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Acculturation of culturally and linguistically diverse individuals

Nigar Khawaja (Queensland University of Technology)

Australian society is very culturally and linguistically diverse. Individuals enter Australia to either settle permanently or to live here for a few years as international students. Although, these new arrivals introduce many benefits to the country, most of them have to undergo an adaptation and acculturation process. A successful acculturation depends on many personal as well as societal factors. Positive attitudes of the host society enhance acculturation. Similarly, the individual characteristics, resilience and strengths also play a vital role in the adaptation process. The constructive attitudes and beliefs of the culturally and linguistically diverse (CALD) individuals can be endorsed through interventions. The acculturation and personal resilience needs to be measured. Four empirical studies will be presented as a part of this symposium. The first study will examine the attitudes and beliefs of the host society towards the culturally diverse individuals. The second study will look at the contribution of personal strengths, such as social self-efficacy and self-esteem, towards positive life satisfaction of the international students. The third study will describe the development and implementation of an intervention to promote the acculturation and well-being of international students. Finally, the fourth study will present the newly developed scale that can measure the acculturation and resilience of international students as well as CALD populations in Australia. The studies will be presented by experienced as well as young researchers and scholars and will act as a forum for clinicians and researchers to discuss acculturation issues.

Paper 1: Attitude towards CALD population as examined by Color Blind Racial factors

Bill Johnson (Australian Catholic University)

Positive adaptation and acculturation of the CALD population in Australia depends on factors associated with these individuals as well as the host society. Although a lot of work has been done on the individual characteristics of those who settle in Australia, there is scarcity of studies examining the host society attitudes and beliefs towards the diverse cultures. The present study sought to examine the nature and extent of color blind racial attitudes in Australia. To date, the effects of these more covert racial attitudes have been rarely studied in Australia; however, such attitudes have been found to impact

physical and psychological health as well as academic success in the larger international literature. Participants (N = 1, 277; M = 592; F = 685) completed 10 questions from the original Color Blind Racial Attitudes Scale. Questions were determined based on their applicability with the Australian context. The results showed that colour blind racial attitudes are affected by persons' income, gender, marital status, and religious beliefs. Additionally, older people showed to have more knowledge of racial privileges, but this knowledge was not associated with acknowledgement of racial issues and problems. Education also increased knowledge of racial privileges, but again did not necessarily result in acknowledgement of racial problems.

Paper 2: Psychosocial predictors of life satisfaction in Asian-born international students

Tami Shaw (University of Canberra)

The present study investigated the effect of various social and personal variables on Asian-born Australian international students' life satisfaction, which is vital to encourage the continued presence of international students in Australia and benefit the economy and domestic students. It was hypothesized that life satisfaction would be positively predicted by intercultural social self-efficacy, self-esteem and social support, and negatively predicted by English use anxiety. It was also expected that intercultural social self-efficacy would mediate the relationship between English use anxiety and life satisfaction. Survey participants were 246 male and 203 female Asian-born tertiary international students recruited using the snowball technique from Canberra and Sydney. A hierarchical regression analysis revealed that intercultural social-self efficacy was the strongest positive predictor of life satisfaction, followed by self-esteem and social support. English use anxiety negatively predicted life satisfaction. Intercultural social self-efficacy was found to mediate the relationship between English use anxiety and life satisfaction. These findings highlight the need for future research on international students' wellbeing and for programs that promote intercultural social self-efficacy, self-esteem and social support, and aim to reduce English use anxiety in international students.

Paper 3: Using a group psychological intervention to enhance the psychological wellbeing and adjustment of international students

Rachel Smith (Queensland University of Technology)

Australia is a popular destination for international students, however, studying overseas has many challenges, and international students may experience acculturative stress and adjustment problems. In addition to the academic pressures, international students face financial, social, and cultural difficulties, which can lead to acculturative stress and in severe cases psychopathology such as depression and anxiety. Whilst some promising steps have been taken to improve the adjustment of international students, a gap remains in the literature surrounding a lack of psychological interventions to help this student group. The authors sought to address this gap in the literature through the development and evaluation of a group psychological intervention that aimed to enhance psychological well-being and adjustment of international students. The intervention was developed from suggestions obtained from international students and professional staff during a qualitative study conducted by the authors. The group intervention is a four session program based on a cognitive behavioural approach, and will be

evaluated using international students in their first year of study at an Australian university. It is hypothesised that the group intervention will enhance participants' coping self-efficacy, social self-efficacy, psychological adjustment, and university connectedness, whilst decreasing depression, anxiety, and stress levels. Preliminary findings will be presented. The development and evaluation of a psychological intervention to enhance psychological well-being in international students is an important step towards addressing the shortage of empirically tested interventions for this student group. If future research further proves the intervention's efficacy, it is hoped that international student centres at universities can begin to adopt it as a regular program offered to international students upon commencement of their study in Australia; thus, helping international students to have a more enriching and satisfying stay in their host country.

Paper 4: Developing a scale to assess the acculturation and resilience of Culturally and Linguistically Diverse Adults in Australia

Rachel Smith (Queensland University of Technology)

A quarter of Australia's society consists of individuals from culturally and linguistically diverse (CALD) backgrounds. Most of these individuals experience post migration challenges and difficulties. However, many demonstrate incredible resilience characteristics and manage to adapt successfully. The current study aimed to develop a psychometrically sound instrument, measuring resiliency and positive acculturation of CALD individuals. An item pool was generated and tested out first with a sample consisting of international students (N = 479) and second with a sample consisting of ethnically diverse community members (N = 225) settled in Brisbane. All participants completed a questionnaire battery online. Separate exploratory factor analyses conducted on the two samples revealed a very similar factor structure with three factors: resiliency, acculturation and spirituality. In the case of the student sample 19 items reflected the three factors, whereas in the case of community sample 27 items revealed the three factors. Both versions are internally consistent with sound test-retest, convergent and divergent validity. The scale was labelled as Adult Acculturation and Resiliency Scale (AARS) with two versions: one for international students and the other for general CALD community members. The findings highlight that "resilience" in the form of personal strengths, protective factors and positive attitudes toward adjustment; "acculturation" in the form of social connectedness and modification of one's identity and beliefs systems; and "spirituality" in the form of religious practices and belief systems assisted the international students and the ethnically diverse individuals in their successful adaptation.



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Assessing and developing the practitioner and industry capabilities of psychology students throughout the undergraduate and postgraduate curricula

John Reece (RMIT University)

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 assessing and developing the capabilities of psychology students will be presented. The development of a range of capabilities is a central imperative for the education of psychology students, and considerable work has been done recently on articulating those capabilities, and in considering how they should be fostered across the undergraduate and postgraduate curricula. An important goal of capability development is to produce more "industry-skilled" graduates, where "industry" is taken to mean the full range of private, government and community businesses, agencies and other organisations that employ psychology graduates, and each of the presentations in this symposium informs this important issue. The three papers here will be presented in a logical sequence based on level of education and training: undergraduate (Jones), postgraduate (Strodl), and higher degree by research (Reece). In the first presentation, Clive Jones will discuss an approach for incorporating practice-based experience into the undergraduate curriculum, and will make the case for the importance of this material being made part of the undergraduate experience by forming a foundation for future postgraduate training. The second presentation, by Esben Strodl, develops this theme by presenting the results of a survey of the learning needs of postgraduate psychology students on external placements. External placement plays a central role in the development of practitioner capabilities for postgraduate psychology students, and Strodl's paper highlights the need for an evidence-based approach assessing the needs of these students. In the final presentation, I will describe a new approach to doctoral education from the UK, Doctoral Training Centres, and will argue that the Doctoral Training Centre approach should be adopted as the preferred model for doctoral education of psychology students in Australia.

Paper 1: From Novice to Expert: Building the foundations of a practice based schema in undergraduate psychology students

Clive Jones (The Australian Institute of Psychology)

Research into the development of professional expertise highlights the need for psychology programs to offer a long term path of practice based experiences to accompany the depth and breadth of declarative and procedural knowledge a student must attain. This paper highlights the important role of practice based experiences for undergraduate psychology students and its place in the longer term path required to develop practice expertise. Specifically, through applying a cognitive model of information processing, this paper clarifies how practice based experiences (either real or simulated) in the undergraduate years can build a crucial foundation from which the developing practitioner can cultivate their capacity to process and respond insightfully to the complex and highly nuanced environment faced within the real world of practice.

Paper 2: What are the learning needs of postgraduate psychology students on external placements?

Esben Strodl (Queensland University of Technology), Jason Lodge (Griffith University), & Lee Beames (Queensland University of Technology)

Work integrated learning is a core principle and process in the training of postgraduate clinical psychology students. However being on a practicum external to the university often may present students with a challenging new learning environment to which they may be unaccustomed to. While it is not possible to train students for every work environment, it is important for educators to be aware of what the perceived learning needs are of students on external placements in order to more closely align the learning content and processes of the curriculum both before and during these external placements. As such we undertook an online survey of postgraduate clinical psychology students on external placements and asked them to respond to questions about 1) resources essential for clinical externships, 2) their main learning needs while on externships, 3) resources that would facilitate them in achieving these learning needs, and 4) the main challenges these students are experiencing in becoming work ready for their externships. Some of the main learning needs identified by this sample of students included more information about multi-disciplinary work, details about real world practical treatment and formulation issues, how to work independently in diverse workplaces, and how to better work with diverse clients. Some of the challenges identified to becoming work ready included a feeling that they lacked professional recognition, lacked of confidence in their abilities, and lacked an understanding workplace practices/norms/administrative issues. One of the challenges with providing additional learning to students on externships is the challenge of very limited access to university staff for training purposes. As such the results of this survey will be discussed in terms of implications for blended learning experiences to better address the identified learning needs of these students.

Paper 3: Doctoral training centres: An innovative model for the doctoral education of psychology students

John Reece (RMIT University)

Doctoral Training Centres (DTCs) have been recently set up in the United Kingdom because of a perceived need for more industry-capable doctoral graduates across a range of disciplines. Since starting, DTCs have rapidly expanded, and have become a highly sought after source of doctoral graduates by industry (the term “industry” is used here in its broadest sense, and incorporates private, government and community businesses, agencies and other organisations). The number of students completing their PhD’s in DTCs is rapidly rising, and it is anticipated that the majority of UK PhD students will soon be studying at a DTC. The training that a student receives at a DTC differs considerably from the typical model of PhD training in the UK and Australia; for example, the nominal degree duration is longer (four years), and a range of high-level generic and industry-specific coursework requirements are part of the program. Australia’s first DTC, in mathematics, has just been announced; it will be distributed across the five ATN universities, and is expected to have its first intake of students in 2012. The implications of Doctoral Training Centres for doctoral education in this country cannot be underestimated, and, as a popular discipline for PhDs, psychology educators should be aware of the potential of DTCs to provide better trained, more capable, industry-aware graduates. This presentation will begin by providing the background and context of DTCs. The proposed model for the newly announced ATN DTC in Maths will be described, and contrasted with the range of DTC models that are currently operating in the UK. The bulk of the presentation will focus on a range of possible models for DTCs in psychology. I will argue that the DTC model has the potential to significantly change postgraduate education in this country, and that psychology, as a discipline, needs to take the initiative by adopting the DTC model as soon as possible.



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Assessment and its centrality in improving educational outcomes: The practice of teaching and learning of students

Terence Bowles (University of Melbourne)

Various forms of assessing and reporting student achievement have had prominence in the media recently. The hope associated with providing such large-scale comparisons of student performance is that transparently providing data will have an impact on student performance. Unfortunately the hope is seldom realised as the link between assessments and improving student performance is remarkably complex. In this symposium three papers are presented that illustrate best practice in educational research and describe methods for improving teacher engagement and student performance. Firstly, theoretically grounded approaches have been critiqued and incorporated into the research. Secondly, the research programs investigate the fine-grained relationship between the complex factors associated with teaching and learning dynamic. Finally, subtle feedback loops have been built into the research to provide refined feedback to teachers to assist them to adjust their own behaviours and develop correct perceptions of student's entry performance. Collectively these projects provide outstanding information about theory testing, intervention, and novel ways of assisting the improvement of the teaching-learning dynamic, directly resulting in improvements for students.

Paper 1: ELKS: Development of a Measure of Early Literacy

Esther Care and Emelie Barringer (Assessment Research Centre, University of Melbourne)

The aim of this project was to produce a scale – Early Literacy Knowledge and Skills (ELKS) – that assessed a wide variety of early literacy skills not addressed by current measures. The development of the scale was part of an Australian Research Council Linkage Grant (LP0883437) entitled “The Young learners’ Project: Identifying personalized teaching strategies for early literacy in children in preschool and the first year of school”. The results reported in this presentation are based on 339 children enrolled in four year old preschool programs in Melbourne (160 boys and 172 girls) who completed ELKS as well as Concepts about Print, the Record of Oral Language and four subtests from the Clinical Evaluation of Language Fundamentals Preschool, Second Edition. Development of ELKS was strongly informed by the work of Ferreiro and Teberosky who took the approach that learning should be facilitated rather being

driven by others. In terms of literacy, this means that children would be helped to learn through their active participation in the process rather than being the objects of a teaching intervention. An additional issue treated in this discussion concerns how different sub skills in early literacy combine to inform the development of reading comprehension. A model of the relative importance of these sub skills or elements is presented and discussed, and informed by the development of ELKS. Although the development of ELKS has conformed with traditional approaches to scale development, raw data have also been analysed from an IRT perspective, which has helped to elucidate clusters of skills which occur at particular developmental points along the progression toward reading comprehension. This information is of particular relevance to teachers in the early years of primary school, as well as to psychologists who work with children who may be referred to them on the basis of assumed learning difficulties.

Paper 2: Developmental approach to assessment: Assessment for teaching

Judith Crigan, Patrick Griffin and Esther Care (Assessment Research Centre, University of Melbourne)

An innovative approach to assessment has changed the focus of assessment in schools and is leading to compelling improvements in student learning outcomes in a Victorian-based project in the Catholic Melbourne diocese. The ideas of Vygotsky's zone of proximal development, criterion-referenced assessment interpretation and item response modelling have formed the basis of a new approach to assessment for teaching. By analysing evidence of student ability, student skill is mapped to a developmental progression, so that educators can determine what each student is ready to learn, rather than comparing students to same age peers or year level curriculum standards. This represents a shift from a deficit approach to a developmental approach to teaching –providing teachers with a realistic expectation for all students' learning and allowing instruction to be focused on where it is most effective. Results over a period from 2006 onward have shown student progress beyond expectations. The factors contributing to these gains include organisational leadership, collaborative teacher teams, and individual team leader knowledge, values and attitudes. This presentation focuses on examining how these contributing factors influence student learning outcomes.

Paper 3: Rethinking social ability: Construction of a competency based measure and learning trajectory

Bernadette Coles-Janess and Patrick Griffin (Assessment Research Centre, University of Melbourne)

What has become known as the students with additional needs (SWANs) project was a large program of research principally funded under an Australian Research Council Linkage Grant (LP0775224). The research was focused on the production of a number of assessment scales and learning pathways that could be used to inform teaching practice. This presentation highlights the incorporation of theory, research and practice considerations in the construction and use of a social ability scale and its articulating developmental progression. The utility of these measures has seen them being embraced by significant stakeholders at a state level and resulted in a fundamental shift in how the social capacity of students funded under the program for students with disabilities are viewed. As a result, the rhetoric that all children can learn has now been supplied with a process to facilitate its likelihood. Social ability

issues form a large component of an educational psychologist's practice. This presentation concludes by considering whether psychological practice would be better served by adopting a competency based approach to both assessment and intervention of students experiencing social "difficulties".



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Body image and health in context

Marie Caltabiano (James Cook University)

Extensive research has shown that body image plays a central role in the development and/or maintenance of a range of adverse psychosocial conditions, including depression, eating disorders, low self-esteem, and health behaviours. In addition, body image concerns also permeate other aspects of individuals' lives including relationships, work, and other social activities. This symposium brings together recent experimental and qualitative research which has been conducted to more fully understand how both women and men experience body image, with a particular focus on contextual factors. The first paper focuses on an in-depth study of women's daily body image concerns in relation to their mood and the presence of others, and shows that contextual triggers of mood are important predictors in understanding state body dissatisfaction. The second paper examines the lived experiences of women with permanent non-facial scarring with a focus on how different women experience and construct their bodies differently. Over half of the women experienced various forms of distress that impacted on their everyday life; however, not all women experienced appearance concerns or other scarring-related distress, thus highlighting the importance of taking into account the biopsychosocial context. The third paper examines Indigenous Australian men's body image in the context of healthy/unhealthy eating and physical activity. Previous research has shown that the body image, self-esteem and other self-concepts of Indigenous men are very negative and often more negative than those of European men, however, these findings need to be understood in the context of Indigenous men's understanding of their health and other sociocultural factors also need to be taken into account. Each paper will examine a range of contextual influences on body image, and address the implications of these findings for promoting positive health and well-being.

Paper 1: Mapping moment-by-moment changes in state body image

Mathew Fuller-Tyszkiewicz (Deakin University)

Body image is a multi-dimensional construct defined as an individual's perception of, and attitudes towards, his or her body and appearance. While body image has been traditionally considered a stable and unchanging characteristic that is transferable across a wide range of contexts, recent findings demonstrate that body image also exhibits state-like properties. However, the determinants and implications of moment-by-moment fluctuations in state body image are not yet fully understood. This oral presentation will report on findings from a study which evaluated state-like properties of body image among adult women. Procedure: The participants were 60 undergraduate women who completed a questionnaire containing trait-based measures of body image and personality, and then carried a Personal Digital Assistant (PDA) for a seven-day period. The PDA prompted participants six times daily to self-report their state body dissatisfaction and answer a series of contextual items (current mood state, and presence of others at time of testing). Results and discussion: Modelling of the patterns of change in state body dissatisfaction over the testing period revealed that individuals who exhibited the greatest variability in state body dissatisfaction also had more unhealthy levels of trait body image and personality measures. Current mood state and presence of others each contributed to state body dissatisfaction levels. However, the influence of these contextual variables on body dissatisfaction was largest for individuals with unhealthy body image attitudes. These findings suggest that malleability in state body dissatisfaction is a related, yet independent, construct from trait body dissatisfaction. Therefore, the effective treatment of state body image necessarily involves identification of the contextual triggers of upswings in state body dissatisfaction. This presentation will conclude with a discussion of other potential contextual influences of body image that warrant further investigation.

Paper 2: Qualitative exploration of lived experiences of women with permanent, non-facial scars

Lee Kofman (RMIT University)

This paper presents findings from an Australian study that explores the lived experiences of women with permanent non-facial scarring. Women's experiences of their scars were conceptualised as a complex, constantly shifting process influenced by their biopsychosocial context, where scarring might be experienced as both positive and negative simultaneously. It is further argued that different women experience and construct their bodies differently, and not always in a direct relationship to the severity of scarring. Twenty-eight women were interviewed in depth about their experiences. Not all women with non-facial scarring experience appearance concerns or other scarring-related distress. Some women even find their scars useful for a variety of purposes. However, more than half of the respondents experienced various forms of distress (predominantly around appearance concerns) that impacted on their everyday life. Factors influencing the differing paths of the aftermath of scarring acquisition, and their shifting nature, are multidimensional, including women's overall attitudes towards their bodies, their health status, scarring causes and its physical dimensions, women's individual characteristics, their intimate relationships, and their broader social context. Women's experiences of their scars demonstrate the overall complex, multi-factorial relationship women have with their bodies,

which goes beyond the currently dominant discourses of body image, disfigurement and resilience. The findings reveal diversity and creativity not only at how women interpret, but also how they manage and utilise, those parts of their body that socially and culturally are considered to be disfiguring.

