, and depression are significantly correlated. Hierarchical regression analyses revealed that loneliness partially mediates the relationship between RS and depression. Implications for interpersonal functioning and practice are discussed.

### **Listening to the children, understanding children's needs and wishes in response to family separation and conflict**

NICHOLAS, S. (Unifam Counselling and Mediation)

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The aim of this paper is a reflection upon the presenting issues of children and parents attending a post-separation programme in a non-government agency. Much has been written of the impact of parental conflict upon child adjustment, and this has far reaching effects on the psychological, emotional, and behavioural development of children and adolescents. While there are many potential directions for future research, this paper is a preliminary retrospective review of the ways in which parents and children, including adolescents, presented in the initial stages of a post separation programme. Written accounts of family issues, including history and presentation of family conflict were reviewed. Also, the written

accounts of individual consultations with children, including sibling groups were reviewed. The resulting themes emerging from this overview of this post separation group were analysed within the frameworks of the existing knowledge within the divorce and separation literature. The results demonstrated that a localised sample of post separation clients highlighted the established views regarding the harmful effects of entrenched parental conflict upon children's adjustment and general wellbeing. In conclusion, several themes for future research were identified, including quantification of levels of family conflict and the relationship to specific indicators of children's adjustment.

**How does having a partner effect the experience of the work-life interface for mothers: Self-efficacy, coping and support**

FALLON, BJ. & AGLICAS, M. (Australian Catholic University)

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The differences between single and partnered working mothers work-life interface was investigated and the effects of self-efficacy, coping, social and supervisor support were explored. A sample of 20 single and 18 partnered working mothers provided data for this research. Single mothers reported higher work to life conflict and life to work conflict than partnered mothers and they also reported less work to life and life to work enhancement than partnered mothers. Partnered mothers reported higher levels of self-efficacy and experienced less work-life conflict than single mothers. Partnered mothers reported more emotional coping and single mothers more proactive coping strategies. Partnered mothers perceived significantly more behavioural and family support than single mothers. Social and supervisor support showed a moderate to weak correlation to work-life interface. There were no significant differences between the two groups in their reporting of supervisor support. The small and uneven sample size limits the generalisation of these findings. Research is required to understand how the above variables and other variables effect single mothers' unique situation. Empirical theory based interventions need to be developed and implemented by psychologists, organisations and supervisors to enhance the lives of working mothers.

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**Coping skills in diverse populations: What we have learnt and what we teach**

FRYDENBERG, E. (University of Melbourne)

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This symposium brings together the insights gained from exploring coping skills in diverse populations as well as presenting the benefits of coping skills prevention and intervention. The first paper focuses on the preschool years and explores the way in which coping can be conceptualised meaningfully for that population. The second paper explores coping and different types of aggression in school-aged children with a focus on the part played by anxiety and the utilisation of supports. The third paper explores the relationship between parents' and children's coping in order to explore how coping skills might be acquired. The final paper reports on the implementation of a pencil and paper coping skills program in a rural secondary school setting. The benefits of boosting the initial program with a parallel CD-Rom coping skills follow-up within a 12 month period are considered.

**Coping in the early years: Developing tools for measurement and intervention**

FRYDENBERG, E., & DEANS, J. (University of Melbourne)

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This study sought to understand the coping actions of four year olds. In particular it sought to identify the ways in which children describe their coping and how parent's descriptions concur and amplify those of their children. The participants in the project were 20 four-year-old children attending a three-day a week preschool program and their parents. This presentation will discuss the analysis of data collected via child interviews and a parent on-line survey. Through this methodology it was possible to identify coping strategies used by this age group and then to utilise these strategies in a visual format to see how they would be used with situations that this age group typically have to deal with in order to determine how these children cope.

**All aggressive children are not necessarily bullies: Finding interventions that suit**

LARKINS, G. (University of Melbourne)

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Although a phenomenon throughout history, bullying has come to prominence since the 1970s with research and interventions by many researchers beginning with Olweus in Norway whose concern was precipitated by the suicide deaths of some young people due to bullying. It is difficult to address this phenomenon and indeed to treat it without having a more comprehensive understanding of aggression and to place any bullying intervention in the context of childhood aggression. This research sought to address the confusion in defining and recognizing bullying and its relationship to different forms of aggression as well as looking at the relationship of different forms of aggression and bully status to coping, and anxiety. It was found that proactively aggressive children use more preventive, reflective and instrumental support seeking coping strategies than other children and have mixed results for anxiety while the bully group scored lower on anxiety used fewer proactive coping strategies and obtained a similar score for leadership to the bystanders and uninvolved students. A research project, developed from this research, for the reduction of aggression in schools is presented.

**A comparison of the coping styles used by parents and their adolescent children**

FRYDENBERG, E., & NIKKERUD, H. (University of Melbourne)

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Extending on previous research that compares the coping styles of older adolescent females with their mothers, this study compares the coping styles of adolescent males and females with the coping styles of their fathers and mothers respectively. To date, there has been a lack of clarity about how coping skills are acquired, and this study bridges a gap in the literature by directly comparing coping styles of parents with their children. Year 7 ( $n = 4$ ;  $M$  age = 12) and Year 11 ( $n = 16$ ;  $M$  age = 16) students, as well as their parent of the same gender, completed the Adolescent Coping Scale. Adolescent children do not simply imitate the coping strategies used by their parents. Predictable age and gender-related differences were found between the parent and child groups, indicating that intra-individual factors may be a better determinant of adolescent coping than parent behaviour.

**Promoting wellbeing and coping amongst rural adolescents: Results from follow-up intervention**

EACOTT, C., & FRYDENBERG, E. (University of Melbourne)

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All young people have challenges and concerns in today's complex society. This is more evident in rural settings where the challenges of isolation, parent vulnerabilities due to the threat of drought and flooding rains make young people more susceptible to depression and despair. Reducing risk for negative mental health outcomes can be assisted by providing empirically sound universal programs for young people in school settings. Current evidence indicates that for an intervention to be successful in the teaching of specific skills and subsequent prevention of depression it should ideally be followed up with booster sessions. This paper reports on a study that aimed to reduce the risk for depression in a population of rural school age students through the delivery of a coping skills program, The Best of Coping (BOC). Students ( $N=125$ ) from a rural Catholic secondary school in Victoria, Australia, took part in the BOC coping skills program during 2007; in 2008 the same group of students participated in a multimedia version of the BOC program titled 'Coping for Success' (CFS): this was delivered as a follow-up/booster to the initial program 12 months later. All students were screened for level of distress, of particular interest were students at high risk for depression ( $n=14$ ). The most significant program effects of the BOC were observed for the high risk students; they utilised the greatest amount of non-productive coping pre-program and showed significant decreases post-program in non-productive coping, namely self-blaming. The high risk group also showed significant reductions in level of distress post-program. Findings demonstrated that those in greatest need were able to benefit from the BOC universal intervention. At the 12 month follow-up results overall indicated that program effects of the BOC program were maintained over time with no significant changes in coping skills reported. Following involvement in the booster CFS program, participants demonstrated significant increases in use of productive coping strategies that involved gaining support and referring to others. This indicates that use of the booster CFS program was successful in facilitating increased use of such strategies enabling students to review such concepts and reflect on their coping.

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### **Counselling psychologists: Identity and practice**

GRANT, J. (Curtin University)

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The work and identity of counselling psychologists in Australia in 2009 is examined in this symposium. A report of work in progress is presented which indicates the roles, functions, work activities, and attitudes of counselling psychologists in WA. A further report details the research activities of counselling psychologists in the last 5 years through their contribution to professional publications and through the work of postgraduate students in the sub-discipline. Also considered is the work of counselling psychology via an institutional case presentation in a law enforcement agency. It is anticipated that the symposium will generate discussion about the future identity and practice for counselling psychology.

### **Counselling psychologists at work in 2009**

GRANT, J. (Curtin University)

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Counselling psychology is the most diverse of all the specialties. This has sometimes created confusion both within the profession of psychology and with the public. This paper explores the core features of counselling psychology and presents data on where counselling psychologists work and who their clients are. The core features are drawn from a systematic review of the specialty both internationally and within Australia (Grant, Mullings & Denham, 2008). This is illustrated with data from a research project on the roles, functions, work activities, and attitudes of counselling psychologists in WA. All identifiable counselling psychologists in WA were invited to complete an extensive questionnaire on their identity and roles. Seventy participants completed the survey (58% response rate) and 6 of these then participated in semi-structured interviews. Respondents were employed in a diversity of settings, primarily engaged in individual therapy, and frequently held more than one position. Private practice was a central employment setting. They worked with a wide variety of client problems and age groups. The vast majority of counselling psychologists worked with clients with identifiable mental health disorders, although there were differences within the group with regard to the level of severity. They identified strongly as counselling psychologists, had a clear sense of their professional identity and career satisfaction was high. The implications of results are discussed in relation to the identity and practice of counselling psychology in Australia.

### **The counselling psychology research enterprise**

DENHAM, GW. (La Trobe University)

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Counselling psychology is the most diverse of all the specialties. This has sometimes created confusion both within the profession of psychology and with the public. This second paper explores the core features of counselling psychology embodied in its recent research practices. A thematic analysis of articles publishing in the Australian Journal of Counselling Psychology was conducted together with a review of research conducted by CP students at postgraduate level (i.e. Masters, Professional Doctorate, and PhD). The results of the analysis are reported both in terms of inter-disciplinary research activity, the foci of research activity and the research methodologies adopted to address research questions. It is noted that Counselling Psychology holds a key position in maintaining and fostering psychology's links with other disciplines, and that Counselling Psychology addresses a broad range of research questions and adopts a range of strategies and methodologies in addressing them.

### **Counselling psychology at work: An institutional case study**

ARBLASTER, W. (University of Canberra)

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Counselling psychology is the most diverse of all the specialties. This has sometimes created confusion both within the profession of psychology and with the public. This third paper explores research and professional practice in terms of representing counselling psychology within a law enforcement environment. Practice areas discussed cover such competencies and practical delivery as: employee counselling (individual, couple and group); critical incident early intervention and psycho-education; coping with unique or chronic job stressors; mental attitude preparation; wellbeing programs; peer support

programs; intervention related education and training; understanding the individual's role in organisational psychology; and process improvement counselling and consultation with management; and broader communication training. The research component explores practice related to these competencies within the broad spectrum of counselling psychology with an overlay template of ethical considerations for counselling psychologists embedded within organisations.

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### **The National Psychology Workforce Survey**

GRENYER, B. (University of Wollongong)

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The Productivity Commission report (2005) outlined workforce shortages across a number of health professions including psychology. In particular, health workforce shortages were highlighted in rural and remote areas and in certain special needs sectors. New Government incentives have led to an increasing demand for psychology services. However, little meaningful national data on the psychology workforce exists to assist with future workforce planning. The aim of the Australian Psychology Workforce Survey was to implement a comprehensive workforce survey with all registered psychologists to gain accurate data to be used in future workforce planning and to ensure the provision of appropriate high quality psychological services to the public. The following papers outline key findings and implications emerging from this survey.

### **A profile of the Australian psychology workforce**

MATHEWS, R., STOKES, D. (Australian Psychological Society), & GRENYER, B. (University of Wollongong)

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The APS in collaboration with the Council of Psychologist Registration Boards developed and implemented a workforce survey to profile the current and future psychology workforce. The survey provides information on the current roles and the future intentions of psychologists. Results of the survey inform current and future workforce needs and provide an impetus for psychology workforce planning by Government and the profession. This presentation will outline the process for developing and implementing the survey and key findings.

### **Psychology: Private and public Sector perspectives**

STOKES, D., MATHEWS, R. (Australian Psychological Society), & GRENYER, B. (University of Wollongong)

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The face of private practice psychology has shifted significantly since the introduction of Medicare items for psychologists. Anecdotal information suggests that this has had an impact on the public sector through a departure of psychologists from this sector. The findings of the National Psychology Workforce Survey outline the characteristics of psychologists working in these sectors. An independent survey conducted to investigate the employment intentions of psychologists in public and non-Government organisations provides additional insight into future employment intentions of public sector psychologists.

### **The training and professional development of registered psychologists**

GRENYER, B. (University of Wollongong), STOKES, D., & MATHEWS, R. (Australian Psychological Society)

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The continued delivery of a skilled psychology workforce is dependent on the capacity and quality of a psychology training and education sector. An increased demand for psychology services has led to an increased accountability for services provided and consideration of the education and training needs of psychologists. The National Psychology Workforce Survey sought to determine the tertiary qualifications, continuing professional development activities, and specialist training of registered psychologists, and to determine the capacity for Australian universities to provide psychology courses to meet future demand.

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### **The APS Indigenous mental health awareness and help-seeking project**

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Improved Indigenous mental health outcomes will not be achieved unless mental health services can successfully engage with Aboriginal and Torres Strait Islander peoples and communities. Innovative approaches are required if Indigenous people are to access the 'newer' mental health services available under the Council of Australian Governments National Action Plan on Mental Health 2006 – 2011. While services need to be responsive to the needs of Indigenous people, service models such as Access to Allied Psychological Services and Better Access require Indigenous people themselves to engage in formal help-seeking from mental health professionals. In 2007, the Australian Psychological Society was funded by the Australian Government to identify innovative models and resources to increase mental health awareness and encourage help-seeking in urban, regional and remote Indigenous communities. A working party of Aboriginal and Torres Strait Islander psychologists was formed to oversee the project. The project involved a service access mapping exercise, an environmental scan and a comprehensive review of 46 innovative services in remote, rural and urban settings across the country. The working party developed criteria to assess each innovation against the identified needs of Indigenous people. This symposium presents three related papers that provide an overview of the initial mapping exercise, an analysis of the collaborative process undertaken to implement the project, and a local Northern Territory case example of an innovative approach that was found to meet the criteria identified by the working party.