Paper 3: Promoting fit bodies, healthy eating and physical activity among Indigenous Australian men

Lina Ricciardelli, David Mellor, Marita McCabe, Alexander Mussap and David Hallford (Deakin University)

The physical health of Indigenous men is the worst in Australia and is very poor in comparison to other first nations. This is also reflected in Indigenous men's poor mental health, and their negative body image. The aim of the present study was to determine the role of risk and protective factors associated with the health and body image of Indigenous Australian men; and to find ways of promoting healthier patterns of eating and physical activity. A central focus was also on gaining a better understanding of how the men viewed and cared for their bodies, as this was viewed as critical pre-requisite for promoting more positive health behaviours. We have completed three focus groups with 15 men, and 18 individual interviews with men aged between 18 and 35 years from Melbourne. These interviews examined the meaning and importance that men attached to their health and body, the role of risk and protective factors in determining eating and physical activity patterns, and finding ways of promoting healthier eating and physical eating patterns. The majority of men were of the view that physical appearance and body image were important, and the ideal was neither being too thin nor too muscular. The majority of men also noted the importance of eating healthy food and being physically active. However, as with health, men's body image was broadly constructed and it did not only include the physical aspects but also included community, cultural and spiritual dimensions. Different aspects of community life were noted as being important. These included looking out for each other, talking and connecting with other, and treating others with respect. In addition, issues surrounding traditional and spiritual culture were often raised as important to the men. These included the Koori community, keeping in touch with the inner self, living culture (are and food) and retaining culture through the generations. These findings will now be fed back to community members and their families in order that we can work together to find solutions and make recommendations to improve men's health.



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Body image concern among preadolescent children: Gender differences and sociocultural influences

Lina Ricciardelli (Deakin University)

Increasingly studies are showing that body image concerns are highly prevalent among preadolescent children, including both girls and boys, and that these can impact negatively on children's emotional and physical well-being. This symposium brings together research being conducted at three universities in Australia. The focus will be on the different types of body image concerns experienced by children; how these experiences differ between both girls and boys; and the critical role that sociocultural factors play in determining children's body image. The aspects of body image that will be examined include body dissatisfaction, attitudes and feeling about body and appearance, concerns with muscularity, height dissatisfaction and social physique anxiety, as assessed by standardised self-report measures. In addition, one paper will also examine boys' body image using a qualitative approach with focus group and individual interviews to ensure that issues and concerns are grounded from boys' actual lived experiences. A range of sociocultural factors will be highlighted and discussed including, participation in sports and type of sport, peers and friends, the media, gender role expectations and gender schemas. Each of the papers will also examine the implications of the findings for health care professionals working with children, and the need to address gender differences and sociocultural influences in designing prevention and intervention programs.

Paper 1: Middle school children's appearance concerns

Vivienne Lewis, J. Dunn and S. Patrick (University of Canberra)

Body image dissatisfaction, including idealisation of thin figures, has been recognised in children as young as six. However the majority of research on body image, a person's perception of their body and the associated thoughts and feelings, focuses on adolescents and adults. This study reports on the findings of the investigation of body image in children, in particular body dissatisfaction and social physique anxiety in children aged 10-12 years. Sixty children were recruited from a private school in Canberra, Australia and completed a self-report questionnaire. Results revealed that both boys and girls desired to be thinner and deemed a thin physique both for both genders to be most attractive for both children and adults. As seen in the adult literature, gender differences were evident, with females higher

in social physique anxiety perceiving that the way they look causes them worry and anxiety. Results are discussed in relation to the implications to prevention and intervention of body image concerns in children and adolescents.

Paper 2: Participation in sports and body image in children aged 8 to 13

Fernando Nava and Paul O'Halloran (La Trobe University)

Recent evidence is emerging which suggests that preadolescent children may experience body image concerns. This is of particular concern given the relationship between body image dissatisfaction and disordered eating, obesity, depression and low self esteem. There is also some evidence which suggest that body image can have a negative effect on willingness to participate in certain sports. Conversely, there is some evidence in older children that participation in certain sports could have a negative impact on body image. Either way, this relationship could have important implications for young children. However there is paucity of research examining this relationship in young children. The present study utilised a survey design to examine the relationship between body image and participation in sports in children aged 8 to 13 years. It was hypothesised that participants would show signs of body dissatisfaction and these feelings will influence their participation in aesthetic sports. Three hundred and thirty nine boys and girls from grades 3 to 6 from a representative sample of 13 Catholic elementary schools in the Northern region of Melbourne, Victoria, participated in the study. Information about body image size satisfaction, attitudes and feelings about body and appearance, desire of being more muscular, height satisfaction, social physique anxiety, and participation in sports was obtained. Results, which have implications for health care professionals working with children and adolescents, will be discussed in relation to body image, participation in sports, and the relationship between body image and participation in sports.

Paper 3: The influence of peers and media on preadolescent boys' body image

Gemma Tatangelo and Lina Ricciardelli (Deakin University)

It is well established that preadolescent girls and boys have body image concerns, and that two of the main socio-cultural factors that determine these concerns are the media and peers. Research with girls has demonstrated the cognitive developmental processes which underlie these relationships. On the other hand, research with young boys is sparse with inconsistent findings. The current study aimed to more fully understand how both the media and peers determine young boy's body image by focusing on specific processes that have been derived from body image literature with adults, adolescent and preadolescent girls. These include internalisation of the thin/muscular ideal, gender schemas and social comparisons. Procedure: Given that much of the research on young boys' body image has been adapted or based entirely from studies with same-age girls or older males, this study utilised a qualitative approach involving focus groups and semi-structured individual interviews to ensure the constructs and measurements are grounded from boys actual lived experiences. Forty boys (8-10 years old) from state primary schools in Victoria participated in semi-structured individual interviews and/or focus groups. Results and Discussion: The main conversation topics focused on appearance, friends, media and sports.

From within these topics some major themes were elicited. Firstly, sports, physical activity and performance were of great importance and were a consistent reference throughout discussions of peers, media and appearance. Secondly, while the importance of appearance was downplayed, the emphasis placed on the importance of functionality and performance was described in ways consistent with traditional gender role expectations. Thirdly, boys downplayed the importance of muscularity for their current body and were generally content with their current body size; however muscularity was identified as an important and desirable feature for when they are 'grown-up'.



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Building the capacity of undergraduate students

Jacquelyn Cranney (University of New South Wales)

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), and features four papers on building the capacity of undergraduate students. Cohen et al. first describe an ALTC-funded initiative on building leadership skills in undergraduate students. As Cranney et al. argued in their development of a "Vision for the Future of Undergraduate Education", this kind of capacity building should be seen as a priority in our undergraduate psychology programs, as it has the potential to benefit the graduate, the discipline, and society generally. O'Shae then presents her model of work-integrated learning and how it is implemented across the first three years of an undergraduate degree program. Within the context of a health sciences curriculum, Harris presents her approach to learning oriented assessment which constructively aligns learning objectives, content and assessment and reflects real-world application. Finally, O'Shae and Swan discuss their research investigating how self-theories of intelligence are related to maths anxiety in students studying first year statistics, and in particular how a specific intervention reduced maths anxiety.

Paper 1: Building leadership skills in undergraduate psychology students

L. Cohen, P. Chang, J. Hendricks and V. Cope (Edith Cowan University)

Leadership is a practical skill that is highly valued in the workplace and should be incorporated into the undergraduate psychology curriculum. Currently students may not immediately demonstrate their leadership potential when they enter the workforce due to the current approach in Australia to teaching in an undergraduate psychology degree. The School of Psychology and Social Science at Edith Cowan University participated in an interprofessional leadership program originally developed specifically for undergraduate nursing students and was aimed at addressing this gap in their training. This extra-curricular program was designed to provide 6 months of theoretical and practical experience in leadership. Entry into this program was highly competitive and voluntary, and the program was aimed at second and third-year. The curriculum consisted of three components: Leadership Knowledge, Leadership Skills, and Leadership in Action which were presented through a series of workshops and

seminars. Areas such as management theories, participative theories, and relationship theories were addressed. Students were provided with the opportunity to develop and practice their leadership skills by participating in a community project under the supervision of an industry mentor. This session will outline the program and the evaluation of the students, their leadership, and their participation in respective community projects. The results have suggested a positive response from both students and industry. Implications and further development of the Leadership Program with respect to learning and teaching will be discussed.

Paper 2: Work integrated learning curriculum for undergraduate psychology: A case study

Annissa O 'Shea (University of Southern Queensland)

A four-year undergraduate degree in Psychology is offered by the University of Southern Queensland on the Springfield campus. In addition to providing the more usual opportunities for students to develop competencies required in a four-year undergraduate psychology degree, as outlined by APAC requirements, this degree program also requires students to engage in and progress through a series of scaffolded Work Integrated Learning (WIL) activities, with the goal of producing more industry-aware and work-ready graduates. These activities constitute six courses offered in semesters one and two over the first three years of the program. WIL activities range from highly-structured, university-based opportunities to learn and practise practitioner skills to participation in university-supported, client-driven team projects and individual, externally supported professional placements in psychology and psychology-related industries. It is proposed that these activities vary in a number of ways including locus of support and degree of learning complexity. A multi-dimensional, learner-centred model of this curriculum will be presented and discussed.

Paper 3: Learning-oriented assessment for future-oriented learning

Lynne Harris (Australian College of Applied Psychology and University of Sydney)

Ensuring that graduates possess a set of contextualised attributes aligned with employability skills that prepare them for lifelong learning is a stated aim of higher education providers. It is agreed that graduate attributes must be contextualised in fields of study and will be reflected in a discernible approach to professional and social contexts beyond graduation. This makes them difficult to demonstrate using approaches designed for assessing knowledge and skill development in individual units of study. Arguably, however, if graduate attributes are not assessed they will not be taken seriously by students or teachers. Learning-oriented assessment constructively aligns learning objectives, content and assessment and reflects real-world application. It also requires sustained activity, engages students with criteria/ standards, and is linked to timely feedback that can 'feedforward' into future activity. Learning-oriented assessment may therefore be useful for fostering graduate attributes that characterise the overarching aims of curriculum designers. This paper presents a case study of the use of learning-oriented assessment to promote acquisition of key graduate attributes in a generic health science program. An online survey of first year students was designed to assess awareness of key graduate attributes in curriculum as part of a broad, longitudinal curriculum

evaluation. Findings indicated that written and oral communication, presentation skills and research and inquiry were not identified well in the curriculum, although they were recognised as important. Learning-oriented assessments were developed for a new, core introductory unit of study focusing on these skills and linking them to (1) later units of study; (2) institutional graduate attributes; (3) future work contexts. Comparison of students from the earlier cohort with those who undertook the revised curriculum showed no differences in ratings of the importance of key intended curriculum elements, but significantly higher scores for the later cohort on the targeted skills. While recognising the limitations of evaluation data, the findings suggest that learning-oriented assessment may improve the awareness of key skills within curricula and promote the development of a stance towards future learning that reflects these, achieving a match between the intended aims of curriculum designers and outcomes for students.

Paper 4: Self theories of intelligence and maths anxiety in a first year statistics cohort

Annissa O'Shea (University of Southern Queensland), & Taryn Swan (University of Southern Queensland)

Overcoming maths anxiety and beliefs of inability is one of the greatest obstacles psychology students report when faced with the prospect of studying statistics at university for the first time. Integrating interventions into standard curriculum and pedagogical practices may assist in reducing these beliefs and distress. This research investigates how self-theories of intelligence impact on maths anxiety levels in students studying first year statistics. It examines whether a series of short interventions embedded in the curriculum can change a student's self-theory of intelligence, moving them from a fixed (entity theorist perspective) to a more fluid view (incremental theorist perspective) of intelligence, and whether this in turn reduces reported levels of overall maths anxiety. A study was conducted using a cohort of 213 first year students, with information collected on a student's self-theory of intelligence and maths anxiety levels via three surveys. A control group of 120 students completed the survey only, while a further 93 students completed the survey and participated in a series of intervention workshops. Both the control group and the intervention group demonstrated a significant increase in scores on the self-theory questionnaire indicating that both groups showed a shift towards the incremental theory of intelligence. Those students who were originally identified as entity theorist, showed the greatest shift in self-theory scores within the intervention group. Of most interest was a reduction in maths anxiety in the intervention cohort compared with an increase in maths anxiety with the control cohort, with a significant difference in a change of maths anxiety levels between the two groups. Overall this study found that the self-theory of intelligence has a direct relationship with a student's maths anxiety level at a university level and that a shift in self-theory, to a more fluid perspective of intelligence, may reduce maths anxiety levels. These results have implications regarding choice of pedagogical practices and curriculum content to be used with first year psychology students encountering statistics for the first time.



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Climate Change

Susie Burke (Australian Psychological Society)

Dealing with global environmental challenges requires work at all levels of society, from individual change, through to community led change, organisational change and change at the political level. And underlying any environmental change in our society, are the crucial perceptions and attitudes that we have towards environmental threats like climate change. In this symposium, psychologists present papers on the valuable work that is done at each level to reduce the threats of climate change. Papers will include: report on the National climate change perceptions and attitudes survey (Professor Joe Reser), Individual changes, household behaviours (Don Hine), community-based projects, Organisational changes, political change and advocacy.

Paper 1: Public risk perceptions, understandings, and responses to climate change in Australia and Great Britain

Joseph Reser (Griffith University)

The paper reports on national survey findings of a collaborative and cross-national research project undertaken by Griffith University and Cardiff University examining public risk perceptions, understandings and responses to the threat and unfolding impacts of climate change and natural disasters in Australia and Great Britain. These surveys were distinctive in their cross-national comparative collaboration, in their in-depth nature, in their focus on underlying public understandings and psychological responses to climate change, and in their shared objective of documenting and monitoring important psychological and social changes and impacts in the human landscape relating to global climate change. The Australian survey included a number of multi-item scales of particular relevance to climate change beliefs and concerns, direct experience, psychological adaptation and coping, and psychological impacts, as well addressing the nexus between climate change and natural disasters. Public concern levels with respect to the threat and perceived impacts of climate change were remarkably similar and very high, despite dramatic differences in geographic regions, climate, climate change exposure, and recent histories of extreme weather events. However Australian respondents viewed climate change as a more immediate, proximal, and certain threat to their local region and

nation, than was the case for British respondents, for whom the problem was perceived to be more distant, uncertain, and less familiar in terms of anticipated consequences. Findings from this two nation study are providing a very different picture of where the Australian public is at with respect to climate change.

Paper 2: Household energy conservation: What predicts engagement in curtailment and efficiency behaviours?

Donald W. Hine, Felicity Fizzle, Francis Roberson, Anthony Marks, and Methuen Morgan (School of Behavioural Cognitive and Social Sciences, University of New England)

Households can reduce energy use and greenhouse gas emissions by engaging in curtailment and/or efficiency behaviours. Curtailment behaviours involve reducing one's use of existing energy consuming equipment, such as turning off heat in unused rooms or driving the car less. On the other hand, efficiency behaviour involves upgrading one's home (e.g., sealing cracks around windows) or purchasing new equipment (e.g., energy efficient appliances) to reduce overall energy use. In the current study we surveyed 140 Australian households about their beliefs about reducing household energy use, including the extent to which they felt personally responsible for reducing Australia's greenhouse gas emissions, their general attitude toward energy consumption, their estimates of the cost and effort associated with engaging in energy reduction activities, and their assessment of the impact of these activities on Australia's overall level of emissions. We also measured the extent to which respondents engaged in a range of curtailment and efficiency behaviours. Regression and profiling analyses revealed that our predictors, as a set, explained significant amounts of variance in both curtailment and efficiency behaviours. However, the pattern of results varied across the outcome variables, with anticipated cost and effort being particularly important in predicting efficiency behaviours, and attitude and perceived personal responsibility predicting curtailment. Implications for encouraging household energy conservation will be discussed.

Paper 3: What do Australian political leaders think about climate change?

Kelly Fielding, Brian Head, Mark Western, Warren Laffan, and Ove Hoegh-Guldberg (The University of Queensland)

In the context of public uncertainty about climate change, political leadership has the potential to bring about change by influencing the way people think about and respond to climate change. Despite the potential of political leaders to influence the public's climate change beliefs, little is known about the knowledge and attitudes of political elites, beyond the expressed party positions or views of prominent individuals. To address this issue we undertook a survey of 311 Australia political leaders at the Federal, State, and Local levels of government. The findings confirmed that participants' personal beliefs about climate change largely reflect their political affiliation. In terms of beliefs that global warming is happening, is human induced, and impacts are serious, Greens party members held the strongest beliefs, followed by Labor party members, and those who are non-aligned politically, while members of the Liberal/National party coalition expressed the weakest beliefs. These differences in beliefs were further reflected in the priority given to climate change in their political work. Political affiliation was

also associated with who political leaders attended to in relation to information about climate change and, interestingly, political leaders generally judged their own beliefs in climate change to be stronger, or in advance of, the views of their electorate. Implications of these data for policy and climate change communication are discussed.



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Current research on the psychology of relationships: Some fundamental and applied questions

Ross Wilkinson (Australian National University)

Members of the APS Psychology of Relationships Interest Group are actively involved in research that addresses a broad range of human relationship issues. The papers presented in this symposium are a sample of the breadth of research conducted by members of this group covering both fundamental and applied research questions. The papers in this symposium cover issues as diverse as childcare, chronic illness, adolescent relationships, and optimism. The common theme underlying all of them, however, is the importance of our relationships for our adjustment and well-being. In the first paper, the complexity of the relationships between expectations about close relationships, social support and psychological symptoms is revealed in a study of the psychological health of those suffering a debilitating chronic illness, arthritis. This study demonstrates that it is important to consider both external (social support) and internal (attachment security) resources when considering factors related to psychological health. The second presentation examines the impact on couples of needing to rely on non-parental care when mothers return to work. While there appears that there are no major negative consequences for the couples' relationship quality or psychological health, the type of child care arrangements parents used was found to be related to stress, both psychological and financial. The third paper looks at a cross-cultural issue and, using a large sample of Malaysian teenagers, takes a psychometric focus in examining the factor structure of one of the most widely used measures of adolescent attachment. The results raise questions about the underlying theoretical basis of existing measures of adolescent attachment. The final paper reports on a study examining the link between individual differences in attachment expectancies and the tendency to be optimistic. Although the authors found that attachment security was related to both trait optimism and optimistic expectancies of relationships, they also found that it was not related to optimism as explanatory style.

Paper 1: The role of attachment and network social support in predicting depression and anxiety in people experiencing arthritis

Gery Karantzas, Marita McCabe and S. Cole (Deakin University)

For many years, it was assumed that social support reduces the emotional suffering of people experiencing a chronic illness. Nevertheless, the relationship between social support and psychological outcomes is complex and often inconsistent between studies. For instance, while some studies report social support improves the emotional wellbeing of chronic illness sufferers, other studies suggest that the support exacerbates depression and anxiety. Relationship researchers argue that it is the quality of the relationship between care recipient and members of their support network that influences whether the provision of support is helpful. Using, attachment theory, a theory of human bonding, emotion and distress regulation the aim of this study was to investigate how attachment style (conceptualised as the dimensions of attachment anxiety and avoidance) moderate perceptions of social network support when predicting symptoms of depression and anxiety in people experiencing arthritis. A total of 373 adults experiencing arthritis from around Australia were asked to complete a self-report questionnaire which included measures of arthritis severity, attachment style, size of social network, perceptions of support received by one's social network, coping strategies and anxiety and depression. The questionnaire took approximately 30 minutes to complete. Hierarchical regression analyses revealed that after controlling for arthritis severity, coping, and social network size, a three-way interaction was found between the attachment style dimensions and perceptions of social support provisions for both depression and anxiety. Specifically, people high on attachment anxiety and avoidance who reported low network social support provisions demonstrated the highest depressive and anxiety symptomatology. Interestingly, people who were high in attachment avoidance, but low on attachment anxiety and reported high social support demonstrated the lowest depressive and anxiety symptoms. These findings highlight that individuals who do not receive support from their network are not necessarily at risk of depression or anxiety; rather it is low network support combined with both forms of attachment insecurity that lead to this heightened risk. The interactions particularly highlight the pervasive and toxic effects of attachment anxiety - the most critical of the three factors in the interaction that heighten the risk of depression and anxiety for people experiencing arthritis.

Paper 2: The effect of infant care arrangements on the psychological health and relationship quality of couples

Elizabeth Layard and Ross Wilkinson (Australian National University)

Social trends, government policy, and financial necessity are resulting in increased pressure for new mothers to return to work (ABS, 2008). These external influences coincide with a vulnerable time for parents as they adjust to the demands of their new care-giving role. Although there has been extensive research into the impact of changing roles on individual and family wellbeing, little is known about the effects of using non-parental care of infants on parental psychological health and adjustment. The current study sought to contribute to our understanding of this issue by examining data from the Longitudinal Study of Australian Children (LSAC). A nationally representative sample of Australian

families ($n=3392$) utilising various infant care arrangements were surveyed in relation to parental psychological wellbeing, relationship satisfaction, caregiving and perceptions of work-family balance. The results revealed subtle differences between mothers and fathers, and between parents of differing infant care arrangements on many aspects of the parental implications explored. Contrary to expectations, the number of hours an infant spends in non-parental care did not predict either parent's levels of psychological wellbeing or relationship satisfaction in regression analyses. However, the results indicated more negative implications for some infant care arrangements. Parents who cared for their infant exclusively amongst themselves reported fewer difficulties and less stress but also reported greater financial strain than parents using non-parental care. It is concluded that there is little evidence to argue that greater rates of maternal employment and formal, non-parental child-care are related to major negative psychological health effects or decrements in relationship quality for parents. The importance of further research exploring explanations for why parents vary so widely in their beliefs about the costs and benefits of non-parental care is highlighted.

Paper 3: Exploratory and confirmatory factor analyses of the Inventory of Parent and Peer Attachment in a Malaysian context: A preliminary study

Sheereen Zulkefli and Ross Wilkinson (Australian National University)

Research with adolescents in western contexts has demonstrated that the quality of their attachment relationships with parent and peers is related to manifold indicators of psychological health and adjustment. However, there have been few attempts to replicate such results in non-western samples of adolescents. Further, it has not yet been established that measures of adolescent attachment relationships, developed primarily with samples of western adolescents, have similar measurement properties when used with non-western adolescents. The purpose of the present study was to investigate the psychometric properties of the Inventory of Parent and Peer Attachment (IPPA) with a sample of Malaysian adolescents. A total of 2064 high-school students aged 14 to 16 years completed the IPPA with regard to mother, father, and peer attachment. An exploratory factor analysis was performed with a randomly selected half of the sample. Three factors (Secure, Anxious, and Content) emerged for the mother and father scales and accounted for 45.93% and 44.21% of the variance respectively. Two factors (Secure and Content) emerged for the peer scale and accounted for 42.47% of the variance. Confirmatory factor analyses, including comparison of model fit indices between four models, were performed on the remaining sample. Analyses revealed that the three factor structure for the parent scales and two factor structure for the peer scale were replicated and provided an acceptable fit in contrast to other measurement models. Further analysis revealed high internal consistencies and a moderate correlation between the factor-based scales which is suggestive of these factors acting as proxy for a higher order scale. Explanations for finding a different factor structure in this study than that found for the original IPPA are considered and implications for practitioners and future research are discussed.

Paper 4: Attachment, trait optimism, and explanatory style: Working models as the basis for a positive outlook on life and relationships

Ross Wilkinson and J. Quek (Australian National University)

Although optimism is known to be related to psychological health, wellbeing, and resilience there have been few attempts in the psychological literature to explain the origins of individual differences in this construct. This study proposes an attachment theory formulation of how individuals' interpersonal experiences might influence their expectancies and thus their optimism. Specifically, it examined the links between attachment styles, current romantic relationship status, and both general and relationship specific optimism. Participants surveyed were 208 undergraduates and young adults. Results indicate that although attachment styles, either as categories or dimensions, are related to trait optimism they are not related to optimistic explanatory style. Current relationship status was only related to individuals' relationship specific optimism levels. Regression analyses found that attachment style predicted both general and relationship specific optimism after controlling for demographics, personality, and current mood. Overall, it is argued that the results support the view that trait optimism may have its origins in the "felt-security" that is generated from secure attachment relationships. However, optimism as explanatory style may have a different genesis and needs to be distinguished as a separate psychological construct with separate precursors to that of an optimistic personality.



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Does 'gender matter' in neurodevelopmental disorders?

Nicole Rinehart (Monash University)

Sex differences in the prevalence of psychiatric disorders in children and adolescents have consistently been identified in epidemiological studies beginning with the landmark Isle of Wight study. A particularly useful way to investigate the “nature versus nurture” effects of gender on psychopathology is through studies of disorders that have a strong genetic component. The impact of ‘nature’ versus ‘nurture’ is infinitely more complex in neurodevelopmental disorders where the interaction between prenatal hormones, specific susceptibility genes, and risk or protective genes on the X chromosome, operate. The genetic mechanisms which result in a higher prevalence of males with child-onset neurodevelopmental disorders, including those for which genetic etiology, are still not determined, such as autism, as well as those disorders for which the genetic origins are known, such as fragile X syndrome (FXS), allow investigation of gender-related differences in prevalence, clinical manifestation, cognitive and neuropsychiatric profiles. The focus of this symposium will be to overview the clinical, cognitive, and neurobiological literature on gender-differences in the most prevalent childhood onset neuropsychiatric disorders, autism and FXS, the latter being the most common cause of hereditary intellectual disability in males, resulting from the silencing of a single gene on the X chromosome. Thompson, Caruso, & Ellerbeck have extensively reviewed the literature on gender differences in neurodevelopmental disorders and concluded that, ‘sex has yet to matter’, sufficiently in neurodevelopmental disorder research, and by extension clinical practice. The almost exclusive focus on males with neurodevelopmental disorders in the biological and clinical research literature, has led to an imbalance in gender-specific information which can inform the clinical assessment and management of females with neurodevelopmental disorders. To illustrate, while psychoeducation is the front-line treatment for children with neurodevelopmental disorders, current information available to parents is based on research conducted with predominately male samples, some of which is not directly applicable or salient to girls with autism. In this symposium we will highlight important gender differences that necessitate careful investigation of male and female profiles across development in order to facilitate targeted gender-specific clinical and educational interventions and treatments.

Paper 1: Sex differences or gender influences in the clinical and academic functioning of children with autism spectrum disorders?

Tamara May, Nicole Rinehart and Kim Cornish (Monash University)

Males with Autism Spectrum Disorders (ASDs) are thought to outnumber females by 4 to 1. Consequently, most research has focused on boys with little known about differences in the clinical presentation of girls with ASDs. Previous findings relating to girls with ASDs have shown more cognitive and social impairment in girls and less repetitive behaviour than boys. However, social rather than biological factors may have influenced these findings such as only the most severely affected girls being ascertained. The purpose of this study is to examine the interrelationships between gender and the clinical symptoms of ASDs including academic performance in children with ASDs over time. This longitudinal study aims to inform educational and psychological interventions and shed light on gender differences in ASDs. One hundred and twenty children (30 girls and 30 boys with ASDs, and 60 age- and gender-matched controls) aged from 7 to 12 years are being recruited for this study. Children have been assessed using a comprehensive battery including the Wechsler Individual Achievement Test II Australian, child and parent version of the Spence Children's Anxiety Scale, Conners 3, and the Social Responsiveness Scale. As this study is ongoing, Time 1 results will be presented. Preliminary findings indicate similar levels of clinical symptoms (social responsiveness, repetitive behaviours, anxiety, inattention, hyperactivity), cognitive ability, and academic performance in boys and girls with ASDs. Inattention is linked to lower maths achievement in girls. Anxiety, specifically panic/agoraphobia symptoms, is linked with poorer reading outcomes in girls but poorer maths outcomes in boys with ASDs. Difficulties with social cognition are linked with worse maths achievement in boys. Findings suggest the profile of clinical symptoms are similar in boys and girls with ASDs, as is their academic performance. When underlying relationships between symptoms are examined different patterns for boys and girls emerge, yet socio-cultural influences may partially explain these findings.

Paper 2: Are girls with ASD more disinhibited than males with ASD

Tamara May, Nicole Rinehart, P. Enticott, J. Lemon and B. Gargaro (Monash University)

Autism spectrum disorders (ASD) predominantly affect males, with diagnostic ratios suggesting at minimum a 4:1 Ratio. It has been suggested that this could, at least in part, result from gender differences in the expression of ASD, which may lead to misdiagnosis or under diagnosis among girls. The gender differences in autism spectrum disorder are commonly attributed to environmental and biological explanations; there may also be a neuropsychological explanation for differences in clinical presentation between males and females with autism. This study examined gender differences in neurobehavioural functioning in males and females with ASD. Participants were males with ASD (n = 10), females with ASD (n = 13), typically developing males (n = 8), and typically developing females (n = 14). Participants were only included if Wechsler scales testing indicated that their full scale IQ score was equal to or above 70. ANOVA revealed no differences in age or fullscale IQ. Response inhibition was assessed using a version of the stop task that has been described elsewhere. Females with ASD, when compared with typically developing females and males with ASD, displayed evidence of reduced speed

of stopping processes (as indicated by increased SSRT). $P < .05$: ASD female > ASD male/control female/control male. This study provides evidence that one aspect of inhibitory control may be impaired in females with ASD. Behavioural consequences of impaired response inhibition are thought to include impulsiveness, risk-taking, and general executive dysfunction (e.g., impaired planning and organization). In the context of ASD, poor response inhibition would also presumably further impair social relating abilities (e.g., appropriate social conduct), especially when states of arousal are high (e.g., under significant anxiety and/or cognitive load). Despite some promising early research, at this stage the influence of gender on the clinical presentation of ASD requires further elaboration. Nevertheless, the current findings suggest the possibility of neuropsychological differences in ASD across genders that would presumably be associated with different clinical presentations and outcomes.

Paper 3: A comparison of handwriting in girls and boys with Asperger's disorder

Beth Johnson, J. Phillips and Nicole Rinehart (Monash University)

Children with autism spectrum disorders (ASD) account for 40% of occupational therapists' caseloads, and 86% of ongoing referrals for children with ASD are for handwriting difficulties. Although it has been suggested that the presence of handwriting difficulties may help to identify girls with Asperger's disorder (AD) from their peers, no study has examined handwriting in girls with AD. Previous studies of boys with ASD have identified poorer letter formation and larger handwriting, however numerous studies have also found typically developing (TD) girls have more legible handwriting. Therefore, the aim of this study was to compare the handwriting profiles of girls and boys with AD. 12 girls and 12 boys aged 8 to 14, whom fulfilled DSM-IV-TR criteria for AD participated in the study. Participants completed the speed subtest of the Handwriting Performance Test (HPT) to assess handwriting speed. Participants also wrote four cursive letter 'l's on 10mm lines on a digitizing tablet. Cursive letter 'l's represent a simple letter combination in which the pen is not lifted from the surface, which allows continuous movement to be recorded. T-tests of preliminary data revealed handwriting speed, measured as letters per minute, did not differ between groups. However, boys with AD showed reduced spacing between words on the HPT relative to AD girls (AD boys: $3.68\text{mm} \pm 6.9$; AD girls $9.48\text{mm} \pm 2.43$; $p=0.31$). AD boys had more hypermetric movements relative to AD girls (AD boys: $12.10\text{mm} \pm 2.40$; AD girls: $10.10\text{mm} \pm 1.10$; $p=0.38$). AD girls showed reduced pen pressure relative to AD boys (AD boys: $647.58 \text{ N} \pm 248$; AD girls: $409.23 \text{ N} \pm 248$; $p=0.38$) and also less consistent pen pressure (Coefficient of variability of pen pressure; AD boys: 6.11 ± 3.76 ; AD girls: 3.04 ± 1.45 , $p=0.38$). Boys with AD revealed poorer spatial control, such as larger handwriting and poorer spacing. Girls were better able to control movement size, however had poorer pen pressure modulation. These findings suggest that the underpinnings of handwriting difficulties in ASD may differ between boys and girls with AD, which has implications for identification and treatment of handwriting and motor problems in girls with AD.

Paper 4: Dissociating the fragile X cognitive phenotypes: having girls lead the way

Tamara May and Kim Cornish (Monash University)

Fragile X syndrome is the world's most common cause of heredity developmental delay world-wide. The condition is caused by a single gene (FMR1) being switched off on the X chromosome and to date

represents one of the only known single gene causes of autism. Due to X linkage, females with fragile X syndrome are not as profoundly impaired as males and so provide a unique opportunity to examine the phenotype without the impact of severe intellectual disability. The aim is to examine gender-specific cognitive profiles in girls and boys with Fragile X using standardized and experimental cognitive measures including those that tap emotion perception and face recognition, in order to determine if the profile of fragile X girls provides a clearer understanding of the impact of the FMR1 gene on abilities that mirror the 'autism phenotype'. Sixty males and females with fragile X and an equivalent numbers of developmental age-matched controls were assessed on a variety of cognitive domains: visual-spatial, language and emotion and face processing. Across all measures males with fragile X were significantly inferior to control males, but females with fragile X were not. Most importantly gender differences became stronger with increasing age with females showing a disproportionate advantage, compared to males, across many of the measures post 16 years. We found evidence of a gender-specific fragile X 'signature' whereby males and females of similar verbal mental age display different cognitive profiles, with females especially strong on skills that required language and social comprehension.



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Eating, shape, and weight concerns: Evidence for contributing and maintaining factors

Elizabeth Rieger (Australian National University)

Eating, shape, and weight concerns can result in significant psychological and physical problems, however, current treatment approaches report limited success. As a result, research is needed to further understand the aetiology of eating disorder pathology. This symposium focuses on new research from the Australian National University aimed at improving understandings regarding the onset and maintenance of body image concerns and disordered eating in adolescence and adulthood. Four presenters will discuss innovative research with implications for the prevention and treatment of body image issues and disordered eating. Two projects focus on the period of adolescence, a time in which body image concerns rise markedly. The first project investigates the previously unexplored role of stress in body image while the second project considers the influence of adolescent perceptions of popularity on physical appearance. Both projects can therefore inform programs designed to improve body image and prevent eating disorders. The next two projects focus on maladaptive restrictive eating, another risk factor for eating disorders. The first of these projects explores the group processes involved in the acquisition of restrictive eating attitudes and behaviours, such as group norms and social identification. A model of social influence is presented that explains how peers may be either a protective factor or a risk factor in the development of disordered eating. The second research project examines the unique contribution of intolerance of uncertainty to the prediction of restricted eating and other eating disorder symptomatology. This symposium offers a thought-provoking discussion of new research in body image and eating problems, with implications for the prevention, aetiology, and treatment of eating disorders.

Paper 1: The role of adolescent stress in body image and body change strategies

Kristen Murray, D. Byrne and Elizabeth Reiger (Australian National University)

Adolescence is an important developmental period posing challenges to a young person in every facet of their life. Two key concerns during this period are body image and stress. However, research has yet to examine the relationship between these two variables. This is surprising given their common link with eating disorder pathology and inclusion of stress management in programs to improve body image and prevent disordered eating. These programs have reported some success, but research understanding how and what stressors relate to body image could enhance their efficacy. This study investigates the relationship between stress and body image, and the role of self-esteem, depressive symptoms, body image importance, body mass index (BMI), coping, romantic relationships, gender and age. The association between stress and several dimensions of body image (i.e., body satisfaction and body change strategies to decrease body size and increase muscularity) were examined. A sample of 517 females and males in grades 7 to 10 were surveyed in Canberra, Australia. Results revealed that body image dissatisfaction was associated with peer stress, low self-esteem, greater body importance, female gender and a very high or low BMI. Strategies to decrease body size were associated with female gender, greater depressive symptoms, body importance, and BMI, low self-esteem, and an interaction between self-esteem and BMI. Finally, strategies to increase muscularity were related to male gender, greater body importance and an interaction between the two. These findings provide insight into the relationship between stress and different dimensions of body image. They show that stress, specifically in the peer environment, relates to satisfaction with the body but not intentions to change it. It suggests that prevention and intervention programs aimed at improving body image satisfaction could tailor stress management to stressors related to the peer group for adolescent females and males.

Paper 2: Intolerance of uncertainty as a maintenance factor in eating disorder symptomatology

Alice Heikkonen and Elizabeth Reiger (Australian National University)

Intolerance of uncertainty is a construct typically associated with anxiety disorders and worry in particular. Conceptualisation of the construct has varied amongst researchers, but is defined here as a negative appraisal of uncertainty, which is evidenced through characteristic cognitions, affect and behaviour in response to uncertainty. While the concept of an intolerance of uncertainty has been alluded to in the eating disorders literature for a number of years, it has yet to be clearly investigated in the eating disorder context. The current study has extended previous research, examining both general and eating disorder-specific intolerance of uncertainty in relation to a range of eating disorder symptomatology. Data was collected from a sample of 211 adult females aged 18-30 from the general population. Participants completed an online questionnaire, which included the assessment of intolerance of uncertainty, perfectionism, self-esteem, negative emotional symptoms and eating disorder symptomatology. Results demonstrated a positive relationship between eating disorder symptomatology and intolerance of uncertainty specific to eating and weight. The role of a general intolerance of uncertainty in eating disorder symptomatology was less clear. Intolerance of uncertainty specific to eating and weight uniquely predicted eating restraint after controlling for a number of

established covariates of eating disorder symptomatology. Intolerance of uncertainty may serve as an important consideration in treatment interventions for eating disorders. The implications of intolerance of uncertainty as a maintenance factor in eating disorder symptomatology will be discussed.

Paper 3: Shared group membership: A necessary condition for social influence in eating behaviour

Tegan Cruwys, M. Platow, Elizabeth Reiger and D. Byrne (Australian National University)

The rising incidence of disordered eating puts pressure on psychologists to consider new approaches to understanding these behaviours. In this project we consider the social influence processes responsible for shaping eating attitudes and behaviour. In two experiments, social identification, norms of valued groups and thin-ideal internalisation are investigated as predictors of the development and maintenance of pro-unhealthy-dieting attitudes and disordered eating behaviour. Specifically, it was predicted that only when a speaker was perceived to be a member of a shared and valued group would his/her message influence the eating attitudes and behaviour of the female participants. In the first experiment, female participants viewed a health promotion video that advocated either healthy eating or dangerous dieting, and was delivered by either a man or woman. The second experiment used only the videos delivered by the woman, and manipulated the salient identity for participants. In both studies, outcome variables of interest included dieting attitudes and healthy eating-related behaviour. Results indicate that female participants were more persuaded by a woman (the in-group member), whether she was promoting healthy eating or dangerous dieting, and that the male presenter had little influence on health behaviours. In addition, the female presenter was most persuasive when she appealed to a salient identity that was shared with the participants. We conclude that an analysis of eating behaviour is enhanced by the addition of group process variables, such as group membership, norms and social identification. The research also holds significance for the successful implementation of public health interventions.