### **Mapping the territory: The who, where, what, and how of Indigenous access to mental health and wellbeing services**

KELLY, K., & GRIDLEY, H. (Australian Psychological Society)

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The Australian Psychological Society was funded in 2007 by the Australian Government to identify services that had developed innovative models and resources to increase mental health awareness and encourage help-seeking in urban, regional and remote Indigenous communities. A comprehensive mapping exercise identified Aboriginal and Torres Strait Islander communities and population patterns, in order to clarify where these communities and populations were located in relation to service providers. The state by state maps were then scanned for the availability and accessibility of primary mental health care and Indigenous-specific social and emotional wellbeing services such as Bringing Them Home (BTH) and SEWB programs. It became clear that many Aboriginal and Torres Strait Islander communities did not have access to the full range of primary mental health care interventions and were forced to rely on tertiary services for late stage interventions. The scan showed restricted access to social and emotional and primary mental health care for Indigenous communities, particularly in remote communities. The different patterns of help-seeking, levels of psychological distress and mental health outcomes are discussed.

### **'Your process was deadly!' - walking the partnership talk**

DUDGEON, P. (Australian Indigenous Psychologists Association)

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In keeping with the principles of self-determination, a working party of Indigenous psychologists was formed to guide the direction of the Indigenous mental health awareness and help-seeking project, and provided leadership throughout. The working party consisted of eighteen psychologists of various specialisations, who were located in all jurisdictions across Australia. The working party participated in a one day face-to-face conference and met regularly by audio-conference for the duration of the project. As well as guiding the direction of the project, members of the working party undertook reviews of innovative models and resources by making site visits and conducting interviews with program staff. The project was strongly collaborative and utilised a participatory action research process that eventually led to the unanticipated formation of the Australian Indigenous Psychologists Association (AIPA). This paper sets out the theoretical framework for the choice of method, and discusses the collaborative research process, highlighting the particular elements which fostered engagement.

### **Celebrating innovations that raise awareness of mental health and wellbeing issues in Indigenous communities**

DAIYI, C. (Australian Indigenous Psychologists Association)

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The Indigenous mental health awareness and help-seeking project working party highlighted the importance of viewing awareness-raising of mental health issues as more than a stand-alone activity, particularly if there is restricted access or an absence of services to respond to any help-seeking which may occur. In seeking to identify good practice examples of mental health awareness-raising and promotion of help-seeking, the working party therefore decided to investigate a wide range of innovative models and resources, including individual, family and community services, training programs, assessment tools, and resources (print and online) that incorporated measures to reduce stigma, raise mental health awareness and promote service uptake. Criteria were developed to assess innovations against the identified needs of Indigenous people. The working party then undertook reviews of 46 potential 'exemplar' innovative models and services in the light of these criteria. Different lessons emerged from the reviews of Indigenous-led and non-Indigenous innovations. Community engagement was more likely if service providers could quickly demonstrate cultural relevance to the communities they were servicing. Innovative services and resources which met the identified criteria are highlighted in this paper, and a local Northern Territory case example of an Indigenous-led service that was found to meet the criteria is described. Finally, the key principles and take-home learnings from the project are presented.

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### **Personality and consequential mental health outcomes**

HEAVEN, PCL. (University of Wollongong), & MORRISSEY, SA. (Griffith University)

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This symposium highlights aspects of personality development during the adolescent years as well as the ability of personality to predict important consequences in adults and teenagers. The first presentation by Ciarrochi and colleagues demonstrates that mindfulness in adolescents has significant implications for emotional well-being over a one-year period and that mindfulness is distinct from other measures of personality. The second presentation by Bore and colleagues reports on a high prevalence of psychiatric symptoms found in university students enrolled in professional courses and the relationships between symptom prevalence and the traits of extraversion, conscientiousness and neuroticism. The paper by Wall and her colleagues investigates the personality profiles of compensation claimants finding high levels of depression, anxiety, and somatic characteristics. Finally, the paper by Heaven and colleagues traces the developmental changes in trait hope and self-esteem across four years amongst a group of high school students. These changes are shown to be related to gender and perceptions of parental styles.

### **On paying attention and feeling good: The link between present-moment awareness and emotional well-being amongst adolescence**

CIARROCHI, J., HEAVEN, PCL., & LEESON, P. (University of Wollongong)

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The last several decades has seen an explosion of scientific research on the benefits of mindfulness amongst adults. The present study sought to critically evaluate a self-report measure of adolescent mindfulness (Greco et al., 2005). We administered a large battery of measures, including a new adolescent measure of mindfulness and well-established measures of personality and affective experience. Seven hundred and seventy six students (male = 388; female = 386) were surveyed in Grade 10 and 572 of these were followed up a year later. We found that the acting-with-awareness (AWA) component of mindfulness could be reliably measured in adolescents, was distinctive from well-established measures of personality, was related in expected ways to established measure of adolescent emotion identification skill and avoidance tendency, and was able to predict changes in emotional well-being over a one-year interval. AWA may be a useful, brief measure for identifying adolescents at risk for mental health problems and for assessing the efficacy of mindfulness-based interventions.

**The Big Five personality domains and mental illness: Consequential outcome or extended dimensions of the same underlying constructs?**

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Research has generally found significant relationships between personality traits and mental illness. In our past research we found a high prevalence of psychiatric symptoms, as measured by the Brief Symptom Inventory, in samples of Medicine and Psychology undergraduate students with 30% of participants producing Global Severity Index (GSI) scores equal to or greater than psychiatric inpatient norms. We also found that a greater prevalence of psychiatric symptoms was significantly related to low Extraversion, low Conscientiousness and high Neuroticism personality trait scores. In our current research undergraduate Law students ( $N = 161$ ) completed a battery of personality and mental health questionnaires. The results replicated the findings of our previous research with respect to the proportion of participants having GSI scores greater than the psychiatric inpatient norm and the personality trait profile of higher scorers. The results of retesting a sub-sample of first-year Law students will also be reported. The findings raise several questions that will be discussed such as the issue of causation and the possibility that what we are really measuring are positive/adaptive and negative/maladaptive 'symptoms' that form clusters which we label as traits or disorders respectively. This latter view supports the move for a dimensional rather than categorical approach to be adopted in the revision of the Diagnostic and Statistical Manual for the Fifth edition - a consequential outcome for personality psychology.

**Differences in personality traits and psychological health of workers at various stages of engagement with the workers' compensation system**

WALL, CL. (Monash University), MORRISSEY, SA. (Griffith University), & OGLOFF, JRP. (Victorian Institute of Forensic Mental Health)

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Few studies have directly explored differences in personality traits of compensation claimants adapting to the compensation environment. This study is a preliminary investigation into the differences in personality traits and psychological health in a cross-sectional comparison of previous, current, and non workers' compensation claimants. Significant differences in personality traits were found between past, current and non compensation claimants. The current compensation claimants displayed greater emotional instability and introversion compared with those less acutely involved in the compensation system. Current claimants also experienced clinical level symptoms of depression, anxiety, somatic complaints, and reported reduced social functioning, relative to previous and non-claimants, respectively. It is concluded that further investigation of the interactions between compensation system, personality, and psychological health may assist in facilitating improved management of workplace injury and reduce the risk of protracted recovery.

**The developmental trajectories of trait hope and self-esteem in adolescence**

HEAVEN, PCL., CIRROCHI, J., & LEESON, P. (University of Wollongong)

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We examined, over four years, the developmental trajectory of adolescent trait hope and self-esteem over four years and the impact of gender and perceived parental styles on these trajectories. Participants were 884 high school students. There was a general decline in hope and self-esteem over time, with females declining more rapidly than males. Girls had higher hope than boys in Grade 7, but lower hope by Grade 10. Perceived parental authoritative at Time 1 was related to high hope across the four years, whilst perceived parental authoritarianism was related to low self-esteem. We discuss research into personality change, the importance of perceived parental styles for adolescent well-being, and possible explanations for changes in hope and self-esteem over the teenage years.

### **Factors influencing stereotypes about older adults: Profession, status, and self-perception**

HELMES, E. (James Cook University)  
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There is extensive research on stereotyped negative attitudes toward older adults in the psychological and sociological literature. These attitudes are particularly strong among younger people, but extend to older adults as well, many of whom hold negative self-stereotypes that limit the ability of the older person to adapt more positively to both personal and social changes. The various factors that can influence the presence and strength of negative attitudes are now becoming more evident. The first presentation summarizes data from three Portuguese professional student groups as to their attitudes toward older adults and interest in working with older adults. The group of psychology students had the lowest knowledge of older adults, the most negative attitudes, and the lowest interest in working with older adults in comparison to nursing and social service students. The second presentation explores the influence of the social status of the older adult. Using a within-subject design with knowledge of older adults as a covariate, only one of four attitude scales showed differential attitudes toward high status older adults as opposed to older adults in general. Order of scale administration interacted with status for two of the other three scales. These results highlight the importance of the selection of measures for assessing attitudes. The third presentation explores the importance of negative self-perceptions in the treatment of subjective memory complaints and objective mild cognitive impairment in older adults. The evidence provided by the presenters illustrates several of the factors that are relevant in the maintenance of negative stereotypes of older adults in the community and of negative self-perceptions among older adults themselves.

### **What students know, think, and plan about older adults: Implications for practice in an aging world**

GONÇALVES, DC. (University of Queensland), FONSECA, AM. (Universidade Católica Portuguesa), GUEDES, J. (ISSSP, Portugal), & MARTÍN, I. (Universidade de Aveiro, Portugal)  
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College students usually display low interest in working within the aging context, frequently based on negative attitudes towards older adults. This phenomenon is often explained by reduced success levels and low economic rewards (e.g., Alford, Miles, Palmer, & Espino, 2001). The main goal of this study was to explore knowledge about and attitudes towards aging among undergraduate students, assessing to what extent they were related with interest in working with older adults. The sample comprised Portuguese undergraduate students (Nursing,  $n=141$ ; Social Service,  $n=220$ ; Psychology,  $n=99$ ). There were no differences between groups regarding age and previous contact with older adults, but there were statistically significant differences in knowledge, attitudes towards aging and interest in work with older adults ( $p<.01$ ). Post-hoc comparisons using the Tukey HSD test found that differences in mean scores in interest to work with older adults were not statistically significant between Social Service and Nursing students, and differences in knowledge between both groups were only tangentially significant. Almost 40% of Psychology students had no or low interest to work with older adults, as opposed to only 15% of Social Service and 8% of Nursing students. These results indicate that within our sample Psychology students displayed the lowest levels of knowledge, the most negative attitudes and the lowest interest in working with older adults. Positive attitudes towards older adults amongst college students can be promoted through knowledge acquisition about normative changes with age, interaction with positive role models amongst faculty members, and contact with healthy as well as ill older adults early in the curriculum (Gonçalves, 2009).

### **Stereotypes of older workers: Does status make a difference?**

HELMES, E. (James Cook University)  
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Stereotypes of older adults remain common in practice, and older workers are a frequent target of both subtle and open discrimination. Older workers are the most frequent targets for redundancy during economic downturns for organisations, regardless of their actual work performance. Stereotypes of older adults can be quite complex, and positive stereotypes do exist, such as the one of warm and kindly grandmothers. However, negative stereotypes predominate. One issue that has not been studied in any

detail is whether people hold different attitudes towards older workers of different social status. Here two established and validated scales of attitudes towards older workers were used to determine if university undergraduates hold different attitudes towards older professionals than older workers in general. A total of 107 university undergraduates (38 males, mean age 24.9 years) participated, completing both scales of attitudes towards older adults in general and again in counterbalanced order for older professionals. Judges, physicians, and lawyers were provided as some examples of high status professional workers. Scores on the multiple-choice version of the Facts on Aging Questionnaire were used as a covariate of knowledge about older adults. Measures used were the Hassell-Perrew version of the Kirchner scale and the three subscales of the Fraboni Scale of Ageism. Data were analyzed using a multivariate analysis of covariance with repeated measures for the priming instruction. Results showed a significant effect for the covariate for three of the four measures used. One measure showed a significant difference for the priming effect for older workers versus older professionals. Significant effects were also obtained for two scales for the effect for the order of administration and two others showed a significant interaction effect between order of scale administration and priming instruction. The results have implications for the measurement of attitudes towards older adults in that differences in sensitivity to the priming instruction were evident between the two scales that were used. Future research could examine other measures in the literature and also explore attitudes in different populations, particularly those involving corporate managers who need to make decisions about hiring or retention of older workers.

**Improving memory performance in mild cognitive impairment (MCI) and older adults with subjective decline: An intervention aimed at reducing the excess disability associated with negative stereotypes of ageing**

GRIGG, J., GRAHAM, D. (James Cook University), & RUSSELL, S. (Cairns & Hinterland Health Service District Aged Care Services)

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It is increasingly evident that the memory performance of older Australians can be negatively affected by culturally-shared stereotypes and negative self-perceptions of cognitive ageing. Drawing on age-stereotype research and literature from positive psychology, the purpose of this study was to develop and evaluate a three-day group intervention administered to both older adults with subjective memory decline and older adults with MCI. A randomised, controlled, repeated measures design was employed to examine whether the objective and subjective memory performance of older adults would improve after participating in the intervention, designed to challenge negative stereotypes of cognitive ageing and to encourage more positive perceptions of the ageing self. It is anticipated that the results will be able to identify a set of techniques that can demonstrate improvements in the memory functioning of two different groups of older adults who may be more vulnerable to the effects of ageist stereotypes.

**Social communication through the internet: Benefits and concerns**

KNOWLES, A. (Swinburne University of Technology)

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Internet technology has had a considerable impact on many domains of human behaviour. In particular, the internet enables anonymous, non face-to-face communication between individuals who may otherwise be unknown to each other. This generates opportunities to explore aspects of one's personality in an anonymous environment and such behaviour may have positive and/or negative consequences for individuals. In the Australian community concerns are frequently expressed regarding the possibility that some interactions with the internet may have negative effects on the self. For example, social networking and blogging are increasingly popular online activities. Both involve aspects of self-presentation, self-expression, peer connection and peer commentary. In this symposium's first paper Baker examines differences in individuals' motivation for blogging/social networking and their associated personality characteristics, identifying who is more likely to engage in this online activity. In the second paper, Squirrell discusses the findings of a large internet-based study investigating the psychological and demographic characteristics of individuals who engage in online sexual activity (OSA). He notes that such internet activities can be viewed as having positive or negative implications for the self. The relationship between the frequency and type of OSA individuals engage in, and their psychological characteristics, are explored. Results suggesting that high levels of OSA are associated with adverse clinical characteristics have implications for the therapeutic context. While the first two papers investigated adult interactions

with the internet, in the third paper Panizza investigates the concerns parents have regarding the impact of the internet on their adolescent children. This study also explores adolescents' perceptions of the strategies their parents use to regulate their internet use. Small group discussions with parents in primary and secondary metropolitan schools identified parental concerns and these are discussed. The effectiveness of these parental strategies is examined in a survey of adolescents. In summary, the three papers report evidence relating to psychological aspects of person to person interactions on the internet.

### **Differences in motivation between social networkers and bloggers**

BAKER, J. (Swinburne University of Technology)

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Social networking and blogging are increasingly popular online activities. Both involve aspects of self-presentation, self-expression, peer connection and peer commentary. However, limited research has been conducted to examine personality and motivational differences between people utilizing the internet in these different ways. While Guadagno, Okdie and Eno (2008) found that in general, bloggers scored higher on openness and neuroticism than non-bloggers, the influence of different types of motivation for blogging (e.g., to present information, to self-express in diary-like format) on these relationships have not been explored. The present study examined differences in motivation for blogging/social networking and associated personality characteristics. A new measure was created, factor analysis of which resulted in seven thematic factors underlying motivation to blog/social network. These were: Exchanging Information, Sharing Self, Exchanging Affect, Professional Advancement, Documenting Experiences, Entertainment, and Connecting with Others. It was hypothesized that bloggers would rate higher on aspects of self disclosure, affective exchange and self-documentation, while social networkers would rate higher on peer connection and entertainment. It was further hypothesized that motivations more characteristic of bloggers than social networkers would correlate with neuroticism and openness, while motivations more characteristic of social networkers would correlate more highly with extroversion. As predicted social networkers highly valued Connecting with Others, while bloggers valued Exchanging Information, Exchanging Affect, Professional Advancement, and Documenting Experiences. Bloggers and non-bloggers appeared to equally value using their respective mediums for entertainment. Extraversion was correlated with the preferred social networking motivation of Connecting with Others, while neuroticism, openness, and low conscientiousness were correlated with the motivations for blogging.

### **Psychological characteristics of individuals who engage in online sexual activity**

SQUIRRELL, MR., KNOWLES, A., & KYRIOS, M. (Swinburne University of Technology)

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This paper discusses the findings of a large internet-based study investigating the psychological and demographic characteristics of individuals who engage in online sexual activity (OSA). A number of researchers and scholars have argued that OSA is pathological (Durkin & Bryant, 1995; Young, 1997). This perspective is consistent with the medical model, and tends to focus on addiction and compulsivity. However other researchers (e.g., Cooper, 1998; Griffiths, 2001) have concluded that online sexuality is adaptive, and have emphasised sexual exploration, or highlighted the educational benefits and advantages for isolated and disenfranchised individuals (Braun-Harvey, 2003). OSA in the context of this study includes using the internet for cybersex in adult-chat rooms, interacting sexually with web-cameras, downloading pornographic images, sending erotic emails and viewing cybersex newsgroups. The study's questionnaire was regularly posted on internet message boards of various cybersex newsgroups over a three-month period. The questionnaire asked for participants' gender, age, relationship status and sexual orientation, followed by psychometric assessment of their mood, social and emotional loneliness, level of impulsivity and attachment style. International data were collected from 1325 participants aged 18 - 80 years, ( $M = 41$ ,  $SD = 13$ ), and 91 % of the sample were male. On average, participants spent 12.25 hours per week engaged in OSA, with a range of 1 - 102 hours per week. Results indicate that men were twice as likely to prefer erotic images to women, whilst women were twice as likely as men to prefer interactive mediums such as adult chat rooms and sexually oriented emailing. Higher depression, anxiety, stress, emotional and social loneliness and impulsivity were associated with increased engagement in OSA. The results also suggest that individuals with a fearful attachment style exhibited a more pathological pattern of OSA compared with their securely attached counterparts. In this context, pathological engagement in OSA included (a) loss of freedom to choose whether to stop or engage in the behaviour, (b) significant life

consequences as the result of the behaviour and (c) obsession with the activity. Theoretical, research and clinical implications of the findings will be discussed.

#### **Parents' concerns regarding adolescents' internet use**

DAVIES, T., & KNOWLES, A. (Swinburne University of Technology)

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Society in general, and parents in particular, express considerable concern regarding the online safety of adolescents. Despite the fact that a large amount of parental information is available from government and private sectors that promote cyber safety among young people little is known about the strategies parents use when attempting to regulate their children's experience with the internet. Similarly, little research has been conducted on the effectiveness of these parental strategies to keep children safe online. This study investigates adolescents' perceptions of how their parents regulate their internet use. Parent internet discussion groups have been conducted in three metropolitan primary schools and three metropolitan secondary schools regarding parent concerns about adolescent internet activities. A total of 120 parents in these small group settings provided information regarding their concerns about their adolescent children's internet use. Parents were concerned about social networking (using Facebook and MySpace; using live chat functions), viewing videos on YouTube, gaming and the risk of meeting strangers online. They also were concerned that their adolescent children could download inappropriate information such as pornography and about family conflict when they attempted to reduce internet use. While parents have many concerns in this area little research has investigated the effectiveness of the strategies parents use to regulate their adolescents' internet behaviour. Based on theoretical approaches to parenting style (Baumrind, 1991), a questionnaire was developed to investigate adolescent perceptions of their parents' parenting style and of how effective were the strategies parents used to regulate their online behaviour. The survey sample included adolescents aged 12 – 16 years, attending independent and public metropolitan schools. Areas investigated included: What type of mediation techniques (i.e., restrictive, instructive) do authoritarian, authoritative, and permissive parents use; the perceived efficacy of these mediation techniques, does the age of the adolescent influence mediation efficacy and how do factors such as family and peer connectedness impact on online behaviour. Conclusions regarding effective parental strategies will be presented.

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#### **KidsMatter Primary Schools and KidsMatter Early Childhood. Health and education working together to improve the mental health and wellbeing of Australian children**

LITTLEFIELD, L. (Australian Psychological Society)

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This symposium will give an overview of the initiative and report on the evaluation of the pilot of KidsMatter Primary Schools throughout 2007 and 2008; provide an update on the broader implementation of KidsMatter Primary throughout 2009 and beyond, and outline the plans for the two year pilot of a new KidsMatter initiative for children from birth to school age in early childhood settings.

#### **KidsMatter primary: Pilot evaluation**

GRAETZ, B. (Beyond Blue)

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The APS is a key development partner in KidsMatter, the national primary schools mental health promotion, prevention and early intervention (PPEI) initiative. KidsMatter has been designed to support a comprehensive whole school approach to PPEI through emphasising four key components: i) A positive school community, ii) Social and emotional learning for students, iii) Parenting support and education, and iv) Early intervention for students experiencing mental health difficulties. Over 100 schools nationally participated in the 2 year pilot until December 2008. The findings from the extensive evaluation of this pilot will be presented and discussed.

#### **KidsMatter primary update: Implementation 2009**

TRINDER, M. (Australian Psychological Society)

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Following the 2 year pilot, in 2009 the KidsMatter partners began collaborating with education systems to develop effective strategies for implementing the initiative more widely. The main aims of this

collaboration were to: enable more schools throughout Australia to formally implement and maintain KidsMatter (ensuring key success factors, particularly implementation support for schools and professional learning for all school staff, are maintained); better link KidsMatter with existing education sector policies and practices; and initiate or further develop links between education sectors, KidsMatter schools and local health sector and community agencies. This presentation will include an outline of the process of engagement with Government, Catholic and Independent education systems throughout Australia, the dissemination model, and the progress to date of sector and school engagements resulting from these partnerships.

### **KidsMatter Early Childhood**

LAWRENCE, J., LITTLEFIELD, L., CAVANAGH, S. (Australian Psychological Society), CAHIR, P., KYNASTON, J. (Early Childhood Australia), GRAETZ, B. (Beyond Blue), & O'SULLIVAN, G. (Department of Health and Ageing)

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KidsMatter Early Childhood is a national mental health Initiative for the early childhood sector developed by the Australian Government Department of Health and Ageing, Early Childhood Australia, the Australian Psychological Society and *beyondblue: the national depression initiative*. This multifaceted program aims to strengthen children's mental health by enhancing identified protective factors and reducing risk factors for poor mental health in children. KidsMatter Early Childhood will be piloted in preschools and long day care centres across Australia. This paper will outline the KidsMatter Early Childhood initiative and the role of the APS.

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### **Issues in the use of restraint and seclusion strategies in the disability sector**

LOVELOCK, H. (Australian Psychological Society)

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The use of restraint and seclusion for individuals demonstrating challenging behaviours raises issues around the human and legal rights of the people who are subjected to these practices. The papers presented as part of this symposium provide an overview of current practice in the use of restraint and seclusion, raise issues of concern, and highlight the role of psychology in providing alternatives interventions.

### **Supporting people with severe behaviours of concern: Current practices; contemporary concerns; and future directions**

McVILLY, KR. (RMIT University)

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The findings of a systematic review, which examined clinical and organisation practices in support of people who exhibit severe behaviours of concern (i.e., of danger to themselves or others) are reported. The review highlights the dangers to clients and staff of many traditional approaches (e.g., restrictive practices such as physical, mechanical or chemical restraint, and seclusion) and how some previously accepted clinical practices now no longer represent best, evidence-practice. It documents a 200 year history in the development of non-aversive approaches and identifies the evidence base in support of *Positive Behaviour Support* (PBS), together with a range of techniques arising from a contemporary *bio-psycho-social* approach to understanding people and their behaviour. In light of guidelines developed by the British Psychological Society (2004), it is evident that psychologists have a vital role to play in both the development of such programs and the education of other professionals involved in the support of people who exhibit severe behaviours of concern.

### **Issues around restraint and seclusion: Views of different states, territories and regions in Australia and New Zealand**

WEBBER, L. (Department of Human Services)

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In November 2008, representatives from Disability government departments and agencies from all States in Australia met to discuss restraint and seclusion in their respective jurisdictions. One of the outcomes was an Australasian collaboration to examine how best to reduce restraint and seclusion and advance best practice psychological interventions to support people with complex needs. The first step was a

Delphi study to capture the issues concerning restraint and seclusion within the various jurisdictions and how best to replace such practices with psychological interventions that are humane and that result in improving rights and quality of life for people with a disability. All participants were sent a series of questions around what they perceived were the main issues for people with a disability who are subjected to restrictive interventions within their jurisdictions and what they felt were the best ways forward. The results of this Delphi study will be presented.

**Psychological interventions that reduce the need for restraint and seclusion**

MATHEWS, R., LOVELOCK, H., & STOKES, D. (Australian Psychological Society)

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The use of restraint and seclusion is applied in a range of service settings to manage challenging behaviours. Inappropriate use of these forms of restraint on a person can be inhumane and harmful resulting in physical and psychological injury that can have long term implications. Under certain circumstances, this use of restraint and seclusion could expose staff to claims of breaching their duty of care. Yet for staff working on the front line the existing work culture, lack of adequate resourcing and training on other viable intervention options can result in the application of these approaches without consideration of less restrictive strategies. The APS is working with experts in the field to develop a paper that provides principles and strategies for the utilisation of evidence based psychological interventions to reduce the use of physical and pharmacological restraint. This presentation will provide an overview of the paper, the evidence base that underpins it and the data that support the increased utilisation of psychological interventions that reduce the need for restraint and seclusion.

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**Controversies and debates regarding the Better Access Initiative: Evidence-based practice and clinical interventions in the community**

LYND-STEVENSON, RM. (Flinders University), CAREY, TA., & RICKWOOD, DJ. (University of Canberra)

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A recent paper by Carey, Rickwood and Baker (in press, *Clinical Psychologist*) discussing the Better Access Initiative has generated a considerable degree of controversy in a number of forums. Comments on the paper have been provided by the Chair of the College of Clinical Psychologists as well as the President of the APS, and aspects of the paper have even been discussed in the public media. The primary purpose of the paper was to examine the contribution of data collected as part of the Better Access Initiative to inform and develop the evidence base on which clinical interventions are conducted in the community. The three papers to be presented in the symposium are designed to examine, explore and develop a number of points that were originally raised in the paper. Lynd-Stevenson provides a context for the symposium and will contend that recent developments in the methodological foundations of scientific psychology provide support for many of the proposals put forward by Carey et al. For example, that effectiveness research (e.g., research using data collected as part of the Better Access Initiative) can answer questions about the success of clinical interventions in the community that cannot be answered using efficacy research (e.g., research using data collected in highly controlled randomised experimental studies). Carey will argue that the current twelve-session limit imposed by Medicare should be removed and replaced with a patient-led approach to determining the length of a clinical intervention. Rickwood will discuss the referral procedures that currently operate in the Better Access Initiative and argue that psychologists need to consider more effective assessment processes, better informed referral processes and the opportunity to conduct early interventions. Overall, the three papers challenge the belief currently prevalent in the psychological community that efficacy research is the best (or only) means available to evaluate the success of clinical interventions in the community.