Paper 4 : Adolescent peer relationships and the importance of physical characteristics

Stephanie Hawke and Elizabeth Reiger (Australian National University)

Popularity research has been a dominant theme in the peer relations realm since the 1990s, with many studies conducted in America and Europe. Research findings have demonstrated the importance of physical appearance for popularity, which may in turn comprise a risk factor for eating disorder pathology. A distinction in the peer relations literature has been made between popularity and likeability. Popularity refers to students with high social status within the social hierarchy who display positive characteristics such as being kind and friendly but also negative behaviours such as bullying. These students are perceived as being popular but may not be well-liked by their peers. Likeability refers to students who are liked by their peers as they generally possess positive qualities. Links between physical appearance and both types of influential peers have been found, with a greater importance found for popularity than likeability. The present study used mixed methodology to obtain information about popularity within Australian high schools. Students from years 9 (n = 106, 62.26% female, mean age = 14.49) and 11 (n = 84, 48.8% female, mean age = 16.42) from four high schools in Canberra were

interviewed individually and were asked to describe students who were most 'popular' (perceived popularity) and most 'well-liked' (sociometric popularity). Students identified as being popular were described as encompassing different physical characteristics to those identified as being liked. Gender differences were found in the descriptions of popular and liked peers. Physical characteristics are important for peer relationships, especially popularity. This may serve as a risk factor for disturbances in body image and eating disorder pathology.



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Facilitating young people's access to psychological therapies and mental health care

Debra Rickwood (University of Canberra)

Adolescents and young adults have the highest need for mental health care across the lifespan, yet the lowest level of service use. Understanding the factors that help young people to access appropriate services early in the development of mental health and alcohol and other drug problems is essential to addressing the barriers to service use and ensuring that young people have timely access to the help they need. Evidence-based psychological therapies are a vital part of the youth mental health care system, yet many young people will not seek help at all and a significant proportion of those who seek help do not show for the appointments they have booked. The papers in this symposium consider some of the barriers and facilitators to accessing psychological therapies by children, adolescents and young adults. The first paper describes the role of informal gatekeepers in encouraging young people to access psychological services, arguing that teachers and coaches have an essential role in pathways to mental health care. The second paper reports on how children seek help for one of the major risk factors for mental health problems—bullying—and thereby begin to develop a help-seeking orientation for personal problems. Paper three describes young people's expectations of therapy. Expectations have been shown to be an important influence on whether adults access and engage with psychological therapy, but this has not been explored for emerging adults, and expectations may comprise an important and modifiable barrier to mental health care. The final paper reports data from an experimental study examining the impact of appointment reminders and other forms of encouraging engagement on young people's attendance at appointments with psychologists in a mental health service. Together these papers report recent research findings on some of the main factors affecting young people's use of psychological services.

Paper 1: Helping young people to access mental health care: The role of gatekeepers in early intervention

Kelly Mazzer (University of Canberra)

Young people have the highest prevalence of mental health problems of any age group, yet most do not receive the professional help they need. Young people usually do not seek services or treatment on their

own and mental health services are rarely the first point of contact in pathway for mental health care. The impact and subsequent burden of mental health problems can be lessened by early intervention, however, it is often only when symptoms reach a crisis point that young people seek professional help, if at all. Gatekeepers within the community such as parents, peers, teachers, sports coaches, and youth workers, are often in positions able to encourage, assist and support young people with their mental health care. The present study aimed to explore gatekeepers', such as teachers and sports coaches, views of their role in young peoples' mental health and to investigate whether they are, or could be, influential in early intervention of young peoples' mental health care. Participants included 15 high school and college teachers and 15 youth sport coaches employed or volunteers within the ACT. Participants engaged in a 20-30 minute semi-structured individual interview with the researcher. Collected data were qualitatively analysed to identify common themes. Results indicated teachers and sports coaches do perceive themselves as influential in young peoples' mental health. Teachers viewed raising awareness of mental health problems and reducing stigma as part of their role. Coaches recognised the impact that mental health can have on a young person's participation in sport, and their role in working with young people in specific areas often affected by mental health, such as performance and motivation. There were, however, limits to the roles perceived as appropriate by teachers and coaches in relation to intervening to support young peoples' mental health. There is potential to increase the influence of gatekeepers as sources of support for young people in their pathways to mental health care.

Paper 2: How young people seek help for bullying and what they learn for future help-seeking

Mitch Dowling (University of Canberra)

It is of critical importance to understand why victims of bullying decide to seek help, particularly from adults, since this reduces the probability of being victimised in the future. The purpose of this study was to investigate student's sources of help when experiencing different types of harassment and bullying, and examine whether students' perceptions of different sources affected their help-seeking decisions. The study addressed two questions: Who do students seek help from when they experience harassment or bullying? (family, friends, staff, or no one); and What reasons do students who experience harassment or bullying have for seeking help from different sources? (i.e. personal goals, perceived ease of seeking help and concern from source). Participants were students in Years 5 and 6 from six different schools in the ACT ($N = 259$). Data were collected using a self-report questionnaire. Several factors were explored, including type of harassment or bullying experienced, severity, sources of help sought, ease, concern, and personal goals. The results indicated that children prefer to seek help from informal sources, such as family members and close friends. Neither the type of victimisation experienced nor the severity appeared to affect this decision. Victims of bullying perceived informal sources as being easier to talk to about being bullied. Moreover, the results suggest that children perceived different sources of help to be related to achieving different goals. Help-seeking is a complex process involving conflicting goals. The results highlight several avenues for future research and the practical implications are discussed.

Paper 3: Young people's expectations of therapy

Claire Watsford (University of Canberra)

Client expectancies about mental health services represent an important area of investigation. Research shows that expectancies are linked to both engagement in therapy and therapeutic outcomes. Clients may hold expectancies related to the roles they and their therapist will play, the outcomes they will achieve, and the processes of therapy. Prior research has demonstrated the impact of expectancies for adults, and in some areas for children, however, little research has explored young people's expectancies around therapy. With increasing emphasis on youth aged 12-25 years as a critical life stage for the development of mental disorders, and the consequent need to provide effective early intervention, investigating the expectations of this age group is timely. The present study aimed to explore what expectancies young people held regarding: 1) their role as a client; 2) their therapist's role in therapy; 3) their expected outcomes in therapy; and 4) what they expect the processes of therapy to involve. Participants included 20 young people aged 12-25 attending at headspace ACT. Participants engaged in a brief 10-15 minute semi-structured interview with the researcher, immediately prior to their initial intake session. Data were qualitatively analysed to draw out main themes around each of the four expectancy types. Results of the study showed that overall young people were unsure of what to expect from engaging in a mental health service, and had few well-formed expectancies. As unrealistic or unmet expectancies can lead to poorer outcomes and engagement in therapy, the study highlights a need for young people to be provided with opportunities to be better informed about what to expect when coming to a mental health service.

Paper 4: No shows: Factors that affect young people's appointment attendance at a mental health service

Lisa Kelly

Failure to attend appointments is a common frustration among Australian mental health service providers. Forgetting about the appointment is the most commonly cited reason for failing to attend. This study aimed to investigate whether the use of appointment reminders and a higher level of readiness to engage in therapy increased appointment attendance by young people at a community mental health service. The participants were 279 young people aged between 12 and 25 years, who were randomly assigned into one of three treatment groups: SMS text reminder; telephone call reminder or no reminder. Data on appointment attendance, readiness level, age and referral pathway were obtained. The study found that appointment reminders and level of readiness did not increase appointment attendance, and rather, that prior attendance, referral source and older age were associated with appointment attendance. While forgetting about the appointment may be one of the reasons given for not attending, other factors are also influential. Implementation of strategies previously identified in the help-seeking literature may not only encourage a young person to seek help but may also increase their attendance once help has been initially sought.



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From theory, through evidence to practice in psychology education

Dawn Darlaston-Jones (University of Notre Dame, Australia)

Achieving the optimal learning environment to enhance student experience, and maximise retention and learning outcomes requires the application of sound evidence based theoretical principles as well as the implementation of a range of teaching and learning strategies that meet the needs of a diverse student population. This symposium showcases a number of initiatives within the Bachelor of Behavioural Science that are predicated on critical pedagogical principles as well as psychological theories. Each paper outlines the theoretical foundations and discusses the learning outcomes achieved. Across the four papers, delegates will follow the development of a large multidiscipline first year unit, a second year unit exploring cultural diversity with an anti-racism framework, and a final year experiential capstone designed to transition students into the post graduation context. In addition, the presenters will discuss the critical reflection involved in creating a collaborative mutual learning opportunity that is characteristic of the programme and the methods of teaching and learning employed within it. The benefits achieved for both staff and students, as well as strategies and ideas for maximising outcomes are discussed.

Paper 1: Applying theory to achieve 'best practice' in psychology education

Sharon McCarthy (University of Notre Dame, Australia)

Teaching and learning in psychology has traditionally focused on transmission of psychological theory, evidence, and knowledge and has not until relatively recently examined the mechanisms of how this knowledge transfer is achieved; that is a focus on the educational theories that underpin teaching practice. Growing interest in the pedagogy applied to psychology education demonstrates a range of initiatives that have proven successful in managing the student experience, enhancing retention, and facilitating learning. This session reports on an action research project undertaken to develop a large undergraduate unit. PS100 Developmental Psychology is a foundation unit delivered over the academic year to 700 students across four different streams in two different delivery modes (13 weeks & 8 Weeks), on two campuses (Fremantle & Broome). In 2009, the unit was redeveloped to increase student engagement and retention by providing a range of learning strategies theoretically grounded in

Vygotskian principles of scaffolded learning and tailored to meet the needs of varied disciplines. Underpinned by critical pedagogical and wellbeing frameworks, the unit provides innovation in student focused curriculum development in a large class setting involving diverse disciplines. Evidence demonstrates increased satisfaction from students as well as more effective learning outcomes.

Paper 2: From Avatar to Liyarn Ngarn: Utilising film as a device in anti-racism education

Dawn Darlaston-Jones (University of Notre Dame, Australia)

Teaching within an anti-racism framework presents many obstacles to even the most skilled educator. Overcoming resistance from students and helping them to deal with the emotional consequences associated with such content as well as the journey of understanding (for both student and educator) can be difficult. Often it is the anxiety associated with managing these responses and reactions from students as well as their own lack of knowledge and skill that inhibits educators from attempting to teach such content. In this presentation, I will discuss the development of a second year unit, Culture & Society, including the theoretical foundations and pedagogical structure of the lectures, tutorials and assessments. Specifically, I will outline the strategy of employing contemporary films such as Avatar, and Freedom Writers alongside the documentaries Australian Eye, Why Me? and Liyarn Ngarn as a device to illustrate concepts that often invoke resistance and to promote empathy as a means of facilitating understanding. I have taught the unit for three years and have achieved satisfaction ratings of 97.6% with students indicating that while it is the most difficult unit they have undertaken it has also been the most rewarding.

Paper 3: Developing Capstone units as a means of linking theory and practice in psychology education

Sharon McCarthy (University of Notre Dame, Australia)

One of the challenges in psychology education is to provide experiential learning opportunities for undergraduate students in which they can begin to integrate theory and practice. In the Bachelor of Behavioural Science degree, the final semester sees students engage in an internship which is designed to assist students to develop critical skills for applying theory based learning to a professional environment. By observing skilled professionals, and through their own supervised experience, students apply the principles, theories and values of Behavioural Science in the workplace and begin to develop their understanding of praxis. Reflection on internship experience includes the psychological, emotional, sociological, economic, political, legal, cultural and ethical dimensions of working with individuals, groups, organisations and communities. At the same time, an internship provides opportunities for the integration of theoretical knowledge and the development of reasoning and problem solving skills in partnership with experienced practitioners. In this session I will discuss the theoretical foundation and development of the unit and the manner in which this has evolved to consolidate students learning and result in a more successful transition to the post graduation context.

Paper 4: A collaborative learning and critical reflexivity model of anti-racism education

Dawn Darlaston-Jones and Ashleigh Owen (University of Notre Dame, Australia)

The traditional model of education in the tertiary sector positions the lecturer, tutor, and student in a hierarchical relationship to each other which results in a 'top down' flow of information and learning. The assumption underpinning this model is that the lecturer is the only person equipped to provide knowledge which is imparted to the students via the facilitation of the tutor. It ignores the possibility of or collaborative learning based on the multiple knowledges of all persons in the equation, and therefore misses a unique opportunity for mutual learning to occur. By applying critical reflection as the theoretical framework for practice, synergistic learning opportunities can arise that sees the traditional learning structure inverted or morphed into an iterative process involving all the players. The authors were coordinator and tutor respectively for the second year undergraduate unit Culture & Society. In this session, we discuss the structures and processes which were designed to create an environment of mutual support and learning. Using mechanisms such as student focused discussion, reflective journals and mentoring, we found ourselves learning from each other and from the students on how to engage with difficult and controversial content.



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Health psychology: Innovations in evidence based practice I

Lina Ricciardelli (Deakin University, College of Health Psychologists)

Health psychologists practise in two main areas - health promotion and clinical health psychology. Health promotion involves the prevention of illness and the promotion of health-related behaviours. Clinical health psychology involves the application of psychological principles to the assessment and treatment of illness, and to rehabilitation. This symposium examines pertinent innovations in evidence based practice in health psychology, and brings together expertise from both the fields of health promotion and clinical health. At the foundation of any model of health promotion and health care intervention is the need for behaviour change. The first paper provides a review of theories of behaviour change and a framework with which to integrate and understand the relationships among different theories. The second paper focuses on one of the most critical health behaviours for promoting health and wellbeing and reducing the impact of illness, that is, physical activity. Specifically the paper examines how to best assist clients increase their activity levels in the contexts of health care interventions. This third paper also examines health behaviour change and in this case the focus is helping individuals achieve more effective eating behaviour. More specifically, the paper examines Acceptance and Commitment Therapy as applied to obesity. Finally, critical to any successful intervention are rigorous, comprehensive and sensitive assessment tools. The development and validation of a new tool for monitoring persistent pain is the subject of the final paper.

Paper 1: The secret to changing health behaviours: The RICK Principle

Janette Gale (Health Change Associates, NSW), and W. Cook (Health Coaching Australia, NSW)

Weight management, chronic pain management, chronic disease prevention and chronic condition self-management are tricky processes to engage clients in to create and sustain behaviour change. There are hundreds of theories that describe or explain health behaviour change processes. Each has its merits, but none is all encompassing due to the complexity of human nature. This paper offers a framework with which to integrate and understand the relationships among theories of health behaviour change. It introduces the RICK Principle and a 10 step framework that provides a practical way for clinicians to diagnose and guide client engagement in making and sustaining health behaviour changes.

Paper 2: Physical Activity: An evidence based examination of why and how it should be used in therapy

Paul O'Halloran (La Trobe University)

The benefits of physical activity are well documented. These benefits include increases in fitness, improved immune system functioning, protection from specific disease states, and psychological benefits such as improvements in mood and well-being. Further, physical activity can play an important role in the management and treatment of chronic conditions. For instance, meta-analytic studies have shown that physical activity is an effective treatment (as either a standalone or adjunct therapy) for mental health conditions such as depression, and there is evidence that it is an integral component of self-management programs for chronic conditions such as type 2 diabetes. Indeed, many researchers consider physical activity as a public health imperative. This is reflected by the fact that physical inactivity accounts for a considerable proportion of the burden of disease in Australia (in terms of behaviours it is second only to smoking). Despite the considerable impact of physical activity on health and well-being, the majority of Australians are not sufficiently active. Thus, health related professionals would benefit from being able to have informed discussions with their clients about why physical activity is important for health and well-being and the best ways of increasing their activity levels. This presentation will provide an evidence-based examination of several issues in physical activity that would be of interest to clinicians. First, this presentation will review meta-analytic evidence regarding how much activity is necessary to achieve specific benefits such as elevations in mood and improvements in clinical states such as depression. Second, emerging evidence that people who meet recommended activity levels can still be at risk for health problems if they spend too much of their day being sedentary (e.g. constant hours of TV watching or uninterrupted hours in front of the computer) will be presented. This evidence will be useful for clinicians who want to offer specific evidence-based advice to clients wanting to improve their health or well-being. As well, the presentation will conclude with some specific evidence-based strategies for assisting your clients to increase their activity levels.

Paper 3: Acceptance and commitment therapy applied to obesity

Tony Merritt (Sydney Clinical Psychology Practice and Eastern Suburbs Pain Clinic)

This presentation will provide an overview of the Acceptance and commitment therapy (ACT) model as applied to obesity, and how ACT can be practically employed to help individuals achieve more effective eating behaviour. Psychological interventions for obesity provide a seemingly essential part of the multidisciplinary approach to the management of this pervasive health problem. Central to psychological approaches are self-monitoring, impulse control, contingency management, goal driven behaviour, and behavioural persistence. The evidence for CBT for obesity is often questioned, however, even though these psychological strategies are central to CBT. Recently ACT has shown promise for the psychological treatment of obesity. ACT may be helpful because the model directly addresses these central change strategies, places less emphasis on symptom change (weight loss) and more on aligning

behaviour with a meaningful life, provides a very different perspective on impulse control, and at its heart is focused on the person's eating behaviour in context.

Paper 4: SPAASMS; The development of a bedside clinical assessment tool for monitoring persistent pain and outcomes

F. Mitra, S. Chowdhury (Townsville Health Service), M. Shelley (Wide Bay Health Service) and P. Buettner (James Cook University)

Persistent pain has profound effects on the health and quality of life. A reliable, comprehensive yet simple, measurement tool is essential for research, optimising clinical practice and treatment outcomes for persistent pain patients. We seek to devise a tool to aid physicians in assessing persistent pain. A scoring tool was developed to measure the direct and indirect markers of persistent pain across the following domains - Score of pain(S), Physical activity (P), Additional medication (A), Additional GP/ED visit (A), Sleep quality (S), Mood (M) and Side-effects of pain medication (S). These characteristics were rated and scored monthly in persistent pain patients for 9 months. SPAASMS score was inversely proportional to improved pain management. The test-retest analysis for SPAASMS score (n=20) showed a concordance correlation coefficient of 0.94; 95%-confidence interval = 0.86, 0.97 and Cronbach's alpha for Reading 1 and 2 were 0.66 (p=0.001) and 0.67 (p<0.001), respectively. Comparison of the score with the Numerical Rating Scale (NRS), Physical Disability Index (PDI), Depression, Anxiety, Stress Scale (DASS21) and a combined score of NRS, PDI and DASS21 showed improved sensitivity except for DASS21. The score declined when patients responded well but remained high in patients not responding to treatment, or increased with precipitating events like further trauma. With optimum relief, scores remained static. SPAASMS is a simple, rapid and comprehensive tool which indicated quantifiably, the progress of the patient. Additionally it can also be used to determine symptoms which have not responded to treatment.



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Health psychology: Innovations in evidence based practice II

Neil Harrigan (CatholicCare, ACT)

This symposium continues the focus on recent innovations and pertinent issues relating to the evidence based practice of health psychology. It also highlights the range of diverse contexts where health psychologists work, and their practice in multidisciplinary teams. The first paper examines emerging research and practice in renal psychology. It provides a review of the psychological interventions at the pre-dialysis stage and introduces a new cognitive-behavioural and exercise intervention for renal patients. The second paper focuses on the role and importance of health education when a patient is diagnosed with a chronic disease. However, the health psychologists argue for the need for this education to be more patient-centric rather than simply adopting a top-down approach where the clinician is viewed as holding all the knowledge. This more patient centric approach forms the basis of the Intentional Health Modules, which were specifically designed to assist patients with diabetes become more aware of the complexities of their illness and empower autonomous health decision-making. The third paper examines the need for the development of best practice guidelines for managing older patients with confusion in acute hospital settings. These guidelines are needed to reduce hospital costs, improve health outcomes for older persons, and ensure that older persons receive the most appropriate treatments. Each of the presenters will also highlight the need for additional research in order to more fully evaluate each of the recommended interventions and/or practice guidelines.

Paper 1: Emerging research and practice in renal psychology

Rachel Reilly, M. Cai and L. McMahon (Monash University)

Like other chronic conditions, chronic kidney disease (CKD) is associated with high levels of psychological distress and high rates of mood disorders compared to the general population. CKD is most commonly caused by diabetes or hypertension and is progressive, with sufferers losing kidney function over months or years. The final stage of CKD, end-stage kidney disease (ESKD) occurs when the kidneys no longer function. Treatment options at this stage include dialysis or kidney transplant. Past studies support a role for psychological intervention at the pre-dialysis stage, while adapting to the significant

physical, socio-economic and emotional impact of forthcoming dialysis or transplantation. Interventions evaluated in these studies include psycho-education, 'supportive therapy' and 'quality of life therapy'. Additionally, self-management and cognitive-behavioural interventions have shown promising results for improving patient outcomes through improved quality of life, adherence to treatment and extended time prior to requiring dialysis. We present preliminary data from a study evaluating a cognitive-behavioural and exercise intervention for renal patients receiving haemodialysis at the Eastern Health Integrated Renal Service, a large and diversely-populated, multicentre renal service in outer Melbourne. In addition to implementing this research study, the first of its kind in Australia, a designated psychologist has been employed to work within the multidisciplinary renal team to provide psychological support and interventions to renal patients and to develop the role of psychology within the service. These two activities running concurrently provide a unique case-study of how psychological practice can be incorporated into renal care to improve the lives of this vulnerable population.

Paper 2 : Intentional Health Modules: Delivering health education and empowering autonomous health decision-making in diabetes management

S. Alder and P. Walk (Busby Medical Practice, NSW)

Most diabetes education that takes place in the GP context is driven by the theory of reasoned action. Patients are given information about their condition and what they must do to manage it, and it is expected that once it is understood what they are to do and why, compliance will follow. This education has traditionally been delivered by a doctor or practice nurse, although recently education has broadened out to include other "physical" collaborators such as a diabetes educator, dietician and exercise physiologist. However, potentially undermining the efforts of all these practitioners is the fact that there are many psychosocially important reasons why people find it difficult to adopt new health behaviours. GPs are used to the idea that "collaborative" work will include nurses and other physical modalities, but not necessarily the psychosocial element. Additionally, biomedical education continues to treat patients individually and isolated from each other. In an attempt to design a mode of health education that is more patient centric, aiming to meet the individual adjustment and aspirational needs of each patient while delivering health education in groups that will be supportive and have a normalizing effect for group members, a four week module called Intentional Health Planning was developed and is being trialled. This module precedes the diabetes-specific strategic and educational aspect of the groupwork, which runs for another four weeks. This is not an empirical study but part of a pilot practice initiative designed as much to educate practitioners as to educate patients. Results are anecdotal at this stage. Discussion: Patient feedback has been overwhelmingly positive, with several new patients seeking care at this medical practice because of the team approach. Practitioners find the collaborative approach a challenge, but the practice is supported by monthly whole-practice meetings that have the capacity to grow relationships and respect. The next step will be to do an empirical study using pre-and post-intervention scores on wellbeing and diabetes-related measures. The Intentional Health module will be applied to all forms of chronic disease.

Paper 3: Management of confusion in acute care hospitals

Michael Shelley (Wide Bay Health Service District, QLD)

The expected increase in the age of patients ensures that management of confusional states will place high demands on acute facilities. Current estimates suggest that confusion occurs in up to 56% of older patient admissions to acute care for other reasons. Studies have found that 10-15% of older patients and 29.7% of hip fracture patients were delirious on admission to hospital. A recent study found that 32% of cases were unrecognised by their Physicians (4). There is growing evidence that lengthy episodes of delirium cause dementia (5). Further, up to 30% of inpatients develop acute confusion due to hospital care and medical interventions. Confusion is associated with increased length of hospital stay, rates of institutionalisation, functional disability, and rates of death. The cost is significant. One estimate suggests that if average hospital stays could be reduced by one day, this would amount to savings of one and two \$Billion. Health care staff use inconsistent terminology. Terms including psychosis, social admission, acopia, disoriented, cognitive decline, depression and dementia can mask confusion and lead to inappropriate treatment. 21.6% of hospital older community dwelling patients experienced delirium during their hospital admission. A guidance document has been developed to encourage the use of consistent terminology and evidence based practice in acute care facilities. Results and discussion: An evidence based procedure for the management of confusion has been designed. It needs to be appropriately tested and incorporated into best practice models of care. This presentation will present the procedure and encourage debate around implementation such as the ethics of labelling, and hospital priorities and responsibilities.



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Implementing health care reform: Integrative approaches to physical and mental health

Jan Gudkovs (Total Health and Education Foundation, Warwick)

Issues in the provision of care of patients with complex needs include how care is co-ordinated and funded. Psychologists can play a significant role in improving both physical and mental health, but system reforms need to be implemented to allow this to happen. Amongst these reforms is changing funding arrangements so that psychologists can participate in multidisciplinary teams. Whilst multidisciplinary team work is extolled as best practice, the reality is that time pressure on doctors and lack of payment for allied health professionals undermines the provision of co-ordinated care. Patients suffering physical and mental health problems need help and support to implement lifestyle changes. Health care needs to be organized so that the “tyranny of the urgent” of the acute care orientation of current health systems is overcome. The lifestyle change elements of chronic disease management can be managed through the input of psychologists and other allied health professionals in multidisciplinary teams, leaving doctors free to concentrate on the patient’s medical care knowing that the important underlying causes and necessary lifestyle changes are being addressed. This relieves GPs of the pressure of trying to educate, motivate and support their patients, all of which are time consuming and possibly not best addressed in the doctor’s surgery. The knowledge and skills of psychologists in private practice can make an important contribution to integrative care. This symposium will present a model of integrated care that effectively addresses these issues. It also provides a successful example of translational research, demonstrating that results achieved in large randomized controlled trials can be achieved in a small rural community.

Paper 1: Defining complex needs : Incidence of co-morbidity in patients referred for psychological treatment

Louis Vitetta and Jan Gudkovs (University of Queensland)

The prevalence of chronic disease in older people seen in general practice has been estimated to be 23%, with 15% of these in turn suffering from more than one chronic disease. This gives a co-morbidity rate of 3.5%. For patients with psychological conditions, the rate is likely to be much higher, as anxiety and depression play a role in the incidence of disease. This study examines the patterns of co-morbidity

in patients referred for psychological treatment. Data was obtained from the referral letters of a case series of 320 patients. These were patients referred for psychological treatment by general practitioners. Results are presented for the key chronic diseases targeted by the federal government's chronic disease strategy, namely, heart disease, asthma, diabetes and cancer. The high incidence of co-morbidity suggests that current guidelines for treatment which tend to be disease-specific, including the use of multiple drug regimens, could potentially cause problems for those with more than one chronic illness. Most clinical practice guidelines do not discuss the applicability of the recommendations for patients with multiple comorbidities. The possible over-prescription of medication and resulting adverse drug interactions suggest alternative approaches need to be developed for this patient population. Lifestyle modification programs that target various aspects of patients' physical health, mental health and quality of life in general are useful additions to treatment, exactly for this reason, and can have high patient acceptability.

Paper 2: An integrative model for patients with physical and mental health needs

Jan Gudkovs (Total Health and Education Foundation, Warwick)

To develop a multidisciplinary team model for chronic disease management utilizing the knowledge and skills of private practitioners. The model involves removing the lifestyle change elements of chronic disease management from the context of general practice to a comprehensive community-based lifestyle program. Psychologists worked in a multidisciplinary team to provide services to a "hard to treat" patient population who suffer from depression or anxiety plus a range of chronic illnesses. The program is delivered by an intentional team of allied health practitioners in private practice. Intensive evaluation of the program provides an opportunity for translational research. A bench-marking strategy was used to compare results obtained in large randomized controlled trials with results from the community-based program delivered in a rural town. Patients were those with complex needs. The program was delivered by a multidisciplinary team which included psychologists, dietician, yoga teacher, occupational therapist and personal trainer. Outcomes obtained in large randomized control trials can be successfully translated to smaller settings. There is evidence of a learning cycle in the team's performance. Multidisciplinary team work is extolled as best practice in documents such as the National Chronic Disease Strategy, the Queensland Strategy for Chronic Disease and System reform and development for chronic disease management. However, multidisciplinary teams within the current framework are more an ideal than a fact. Communication between supposed team members is frequently minimal because of time pressure on doctors and lack of payment for allied health professionals who are supposed to collaborate on the making and implementing of chronic disease management plans. Ultimately Medicare will need to make better arrangements for funding allied health professionals to participate in multidisciplinary teams. Ad hoc funding arrangements do not take into account the learning cycle that is inherent in successful team work. Comprehensive programs can address a number of patient needs simultaneously.

Paper 3: The psychologist's role in a multidisciplinary team

Jan Dugan and Jan Gudkovs (Total Health and Education Foundation, Warwick)

The dichotomy between physical and mental health which is currently enshrined in our health care policies is an abstraction. Even the term 'comorbidity' probably does not go far enough in expressing the interrelation between physical and mental health. Depression and anxiety are both causes and consequences of chronic illness prompting a need for more integrated programs. A comprehensive lifestyle program was developed by Dean Ornish for patients with heart disease facing the prospect of cardiac by-pass surgery. It is delivered by a team of healthcare professionals including psychologists. This program was used as a model for a 12 week lifestyle program delivered in rural Queensland. A psychologist led a weekly group session as part of the Warwick Healthy Living Program. A safe, informal and inclusive atmosphere encouraged sharing of personal experiences around topics such as: the challenge of changing habits, replacing anger with assertiveness, the effects of stress, enhancing self-esteem and how positive values and creativity contribute to good health. Journals and relevant handouts were additional tools given to participants to foster consistent practice. There was consistent attendance over the 12 weeks of the program. After twelve weeks, there was significant improvement in all three dimensions of the DASS (Depression, Anxiety and Stress Scale). There was also significant improvement in mental health as measured by the SF-36 Role Emotional, Energy and Emotional Well-being scales. Participants reported feeling nurtured by the group process and more connected to others. They said they had more faith in life and felt valued and strengthened through the group program. The positive results for mental health from this group program have wide ranging implications for working with stressed, anxious and depressed patients with chronic illness. Their mental health care needs can be met in a healthy lifestyle program, without the stigma that may be attached to a 'mental health' program. The blocks to implementing doctors' recommendations for lifestyle change can be addressed. Social isolation is diminished through support provided through the group.

Paper 4: Care for the carers – a vital ingredient for sustainable change

Mark Cary (Mercy Family Services)

To ensure the integration and continuity of care for people with chronic diseases, attention has increasingly been directed to family members who help the person with chronic disease manage the physical, social and psychological consequences of their chronic illness. The burden on these carers has been widely reported to have negative consequences on their own mental health and has led to the growing development of psychosocial interventions targeting carers found to have significant psychopathology. Few if any such interventions have been used with rural populations. A trial of a 12 week psychological intervention program for carers of patients with chronic disease living in a rural setting. Carer stressors identified were concern for suffering, worry over life expectancy, impaired social and family life, difficulty negotiating acceptable support and depression/anxiety. Mild levels of depression and anxiety, and moderate levels of stress recorded in carers prior to the commencement of intervention were found to be reduced to normal levels post intervention. Mild levels of anxiety and depression and moderate levels of stress found in carers for people with chronic diseases suggested the

need for an intervention to help this group achieve better mental health. The study revealed that the intervention was useful in reducing levels of identified psychopathology in the target group and improving their well being. Implications were that a program effective in improving the mental health of carers could help ensure the continued care they provide for their family member with a chronic disease.



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Innovations in evidence based practice for diabetes prevention and management

Marie Caltabiano (James Cook University)

Diabetes is one of the world's fastest growing chronic diseases, and also one of the eight national health priority areas flagged by the Australian government. This symposium brings together four research groups who are currently working to reduce the risk of diabetes-related complications and better understand the psychosocial issues underlying diabetes prevention and management. The first paper provides an overview of the pertinent psychological issues that are implicated in the prevention or self-management of diabetes. These include the burden of living with the disease, recent developments in interventions and technologies, and the implications of caring for someone with diabetes. In addition, the paper will also include an introduction to the research being conducted at the new Australian Centre for Behavioural Research in Diabetes. The second paper focuses on the prevalence of psychopathology, coping strategies, and perceived stress in people with type 1 diabetes. People with type 1 diabetes had significantly higher prevalence rates of mood or anxiety disorders, and alcohol and/or substance misuse than found in non-diabetes controls, however, they did not perceive that they were under higher levels of stress nor do they report different coping strategies. The implications of these findings for promoting better self-management will be discussed. The third paper examines the effects of a Motivational Interview Health Coaching intervention on mental health status, lifestyle behaviours and coping strategies for participants with type 2 diabetes or cardiovascular disease. Contrary to expectations, participants who took part in the intervention did not show greater improvements than an active control group who were also given educational materials to help assist with health behaviour change. This study highlights the importance and value of improving and targeting health information to better assist self-management in this population. The final paper focuses on the development of an evidence based online training program and support materials to assist primary healthcare professionals intervening to increase physical activity in people with type 2 diabetes. This new and innovative program addresses the barriers to promoting physical activity in primary care and integrates this with techniques that have been shown to increase physical activity among adults.

Paper 1: The Australian Centre for Behavioural Research in Diabetes: An idea whose time has come?

Jane Speight and J. Brown (The Australian Centre for Behavioural Research in Diabetes; Deakin University)

Diabetes is the fastest growing chronic condition in Australia, affecting 1.7 million Australians and increasing at epidemic proportions. Efforts to promote behaviour change for the prevention of diabetes, and to improve adherence to treatment regimens often overlook the complex psychological needs of people with diabetes. Historically, clinicians, peak bodies, and governments have relied primarily on a biomedical approach to the prevention and management of diabetes. Yet, prevention and successful management of diabetes (in all its forms) requires that attention be given to the behavioural, psychological and social aspects of this devastating condition. Six themes summarise the behavioural and psychological factors implicated in diabetes prevention and management: (1) psychosocial factors implicated in prevention or self-management (e.g. diet, physical activity, blood glucose monitoring, adherence to medications), such as health beliefs, attitudes, illness perceptions, the patient-clinician relationship; (2) the psychological burden of living with diabetes, including diabetes-related distress, quality of life, impaired awareness and fear of hypoglycaemia; (3) major psychological disorders (e.g. mood and eating disorders), which are more common in people with diabetes than in the general population; (4) the psychological impact of interventions and new technologies (e.g. structured education programs, insulin pumps, islet/pancreas transplantation); (5) the psychological aspects of diabetes over the lifespan (e.g., diabetes during pregnancy, the differing needs of children, youth, adults and older adults), and; (6) the psychological implications of caring for someone with diabetes (e.g., child, partner). The Australian Centre for Behavioural Research in Diabetes was established in 2010, as a partnership between Diabetes Australia–Victoria and Deakin University. It is the first national research centre dedicated to improving the quality of life of all people affected by diabetes in Australia. The Centre's roles are (1) to lead and collaborate on a varied program of behavioural and social research in diabetes, (2) to act as a national resource for clinicians and researchers, and (3) to offer a national voice promoting behavioural and psychosocial issues in diabetes. The Centre is developing a comprehensive research agenda that aims to increase the evidence base and enhance the national and international profile of psychological research in diabetes in Australia.

Paper 2: Stress, coping and psychopathology in Type 1 Diabetes

Grant Sinnamon, J. NcDonnell, T. Carbis, M. Ferriday, T. Vercoe, J. Yang, Marie Caltabiano, D. Mitchell and B. Baune (James Cook University)

Diabetes is associated with increased prevalence of mood and anxiety disorders. Disease burden-related stress and sub-optimal blood glucose control are generally accepted as the primary mediating factors. The extent of the prevailing psychopathology is contentious with previous cross-sectional studies reporting large variations. Furthermore, previous investigations have used self-report measures rather than clinical assessments of psychopathology. Additionally, studies of mood and anxiety disorders in non-Diabetes cohorts have shown a close association with increased psychological stress and

maladaptive coping strategies however, little research has been conducted on the association between these factors in Diabetes. Regardless, comorbid mood and anxiety disorders in diabetes are associated with decreased self-care, sub-optimal metabolic control, and increased risk of complications. The aim of the present study was to quantify the prevalence of mood and anxiety disorders in participants with type 1 diabetes (T1D) using clinical assessment, and to compare coping strategies and perceived stress levels to non-diabetes controls. The study employed a cross-sectional case-control design. Participants presented for a structured neuropsychiatric interview (MINI600) in which they were assessed for the presence of psychopathology according to DSM-IV-TR criteria. Coping and perceived stress were assessed by self-report using the Perceived Stress Scale, Rhode Island Stress and Coping Inventory, and Ways of Coping Questionnaire. Multivariate ANOVA found no significant differences between groups in either perceptions of stress or coping strategies ($p=.497$). Chi-square tests revealed a significantly higher prevalence of mood or anxiety disorder ($p<.001$, 60% vs 10%). Alcohol and/or substance misuse was also found to be higher in the T1D group ($p=.002$, 30% vs 11%). Other variables could not account for the differences in levels of psychopathology between participant groups. As many as 60% of individuals with T1D suffer from anxiety or depression at any given time however; sufferers do not appear to perceive that they are under higher levels of stress than those without the condition, nor do they report different coping strategies. The results suggest that neither disease burden-related psychological stress nor blood glucose control factors may be able to account for the high prevalence of comorbid psychopathology.

Paper 3: The effect of a lifestyle behavioural intervention on psychosocial factors in those with a chronic illness

Mirella Di Benedetto (RMIT University), Helen Lindner (APS), and H. Aucote (Australian Catholic University)

“Movement as Medicine”: combining theory and research to develop an online professional development training program and support materials to assist primary healthcare professionals intervening to increase physical activity in people with type 2 diabetes. The global prevalence of diabetes is projected to rise to 366 million by 2030, with much of this attributed to type 2 diabetes (T2DM). T2DM is an asymptomatic but devastating condition; persistently elevated blood glucose (BG) concentrations are associated with increased risk of blindness, kidney damage, cardiovascular disease, stroke and depression. So-called ‘simple lifestyle changes’, including regular moderate physical activity (PA), are as effective in reducing BG levels as oral medication and can act as a catalyst for other behavioural changes. Most T2DM care takes place in general practice yet primary care providers (PCPs) are largely unsuccessful in effecting increased PA. Our aim was to develop an intervention that would engage PCPs and facilitate increased PA in people with T2DM. Procedure: The Information-Motivation-Behavioural (IMB) skills model of health behaviour change underpinned the development of a web-based continuing professional development (CPD) program for PCPs. In order to determine the relevant factors involved in promoting PA among people with T2DM, we conducted (1) a systematic review to ascertain barriers to the promotion of PA in primary care and to determine the interventions / techniques that have been shown to increase PA among adults; and (2) focus groups (N=13) with adults with T2DM to investigate patients’ perceptions of their PCPs knowledge about T2DM management. Results: The CPD program (consisting of 8 web-based modules) was developed to offer an evidence-

based learning opportunity about the role of PA in T2DM, promote positive attitudes about engaging with people with T2DM about PA, and offer opportunities to develop requisite skills / confidence to facilitate increased PA in people with T2DM. In parallel, a range of materials (based upon proven behaviour change theory and techniques) were developed to support PA consultations with adults with T2DM, to prompt intention formation and goal-setting, provide feedback on performance, and prompt review of behavioural goals. Conclusion: We have developed a theoretically- and empirically-derived PA intervention for PCPs and adults with T2DM. The 'Movement as Medicine' intervention is currently undergoing pilot work in the UK to assess its acceptability to PCPs and adults with T2DM before undergoing rigorous evaluation.