**The unified paradigm and attempts to evaluate the causal impact of clinical treatments: How do we know which clinical treatments really work in the community?**

LYND-STEVENSON, RM. (Flinders University)

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Carey, Rickwood and Baker (in press, *Clinical Psychologist*) remind us of the need to consider seriously the role of scientific evidence rather than political rhetoric when attempting to judge which clinical treatments really work in the community. The present proposal is that some of the controversy

surrounding the issues raised by Carey et al. has arisen because psychologists often uphold a methodological perspective that is inadequate when attempting to evaluate the causal impact of clinical treatments. The traditional paradigm refers to the common assumption held by many psychologists that the causal impact of clinical treatments must be judged in terms of what happens in a closed system. The obvious problem for the traditional paradigm, of course, is that psychologists work in real-world settings and real-world settings by definition constitute an open system. The unified paradigm for causal research (Lynd-Stevenson, 2007, *Review of General Psychology*) is a new perspective that overcomes the deficits of the traditional paradigm because the causal impact of clinical treatments is defined in terms of what happens in an open system. A notable consequence of the unified paradigm is that a methodological justification is provided for many of the proposals put forward by Carey et al. For example, efficacy research alone (i.e., the use of experimental methods to create a closed system) cannot tell us if clinical treatments actually work in the community. Moreover, the data collected in effectiveness research (i.e., data collected in real-world settings that maintains an open system) such as that provided by the Better Access initiative is necessary to evaluate if clinical treatments actually work when implemented by psychologists in the community.

### **Don't stop 'til you get enough: Empirical justification for adopting a patient-led approach to the issue of treatment length**

CAREY, TA. (University of Canberra)  
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The Better Access initiative has been a welcome response by the Federal Government to address the issue of mental health problems. The enthusiastic endorsement of the initiative has seen budgetary expectations exceeded and burgeoning waiting lists. Under the initiative, clients are generally able to access twelve sessions of psychological treatment in a calendar year. There is no empirical evidence, however, that twelve sessions are ideal or even necessary for the amelioration of symptoms of mental disorders. This paper describes studies undertaken in naturalistic contexts in the National Health Service (NHS) in Scotland which investigated the issue of treatment length. The NHS was an ideal environment to conduct these studies because psychological treatments are freely available and do not have caps on treatment length. The aim of the studies was to assess patterns of treatment uptake if clients rather than clinicians specified treatment length. A secondary aim of the studies was to assess treatment efficiency according to service capacity and waiting times. The studies involved three clinicians working in different contexts in an adult primary care service. Services were arranged so that patients were able to schedule their own appointments and data were collected about treatment patterns as well as patient satisfaction, GP satisfaction, and symptom change. Attendance pattern results mirrored those in the literature with most patients attending for a small number of sessions and a small number of patients attending for many more sessions. There was a reduction, however, in the number of cancelled and missed appointments. Also, treatment efficiency was improved with an increase in service capacity and a reduction in waiting times. Using the lessons learned from the NHS it is suggested that the twelve-session limit currently imposed with Medicare could be removed and a patient-led approach to appointment scheduling adopted. Adopting a patient-led approach to service delivery may contribute to efforts to improve service efficiency thereby minimising budgetary excesses as well as decreasing waiting times.

### **Better Access for mental health care: Implications of assessment, diagnosis and referral practices**

RICKWOOD, DJ. (University of Canberra)  
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The introduction of the Better Access initiative in late 2006 to increase community access to mental health care through general practitioners, psychiatrists, clinical psychologists and other allied mental health professionals has transformed the face of community-based mental health services, and had a profound impact on the professional practice of psychology. This government-funded support for psychological services through the MBS GP Mental Health Care items was a hard won recognition of the value of psychological services, and the extraordinarily high level of uptake confirmed such a response to the high level of unmet need that was revealed in the 1997 National Survey of Mental Health and Wellbeing. Now, more than two years after instigation of this initiative, it is time to reflect on progress and consider some of the largely unanticipated consequences of the approach that has been taken. This paper considers issues that have arisen related to assessment, diagnosis and referral from GPs through the Mental Health Care Plan. The information provided was derived from consultations with mental health

providers, particularly regarding early intervention and youth mental health. It has become apparent that there are a number of concerns including: the assessment undertaken by GPs and the practice of further assessment needing to be undertaken by the allied health provider; the referral options for GPs and their knowledge and choice of referral source; and the impact of a Mental Health Care plan diagnosis, particularly for young people and those in need of early intervention for developing mental health problems. Importantly, the declaration of a diagnosed mental disorder on a person's health record may have long-term implications as a result of continuing stigma related to mental illness. It is argued that psychology needs to carefully consider these issues and help to develop more effective assessment processes, better informed referral processes, and additional MBS items that are appropriate for early intervention, so as to maximise the benefit of this important government initiative to improve mental health in Australia.

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### **Measurement and modes of female sexual dysfunction**

McCABE, MP. (Deakin University)  
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This symposium examines literature and studies related to measurement and models of female sexual dysfunction (FSD). The first paper presents data on interviews with 100 women whose partners experienced male sexual dysfunction. The impact of the treatment of the male's sexual dysfunction on FSD in the woman was evaluated. These results are contrasted with data that were gathered on the same women using a questionnaire evaluation of their sexual dysfunction. The second paper evaluates literature that reports on medical management of low levels of sexual desire among women. In particular, it evaluates the efficacy of the use of testosterone treatments for low sexual desire in women. Clinical implications of this medical approach to FSD are discussed. The final paper in the symposium examines the evidence to support two competing models of FSD. Data from 400 women regarding their experience of the various phases of the sexual response cycle are examined, and the extent to which these data fit a linear model versus a circular model of sexual functioning in women is evaluated. Overall, this symposium provides a closer examination of theoretical and clinical aspects of FSD, as well as the implications of these findings for psychological or medical interventions for the disorders.

### **Measuring female sexual dysfunction: Comparing information from the Female Sexual Function Inventory and interviews**

CONAGLEN, HM. (University of Waikato)  
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Researchers in female sexual dysfunction (FSD) have increasingly used the Female Sexual Function Index (FSFI) to investigate women's sexual function. The Partner's Preference Study investigated women's experience of their partners using two oral medication treatments for erectile dysfunction (ED). Over a period of six months the 100 women completed questionnaires, including the FSFI, and were interviewed on three occasions. Forty-six of the women initially recorded FSFI scores at a level suggestive of FSD (<26.5), however after their male partners were treated the majority of women recorded significant improvements in their FSFI scores. By the end of the study 69/96 women recorded functional scores. In order to understand these 'clinical cut-offs', we compared the FSFI with detailed interviews of the women's sexual functioning. Qualitative analysis of the interviews identified a number of themes that elaborate on the FSFI data. In addition the women described the beneficial effects, on them and their relationship, of the use of oral ED medications by their partner. These two sources of information are compared demonstrating how standard questionnaires can provide a clinician with an overview but should only be treated as supplementary to detailed clinical interviews. Both modes of data gathering are important to further our understanding of FSD and its treatment.

### **Testosterone in female sexual dysfunction: Evidence for and against**

CONAGLEN, JV. (University of Auckland)  
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Myths in the medical management of low sexual desire abound, often resulting in treatment programmes in which there are no data to support efficacy or safety. This presentation examines current issues, controversies and treatment approaches for the management of low sexual desire in women. Framed around the sexual response cycle, discussion of definitional issues is followed by a review of recent

research and clinical approaches to sexual desire problems. A brief overview of the role of oestrogen replacement therapy in postmenopausal women following recent landmark studies will be presented. The pitfalls in the assessment of testosterone levels and subsequent use of testosterone in the treatment of low sexual desire in women will be critically appraised, with suggestions regarding an evidence-based approach for women with these problems. Findings from a range of studies investigating aspects of female sexual desire and arousal will be reviewed, with a view to providing clinicians with an update on the hormonal management of female sexual dysfunction.

### **Conceptualising women's sexual function: Linear vs. circular models of sexual response**

McCABE, MP. (Deakin University)

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The lack of an adequate empirical base for models of female sexual response is a critical issue within the female sexual dysfunction (FSD) literature. The current research compared the extent to which a linear model of sexual response and Basson's circular model of female sexual response represent the sexual function of women with and without FSD. Women's levels of sexual function/dysfunction were assessed with the Female Sexual Function Index and additional items measured women's endorsement of models of female sexual function as representing their own sexual experience. An anonymous online survey assessing female sexual response and associated aetiological factors was completed by a random sample of 404 women. While the linear model of sexual response was a good fit for women with and without sexual dysfunction, the relationship between sexual arousal and orgasm was mediated by sexual desire for women with FSD. The fit of the initial circular model of women's sexual response was poor for both groups. Following pathway modification, the modified circular model adequately represented the responses of both groups and revealed that a number of the relationships between sexual response variables were stronger for women with FSD. The linear model was a more accurate representation of sexual response for women with normal sexual function than women with FSD and sexual arousal and orgasm was mediated by sexual desire for women with FSD. The modified circular model was a more accurate representation of the sexual response of women with FSD than women with normal sexual function.

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### **Australian Psychology Educators' Network: Undergraduate curriculum and good practice: Fourth year**

MARTIN, F. (University of Tasmania)

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This symposium will be in two parts. First, Cranney, Martin and colleagues will present data from the educators' perspective on the nature and value of fourth year curriculum and practices, followed by the presentation of findings from two student experience surveys. Then, the symposium will be thrown open to those members of the Teaching, Learning and Psychology Interest Group of the Australian Psychological Society (TLaPIG-APS), who wish to briefly share their good teaching practice.

### **The undergraduate fourth year from the educators' perspective**

CRANNEY, J. (University of New South Wales)\*, MARTIN, F. (University of Tasmania), & MELLISH, L.\*  
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This paper will provide a brief overview of the current nature of the fourth year in the Australian undergraduate psychology program. The fourth year takes a number of forms, including a 'stand-alone' honours year, a Graduate Diploma in Psychology, or the final year in an integrated four-year sequence; nevertheless, they all need to meet the relevant APAC accreditation standards. Findings from a number of different sources, including interviews with members of the Heads of Schools and Departments of Psychology Association, and a survey of School/Department websites, will be discussed in the context of current reviews of psychology education and of higher education more generally.

### **The undergraduate fourth year from the students' perspective**

MARTIN, F. (University of Tasmania), VARCIN, K., CRANNEY, J. (University of New South Wales), PROVOST, S. (Southern Cross University), KATSIKITIS, M. (University of Sunshine Coast), WHITE, F. (University of Sydney), & COHEN, L. (Edith Cowan University)  
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This paper reports the findings of surveys of fourth year students in October of 2007 ( $n = 86$ , 12 universities) and 2008 ( $n = 300$ , 20 universities). The surveys were distributed through the Heads of Schools and Departments of Psychology Association (HODSPA) email listserve. In the first survey, students rated their experience of the year as enjoyable though stressful. Respondents strongly agreed that their research skills improved significantly during the year, that they enjoyed the process of undertaking an independent research project and that they would like to be involved in future research in psychology. Respondents would also have liked to have had more practical training in professional psychology during the course of the year. Respondents reported that their four-year undergraduate education contributed to the development of their "knowledge and understanding of psychology" (Graduate Attribute 1) and "research methods skills" (Graduate Attribute 2) to a greater extent than to their "learning and application" (Graduate Attribute 6). A somewhat similar pattern of results were found in the second survey. Individual confidential reports were sent to all participating HODSPA members. The implications of these findings for how we structure the fourth year curriculum are discussed.

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### **Psychological responses to disasters**

MONTGOMERY, B. (Independent Practice)  
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It is an unavoidable fact that life inevitably includes some disasters, both 'natural' and 'man-made', and ranging in impact from brief, individual, traumatic experiences to prolonged, large scale events causing major loss of life and damage. The Victorian fires around Black Saturday show how such lines are blurred, when arsonists start fires that flourish in exceptional weather conditions and we see media reports of individual pain and suffering multiplied across whole communities, marking the beginning of a long process of recovery. Joe Reser will describe how we, as psychologists, have a strong interest in how individuals at risk respond to the threat of possible disasters, too often inadequately, and so magnify the impact of an eventual disaster. Psychologists have a central role to play in helping people at risk to overcome the psychological barriers to taking adequate preparations. Psychological reactions to trauma develop over time, so the psychological support provided to an individual survivor should be appropriate to their current state and needs, to be effective and safe. Richard Bryant will provide a review of current, best practice, evidence-informed interventions as the basis of the helpful responses particularly of psychologists to disasters. The degree of risk of serious, long term effects in survivors of traumatic experiences depends on their robustness versus vulnerability, as well as other factors. Kevin Ronan will focus on how to help children and families survive and recover from disasters. Finally Susie Burke will report on the development of the capacity of the APS and its members to respond effectively and quickly to community needs after a large scale disaster, illustrating this with reference to the APS response after the Victorian fires.

### **'Being prepared' for disasters: The missing psychological link**

RESER, JP. (Griffith University)  
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The crucial but neglected role of psychological preparedness in disaster 'preparedness, response, and recovery' is examined and explained. 'Being prepared' in the context of community awareness campaigns and warning messages of imminent threat must be based on more effective translations and applications of psychological research and findings relating to risk communication, perception and appraisal, and the roles of sense making, emotion management, and protection motivation in individual and community responses in disaster prone regions of Australia. Psychological preparedness materials developed by the Australian Psychological Society address the missing link in disaster preparedness and mitigation, preparing oneself and family members for how they will be thinking, feeling, and responding in the face of an imminent emergency situation, and having ready some psychological strategies for 'weathering the storm'. This advice and suggested strategies are based on evidence-based principles of effective risk communication, stress inoculation, and emotion management, and enhancing public understandings of

normal human psychological and behavioural responses to the extreme and threatening circumstances of natural disaster threat and impact. Psychological preparedness is about focusing on what will be taking place in one's internal psychological environment as well as in one's immediate physical environment, and better anticipating and managing what can be an extremely stressful and challenging experience.