Paper 4: "Movement as Medicine": combining theory and research to develop an online professional development training program and support materials to assist primary healthcare professionals intervening to increase physical activity in people with type 2 diabetes

K. Mosley (AHP Research, UK; Australian Catholic University), L. Avery (Newcastle University, UK), J. Speight (AHP Research, UK; The Australian Centre for Behavioural Research in Diabetes; Deakin University), F. Sneihotta and M. Trenell (Newcastle University, UK)

The global prevalence of diabetes is projected to rise to 366 million by 2030, with much of this attributed to type 2 diabetes (T2DM). T2DM is an asymptomatic but devastating condition; persistently elevated blood glucose (BG) concentrations are associated with increased risk of blindness, kidney damage, cardiovascular disease, stroke and depression. So-called 'simple lifestyle changes', including regular moderate physical activity (PA), are as effective in reducing BG levels as oral medication and can act as a catalyst for other behavioural changes. Most T2DM care takes place in general practice yet primary care providers (PCPs) are largely unsuccessful in effecting increased PA. Our aim was to develop an intervention that would engage PCPs and facilitate increased PA in people with T2DM. The Information-Motivation-Behavioural (IMB) skills model of health behaviour change underpinned the development of a web-based continuing professional development (CPD) program for PCPs. In order to determine the relevant factors involved in promoting PA among people with T2DM, we conducted (1) a systematic review to ascertain barriers to the promotion of PA in primary care and to determine the interventions / techniques that have been shown to increase PA among adults; and (2) focus groups (N=13) with adults with T2DM to investigate patients' perceptions of their PCPs knowledge about T2DM management. The CPD program (consisting of 8 web-based modules) was developed to offer an evidence-based learning opportunity about the role of PA in T2DM, promote positive attitudes about engaging with people with T2DM about PA, and offer opportunities to develop requisite skills / confidence to facilitate increased PA in people with T2DM. In parallel, a range of materials (based upon proven behaviour change theory and techniques) were developed to support PA consultations with adults with T2DM, to prompt intention formation and goal-setting, provide feedback on performance, and prompt review of behavioural goals. We have developed a theoretically- and empirically-derived PA intervention for PCPs and adults with T2DM. The 'Movement as Medicine' intervention is currently undergoing pilot work in the UK to assess its acceptability to PCPs and adults with T2DM before undergoing rigorous evaluation.



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Introductions to the profession: Expectations and transitions of beginning psychology students at three universities

Jason Lodge (Griffith University)

In 2008, the Organization for Economic Co-operation and Development (OECD, 2008) argued that the increasing demand for trained health professionals and an ageing population foreshadow a 'looming crisis' in health care. Recognising this as one of a number of sectors where increased numbers of professionals will be required in the future, the Review of Australian Higher Education (Bradley, Noonan, Nugent & Scales, 2008) recommended a substantial increase in student numbers through widening participation in higher education. This recommendation has resulted in the current federal government setting a target of 40% of 25 to 34 year olds having bachelor degrees by 2025 (Australian Government, 2009). Despite these progressive goals, there is evidence suggesting that a substantial proportion of students do not complete their first year in higher education (Nelson, Duncan & Clarke, 2009). Increasing hours of paid work, less time on campus and changing pedagogy through technology have all been forwarded as reasons why student attrition remains a problem in higher education. Another factor that has received less attention is the expectations students have when coming into first year. These issues appear to be a particular challenge in psychology courses where diversity in career options and unrealistic expectations of the course content and practice negatively impact on student satisfaction and retention. The current symposium aims to present a clearer picture of student expectations and present a series of curricular and co-curricular strategies that can alleviate potential issues and decrease student attrition from first year of psychology programs. The first paper in this symposium describes the results of a survey of first year psychology students across institutions and campuses in Queensland. Following from this, the second is a presentation of a technological approach to managing transition issues at Griffith University. The third paper is an illustration of a curricular approach to introducing first year students to psychology at Queensland University of Technology. The final paper includes a presentation of a co-curricular approach taken by James Cook University. Each of these approaches will be described and outcomes in terms of engagement and retention will be discussed.

Paper 1: Introductions to the profession: A survey of the expectations of first year psychology students in Australia

Jason Lodge (James Cook University), Erin O'Connor (Queensland University of Technology), Claire Ryan and L. Hansen (Griffith University)

Previous research conducted in the UK suggests that first year psychology students have unrealistic expectations of their course and future profession (Rowley, Hartley & Larkin, 2008). Although there is evidence to suggest that Australian students have similar expectations and that those expectations influence successful student transition to higher education (O'Connor, Hansen & Thorne 2009), there is little systematic evidence across institutions to support this conjecture. The current study aimed to build on the findings of studies done in the UK by examining these issues in Australia. The aim was to collect evidence of these expectations as a precursor to developing approaches to lessen the impact on the successful transition into a psychology course and into the profession. Students from a number of institutions in Queensland were surveyed about their expectations of psychology. The survey used was a modified version of that developed by Rowley et al., adapted to Australian circumstances. The results suggest that the majority of students in these programs have not studied psychology before, chose psychology as their first preference and hope to continue to postgraduate study and registration as a psychologist. Despite this, students also report that they are unclear about the registration requirements and do not understand the pathways and career trajectories afforded by their course. Students in this sample also expect there to be a strong emphasis on research methods, statistics and clinical practice. These results suggest that students have a relatively realistic sense of the content of a psychology course but are particularly unclear about the practice of the profession. The results suggest that a renewed emphasis on connecting students with the profession is required in first year psychology subjects. The subsequent papers in this symposium will address ways in which this can be done.

Paper 2: Introductions to the profession: Technological approach to increasing engagement with the profession

Claire Ryan and Debra Bath (Griffith University)

Students are drawn to study psychology for many reasons. Our data and that of other researchers suggest that students' expectations about the profession and studying psychology are often inconsistent with reality. A particular challenge faced by Griffith University is the lower levels of 'assumed student knowledge' that our students have as around 70% of our students are the first in their family to attend university. Cohorts are also large, with around 600 students in each spread across two campuses. Managing these incongruent expectations or catching up non-traditional students' understanding of higher education seems a necessary step in helping to build effective future mental health professionals. At Griffith, we deliver a range of interventions to orientate our students toward realistic expectations of their profession and learning journey. The focus of this session is how we engage with technology through an interactive online learning environment designed to stimulate self-directed learning, which we have called "PsychMe". Students' expectations of their profession and learning process were measured at Time 1 (n = 91) before the semester commenced. Students at the Mt Gravatt campus took

part in a suite of interventions geared toward stimulating their sense of connection, capability, resourcefulness, and purpose. In particular, we targeted students' expectations through encouraging participation in the online learning platform, "PsychMe". We complimented this online learning with such things as: Common Time workshops which built on the learning related skills touched on in the online learning platform; a series of professionals in practice panel discussions; just-in-time coaching sessions for low performing students; and a peer mentoring program. Follow up surveys, focus groups and electronic data capture data were used to investigate the engagement with and outcomes of these interventions. Results to date have shown that an integrated approach to managing student expectations and building 'assumed knowledge' appears very effective. Specifically, the use of technology through a user-friendly learning platform appeared to stimulate self-directed learning and help to achieve a sense of community in such a large group of students.

Paper 3: Introductions to the profession: Curricular approach

Erin O'Connor and Louise Hansen (Queensland University of Technology)

In 2008, extra-curricular career development programs developed for psychology undergraduates at the Queensland University of Technology were incorporated into the formal curriculum. While a whole of course approach has been adopted, this session will explore the impact of a new introductory unit, Psychology in Professional Contexts, which adopts a constructivist approach to student career exploration. First-year students are introduced to key theories, models, and processes of career development, and the diversity of contexts in which their psychological knowledge can be applied, while developing and highlighting the value of important generic abilities such as critical thinking, team communication, critical reflection, and information literacy. Materials are drawn from the media, guest speakers' professional profiles, the students' own experiences, and traditional and emerging areas of psychology. Assessment and learning activities involve case analysis, problem-based learning, and discussion-based classes. The content of these professional development classes is also aligned with that of the core discipline units studied concurrently, to encourage the transfer of career development skills and knowledge across the psychology curriculum. This presentation will focus on 4 years of curriculum development in Psychology in Professional Contexts, and discuss changes initiated in 2011 which incorporate interactive online environments and extend the role of problem-based learning.

Paper 4: Introductions to the profession: Co-curricular approach

Louise Hansen (James Cook University) and Jason Lodge (Griffith University)

In addition to the general issues that impact the transition of students into first year psychology, first year psychology cohorts from James Cook University (JCU) are further hampered by challenges posed to regional universities. Despite a well-developed curriculum and a strong first-year teaching team, engagement and retention have been an ongoing problem at the JCU Cairns campus. Since 2008, a series of co-curricular initiatives have been implemented to first year psychology students at this campus. For instance, a Principal Tutor position was established, a new student system was trialled, and an online presence was provided. Links between the curriculum, the course structure and the profession were highlighted and a concerted effort to involve these students in APS activities was instigated.

Students were surveyed over two successive years in order to track engagement and retention rates. Student engagement levels were compared with national averages and results suggest a vast improvement. Similarly, student retention rates showed marked improvement. Broader approaches to improving students' first year experience now employ transition pedagogies that espouse curricular and co-curricular activities in a whole of school approach (Kift, Nelson & Clarke, 2010). Our research suggests that co-curricular, grass-roots approaches to increasing student engagement positively impact retention of first year psychology students when the curriculum is sound and when there is a committed teaching team in place.



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KidsMatter initiatives – from theory to practice

Lyn Littlefield (Australian Psychological Society)

The KidsMatter Mental Health initiatives are based on a promotion, prevention and early intervention framework developed specifically for children attending early childhood services and primary schools. The KidsMatter framework is underpinned by a socio-ecological approach that emphasises the impacts that families, schools, early childhood services and communities have on children’s mental health. There are a range of risk and protective factors that influence children’s mental health present in each of these environments. KidsMatter has grouped these under four key areas (Components) where schools and early childhood services can take action to influence children’s mental health. The four components of KidsMatter range from more universal approaches to promoting mental health to those which are targeted at assisting children who are already showing signs of mental health difficulties. Given the great variability among individual schools and early childhood services, the four components of KidsMatter have been intentionally phrased in broad terms so that schools and services involved can identify strategies to support children’s mental health which are meaningful within their own contexts. The implementation models developed during the pilot stages of KidsMatter have been informed by the literature and experts in the field, ensuring that they are viable and have the capacity to overcome many of the challenges associated with implementing a new initiative into settings that are faced with already stretched resources. How schools and early childhood services have overcome these challenges has great practical significance and can help inform the development of future initiatives that aim to promote children’s mental health.

Paper 1: KidsMatter Primary

Lynette O'Grady (Australian Psychological Society)

The KidsMatter Primary initiative engages whole schools, parents, carers and health and community agencies in addressing children's mental health. It provides schools with professional learning and resources as well as a structured implementation process. It encourages a planned yet responsive and practical approach to implementation by schools that has enabled schools to implement appropriate mental health promotion, prevention and early intervention strategies whilst being sufficiently flexible to meet school specific needs. Schools implementing KidsMatter Primary are expected to critically examine and enhance school plans, policies and procedures, knowledge and attitudes of staff, social and emotional curriculum for students, ways of working with parents and carers, and referral pathways for students experiencing mental health difficulties. KidsMatter Primary has been independently evaluated and shown to have positive outcomes for children's mental health, parents and schools and is now being funded for national rollout. Increasingly, health and education sectors are developing partnerships with Kidsmatter Primary which enhance both the ongoing roll out of KidsMatter Primary across Australia and improve access for children and parents to services within their local community. This presentation will highlight how the evidence underpinning children's mental health has been operationalised in schools via the KidsMatter Primary initiative and will present case studies of current participating schools.

Paper 2: KidsMatter Early Childhood

Jo Cole (Australian Psychological Society)

The KidsMatter Early Childhood (KMEC) initiative is currently being piloted and independently evaluated in over 100 preschools and long day care centres around Australia. The KidsMatter framework, piloted and evaluated in the KidsMatter Primary initiative, is being used in these Australian early childhood services to help them to review their practice and focus their strategies for optimising the mental health of the children attending their services. This paper will present case studies from KMEC pilot sites who have been implementing strategies under Component 1 – Creating a sense of community. Within this Component, early childhood services review their practice and implement Action Plans under four target areas: belonging and connectedness; positive relationships; inclusion and collaboration. The evidence that supports these strategies will also be presented, as well as early data from the evaluation.

Paper 3: KidsMatter Transition to School: Parent Initiative

Lee Oliver (Australian Psychological Society)

The transition to school can be an exciting, but also a potentially stressful period for children and families alike. Whilst many children will make a smooth transition into school, research suggests that a number will experience adjustment difficulties and distress during this time. The KidsMatter Transition to School: Parent Initiative (KMT Initiative) aims to equip schools, parents and carers with knowledge, skills and resources for a successful transition. The Initiative focuses on engaging and involving parents and carers since they play a central role in supporting their children to adjust to the new physical, social

and educational contexts and changes in the parent/carer-child relationship. The initiative also seeks to assist schools to engage parents and carers in their child's schooling and ongoing social and emotional learning at school. Schools are provided with a range of tools and resources to support them in reaching out and working in partnership both with parents and carers as well as other key stakeholders, such as early childhood services. The Initiative is being piloted in 17 schools across Australia. It includes school staff delivering four information sessions to parents and carers prior to and following children's entry into primary school. Theory and evidence used to inform the Initiative will be presented along with feedback from the pilot.



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Lesbian, Gay and Trans Issues in Psychology 1

Damien Riggs (Flinders University)

The three papers in this first session on issues related to lesbian women, gay men, and transgender people in psychology report on empirical research conducted both within Australia and abroad. In the first paper, Riggs reports on a South Australian study examining the educational experiences of lesbian mothers and their children. Riggs' findings suggest that whilst the lesbian mother families in the study on the whole reported few experiences of outright discrimination, both mothers and children reported relatively high rates of more subtle discrimination. In the second paper, Lysenko reports on findings from interviews conducted with Australian gender diverse people and the mental health practitioners who work with them, with a focus upon how both groups negotiate the therapeutic relationship. The findings suggest that practitioners must recognise the authority of gender diverse people when they speak about their lives, but at the same time practitioners must resist positioning gender diverse clients as educators. In the final paper, Davis and Flowers report on findings from interviews conducted with HIV positive gay men living in Scotland. Their findings focus on discourses of honesty, self care, and informed consent, and in so doing highlight the important psychosocial dimensions of living with HIV.

Paper 1 : The educational experiences of lesbian mother families: A South Australian study

Damien Riggs (Flinders University)

Research continues to find that despite living in a context of ongoing discrimination, lesbian mother families continue to thrive. This is perhaps nowhere more evident than in the educational system. The research reported here sought to explore the educational experiences of a sample of lesbian mothers and their children in the context of South Australia. The findings suggest that a minority of the sample of mothers reported experiencing discrimination within their children's schools, and that a minority of children also experienced such discrimination. Experiences of discrimination were related to the age of the child, outness of the mother, and the socio-economic rating of the school. The research also assessed the degree to which both mothers and children had heard the words 'lesbian' or 'gay' used pejoratively. A large proportion of children had reported hearing such negative useage, as had a minority of mothers. Having heard the words used negatively was predicted by the age and gender of

the child, and for mothers, the socio-economic rating of the school. Degree of comfort within school spaces amongst mothers was also assessed, with comfort negatively influenced by experiences of discrimination and the socio-economic rating of the school. The findings highlight areas that require improvement within South Australian schools and indicate the need for further research in the area.

Paper 2: Experts not educators: Exploring tensions in the therapeutic relationships between gender diverse clients and their psychologists in counselling

Natalie Lysenko (Monash University)

This paper is based on a study of therapeutic relationships between psychologists and gender diverse clients in counselling in Australia. While cultural diversity discourses have become powerful in psychology, and discourses on gender diversity are coming onto the agenda, gender diverse people are still reporting difficulty in finding therapeutic relationships that are “actually therapeutic”. In this context, the study considers how gender diverse clients and their psychologists are negotiating therapeutic relationships. The study aims to provide psychologists with some tools for unpacking and responding to tensions that may arise when developing relationships in counselling with these clients. Taking an integrated approach to discourse analysis informed by Foucault, Wetherell and Butler the study considers the discursive resources and tensions present in the talk of gender diverse clients and their psychologists when being interviewed about their experiences of therapeutic relationships. In these interviews clients gave numerous accounts of what they perceived to be unacceptable counsellor behaviour. Such accounts can be seen as reflecting prohibitions present in the discourses used by clients. This paper will discuss two such prohibitions, the first being subjectification of clients as educators. This prohibition relates to clients’ sense that they should not have to educate their counsellors about gender diversity because their expectation is that their counsellors will educate themselves on this area. The second prohibition is against disputing clients’ accounts of their identities and experiences. This prohibition relates to the argument, evident in the talk of many clients interviewed, that people are the experts on their own identities and experiences. For counselling, this prohibition means that it is unacceptable for counsellors to impose their understandings of gender onto clients in ways that are invalidating. There is a fine line for psychologists to walk in not challenging the status of gender diverse clients as experts and at the same time not leaving these clients feeling they are taking on a position as educator. The paper will discuss some ways psychologists could navigate this tension if it is identified in their therapeutic relationships.

Paper 3: Understanding HIV and gay men: Self, relational ethics and biomedicine

Mark Davis (Monash University) and Paul Flowers (Glasgow Caledonian University)

This paper explores gay men’s accounts of HIV antibody serostatus disclosure as a multifaceted psychosocial practice. It stands in contrast to biomedically-oriented HIV control, which tends to ignore or gloss over the complexities of HIV disclosure and related HIV testing and diagnosis. Through analysis of the narratives of 16 HIV-positive gay men living in Scotland, we show that HIV disclosure is a central, ramified psychosocial practice for gay men with HIV. We examine such HIV disclosure in three dimensions: i) the value of ‘honesty’ for significant relations in light of biomedical ‘truth’ concerning HIV

serostatus, ii) care of the self and other(s) as a matter of ethical relationality, iii) and the dilemmas related to informing sexual and romantic partners. Along with commenting on implications for HIV control, we highlight the wider relevance of our findings for understanding contemporary biomedicine's involvement in the sexual identities and practices of gay men.



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Lesbian, Gay and Trans Issues in Psychology 2

Ken Davidson (University of Ballarat)

The four papers in this second session on issues related to lesbian women, gay men, and trans people in psychology provide insights at both community and individual levels in regards to these populations. In the first paper, McLaren and colleagues report findings on the relationship between sense of belonging and experiences of depression amongst gay men. In the second paper Becker reports on findings from interviews with gay men focusing on the topic of shame. Becker's findings suggest that despite the depathologisation of homosexuality, some gay men continue to experience high levels of shame in terms of their sexual identities. In the third paper Todd, using psychoanalysis as a framework, explores some of the issues that face non-heterosexual and/or trans people in terms of the development of a healthy sexual and gender identity. In the final paper, Yates and colleagues report on their work for A Gender Agenda, a community organisation in Canberra servicing sexual and gender diverse communities. The report highlights the challenges and successes experienced by the organisation and the considerable advocacy role it plays for sexual and gender diverse people.

Paper 1: Sense of belonging and depression among gay men

Suzanne McLaren, K. Davidson, P. Gibbs, M. Molly and M. Jenkins (University of Ballarat)

Depression is a major health concern among gay men. This study explored how sense of belonging to the general community, the gay community, gay groups and gay friends influence depression in gay men by testing a path model. Two hundred and forty six gay men, aged between 18 and 82 years ($M = 35.37$, $SD = 12.42$) were recruited at gay community events. The participants completed self-report measures of sense of belonging and depressive symptoms. The results indicate that the model was a good fit for the data. Sense of belonging to the gay community predicted sense of belonging to gay groups, and sense of belonging to gay groups predicted sense of belonging to gay friends. Sense of belonging to gay friends predicted depression directly and indirectly, via sense of belonging to the general community. Increasing sense of belonging to gay friends may be beneficial for the mental health of gay men.