### **Responding to disasters**

BRYANT, R. (University of New South Wales)  
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There have been many lessons learned over recent years concerning mental health response to disasters. This review will provide an overview of mental health effects of disasters, and outline the specific interventions that are provided at the acute, intermediate, and longer-term phases after disaster. Specific attention will initially be given to immediate psychological first aid provided in the days after disaster. An outline will then be given of Skills for Psychological Recovery, which is an evidence-informed protocol developed after Hurricane Katrina and being disseminated to counsellors across the USA. Finally, an overview will be provided of more specialist interventions provided to people suffering persistent and more severe mental health conditions. These strategies will be discussed in the context of overall disaster response and the need to integrate evidence-informed strategies with practical factors occurring after disasters.

### **Child and family resilience to disasters**

RONAN, K. (Central Queensland University)  
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Children and families have been identified as vulnerable groups in the wake of disasters. This session will report on research and practice designed to assist children and families cope more effectively with hazardous events. This session will include a focus on evidence-informed and common sense activities that can be done to help children and families to prepare for, respond to and recover from a major event. In addition, this session will also include a discussion about means available to equip oneself to deliver and evaluate evidence-based services.

### **APS involvement in disaster work**

BURKE, S. (Australian Psychological Society)  
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Over the past 12 months the APS has expanded its Disaster Preparedness and Response capacity, with collaborative work with the Australian Red Cross, and other education, training and professional support initiatives that were set up after the Victorian bushfires in February, 2009. In this session, we will report on the various collaborative initiatives which are underway.

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### **Mental health challenges and innovations in the Australian Defence Force**

MURPHY, P. (Defence Force Psychology Organisation)  
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The Australian Defence Force is a major employer of both uniformed and civilian psychologists who share responsibility for the care of an expanding defence force. Recent publicity has drawn attention to some of the problems facing psychologists working in this environment. In this symposium, representatives of Defence Force Psychology in the Directorate of Mental Health discuss aspects of their work and conclude by presenting a framework for handling mental health issues post-2009. The first paper by Major John McGrogan (MAPS) illustrates the application of the Australian Defence Force Critical Incident Mental Health Support System (CIMHS) in a domestic setting, namely the 2009 Victorian Bushfires. The second paper by Ms Cherie Nicholson describes research conducted on the development of posttraumatic stress in military veterans. The third paper by Lieutenant Colonel Stephanie Hodson (PhD, MAPS) brings various threads together. It will summarise the strategic direction of the ADF Mental Health Strategy for the next four years, as well as exploring the challenges of integrating a psychology workforce into multi-disciplinary teams while maintaining the unique contribution the profession has to offer.

### **The Australian Defence Force Critical Incident Mental Health Support System, and its application in the 2009 Victorian bushfires**

McGROGAN, J. (Defence Force Psychology Organisation)

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The Australian Defence Force Critical Incident Mental Health Support (CIMHS) system has been developed to identify and respond to critical incidents or potentially traumatic events. CIMHS seeks to identify individuals at risk following exposure to such incidents, and to provide intervention strategies to mitigate and alleviate possible psychological difficulties. In doing so, CIMHS is designed to bolster individual and group resources, so that personnel can either maintain performance or return to full capacity as quickly as possible. The framework for CIMHS is formulated on evidence-based research and ongoing expert evaluation, and is based on the Australian Centre for Posttraumatic Mental Health's recommendation that early interventions should focus on the screening of exposed individuals with appropriate referral for those in need of specialised treatment. The CIMHS framework is a fundamental part of Defence's recognition of, and response to, potentially traumatic events. This presentation will provide an overview of the CIMHS system and discuss the application of the CIMHS system using two examples including the 2009 Victorian Bushfires.

### **A model of posttraumatic stress development and areas of potential intervention**

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By definition, exposure to trauma is the key antecedent to posttraumatic stress development, however not all individuals exposed to the same trauma will develop posttraumatic stress symptoms. Meta-analytic studies report large variation regarding the types of factors thought to predict posttraumatic stress outcomes. The present study proposed a comprehensive model of posttraumatic stress development including: pre-trauma variables such as family history, personality, and intelligence; peri-trauma variables such as exposure and event interpretation; and post-trauma variables such as cognitive coping methods, additional stressors, and social support. Psychological screening data for ADF personnel collected during selection for the ADF upon return home from deployment and 3-6 months post-deployment were used to test the model. Structural equation modelling indicated the strength of association between predictor variables and post-trauma outcomes and revealed potential areas where timely interventions may lead to a reduction in the impact of trauma.

### **The reformation of mental health in the Australian Defence Force and the contribution of psychology as a cornerstone service provider**

HODSON, S. (Defence Force Psychology Organisation)

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In 2002, Defence launched the ADF Mental Health Strategy. A recent review of mental health in the ADF by Professor David Dunt considered that the introduction of the ADF Mental Health Strategy in 2002 was far-sighted and that it compared favourably and in some ways surpassed similar strategies in Australian workplaces and other military forces around the globe. Nevertheless, Professor Dunt's benchmark review necessarily highlighted gaps in the delivery of mental health services in the ADF, and he made 52 recommendations to reform and enhance the delivery of ADF mental health programs and Defence and DVA transition services. The review called for the next generation of the mental health strategy, including a greater role for psychologists in multi-disciplinary mental health teams. This presentation will present a framework for the reformation of mental health in the ADF as part of the Joint Health Command transformation process. It will summarise the strategic direction of the ADF Mental Health Strategy for the next four years, as well as exploring both the challenges of integrating a psychology workforce into multi-disciplinary teams while maintaining the unique contribution the profession has to offer.

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### **Late life affective disorders: Dimensions of theory, assessment, and treatment**

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People over age 65 are the fastest growing portion of the Australian population. Increasingly psychologists need to be aware of advances in psychological theory, as well as assessment and treatment approaches, for disorders appearing in later life. This is particularly true as access to

psychological services continues to improve in the Australian context. Affective disorders in later life make up a large proportion of disorders presenting for psychological treatment. Affective disorders also have a presentation, course and response to treatment that is unique to that stage of the lifespan. Advances with respect to psychological theory, methods of assessment and treatment approaches continue to be made. On the theoretical front, perceived health and personality traits are constructs with implications for health care outcomes. Data in a longitudinal cohort of older women are examined to tease out these relationships. Anxiety in later life has particularly devastating impacts on health outcomes, yet measurement of anxiety (particularly by informant) is under-researched. Data is presented on applications and a new informant version of the Geriatric Anxiety Inventory.

### **Perceived health and personality traits in aging women**

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Perceived health (PH) is a complex variable, constrained by demographic, medical and psychosocial factors, and related with several outcomes, such as medication use, institutionalization and even mortality. Notwithstanding results obtained in previous studies, the contribution of specific variables for PH requires further research, especially in older cohorts. The goal of the present study was to explore the contribution of personality traits to PH in Australian older women. Our hypothesis was that after controlling for personality traits the relation between PH and psychological distress, health conditions, activities of daily living and life events would change, namely that (i) after controlling for Neuroticism (N) the relation between PH and health conditions, ADL impairments, depression and anxiety would decrease and that (ii) after controlling for Openness to experience (O) and Extroversion (E) the relation between PH and depression and anxiety would increase. Study design was cross-sectional and sample ( $N=227$ ,  $M=71.8$ ) was withdrawn from the ongoing *Longitudinal Study of Ageing in Women*. Results indicate that controlling for N resulted in a decreased association between PH and depression, number of diseases, and life events, and that the relation between PH and anxiety was no longer significant ( $-.012$ ,  $p>.05$ ). On the contrary, after controlling for O and E the relation between PH and life events increased significantly. Additional analysis indicated that even after controlling for the number of health conditions, impaired ADL and age, there was a significant correlation between PH and N ( $-.265$ ,  $p<.001$ ). These results are consistent with recent findings that postulate the existence of specific associations between personality traits and PH. Considering the outcomes of PH, it is noteworthy to further explore and understand which factors are related with a positive self-assessed health, especially in an aging population.

### **Use of the Geriatric Anxiety Inventory (GAI) to assess older adults**

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Anxiety symptoms and disorders are highly prevalent among older people, including those with mild cognitive impairment. Our 20 item Geriatric Anxiety Inventory is a brief measure of dimensional anxiety specifically designed for use with older adults. The scale has demonstrated good reliability in both normal community and psychiatric samples (Cronbach's alpha 0.91 and 0.93, respectively). Inter-rater and test-retest reliability are excellent, and the measure is well tolerated by older adults across a range of settings including residential care. Receiver operating characteristic (ROC) analysis indicated an optimum cut point of 8/9 to identify older patients with any anxiety disorder, correctly classifying 78% of patients (sensitivity 73%, specificity 80%). The GAI is in use in over a dozen countries with several translations in use, including Portuguese. A number of follow-up studies have indicated good pre-post utility in treatment studies on clinical populations. Uses and data for the current self-report scale in older patients with anxiety symptoms, and an introduction to an informant version in pilot testing phase, will be presented.

### **The Whole Person Model: A 6 week cognitive behavioural group program for people with depression and COPD**

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Clients living with a chronic condition often experience depression. Yet access to treatment for depression is often limited. Integrating non-pharmacological evidence-based treatment for clients with a chronic disease is important. Group CBT may be a useful approach. Peers can explore cognitions with each other, such as catastrophising in response to dyspnoea, and model rational alternative thoughts. A

review of the literature was conducted and group modules were developed. A group program was designed which used two key concepts (1) The Whole Person Model, a structure to help people look at thoughts, feelings and actions and (2) the idea of creating “Your Health Care Kit” - a range of strategies for physical and mental health. The aim of this study was to describe the development and evaluation of a 6 week CBT group program for people with chronic obstructive pulmonary disorder and depression. Group modules and client handouts will be presented. Groups were offered to clients of the respiratory stream of a disease management program. Participants were referred by key workers. Data from the pilot of the group program will be presented. Nine participants completed the group program. The group consisted mainly of men (8/9) with a mean age of 63.5 (SD7.90) with 3.63 (SD1.36) co-morbid illnesses. At base line participants had moderate symptoms of depression (18.33 (SD11.54) and 18.77 (SD 13.01) on BDI-II and BAI-II) and low self efficacy (COPD self efficacy scale) and low perceived quality of life (WHOQol Bref). At conclusion of the group participants showed improvement on depression, self efficacy and quality of life. At 3 month follow up, participants exhibited mild or minimal symptoms on the BDI-II and mild symptoms on the BAI-II. Group modules will be presented and the experiences of running a group program will be presented. Group dynamics will be explored and discussed. Although this study is limited by small sample size, group CBT treatment may be a useful approach.

### **Novel perspectives on dementia and psychiatric disorders in late life: Management and preventative strategies**

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Accessible and innovative care for persons with dementia is crucial. In 2005, the number of Australians with dementia (including Alzheimer’s disease) exceeded 200,000; but by 2050, the total number will exceed 730,000. The aim of the National Framework for Action on Dementia (2006-2010) is to improve the quality of life of people living with dementia, their families and their carers. Psychologists have a unique set of skills and tools at their disposal to assist in caring for persons with dementia across settings and at each stage of the disease process, including efforts at prevention and the delay of onset of symptoms. The papers in this symposia present aspects of dementia assessment and care from a variety of perspectives. Lifestyle factors (e.g. exercise and diet) as well as management strategies for persons with dementia (e.g. memory enhancement strategies) are not only cost effective but can increase quality of life and well being. Such improvements of care can extend to one of the most challenging environments, acute aged inpatient mental health wards. Management of behavioural disturbances on such wards through enhanced observation can assist in the early detection of behaviours of aggression and self-harm. Behavioural and psychological symptoms of dementia (BPSD) are common behaviours which again present a management challenge in dementia patients. Psychosocial interventions can result not only in a reduction in BPSD but also in reduced levels of psychotropic medication and health service utilisation. Taken together, the psychosocial approaches presented can lessen the impact of dementia and psychiatric disturbance in older adults on several fronts.

### **Preparing for your own dementia: Insurance and reassurance**

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This paper explores ways dementia can be effectively managed, strategies to reduce the likelihood of contracting dementia, and guidelines for psychologists to “market” such interventions. Research indicates: currently 1% of the population develop dementia and this will increase to 2.8% by 2050; the provision of services for those affected by dementia will become increasingly difficult due to our demographics; there are more effective ways to manage those affected by dementia; and by delaying the onset of dementia by 5 years can halve the incidence of dementia. Importantly, the process to reduce our dementia risk status would increase our overall quality of life and reduce our risk status for a range of chronic diseases. More controversially, if you “live your dreams”, are comfortable with your life, and retain a good sense of humour, you deal better with adversity, including dementia. Evidence points to the protective effects of regular exercise and a sensible diet, both for dementia and other health issues such as cardio-vascular/pulmonary disease, diabetes and mood disorders. If we were to combine such lifestyle changes with storing positive memories from “living your dreams”, developing your sense of humour, developing routines and activities that involve both social interaction and thinking (e.g. card

games, mahjong etc) you are moving from enjoying your life and reducing your risk status, to preparing for managing dementia more effectively if it was to occur. Memory is the most common and disabling aspect of dementia but if you develop an external memory system tailored to your future needs you can better retain your autonomy. We can develop strategies to assist recall using previously experienced enjoyable experiences with key songs and music and specific experiences. We do not like to consider dementia as a possibility but by using the “attack and retreat” method we can assist others to accept the potential benefits of implementing the strategies outlined above. This presentation will expand on the issues mentioned and provide suggestions for implementation.

### **The use of video monitoring for inpatients in mental health hospital wards for the aged—enhancing clinical care**

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With an increasing ageing population, acute aged inpatient mental health wards will see a larger proportion of the old and very old present, like all other inpatient units. Such inpatient wards for the aged especially those with mixed presentations of both dementia and acute mental illness hold a significantly higher incidence for behaviours such as aggression, self-harm, sleep disturbances and preventable falls. Past research show that poor architectural design of psychiatric wards and a lack of understanding of predictable factors that cause these behaviours amongst staff can contribute to some of these incidents. With greater observation, vigilance and protective measures by inpatient staff, this overall risk can be reduced and help with creating a more therapeutic environment for the aged inpatients. This particular study aims to gather specific staff and carer opinions in the use of video cameras in acute inpatient mental health wards for the elderly to enhance overall clinical care. When used effectively, video cameras can provide non-intrusive observational opportunities for nursing staff in the early detection of behaviours of aggression, self-harm, sleep disturbances and preventable falls. However, there are also issues around privacy and obtaining consent from inpatients and the willingness for nursing staff to be trained and comfortable in using this medium that have to be considered. In the context of this, an opinion survey was conducted to gauge such initial views. A range of staff from the multi-disciplinary inpatient and community setting of the Aged Persons Mental Health unit at Peter James Centre, a public geriatric hospital in outer eastern metropolitan Melbourne, together with family and carers were asked to participate in this preliminary survey. The findings of this attitudinal survey will have implications for a more in-depth study of the feasibility of using such video monitoring devices in acute aged ward settings and perhaps create a pathway in trialling the use of them in the near future.

### **A randomised controlled trial of an individualised psychosocial treatment approach for behavioural and psychological symptoms of dementia in severely impaired nursing home residents**

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Behavioural and psychological symptoms of dementia (BPSD) are common and increasingly experienced by nursing home residents, impacting negatively on them, their families and the staff. There is currently a very limited amount of research investigating the use of non-pharmacological interventions and so treatment tends to be predominantly medication, particularly antipsychotics, which are known to have serious side effects and associated risks in this population. This study built upon our group’s previous research project, which demonstrated positive outcomes of a psychosocial intervention approach for BPSD in a series of individual cases. The current study compared the effectiveness of individualised psychosocial interventions with a traditional medical treatment approach with a patient sample referred to a specialist mental health service. Outcome data on severity of BPSD, levels of carer burden, medication use and health service utilisation were collected. Whilst the participants receiving the traditional medical treatment approach showed a more significant reduction in BPSD after six months, they also demonstrated a much higher use of prescribed psychotropic medications, as well as higher levels of health service utilisation, compared with the group receiving the psychosocial approach. The group receiving the psychosocial approach did demonstrate a trend towards a reduction in BPSD and combined with the finding of reduced levels of psychotropic medication and health service utilisation in this group, this is a significant result. It is argued that quality of life and the well-being of people with dementia are

important and primary treatment goals. In addition, key differences between this sample and the sample who participated in our previous research are discussed, with regards to appropriate targeting of psychosocial intervention approaches. Finally, this study highlighted the difficulties involved in conducting empirical research into the use of individualised psychosocial interventions with significantly impaired individuals. Lessons learned and recommendations for the future are considered.

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### **The scholarship of teaching and learning in psychology: Research on innovative practices in feedback and assessment**

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This symposium is presented under the auspices of the Australian Psychological Society's Teaching, Learning, and Psychology Interest Group (TLaPIG) and the Australian Psychology Educators' Network (APEN). Three thematically linked papers on the scholarship of teaching and learning in psychology will be presented. This research is concerned with the assessment and evaluation of innovative practices in feedback and assessment, which play a central role in student learning outcomes. In the first presentation, White and Owens will describe the results of a study on the use of constructive feedback to reduce plagiarism in student work. Plagiarism remains an ongoing problem for universities, and White and Owens's results are encouraging in presenting an empirically validated approach to the problem that can be readily applied in the classroom. In Cranney et al.'s presentation, the results of an investigation on a teaching and learning application of a well-known memory phenomenon—the testing effect—will be presented. Cranney et al. manipulated feedback and collaborative testing in the context of first-year psychology material and found some support for the repeated retrieval hypothesis, leading to improved test performance. The focus of the final presentation is on assessment. O'Hara will present the results of an evaluation of a method for providing student assessment that involves online assessment strategies to improve skill acquisition and the internalisation of knowledge, with a particular focus on peer-assessed groupwork. The research to be presented in this symposium can be characterised by its strong theoretical underpinnings, innovative methodological approaches, and broad potential for improved teaching and learning outcomes.

### **Reducing student plagiarism and improving scientific writing: Phase 2 of a constructive feedback approach**

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In semester 1 of 2008 the School of Psychology at the University of Sydney implemented a constructive feedback exercise in order to reduce levels of plagiarism. This approach involved providing feedback on real examples of students' writing, which identified referencing errors and plagiarism. Making students aware of these real examples of plagiarism in lectures and online reduced plagiarism levels dramatically from 2007 levels. In Semester 2 of 2008, rather than repeating this exercise amongst the same cohort, we made the same feedback of the real student examples available online, and also found plagiarism levels were significantly reduced from 2007 levels. By comparing plagiarism levels across consecutive years the school was able to objectively ascertain the effectiveness of this innovative approach. In addition to our continued use of these real plagiarism examples, in 2009, we will implement a quiz-based approach which will ask students to identify examples of plagiarism and correct referencing. We expect this approach to help us maintain the very low levels of plagiarism we have achieved thus far.

### **The testing effect: The role of feedback and collaboration in a tertiary classroom setting**

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Successful retrieval on a test compared to just re-studying material improves long-term retention for that material. This phenomenon has been called the 'testing effect'. This study used a tertiary educational setting to test the main theoretical explanation of the testing effect, known as the repeated retrieval hypothesis. This was achieved by manipulating feedback and collaborative testing. First year psychology students were presented with the target material in a PowerPoint presentation in introductory psychology tutorials, and then tested individually or in groups. Two-thirds of the material was tested, and half of that received feedback in the form of re-presentation of the questions, followed by the answers. There was a

final individual surprise test in tutorials one week later. Findings provided some support for the repeated retrieval hypothesis, with more retrieval opportunities generally leading to better memory. Feedback after the initial test allowed for the correction of errors, leading to better performance on the final test. Although collaborating on an initial test led to better performance than completing it individually, the benefit of collaboration did not transfer to the final test. Practical implications for education and training are discussed.

### **Assessment: Setting the scene for good learning outcomes**

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The nature of assessments and the clarity with which associated rationale, expectations and marking criteria are articulated, significantly contribute to student learning outcomes. Poor design and inadequate preparation for assessment can severely hamper a positive learning experience. Added considerations for effective group assessments are the strategies employed to anticipate and counter negative perceptions regarding fairness and validity of the assessment. It should be assumed that the level of student contribution to group assessments will vary and therefore a means of assessing this variability needs to be incorporated, to ensure the most favourable learning outcomes. The Psychology for Social Work unit of study utilises three different online assessment strategies forming a coherent sequencing of learning that assists skills acquisition and an internalisation of knowledge. The paper to follow details the design, preparation and the results of an evaluation of student responses to the assessments in this unit, including a group assessment for which 40% of the marks are peer assessed, based on clearly defined criteria.

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### **The scholarship of teaching and learning in psychology: The impact of student characteristics and experiences on learning outcomes**

REECE, J. (RMIT University)

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This symposium is presented under the auspices of the Australian Psychological Society's Teaching, Learning, and Psychology Interest Group (TLaPIG) and the Australian Psychology Educators' Network (APEN). The three thematically linked papers to be presented in this symposium are all concerned with empirically investigating the relationships among a range of student characteristics and experiences, and learning outcomes. In the first presentation, Chester et al. will focus on the use of a teaching and learning technology that is becoming widespread: digitally recorded class content, using tools such as Lectopia. Although the teaching and learning potential of such technology seems enormous, there is very little research on how students use and interact with the technology. This is somewhat surprising, given the generally accepted view that educational technology is only effective if used appropriately by its target audience. Chester et al. will present results of a survey of podcast use among psychology students, the results of which have the potential to inform the more effective future implementation of this technology. The second presentation focuses on the important issue of the transition to first-year university, which can be problematic for many students. Chester et al., will present the results of a randomised controlled trial investigating the effectiveness of a peer mentoring program to aid the transition of first-year university psychology students. Using third-year students as peer mentors, positive results were found across a range of outcomes, including measures of overall psychosocial and psychological wellbeing. In the final study, also concerned with the transition to university, Burton and Ballantine will present the results of a study investigating the relationships among personality, attitudes toward student support services, and academic performance in a cohort of first-year psychology students at a university with a large number of distance education students. The key findings were that perceptions of student support services and certain personality traits predicted academic outcomes and learning style, with some relationships being moderated by mode of delivery (i.e., distance versus on-campus). These results have clear implications for assisting the university transition experience of first-year students.

**Which students use podcasts and why? A survey of undergraduate students**

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In the last five years podcasting or lecture recording has become increasingly accessible. Systems like Lectopia enable lecturers to record lectures, including screen capture, with relative ease. Online learning systems commonly used in Australian universities and repositories like iTunes make accessing podcasts simple for students. Although lecture recordings have been embraced by many universities, there continues to be debate amongst academic staff about their merit and empirical work on how and why students use podcasts and their impact on learning is in its infancy. This research, part of a larger study of podcast use across disciplines, sought to better understand the use and non-use of podcasts by psychology students. Participants were 118 (94 female, 24 male) students enrolled in first and second year psychology courses. Students in the smaller second year course were more likely to make use of the podcasts during semester and for exam revision than students in the larger first year course and the second year students reported greater satisfaction with the recordings. Podcast users were older, but contrary to the findings from the larger study, did not evidence higher levels of academic self-efficacy than non-users. Although non-users reported the value of attending face-to-face classes, self-reported attendance of users was not lower than non-users. Reasons for use and non-use will be presented. Qualitative data, suggesting ways to improve podcasting practice will be discussed.

**Using peer assisted learning to enhance transition, engagement, and acquisition of foundational academic skills in large first year classes**

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This project evaluated the efficacy of a peer-to-peer mentoring interaction program in a large first year psychology student cohort. Pairs of third year students worked with small groups of first year students in scheduled tutorial time to support social and academic transition. Using a randomised controlled design, the program demonstrated efficacy in improving first year students' grades, retention rates, and academic self-efficacy – all of which are commonly reported challenges for first year students. In addition to academic transition, the program positively impacted on student's wellbeing, self esteem, and problem-solving ability, with students reporting higher levels of self-esteem and improved grades, increased motivation, improved study techniques and confidence as academic learners, increased social engagement, and enhanced motivation to attend classes and enhanced motivation to engage in learning. A range of benefits was also noted for peer tutors including the consolidation of academic skills, improvement in leadership competencies, a heightened sense of purpose and responsibility, an increase in their academic self-efficacy and self esteem, and an improvement in their psychological wellbeing, with levels of depression, anxiety, and stress lower upon completion of the program. Overall, the results revealed that embedding this peer-to-peer mentoring program into the first semester of first year facilitated the emergence of a learning community, provided first year students with a solid foundation which students can benefit from throughout their academic career, and also highlighted additional benefits for the wider university community.

**The relationships between student support services, personality, learning approaches, and academic success**

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The main aim of this study was to examine the relationships between student support services, personality, learning approaches, and academic success in 647 first-year students, enrolled both on-campus and via distance education, at the University of Southern Queensland (USQ). Academic success was measured by Grade Point Average (GPA) at the end of students' first year of tertiary study. A key finding of this study was that overall satisfaction with student support services predicted GPA, accounting for 2% of the variance in GPA. The data indicated that student support services play a vital role in enhancing student satisfaction, both for on-campus and distance student cohorts. Consistent with previous research, Conscientiousness positively predicted GPA. Other key findings were that the Surface approach negatively predicted GPA; the Strategic approach positively predicted GPA. Both Conscientiousness and Intellect positively predicted the Deep and the Strategic approaches, respectively; Neuroticism positively predicted the Surface approach. These findings provide implications for curriculum

design and delivery and for transition programs for commencing students. Further research that tracks the academic performance of these students until they complete their degrees or leave the university is recommended.

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**Substance use and misuse among youth: Risk factors, mechanisms and behavioural change**

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Early initiation and misuse of substances in adolescence is a key marker for future substance-related problems, social dysfunction and psychopathology. Important psychological and social changes occur in the transition period from adolescence to adulthood. It is this transitional period that researchers have focused research efforts to reduce the significant health and social burden associated with substance use disorders. This symposium consists of five papers that employ a combination of experimental, cross-sectional, prospective, qualitative, and RCT designs to examine mechanisms, risk factors and behavioural change in adolescent substance use and misuse. The first two studies (Kelly and Williams) examine novel psychological mechanisms which have been recently implicated in problematic adolescent substance use. Psychological, family and behavioural risk factors associated with problematic substance in young adolescents are then examined in the context of a school-based, prospective study (Connor). In a second prospective study the factors associated with cannabis use are related to gender but a follow up qualitative study did not find a similar pattern in youth with drug problems (Young). The final paper (Toumbourou) reports on an evaluation of a large scale, universal family intervention delivered in early secondary schools which demonstrated reductions of frequent and heavy alcohol use. Together, these papers represent a contemporary body of research aimed to better understand the aetiology and process of behavioural change in adolescent substance use.