Paper 2: Experiences of shame among gay men living in Australia: A qualitative exploration

A Becker (La Trobe University)

Several constructs, such as internalised homophobia, have been the focus of particular attention in relation to the wellbeing of gay men. In turn, it has been suggested by Allen and Oleson that shame may be the principle pathogenic factor in internalised homophobia. Nevertheless, the experience of shame for gay men has been largely unexplored. This is despite it being considered by some to be the master emotion, and by Block Lewis as the ““sleeper in psychopathology”. Furthermore, shame appears to be a critical affect when considering psychotherapy content, process and outcome. Whilst we have seen the ‘depathologising’ of homosexuality and the development of gay-affirmative psychotherapies, there is further need to develop our understanding of the experience of shame in the lives of gay men. In-depth, semi-structured interviews were conducted with nine gay men living in Melbourne and Sydney exploring both their experiences with shame and embarrassment, and how they managed to cope with these feelings with or without counselling. Grounded theory methodology was utilised for data collection, coding and analysis. Research findings are discussed in terms of the higher order categories that reflect participants’ processes and experiences and in turn, the contribution to current theory around shame and identity development.

Paper 3: The evolution of A Gender Agenda: The psychology of how Canberra’s sex and gender diverse individuals are growing a community organisation

G. Hitch (A Gender Agenda), H. Yates (Women’s Legal Centre) and J. Yates (Canberra Institute of Technology)

Growing a successful community organisation from a group of individuals who share their diversity as a common link is no mean feat. Canberra-based community organisation A Gender Agenda has been working toward this goal for more than a decade, but the last few years have seen a marked growth in the organisation’s membership and more particularly in the breadth of its achievements. A discussion of the framework which has facilitated this growth, followed by an examination of the five key strands which comprise AGA’s core strength, provides insight into how this work has been achieved and how AGA has moved along the continuum of achievement toward success.



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MindOverGut? Exploring the biological and psychological processes associated with gastroenterological conditions and their impact on individual well-being

Simon Knowles (Swinburne University of Technology)

Around 60% of individuals in Australia have gastrointestinal (GI) problems at any one time. A growing body of research indicates that the brain-gut-axis plays an important role in the development of pathology, both physically and psychologically in GI conditions. In this symposium, four papers are presented which explore the impact of individual biological and psychological processes associated with Irritable Bowel Syndrome (IBS) and/or Inflammatory Bowel Disease (IBD). In the biological domain, Elizabeth Nelson explores changes in GI microbiota in patients undergoing a targeted Cognitive Behavioural Therapy program for IBS. In the mental health domain, Davina Tribbick explores the psychological impact of living with a stoma, while Christine Gass investigates the impact of IBS and IBD on sexual health. Finally, Simon Knowles reviews the efficacy of psychological interventions associated with IBD.

Paper 1: Mechanisms underlying the efficacy of cognitive behaviour therapy as a treatment for irritable bowel syndrome: impact on both self-report measures and biological markers of irritable bowel syndrome

Elizabeth Nelson, E. Palombo and S. Knowles (Swinburne University of Technology)

In a series of case studies, the aim of this research was to identify the mechanisms involved in the success of a Cognitive Behaviour Therapy (CBT) treatment program for Irritable Bowel Syndrome (IBS), by exploring possible changes in psychological and physiological measures (specifically cortisol, bacterial microbiota activity [the commensal gut bacteria *Lactobacillus*, *Bifidobacterium*, *E. coli*, and *Enterococcus*], and sIgA) previously identified as being associated with IBS. Before, after and throughout the CBT treatment program participants completed a series of questionnaires and provided a number of biological samples, specifically, saliva and faecal samples. The CBT intervention program consisted of ten structured sessions, aimed at reducing overall anxiety levels and visceral hypersensitivity. Results indicated reduced psychological distress and IBS symptoms, and several

changes in microbiota, IgA and Cortisol levels. A review of these findings in relation to the possible mechanisms of CBT effectiveness in the treatment of IBS is discussed.

Paper 2: Exploring the impact of stoma formation on psychological wellbeing using the Common Sense Model

D. Tribbick and S. Knowles (Swinburne University of Technology)

The aim of this study was to explore the impact of having a stoma on psychological well-being using the Common Sense Model (CSM). One hundred and fifty adults (54 males, 96 females; average age 44.97) with a stoma (41 ileostomy, 109 colostomy; 49 emergency, 101 planned, 97 permanent, 53 temporary) completed an online questionnaire assessing illness activity, illness beliefs, adaptive and maladaptive coping, anxiety, and depression. Using structural equation modelling a final model with an excellent fit was obtained ($\chi^2(10) = 14.05, p = .17, \chi^2/N = 1.41, CFI > .99, RMSEA < .05, SRMR < .04; GFI > .97$). Months since surgery had a significant direct influence on illness symptoms ($\beta = -.21, p < .02$) and illness beliefs ($\beta = -.24, p < .001$). Illness symptoms had a significant direct influence on illness beliefs ($\beta = .79, p < .001$), depression ($\beta = .47, p < .001$), and anxiety ($\beta = .46, p < .001$). Illness beliefs had a significant direct influence on adaptive and maladaptive coping ($\beta = .36, p < .001, \beta = .64, p < .001$, respectively) but not anxiety or depression. While maladaptive coping had a significant direct influence on depression and anxiety ($\beta = .51, p < .001, \beta = .46, p < .001$, respectively), adaptive coping was only found to have a direct influence on depression ($\beta = -.28, p < .001$). The results partially provide support for the CSM and the inter-relationship between illness activity, illness beliefs, coping styles, and depression and anxiety in patients with stomas. These aspects of psychological processing provide a framework and direction for the psychological support that patients with stomas require.

Paper 3: Exploring the impact of psychosocial factors on sexual health for individuals with Inflammatory Bowel Disease (IBD) or Irritable Bowel Syndrome (IBS)

Chris Gass and S. Knowles (Swinburne University of Technology)

Inflammatory Bowel Disease (IBD) and Irritable Bowel Syndrome (IBS) are both associated with poorer psychological well-being, however only limited research has explored the impact of these illnesses on relationships and sexual health. Using an extended version of the Common Sense Model (CSM), this study explored the influence of illness, illness perceptions, coping, anxiety and depression on sexual satisfaction. Ninety-six adults (15 males, 81 females; average age 39.31) with either IBS ($n = 26$) or IBD ($n = 70$) completed an online questionnaire. Initial multivariate analysis indicated individuals with IBS reported significantly higher levels of anxiety and depression. Consistent with the CSM, illness activity and illness perceptions were inversely related to anxiety, depression and sexual satisfaction. Maladaptive coping was associated with increased anxiety and depression, while adaptive coping was associated with reduced anxiety and depression. Higher sexual satisfaction was associated with reduced anxiety and depression. A review of the impact of chronic illness of the gastrointestinal system on individual psychological well-being is discussed.

Paper 4: Inflammatory Bowel Disease and psychological interventions: Lessons from the past and visions for the future

S. Knowles (Swinburne University of Technology)

Research indicates that Inflammatory Bowel Disease (IBD) is associated with significant psychological distress and reduced quality of life (QoL). The primary aim of this review was to evaluate the efficacy of psychological interventions (PIs) in reducing psychological distress and improving QoL in individuals with IBD. A secondary aim of this research was to identify those beneficial components of IBD-focused PIs which could be utilised in an online IBD-focused PI for individuals with IBD. All PIs reviewed had at least one component of psychological therapy and levels of disease severity, anxiety, depression, and/or QoL were assessed. Review of the published PIs suggests that a targeted IBD-focused PI can attenuate psychological distress and/or improve QoL. No evidence for the impact of PIs on disease status was identified. Development of the Swinburne online IBD psychological service in relation to previous PIs will be outlined and discussed.



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Primary Care Psychology: Early intervention and prevention for common mental and comorbid disorders - an update

Robyn Vines (Monash University)

Primary Care Psychology is still a relatively new development in Australia and elsewhere and involves appropriately trained psychologists working collaboratively with general practitioners in the primary care setting. Primary mental health care by psychologists in general practice requires different models of early intervention and care than those traditionally used by privately practicing psychologists in separate facilities, or those working in the hospital or community health sector. The Symposium will provide four short papers focused on: models of care and how to maximise best practice; implementation of evidence-based outcomes for those suffering from high prevalence common mental disorders and chronic disease in our communities; how current treatment models need to adapt to facilitate collaborative, shared care between the professions; and how to enhance post-graduate training models to ensure that specialist psychologists and GPs are adequately equipped to work effectively together in the primary care setting. The Symposium will provide an international perspective and update, comparing Australia, USA, Canada, Norway and the UK, and will highlight and describe progress in primary care mental health care in each of these countries. It will also look at issues such as rural vs metropolitan distribution of services, how to recruit appropriately trained practitioners to rural areas, thereby counteracting current inequities, and what latest statistics are telling us about Better Access and Better Outcomes funding streams and whether such goals are being met. Cross-disciplinary models of care are currently, and will be progressively required under new funding streams. This symposium focuses on the need for clinical/primary care psychology as a profession to engage with new models of care and new policy and funding initiatives to maximize engagement of our profession in positive outcomes for our community.

Paper 1: Primary Care Psychology: Overview and update

Robyn Vines (Monash University)

Primary Care Psychology - the provision of collaborative mental health care in the general practice setting - is still evolving in Australia. The paper will provide a description of what is involved in primary

care psychologists providing mental health interventions “in situ”, why it is a desirable development, and what further can be done to facilitate this team-based approach to early intervention for common mental disorders in the community. An update on progress under the Better Access scheme, evaluating how widespread true collaborative team-based care and co-location has become, will be provided. A comparative International Report Card will also be provided on Norway, the USA, the UK and Canada, to assess how recent attempts to change primary mental health care service delivery to enhance co-located care are progressing. Further issues outlined in the over-arching description of the Symposium will also be canvassed.

Paper 2: Primary Care Psychology: Untapped Potential – A Scottish Example

Tim Carey(Flinders University)

Primary care has been recognized as key to health service delivery by the World Health Organization. Typically, “primary care” has involved GPs and nurses; however, psychologists can also make significant contributions to the delivery of primary health care services. The benefits of co-locating psychological services within GP practices are well documented. However, changes to current models of practice and revision of some aspects of training are needed to ensure this is done optimally. Data will be presented regarding a sustained program of primary care psychological service conducted in the National Health Service in Scotland between 2002 and 2007. A number of evaluations were conducted with positive results. GPs were unanimously in favor of the service and regarded the increase in communication enabled by co-location as important in the continuity of care for patients. In one practice a reduction in the prescription of anti-depressant medications was observed. Patients also regarded the program favourably and appreciated being able to book appointments at short notice when needed. Dramatic reductions in waiting times were recorded, as well as an increase in service capacity. Outcome data were collected at every session so that treatment decisions could be made in relation to patient progress and response to treatment, and brief notes were recorded in the patient's medical records so that GPs were aware of the patient progress. Despite patients having unlimited access to the service (in terms of the number of appointments they could attend), the average number of sessions was between 4 and 6. The attendance pattern data have implications for initiatives that involve a capping of sessions, such as the Better Access Medicare program. The program was highly successful and sustainable. This way of working is especially relevant to rural and remote contexts and the scope of the psychological work could easily be expanded to include supporting the treatment of people with chronic health conditions as well as health promotion initiatives. Primary care has been largely neglected by psychologists but presents a golden opportunity for psychologists to work in collaborative and multidisciplinary ways to provide valuable contributions to the improvement of primary health care.

Paper 3: Getting primary care psychology to the bush: innovative delivery of best practice psychological services

Louise Roufeil (Kristine Battye Consulting Pty Ltd)

The aim of this presentation is to provide an overview of the innovative ways that primary care psychological services are being delivered in rural and remote Australia where the tyranny of distance mitigates against the delivery of the traditional model of care (i.e. regular face to face delivery of services by a psychologist to a client in an office setting). The presentation will include exemplars of best practice from across Australia including the Royal Flying Doctor Service, the North West Queensland Allied Health Service and the Social and Emotional Wellbeing Service in Far West NSW. The paper will outline how these services operate, the types of issues confronted by psychologists in delivering services in rural and remote regions, and how these issues have been overcome.

Paper 4: A model of early intervention for adolescents: Collaborative mental care involving GPs, Clinical Psychologists and other health professionals

Chris Wigg and Simon Canny

Early intervention for young people has become a priority as evidence for its effectiveness has emerged (McGorry and Jackson 1999; Harrington and Clarke, 1998). There is also increasing evidence to show that early case identification and intensive treatment of first episodes of illness constitute a core preventive strategy with an excellent chance of reducing prevalence, cost and morbidity. Anxiety and depression are the most common mental health problems for people aged 12–17 years. However, Sawyer et al (2000) found that only 25% of young people with significant mental health problems attended a service provider, with merely 8% reaching a child and adolescent mental health service. In response to the level of adolescent mental health problems and the low proportion of young people accessing mental health services, collaborative primary health resources have developed an early intervention service that uses multiple eyes to identify 'cases', is well accepted by young people and their families, and clinically effective. Doctor on Campus Services (DOCS) is a private / public partnership based within a rural high school in South Australia, and has been working effectively for the past 6-years. DOCS involves school counsellors, a medical practitioner, a clinical psychologist, a mental health social worker, and some energetic Student Services support, providing a service on-site to maintain school attendance and supports, and at no cost to the student.



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Psychological problems and psychosocial development in university students

Miles Bore (University of Newcastle)

The research reported in this symposium builds on an earlier study in which 30% of first year psychology and medicine students were found to have a psychiatric symptom profile equal to or worse than the norms for psychiatric inpatients. The first presentation of the symposium reports on research that replicates that finding, examines the personality correlates of mental health and qualitatively explores the interviews of a small number of high scorers. The second presentation reports on personality disorder symptoms in 1st year psychology student and the finding of prevalence rates significantly higher than found in the general population. The Big 5 model of personality was found to be a significant predictor of a number of personality disorders and has implications for the revisions proposed for DSM-V. The third paper examines eating disorder symptoms in a sample of 407 first year psychology students again finding prevalence to be significantly greater than expected. The role of mindfulness and the influence of several correlates of eating disorder symptoms are explored. In the fourth and final presentation the findings from a longitudinal study of law student mental health are described in which, again, some 30% of participants produced significantly high poor mental health scores. This final presentation then discusses possible reasons for the high prevalence of poor psychological health in university students found across the research reported here. A psychosocial developmental explanation is proposed which, together with the findings reported in the symposium, has significant implications for educators, clinicians, families, and particularly for each student as a developing individual.

Paper 1: The mental health and illness of medicine and psychology students

Suzanne Stevens and Miles Bore (University of Newcastle)

There is increasing recognition of the psychological distress experienced by doctors, medical students and other tertiary students. The aim of this study was to determine if psychological distress is being accurately measured in medicine and psychology students as well as exploring the role of personality factors and subjective well-being. Previous researchers have used the Brief Symptom Inventory (BSI) to screen for psychological distress and found that approximately 30% of students score in the same range as psychiatric inpatients. However, the BSI has not been validated for use with medical and psychology students. In Study 1, 172 medicine students and 122 psychology students completed the BSI as well as the General Health Questionnaire (GHQ), the Big Five Aspect Scale (BFAS) personality measure and a measure of subjective well-being. In Study 2 six students who scored in the psychiatric inpatient range on the BSI were interviewed in order to determine if they are as unwell as their results indicate. The high rates of psychological distress, as measured by the BSI, were replicated in this study. The interviews, as well as comparison of the scores with the General Health Questionnaire (GHQ) provided validation for the BSI as measuring psychological distress; however students appear to fall into two categories, those with clinical disorders and those experiencing situational distress. There was a significant relationship between psychological distress and measures of student's subjective account of their well-being. There was also a relationship between personality factors and both psychological distress and subjective well-being. The results demonstrate that exploring personality factors at a more specific level may account for inconsistencies in previous research in this area and provides more detailed and valuable information on how personality relates to psychological health. The results are discussed in terms of past research and in relation to implications for future directions.

Paper 2: Normal within themselves: Axis II symptoms in first year psychology students

Peta Apostolatos and Miles Bore (University of Newcastle)

This project aimed to determine how personality disorders are represented in first year psychology students. Four hundred and twenty students (84 males, 335 females, 1 unknown) with a mean age of 22.3 years participated. Students were recruited via the university online research administration program, which directed them to an electronic survey. The survey included the International Personality Disorder Examination Questionnaire (IPDEQ; Loranger, Janca & Sartorius, 1997); Neuroticism, Extraversion, and Openness Personality Inventory (NEO PI-R; Costa & McCrae, 1992); Narcissism, Aloofness, Confidence and Empathy (NACE; Munro, 1999); Self Assessment Inventory (SAI; Munro, Bore & Powis, 2008); Ego Identity Process Questionnaire (EIPQ; Balistreri, Busch-Rossnagel & Geisinger, 1995); and the State Adult Attachment Measure (SAAM; Gillath, Hart, Nofle & Stockdale, 2009). Consistent with the literature, the student population demonstrated a higher prevalence of psychiatric symptoms compared to the normal population. Collectively, participants identified most strongly with an odd or eccentric cluster of traits. This finding fits the turbulence of the "who am I?" exploration period of emerging adulthood and also applies to mature-age individuals experiencing career or relationship crises. The finding also raises implications for university counsellors and mental health

professionals to assess and treat individuals failing the screen for 'psychosis risk syndrome' (American Psychiatric Association, 2010).

Paper 3: The relationship between eating disorder symptoms and mindfulness and their influence on body image, identity, personality and quality of life in psychology students

Emma Prowse, Miles Bore (University of Newcastle) and S. Dyer (Centre for Psychotherapy, Hunter New England Health)

There has been increasing interest in the use of mindfulness and acceptance based therapies in treating various disorders and conditions. However, evidence to support the application of mindfulness-based treatments for eating disorders is limited. The theoretical underpinnings of mindfulness based approaches focus on underlying issues rather than eating behaviour itself. As a consequence, the current study was designed to investigate the relationship between mindfulness and eating disordered symptoms to inform treatment. Additionally, underlying factors including body image, self control, sense of self, identity, negative affect and distress, personality and quality of life, were also investigated in order to increase understanding about eating disorders and the interaction of these factors with the individuals' capacity to be mindful. The EDE-Q, Kentucky Mindfulness Inventory, the Body Image Acceptance and Action Questionnaire, the Ego Identity Processes Questionnaire, Sense of Self Inventory and Mini-IPIP were administered online to first year psychology students at the University of Newcastle (N=407). Preliminary results from the student population indicate a strong negative relationship between eating disorder symptoms and acceptance of body image. Observing alone as a mindfulness skill was linked to higher reported eating disorder symptoms, however, the mindfulness skills acceptance without judgment and action with awareness were related to lower eating disorder symptoms. These findings are consistent with theory that certain aspects of Mindfulness (e.g. Acceptance without judgment and action with awareness) play a role in reducing distress and dysfunctional beliefs, providing some support for a possible role of mindfulness based interventions in treating eating disorders.

Paper 4: Why are they not flourishing: late adolescence, emerging adulthood or excessive demands and uncertainty?