**Problem drinking and control of negative affect among adolescent girls and boys**

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Risky consumption of alcohol has been mainly related to masculine (hegemonic) traits and the drinking milieu usually described as being a masculine domain. None-the-less the incidence of problem drinking amongst adolescent girls is increasing alarmingly. One motivation common to both genders appears to relate to short-term hedonic control. However, the use of alcohol for this purpose contains a paradox in that risky drinking tends to result in a subsequent increase in negative affect. The aims of the study was to examine the role of adherence to gender stereotype, restrained drinking and negative affect on problem drinking. Participants were 267 girls and 426 boys aged between 14 and 18 years. A survey format and standardized measures were used. The main predictor of problem drinking for both genders was negative masculinity (noisy, bullying, loud, etc). In addition, high scores on restrained drinking predicted problem drinking indicating difficulties in self-regulation. Restrained drinking was also found to fully mediate the effects of negative affect (anxiety, stress, and depression) on problem drinking by girls as well as boys. The study concluded that negative masculinity reflecting an overly assertive style of interaction and ineffective (and ultimately counterproductive) attempts to control negative affect through preoccupation with the management of emotions both figure in the misregulation of alcohol.

**Subtle intra-individual processes relating to substance use by young people**

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Traditional social learning models of alcohol use have emphasised the role of conscious decision-making processes in the early development of substance use. This paper will present a series of research studies that build a model of how implicit cognitive processes, mood change, and explicit cognition relate to substance use in young people. Study 1 examined the cross-sectional and longitudinal role of automatic alcohol-related memory associations in the determination of alcohol and tobacco use. Among undergraduate students, the implicit measures significantly predicted changes in alcohol use several months later. Using a negative binomial protocol to accommodate severe skew in tobacco use, a similar effect was observed for smoking among teenagers. Study 2 examined the links between implicit measures and altered mood using a musical mood induction protocol. High and low risk drinkers showed

significantly different links between mood changes and alcohol-related memory associations. Study 3 examined the ways in which mood changes and implicit processes are related to affect change expectancies. For those with high affect change expectancies, changes in negative mood resulted in higher alcohol-related implicit measures. In terms of prevention and early intervention, this research lends support to the value of developing strategies to increase awareness and insight into the subtle precursors of drinking and smoking.

#### **A prospective study of risk factors for early adolescent alcohol misuse**

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Early adolescent alcohol consumption is a robust indicator of subsequent alcohol-related problems. The current study aimed to identify key risk factors and develop prospective models (using structural equation modelling) for alcohol consumption and alcohol-related problems in a sample of adolescents. A review of risk factors for adolescent alcohol misuse was initially conducted. Factors demonstrated to be most predictive of future alcohol misuse were incorporated in the current study. These included demographics, school factors, parental factors, peer factors, alcohol expectancies, drinking-refusal self-efficacy, personality dimensions, behavioural characteristics and school connectedness. A survey was administered to one hundred and ninety-two year nine students (Mean age = 13.8 years,  $SD = .51$ ) attending three high schools at baseline (Time 1). Students were assessed again at 12 month follow-up (Time 2), with a retention rate of 88.5%. Drinking (outcome) variables included quantity of alcohol consumption, frequency of use, and harmful alcohol usage (measured by the Alcohol Use Disorders Identification Test, AUDIT). An empirically driven approach was adopted through multiple regression analyses to determine the most salient variables to include in the prospective structural models. All models were a good fit for the data. Quantity of alcohol consumption (Model 1) was predicted by low opportunistic drinking refusal self-efficacy beliefs, high levels of psychoticism and extraversion, low levels of prosocial behaviour, and high peer provision of nicotine. Frequency of alcohol consumption (Model 2) was predicted by high expectations of social enhancement, and motor and cognitive impairment, as well as high peer provision of nicotine. AUDIT scores (Model 3) were predicted by high alcohol expectancies of social enhancement, high levels of psychoticism, high peer provision of nicotine and high peer consumption of alcohol predicted harmful alcohol usage. It was concluded that risk factors found to predict alcohol misuse in adolescents are multidimensional. There is scope to potentially modify many of these risk factors through public health campaigns and school-based prevention programs.

#### **Gender differences in adolescent cannabis use and mental health**

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Cannabis is the most commonly used illicit drug in Australia and initiation of use typically occurs during adolescence. Pathways of risk and the outcomes of cannabis use related to gender have not been extensively studied. In the first of two studies psychological adjustment of 1,442 males and 1,154 females (mean age 13.5 years) was used to predict cannabis use and intoxication two years later. Regression analysis, which controlled Time1 use, indicated that prior delinquency was the only predictor of use and intoxication for boys but for girls both delinquency and low self-esteem predicted use however low self-esteem alone predicted intoxication. The second study explored these gender related differences in more depth in a sample of 15 males and 15 females presenting for substance misuse treatment. Consensual Qualitative Research (CQR) methods identified more prosocial and adaptive reasons for use than the prospective study as well as negative outcomes related to addiction, cognitive impairment and poorer relationships. In this second sample of those with substance misuse gender related differences associated with cannabis were not marked. Collectively, these two studies suggest that the pathways for cannabis may be different for males and females but the outcomes of cannabis use for those with substance misuse problems are similar for both genders.

**Reduction of harmful adolescent alcohol use through family intervention in secondary school: Two year outcome of a randomised trial**

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A cluster randomised design (Australian Clinical Trial: 012606000399594) was used to evaluate a universal family intervention delivered in early secondary school for its effect in preventing frequent and heavy adolescent alcohol use. Government and Catholic secondary schools in metropolitan Melbourne, Australia were randomly selected to be approached. Twenty-four (62%) consented, 12 were randomly assigned to be approached for the “Resilient Families” intervention and 12 were monitored as usual-practice controls. Students in the intervention schools received a social relationship curriculum and their parents received a parent education handbook and invitations to attend parent education events that outlined strategies to reduce adolescent alcohol misuse and related problems. A total of 2,539 students were recruited based on parent consent and student participation (56% of approached sample) and completed three annual surveys with Wave 1 in 2004 (mean age 12.3 years). Data were imputed for all students participating in at least two survey waves ( $N=2,354$ , 93% of recruited sample). The main outcome measures were Wave 3 (average age 14.5 in 2006) alcohol use, frequent alcohol use (at least monthly) and binge use (five or more drinks in a session at least once in the prior fortnight). Multi-variate logistic regression results were averaged across 20 imputations to assess the effect of intervention exposure, adjusting for school clustering and baseline measures. Relative to students in the control schools, those exposed to the intervention showed significant reductions in frequent alcohol use, and binge drinking. Building relationship skills and increasing parent education in early secondary school appeared to be feasible public health strategies for reducing frequent and heavy adolescent alcohol use.

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**Aboriginal mental health: Towards closing the gap**

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While data remains inadequate, there is general consensus that Aboriginal people suffer mental health problems at a much higher rate than non-Aboriginal people, and that substance abuse, domestic violence, child abuse and disadvantage contribute additional risk factors. There is also strong evidence of the inability of the existing health system to effectively meet the mental health needs of Aboriginal people. This symposium brings together evidence from recent research, policy and service development activities across Australia to showcase innovative new ways of closing the gap on Aboriginal mental and emotional well-being.

**Improving access to social and emotional well-being services for Indigenous people in rural and remote Australia: Lessons learned**

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Indigenous people living in rural and remote Australia experience an excess burden of mental health disorders, emotional distress and substance misuse. However, their needs often go unrecognised and/or are inadequately addressed by the health care system. While a long term solution to this issue is likely to require broad social change, there is growing evidence that a range of initiatives can improve access to services. These initiatives include actions aimed at enhancing service availability, geographical accessibility, the organisational structure of how services are delivered, and their acceptability to Indigenous people. In this paper, we will draw on our findings from a number of projects we have conducted in Far West NSW (Murdi Paaki) and the Northern Territory that are seeking to improve access to services for Indigenous people. The Murdi Paaki project has adopted innovative approaches to target these access issues including organisational reform to enable cross agency delivery of services, multidisciplinary care, and a family-centred rather than individual-focused model of care. Such significant reform challenges both service delivery agencies and individual clinicians and we will report on strategies adopted to minimize these tensions and foster effective outcomes.

### **Pathways and tools for the integration of social and emotional wellbeing support and mental health care within Primary Health Care settings**

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The development of “mental” and “physical” health care services around Australia, and most western countries, has often occurred separately, rather than in an integrated way, since the days when the mainstay of mental health services occurred in long stay institutions. Evidence that this separation of mental and physical health remains prevalent is found in many national, state and regional “chronic disease” initiatives, which tend to include depression and anxiety only as co-morbidities to diabetes, cardiovascular and renal disease and cancer. In fact, diagnosed mental disorders are usually long term and recurring; they also rival more traditionally considered chronic physical illnesses in terms of disability adjusted life years and mortality in some age groups. Thus there remain serious gaps in the way social and emotional well being is supported and mental health services are delivered, especially in community primary health care settings where this can most effectively occur. Indigenous settings have helped to highlight these gaps and inform better ways forward. This presentation will describe the recently launched *Protocols for the Delivery of Social and Emotional Well Being and Mental Health Services in Indigenous Communities: Guidelines for health workers, clinicians, consumers and carers*. The document was produced through a 5 year collaborative mental health research and service partnership (Australian Integrated Mental Health Initiative [AIMhi] Indigenous Stream North Queensland and AHMAC Priority Driven Research) involving Aboriginal communities, universities and government, community-controlled and other non-government health services. The Protocols are underpinned by evidence (where available) and consensus-based practice, and operate according to empowerment and recovery principles which seek to foster strength within communities to support better outcomes for consumers and families. The aim of the presentation is to raise awareness among researchers and service providers that wellbeing approaches to assist Indigenous communities to prevent and address mental health problems are possible and appropriate tools are available. What is needed is long-term commitment to work together, changed ways of thinking and appropriate support.

### **Building the strengths to overcome the odds: Examining empowerment through program theory**

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Job opportunities, affordable child care, clean playgrounds, comfortable living arrangements, safe neighbourhoods, gathering places... these things are as much a part of health as are hospitals, prevention programs and clinical guidelines. The WHO urges nations to view the goal of health from an ecological, a holistic and a strength-based perspective. This means recognizing the impact of social determinants, such as those mentioned, on the wellbeing of individuals who have the capacity to think and do for themselves. However, when jobs are rare or the workforce unprepared, when houses are overcrowded and everyday stressors constantly reach a boiling point, when feeling safe is an almost foreign concept and lashing out against all this becomes the norm, the impact of poor social determinants is so great that survival sometimes seems like the most one can hope for. Data suggest that Indigenous communities experience disproportionately higher rates of emotional distress, co-morbid disorders related to addiction and physical illness and hospital admissions for mental disorders. These present earlier in life, are multiple and mutually reinforcing, recurrent, persistent and are seen as unmodifiable. In this context, how can psychologists assist people to achieve the goal of wellbeing advocated by the WHO? This talk will explore empowerment as a valuable solution and examine its operationalisation through the theoretical evaluation of an Indigenous-developed empowerment intervention, the Family Wellbeing Program (FWB). This Program builds on the strengths of the participants to address everyday challenges, assisting them on a journey toward understanding their emotions, improve their relationships and increase control in their lives. This presentation offers a brief description of the program; the methodology used to extract its process theory and the key components. Identifying program components provides benchmarks for evaluation, allows program improvements, adaptations and generalization. Identifying the components of an empowerment program allows for wider scrutiny of the operationalisation of the concept and contributes to build the evidence base for empowering initiatives. We hope this presentation will prompt reflection and discussion and become a mutually inspiring experience through a shared learning process.

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**Issues for clinical, community, and forensic psychology in a multicultural society**

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This symposium explores issues for clinical practice and research in a multicultural society. The three papers represent clinical, community, and forensic psychology in cross cultural settings. The first paper discusses a competency-based approach to clinical supervision provided to practitioners working in culturally diverse contexts. It then proposes that a competency-based model of clinical supervision is highly appropriate for both the supervisor and practitioner to work with the complexity provided by cultural issues in clinical practice. The second paper reports on a research project conducted to identify factors that are associated with psychopathology in Filipino immigrants whose community is characterised by gender imbalance. The third study explores factors that influence the attitudes of Vietnamese people towards crime, justice, trust and police work. The paper provides useful information about the difficult relationship between police and the Vietnamese community. A general discussion about psychological issues in a multicultural society will then be presented.

**A competency model for clinical supervision in multicultural contexts**

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This paper deals with the application of a competency-based approach to clinical supervision provided to practitioners working in culturally diverse contexts. The paper reviews the literature with particular reference to key issues in such supervision, including level of practitioner experience, theoretical models of practice and practitioner's cultural background. This review provides a context for the conceptual basis to the model. The author will draw on her experience to discuss the application of the model in relation to examples involving practitioners supervised in various contexts including psychology registration programmes, private practitioners, contracted practitioners working in multicultural services and practitioners working with specific communities. It will be argued that a competency-based model of clinical supervision provides an appropriate framework for both the supervisor and practitioner to work with the complexity provided by cultural issues in clinical practice.

**Psychological distress in older Filipino migrants**

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The Filipino community is projected to be the sixth largest community among culturally and linguistically different background migrants in Australia. This community also has gender imbalance because of the large migration of women who came to Australia as brides and grandmothers. This paper reports on a correlational, cross-sectional study with multivariate analysis, conducted to identify factors that are associated with psychopathology in Filipino immigrants in Australia. Participants include 342 older Filipino migrants aged 50 and above. Following the stress and coping framework, the study examines the role of factors including reasons for migration, health, social roles, cohort effect, coping strategies, and social support on psychological distress. The results indicate that factors such as education, living arrangements, motivation to migrate, employment status, coping, and social support contribute significantly to positive psychological well being for this sample. The implications of the findings related to immigration policies and the welfare of migrants are then discussed.

**Exploring the attitudes of Vietnamese people towards justice, trust and police work in Victoria**

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The Vietnamese community has grown larger in the last two decades, and Australia has seen many successful Vietnamese men and women from both first and second generations in business, politics, and academic. However, at the same time, there have also been many other issues and problems within this striving community such as drugs, gambling, crimes, and anti-police sentiments, which police and the governments have difficulties to deal with. Police and law enforcement agencies have found it hard to understand, or reach to and work cooperatively with the Vietnamese. The present study explores the

factors that influence attitudes of Vietnamese people towards justice, trust and police work. Using data obtained from focus groups selected from various leaders and representatives of Vietnamese community and organisations in Victoria. About 20 Vietnamese participate in focus groups discussing the deepest issues concerning the Vietnamese community such as crime, safety, and views of police work. Results gathered from these focus groups will then be interpreted in terms of the Socio-historical life-course theory of Elder's model.

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### **Psychologists for peace: APS interest group initiatives and peace research**

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The *Psychologists for Peace (PFP)* interest group of the Australian Psychological Society has been promoting peace and peace research for over 20 years. This symposium gives an overview of recent and ongoing activities with a focus on *PFP* initiatives that promote peace and stimulate peace research. Exemplary initiatives include: 1) the *Peace Research Award* for psychology students conducting a research project, 2) the *Children's Peace Literature Award* for a children's book with the theme of peaceful conflict resolution, and 3) the *Art Award* for secondary school student exploring peace issues through a creative work. This symposium will also include three presentations on peace related research. The first is an investigation into aspects of emotional intelligence that facilitates the capacity to forgive. This online study incorporated both self-report and ability measures of emotional intelligence. The study won the *PFP Peace Research Award* for 2008. Two other presentations emerge from a major applied research project in primary schools called *Enhancing Relationships in School Communities (ERIS)*. This project was designed to introduce a model of conflict resolution and relationship building into schools. Implementation, program evaluation and evolution of the program are described. The initial focus has expanded to incorporate awareness and respect for cultural diversity through an ARC supported project called *Creating Culturally Respectful School Communities*. The evidence base and lessons learned are central to the success of such peace building programs and ones in which psychologist can play a lead role.

### **Initiatives of the APS interest group *Psychologists for Peace***

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The APS interest group *Psychologists for Peace* has a long history of promoting peace and peace research. An overview of past and current initiatives of the group is presented. The importance of individual and collective effort is emphasised and examples are provided. The various contributions that psychologists can make are also covered. A previous project leading to an Order of Australia award will be noted. The critical importance of role models for peace and informed public commentary are discussed. Three *PFP* award initiatives are described. The *Peace Project Award* is an annual award for a psychology student whose 4<sup>th</sup> year or Master's research project relates to understanding peace and constructive resolution of conflict. Specific aims of the research award and planned changes to further encourage student engagement with peace studies are outlined. The biennial *Children's Peace Literature Award* will also be explained including the process of managing the award, types of books receiving awards, and positive outcomes of the award. The third *PFP* award is the biennial Art Award which involves promoting peace related art by secondary school students in Western Australia. Other *PFP* initiatives include: 1) school based programs that promote conflict resolution and cultural diversity and 2) a project exploring micro-financing to reduce poverty and break down the structural barriers to peace. This introductory session provides a context and foundation for the subsequent research based presentations.

### **An investigation into the role of emotional intelligence in the prediction of forgiveness in a community sample**

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Forgiveness is a process that sustains relationship functioning by offering parties a means to resolve transgressions that may sometimes arise. However, not all people are alike in their tendency to forgive. While various factors have been found to explain this variation, little is known about the role of emotional intelligence (EI) in the process of forgiveness. The aim of this study was to extend past research into characteristics predictive of a tendency to forgive, such as self-reported emotion management, by including an objective measure of emotional intelligence. Three models of the relationships between emotion-related variables and the disposition to forgive were proposed and tested. Using the snowball approach (social networking) and advertising, 201 adult participants (57 males, 144 females; mean age = 35.78,  $SD = 11.13$ ) from Australia and internationally participated in this online study. Participants completed demographic questions, a self-report forgiveness questionnaire, and two emotion-related measures. The Trait Meta-Mood Scale assessed self-reported attention to, clarity about, and repair of emotions. The Mayer-Salovey-Caruso Emotional Intelligence Test Version 2.0 (MSCEIT) assessed ability and knowledge to perform emotion-related tasks and solve hypothetical emotion-related problems in the four areas of perceiving emotions, using emotions to facilitate thought, understanding emotions, and managing emotions. The MSCEIT, which also yields a single EI score, is considered an objective ability-based test. In initial analyses, the total MSCEIT EI score, as well as perceiving and managing emotions branches, had low but significant correlations with tendency to forgive. Upon integrating self-report and ability EI measures in regression-based path analyses, it was found that self-reported repair of emotion was the most proximal predictor of forgiveness. Theoretical and practical implications of these findings will be discussed along with directions for future research.

### **New lessons learned from the *Enhancing Relationships in School Communities Project* – Explorations in conflict resolution, cultural diversity and program implementation in primary schools**

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The aim of this paper is to describe the current phase (Phase 2) of the *Enhancing Relationships in School Communities* (ERIS) project and to highlight lessons being learned from this new research. In 2005, arising out of a Psychologists for Peace initiative, 12 primary schools enrolled in an 18-month ERIS program, which assisted 3-5 person professional learning teams to develop constructive conflict handling and relationship-building processes in their schools. Results suggested that the full program was effective in encouraging teachers to implement cooperative conflict resolution methods and teach students relevant curriculum. Subsequently, based on lessons learned from Phase 1 of the project and in collaboration with the Centre for Equity and Innovation in Early Childhood (University of Melbourne), the ERIS program was developed further and processes for creating school communities that are respectful of cultural diversity were extended. Phase 2 of the ERIS project was supported by Australian Research Council Linkage Grant called *Creating Culturally Respectful Primary Schools*, including the APS, the Catholic Education Office Melbourne, two primary schools and a philanthropic trust as Linkage Partners. In February 2008, a new group of 10 primary schools began the revised version of the 18-month program ERIS program. This paper describes lessons learned in this process. The original ERIS program conflict resolution model will be discussed, followed by modifications that have been made to the model to address three different issues and influences. The first influence has been teacher responses and concerns during field visits and workshops as documented by field notes, and informal and formal feedback; these concerns were addressed by developing a briefer conflict resolution model. The second modification involved embedding concepts related to creating respect for, and awareness of, cultural diversity into the conflict resolution model in the form of 'justice watchpoints'. The third modification has integrated the ERIS conflict resolution model into the Restorative Practices program used by the Catholic Education Office in Victoria. After describing these modifications, the paper will conclude with discussion of other lessons learned about program implementation in schools from this phase of the project.

**An evaluation of the mid-program outcomes of phase two of the *Enhancing Relationships in School Communities* project**

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The aim of this paper is to report on mid-program outcomes of the second cohort completing the *Enhancing Relationships in School Communities* (ERIS) program. Following a successful 18-month pilot project, the ERIS program was modified to better assist schools in developing productive conflict handling processes and, in addition, to positively address issues of cultural diversity. These two program areas were included in the design of a Phase 2 ERIS program with a view to encouraging respect for differences between people and groups, and enhancing interpersonal relationships among students, parents and teachers. Thirteen schools that applied to the program were matched and then randomly assigned to either a full-intervention group or a comparison group. In the intervention, ten Victorian primary schools took part in the 18-month ERIS program which provided professional development workshops to 3-5 person professional learning (core) teams. Core teams were then expected to disseminate program content acquired at the workshops throughout their schools. Core teams attended six days of workshops over the program and received periodic in-school support by ERIS staff; the whole school also attended a workshop. Three comparison schools were provided with relevant materials, but participated in no workshops and received no in-school support. Staff in all schools were asked to complete questionnaires at pre-program, mid-program (10 months into the program), and at end-of-program. These measures assessed conflict and cultural diversity knowledge, skills and attitudes through rating scales and scenario based measures, and teacher perceptions of their students' knowledge, skills and behaviours in these areas. This paper reports on changes between pre-program and mid-program on these measures. The amount of time that teachers reported spending teaching conflict and cultural diversity curricula in classrooms will also be evaluated. The progress of the ERIS program in 2009 will be discussed and the results from the current program will be compared to those of the pilot project.

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**Body image across the life span, gender and culture**

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Body image is a significant concern affecting women and men across the lifespan and in different cultural groups. Moreover, we know that a positive body image is an integral aspect of one's emotional and physical health, and that it has a pervasive influence on many aspects of one's life (e.g., relationships, work, family, leisure and health risk behaviours). This symposium examines body image in four different contexts and populations. These include preadolescents, university students, women aged between 18 to 92 years, and adolescents from Fiji, Tonga and Australia. The first paper examines body image and its correlates among preadolescent children. The main focus is on the role of social comparisons as these play a significant role in children's social and emotional development from a young age. The second paper examines the relationships between attachment, body dissatisfaction, body change strategies and self-esteem among university students. Specific styles of attachment were found to be related to different body change strategies and the findings highlight the importance of studying adult attachment styles. The third paper examines women's experiences of body image, self-esteem and quality of life. Body dissatisfaction was associated with lower self-esteem and lower quality of life. The final paper examines the role of cultural values and the church on body image and body change strategies among adolescents from Fiji, Tonga and Australia. The findings showed that the church was the strongest influence in shaping eating practices for Indo-Fijians and Tongans. Each paper addresses the implications for educational and prevention strategies to promote better health, and takes into account the impact of age, gender and culture.

**The role of social comparisons in children's body image concerns**

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Body image concerns and related behaviours associated with either disordered eating or the pursuit of muscularity have become areas of concern for professionals working with children. Although children

display fewer body image concerns and related behaviours in comparison with adolescents and young adults, their concerns are similar in nature and are wide-ranging. In order to more fully understand the development of children's body image concerns, we need to study these attitudes and related behaviours in relation to other important aspects of their development. We have selected to focus on social comparisons as the emergence of social comparisons marks a critical milestone for children's self-socialization. The present study was designed to investigate the extent to which children aged between 8 and 10 years use social comparisons pertaining to their weight, muscles and height. We also investigated the extent to which children were more likely to compare their body with others who they thought had a better body (upward social comparisons) versus others who they thought had a worse body (downward social comparisons). In addition, we examined children's body-related social comparisons in relation to measures of social and emotional development, which included self-esteem, negative and positive affect, body dissatisfaction, and weight and muscle concerns. The participants were 101 girls and 98 boys from grade 3 and 4 classes. We found similar levels of body-related social comparisons among both girls and boys, although girls were more likely to make weight-related comparisons while boys were more likely to make muscle-related comparisons. Moreover, we found that these were evenly divided between upward and downward social comparisons. In addition, we found that both types of social comparisons were related to higher levels of negative mood for girls and boys. However, only upward social comparisons were related to lower levels of self-esteem. This is consistent with other work in the field, which shows that even downward social comparisons can lead to higher levels of negative mood, particularly when assessed using state measures. On the other hand, self-esteem, which is a more stable trait-like characteristic, has been frequently found to moderate the effects of social comparisons.

#### **Attachment, body image dissatisfaction, body change strategies, and self esteem in a university sample**

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The inter-relationship between adult attachment style, body image dissatisfaction, body change strategies and self esteem was examined for a university sample of 110 students (80 females, 30 males). Participants completed the Body Image and Body Change Inventory (body image importance, body image dissatisfaction and body change strategies), the Relationship Styles Questionnaire as a measure of adult attachment (secure, dismissing, preoccupied and fearful), and the Rosenberg Self esteem scale. Preoccupied attachment style was associated with higher body image dissatisfaction (Beta = .222;  $p < .05$ ) and females with this attachment style were more likely to use body change strategies to decrease their weight. Preoccupied attachment was negatively associated with self-esteem (Beta = -.341,  $p < .01$ ). Those with low self-esteem had greater body image dissatisfaction (Beta = -.275;  $p < .05$ ). Mediation analysis indicated that self esteem partially mediated the influence of preoccupied attachment on body image dissatisfaction; the beta dropping from .222 to .128 ( $p > .05$ ). Interestingly, individuals with a dismissing attachment style were less likely to use strategies to decrease their weight, and similar to fearful attachment style were more likely to use strategies to increase their weight. Findings are discussed in terms of the importance of understanding the interaction between body image and adult attachment. Clinical implications and future research are suggested.

#### **Women's experience of body image, self and quality of life**

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This study used a self-report questionnaire and cross-sectional design to investigate differences, across the life span, in body dissatisfaction, self-esteem, and perceptions of quality of life. Participants were 152 women, aged 18-92 years. Significant differences were found across age groups for ratings of the ideal figure, the attractive to men figure, the thinnest acceptable figure, and the male figure shape women found attractive. A significant relationship was found for age and sexual attraction. Women experienced their body image as having a positive effect on their quality of life. Results showed women with lower body esteem had lower self-esteem, and their feelings about their appearance had a more negative effect on their quality of life. Limitations and future directions are discussed.

**The role of cultural values and the church on body image and body change strategies among adolescents from Fiji, Tonga, and Australia**

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This study investigated cultural values, body image and body change strategies in Western and non-Western societies. In total, 628 Fijian, 463 Indo-Fijian, 598 Tongan, and 534 Australian adolescents completed measures of cultural values and church in relation to the ideal body and eating practices. Fijian and Tongan adolescents were more likely to value a large body, and this view was strongly endorsed by the church. These church influences were strongest in shaping eating practices for Indo-Fijians and Tongans. These findings support the role of the church in transmitting cultural values regarding body image and body change strategies in these Pacific Island communities.