Miles Bore, Peta Apostolatos, Emma Prowse, S. Stevens and C. James (University of Newcastle)

The research presented in the first three papers of this symposium showed that university students were found to have significantly higher rates of psychological disorder symptoms compared to adult norms. Scores from the Brief Symptom Inventory and other measures of well-being collected from Law students will be presented which also demonstrate higher rates of poor mental health compared to adult norms. This presentation will then go onto explore the possible reasons for these high scores, such as: response biases or other possible psychometric artefacts; possible specific stressors within the educative context, and/or; the data as evidence supporting the recently proposed new developmental stage of 'Emerging Adulthood' as championed by Arnett. Yet another possibility is that forces outside the individual have extended the developmental period of adolescence and made more onerous the task of this 5th psychosocial stage proposed by Ericson: that of identity formation. The findings of our

research reported at this symposium and the conclusions we draw from it have implications for educators, clinicians, families, for the broader society and particularly for each student as a developing individual.



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Psychologists for Peace: APS interest group promoting peace research by psychology students

Anthony Thompson (Charles Sturt University)

The Psychologists for Peace interest group of the Australian Psychological Society has been promoting peace and peace research for over 20 years. One longstanding initiative has been the Peace Research Award for psychology students conducting a research project. The award is open to fourth year and coursework Masters' students whose thesis relates to 1) the peaceful resolution of conflict or 2) understanding and preventing aggressive behaviour or 3) the fostering of harmonious relationships whether at global, intergroup or interpersonal levels. This symposium showcases both the variety and caliber of fourth year research that is being submitted for the award. The first two presentations concern analogue investigations into the psychological mechanisms that may facilitate self-control of aggressive impulses. Through carefully crafted experimental designs these two studies explore, test and expand the strength model of self control. The first study focuses on the ability to override aggressive impulses. The research question is whether self control training that is not specifically designed for dealing with aggression will nevertheless confer self-control benefits when an individual is provoked. This and related hypotheses were tested in an experimental procedure with university students. The second presentation is also concerned with control of aggressive impulses. The study builds on a previous research finding that glucose aided self control for individuals high in trait aggression. Those findings were extended in the current research to implicate working memory capacity as a key underlying mechanism. The third research project was an evaluation study of a brief, entry level parenting program designed to promote children's harmonious interaction. In this study, staff at two child care centres rated behaviours of participant children to see whether there was evidence of positive change in the non-home setting. The final presentation is concerned with ethnocentrism and prejudice. In that study, university student responses to a questionnaire were used to explore the way ethnocentrism is defined and measured. In the second phase of the research, hypothetical scenarios were used to see whether aspects of ethnocentrism and prejudice intensify when there are threats to an in-group from external sources.

Paper 1: Self-control training decreases aggression in response to provocation in aggressive individuals

Miriam Capper (University of New South Wales)

Exerting self-control allows behaviour to be modified or restrained when it does not benefit an individual's goal-attainment or long-term well-being. As such, individuals are able to override undesirable impulses. According to the strength model, self-control is like a muscle that fatigues through use and gains strength through regular exercise. As all acts of self-control are thought to rely on a common personal resource, regularly performing a task that utilises self-control should also improve control of unrelated tasks. Self-control failure is a common cause of aggression. Thus, the present research examined whether self-control training (SCT) would reduce aggressive responding to provocation. After initial personality testing, seventy undergraduate students completed two weeks of SCT or a control task. In the training condition, participants practiced self-control by using their non-dominant hand in everyday tasks such as brushing their teeth and opening doors. Progress was tracked through online diaries. In the second stage of the procedure, participants were told that they would give a short speech about themselves as part of a videoconference, ostensibly with another participant. The other participant was a pre-recorded actor whose responses were carefully timed to give the illusion of a live conference. After the speech, participants provided feedback to their partner. In return, they received standardised insulting feedback which served as a provocation. Next, under the guise of a reaction time game, participants had the opportunity to retaliate against their provocateur by administering a blast of white noise. Analyses indicated that SCT reduced aggression among those high in trait aggression to a level comparable to those low in trait aggression. On the other hand, SCT did not affect aggressive responding for individuals low in trait aggression. Participants who received SCT also reported less anger than those in the control condition. These results provide additional support for the strength model of self control. The findings also suggest the potential benefits of self-control training particularly as an intervention for assisting aggressive individuals.

Paper 2: Glucose consumption reduces reliance on impulsive determinants of aggressive behaviour for individuals low in working memory capacity

Alira Garradd and T. Denson (University of New South Wales)

Failure of self-control is a common cause of aggression. According to the strength model, acts of self-control rely on a common personal resource which when exerted becomes temporarily depleted and impairs further attempts at self-control. This depletion can be replenished over time, or alternatively through supplementation from another energy source such as glucose. Research has shown that when participants were insulted, consuming glucose replenished self-control resources, thereby increasing the ability to override aggressive impulses. The relationship between glucose consumption and self-control performance may operate through working memory capacity (WMC) which plays a role in enacting controlled behaviour and overriding automatic impulses. Previous research has identified WMC as a key moderator in aggression. Individuals low in WMC are more likely than individuals high in WMC to rely on their implicit (automatic) impulses when provoked. The present research investigated these

psychological mechanisms that may underlie the regulation of aggressive impulses. In particular, the focus was on the effects of glucose, automatic impulses (such as implicit anger) and WMC on aggressive behaviour. After completing initial measures of personality, WMC, and implicit anger, 83 participants were administered either 50 grams of glucose or a placebo. Participants were then provoked and given the opportunity to aggress against the provocateur by delivering a blast of white noise. Analyses indicated that relative to the placebo, glucose decreased aggression for those low in WMC and high in implicit anger. Implicit anger did not influence aggressive behaviour for those high in WMC, regardless of whether they had consumed glucose or placebo. These findings support the notion that both WMC and implicit anger play a role in determining the effects of glucose on aggression. In addition to providing support for the strength model of self-control, the findings suggest that WMC is an underlying mechanism. The findings also have implications for reducing aggressive behaviour.

Paper 3: The 1-2-3 Magic Program: Can brief parent training improve child behaviour at childcare?

Lauren Roche, E. Bailey and A. Brooks (Southern Cross University)

Positive parenting in the preschool years has been shown to predict both short- and long-term child behaviour outcomes. Parenting programs consisting of psycho-educational sessions and/or adjunctive therapies are available to assist parents of children who display behavior problems. Longer-delivery parenting programs are typically efficacious but also resource expensive and may discourage participation due to length of commitment. Thus, brief parenting programs may be desirable if they yield positive outcomes and especially if child behaviour changes generalise across settings. The aim of this study was to evaluate a popular brief parenting program called 1-2-3 Magic and to determine whether any child behaviour improvements generalised from the home to childcare settings. Participants were 21 preschool-aged children (11 boys, 10 girls; $M = 3.52$ years) and their parents (20 female, 1 male; $M = 30.05$ years). Parents attended two, 3-hour group sessions for instruction into the philosophy and application of 1-2-3 Magic before implementing the program at home. Training and program implementation were delayed by two months for seven of the 21 families who became the wait-list control group. Six child-care providers (5 female, 1 male) from two regional child-care centres evaluated the frequency and nature of target disruptive behaviours of participating children using the Sutter-Eyberg Student Behavior Inventory – Revised. These ratings were obtained prior to program implementation, then again two- and four-months following implementation. In contrast to predictions, the frequency of problem behaviours did not systematically decline at either post-treatment interval. However, systematic reductions in those behaviours initially considered to be problematic by child-care providers were observed at the longer interval. The findings suggest that improvements in child behaviour associated with a brief parenting program may generalise to a degree to out of home contexts. The present findings were evident for a non-clinical sample and indicate that relatively well-behaved children can benefit from brief parenting interventions. The potential for improving harmonious peer relationships in early childhood and directions for future research will be discussed.

Paper 4: The differential impact of ethnic threat and ecological threat on ethnocentrism and prejudice

T. Howle and B. Bizumic (Australian National University)

The world is populated by an abundant variety of ethnic and cultural groups. In various places, a number of these groups are constantly interacting. Many of these interactions are peaceful but others are characterized by ethnocentrism and prejudice. The current study aimed to: 1) explore the conceptualisation and psychometric measurement of ethnocentrism and 2) explore the relationship between social threat, ethnocentrism and prejudicial attitudes. The first aim was pursued using the responses of 168 university students to a recently developed ethnocentrism scale (Bizumic, Duckitt, Popadic, Dru & Krauss, 2009). Confirmatory Factor Analysis supported the view that two higher order dimension (intergroup ethnocentrism, intragroup ethnocentrism) and their related subscales could be used to conceptualise and measure ethnocentrism. The second aim was pursued using an analogue experimental design to determine if threats in the social environment influence ethnocentrism and prejudice. The participants consisted of 146 white Australian undergraduate students who were a subset of those completing the ethnocentrism scale. Participants were randomly allocated to one of three hypothetical threat conditions: a) ethnic out-group threat, b) ecological threat, or c) a non-threatening secure condition. Predictions related to the influence of the threat on ethnocentrism and prejudice were formulated. Prejudice was measured using a feeling thermometer scale on which participants indicated their feelings toward different ethnic groups. Results showed that ethnic out-group threat increased subscales of intergroup ethnocentrism referred to as ethnic group preference, purity and exploitativeness. It also increased prejudice towards the source of the ethnic out-group threat, but not towards other ethnic outgroups. The ecological threat manipulation increased one subscale of intragroup ethnocentrism referred to as ethnic group cohesion. It did not increase feelings of prejudice. These findings supported some of the hypotheses about the differential impact of various social threats on ethnocentrism and prejudice. The applied and research implications for social threat, ethnocentrism and prejudice are discussed.



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Psychosocial interventions in oncology

Vikki Knott (University of Canberra)

This symposium aims to provide psychologists with an overview of issues affecting the provision of and access to quality psychosocial support for people affected by cancer. A theme focussed on increasing access to support and addressing the needs of the underserved will underpin the symposium. Dr Vikki Knott (University of Canberra) will provide an overview of evidence underpinning the need for intervention; a summary of existing best-practice guidelines for the provision of support; and, an example of recent research identifying factors linked with a lack of referral. Ms Kate Gunn (University of Adelaide) will present research conducted in SA and will highlight the key issues associated with access to psychosocial care from the perspective of rural cancer patients. Subsequent presentations focus on providing examples of novel approaches to the delivery of psychosocial interventions. Dr Kerry Sherman (Macquarie University and Westmead Breast Cancer Institute) will present details of an online interactive decision-support tool designed for women who are faced with the decision of whether or not to consider breast reconstructive surgery. Ms Chisholm (Deakin University) will present details of an online program developed to address the complex needs of men diagnosed with prostate cancer. Professor Suzanne Chambers (Griffith University), will conclude the symposium with a presentation focussed on novel approaches to increase access to supportive care. Professor Chambers will present early data from a randomised controlled trial (n=560) conducted across NSW and QLD. In summary, this symposium comprises innovative and applied research conducted across Australia. Psychologists and other health professionals will find the symposium informative although it may challenge traditional conceptualisations of what constitutes 'effective psychological intervention' in the oncology setting.

Paper 1: Background: Psychosocial interventions in oncology

Vikki Knott (University of Canberra)

Internationally, proposals for the routine assessment of 'distress' (i.e., the 6th vital sign in cancer care) have led to an improved focus on the assessment of psychosocial support needs of people affected by cancer. In Australia, recognition of the supportive needs of cancer patients - along with evidence based recommendations for appropriate intervention - was highlighted first in guidelines developed for

women with breast cancer (NBCC, 2000). These were later expanded to all Adult cancers in: Clinical practice guidelines for the psychosocial care of adults with cancer (NBCC & NCCI, 2003). Despite significant promotion of these guidelines, referral for appropriate intervention remains inadequate. Access to appropriate services is particularly problematic for males and members of underserved populations such as Aboriginal and Torres Strait Islanders, and the culturally and linguistically diverse. The aim of this presentation is to provide the background underpinning the need for intervention and will include: a summary of the recommendations of the clinical practice guidelines for the provision of supportive care, an overview of the levels-of-evidence approach to the review of interventions, and, a summary of recent research aimed at identifying factors linked with a lack of referral to appropriate support services. The delivery of quality psychosocial support for people affected by cancer is complex and requires consideration of a range of support needs. Thus, interventions need to be designed to respond to the complexity of peoples' needs and must be delivered in innovative ways to improve access.

Paper 2: Psychosocial service use: A qualitative exploration from the perspective of rural cancer patients

Kate Gunn, Deborah Turnbull (University of Adelaide), Ian Olver (Cancer Council, Australia), Lindsay McWha and Matthew Davies (University of Adelaide)

People living in rural and remote Australia experience significantly poorer outcomes from cancer both in terms of mortality and psychosocial care. The objective of this study was to identify key issues associated with the provision of psychosocial care from the perspective of rural cancer patients and to determine socially and culturally appropriate methods to reduce barriers to service use. Seventeen purposely sampled adult South Australians who lived outside metropolitan Adelaide and had been given a diagnosis of cancer, participated in semi-structured, face-to-face interviews. A range of socio-demographic and medical backgrounds were represented in the sample. Participants also completed a demographic questionnaire along with a range of validated instruments to assess for distress and quality of life. Five key themes were identified; (1) psychosocial support services are highly valued by those who have used them, (2) having access to both lay and professional psychosocial support is vitally important, (3) multiple barriers make accessing psychosocial services difficult (including lack of information, initial beliefs that they are unnecessary, feeling overwhelmed and unable to ask questions about services, and concerns about stigma, dual relationships and confidentiality), (4) there is a need for increased awareness of the unique needs of rural patients among staff located in metropolitan treatment centres and (5) a need for better access to psychosocial services for patients following their return home after treatment. The results of this study suggest that comprehensive, targeted and locally-relevant information regarding psychosocial services needs to be systematically delivered to all rural cancer at the time of their diagnosis.

Paper 3: Facilitating decision making among women with breast cancer: Development and piloting an interactive decision support tool

Kerry Sherman (Macquarie University and Westmead Breast Cancer Institute), Diana Harcourt (University of the West of England), Thomas Lam (Westmead Breast Cancer Institute) and John Boyages (Westmead Breast Cancer Institute)

Each year more than 5000 Australian women face the dilemma as to whether, and how, to restore a breast shape after mastectomy for breast cancer prophylaxis or following breast cancer diagnosis. Choosing whether or not to undergo breast reconstructive surgery is challenging and involves consideration of complex information at a time when many women are experiencing psychological distress. We have developed a theoretically-based, interactive computer-based decision aid to facilitate this choice. The aim of this study was to obtain initial user feedback and evaluation of the decision aid. Participants were 10 women recently diagnosed with breast cancer who were randomized to receive the decision support tool in a larger evaluation trial. Using mixed methods, the women initially rated the decision aid on Likert scales and then provided detailed feedback during individual telephone interviews. Qualitative data were subjected to a thematic analysis. Likert scale ratings (5 = high; 1 = low) showed the intervention was considered very useful (mean 4.05), easy to use (mean 4.63), and provided sufficient relevant information (mean 3.95). The overall satisfaction rating was high (mean 3.89). All participants gave very positive feedback on its potential use and noted that it provided a good depth of balanced information. Patient videotaped interviews and photos were regarded as particularly beneficial. The possibility of being overwhelmed by the information was seen as a limitation, with careful consideration of the most appropriate timing to provide access to the decision support tool needed. The range of participants' responses illustrate the complexity of meeting individuals' information and support needs during decision making. These qualitative data indicate that the decision support intervention has been well-received by patients and is likely to usefully support decision making. The findings of this study provide preliminary confirmation of the potential benefits from this interactive resource and will complement the data derived from the larger randomized trial.

Paper 4: The development of an online psychological intervention for men with prostate cancer

Katherine Chisholm and Marita McCabe (Deakin University), Addie Wooten (Melbourne Health) and Jo Abbott (Swinburne University)

This study aims to describe the development of an online psychological intervention for men with prostate cancer. Men with prostate cancer are not routinely offered psychosocial support despite strong evidence that being diagnosed with prostate cancer poses significant quality of life concerns for men and their partners. Sexual dysfunction poses a particular threat to a man's psychological functioning as well as relationship functioning. Even though the need for psychosocial interventions for men with prostate cancer and their partners is evident, treatments designed to target the complexity of needs experienced by survivors have only begun in the last 10 years. There are very few studies adequately addressing the psychological, physical (including sexual), and relationship difficulties men and partner's face post-treatment. Lack of psychosocial support is in part due to lack of available resources and this

project aims to develop and evaluate a structured, self-directed psychological support intervention that is accessible and appealing over the internet. This presentation will cover Phase 1 of the project – development of the online program and pilot testing. The program (Reconnect) will provide a 6-module self directed online psychological intervention. The program draws on strategies from CBT, sex therapy, and mindfulness, with each module including a range of information (videos, audio, written text and animated diagrams) as well as interactive tasks and tasks to complete between sessions. Module 1: Understanding how prostate cancer can impact on your life and your emotions, Module 2: Tools for effective communication and helpful thinking, Module 3: Coping with physical changes, Module 4: Sexuality and masculinity, Module 5: Sexuality and intimacy and Module 6: Living with uncertainty and planning for the future. The program will be targeted at both single and partnered men with separate information for the partners and exercises for them to participate in. This program will be implemented via the internet and be used to assist men with prostate cancer better handle their emotional response to prostate cancer and it will be evaluated using a RCT. The results of this study will indicate which aspects of psychological, sexual and relationship functioning improve as a result of the internet program.

Paper 5: Low intensity psychological interventions for patients and their carers

Suzanne Chambers (Griffith University)

Low intensity psychological interventions are part of a new values-based paradigm of care that has as its guiding principle improving access. This presentation aims to provide a discussion of the six key attributes underpinning such an approach complemented by presentation of data from a current RCT being run across QLD and NSW. Low intensity psychological care supports the aim of offering on a community-wide basis the minimum amount of intervention needed to produce the maximum amount of effect. This meets the objectives of increasing access, ensuring services are flexible and responsive to need, being patient centred, as well as cost effective. Six key attributes are proposed to drive this approach: 1) remote delivery to address geographical and health status barriers to care; 2) cultural and cohort relevance to address attitudinal barriers to access; 3) cancer specific relevance to ensure services resonate with the person/family's specific cancer experience; 4) infrastructure compatibility so that once proven effective interventions can be easily integrated into existing community infrastructure; 5) a stepped or tiered care model; 6) and evidence-based. Data (n=560) from an ongoing multi-state (QLD and NSW) RCT for high distress cancer patients and carers that utilises screening for distress in community-based cancer helplines and then compares two tele-based interventions (e.g., a psychologist delivered five session cognitive therapy intervention vs. a single session nurse delivered self-management approach) will be presented.



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Research into interpersonal and intergroup forgiveness

Anthony Thompson (Charles Sturt University) and Eleanor Wertheim (La Trobe University)

An important element of peace psychology is to develop theories and interventions to assist individuals and groups to repair relationships after hurtful actions, injustices and transgressions. The process of forgiveness has gained increasing attention as a method for assisting aggrieved individuals or groups to deal with past grievances in a way that can assist them in setting aside hurtful past experiences and moving forward. Forgiveness involves a shift away from negative thoughts, feelings and actions, such as avoidance or revenge, and towards more positive or benevolent thoughts, feelings and possibly actions. Forgiveness is generally distinguished from reconciliation which involves a two-party process in which the parties mutually work towards a resumed relationship. However, forgiveness can set a context allowing reconciliation to more readily take place. This symposium showcases four studies which explore factors involved in the process of forgiveness with examples ranging from the individual to the inter-group levels. The first paper addresses both forgiveness and unforgiveness. The interesting possibility that both types of expression may have psychological benefits to an injured party was tested in an experimental paradigm. The research tested the hypothesis that psychological consequences of forgiveness versus unforgiveness may depend on whether they are addressed to the offender or a third party. The second paper similarly addresses the issue of context in injured parties' forgiveness to others. Specifically, perceptions or beliefs that forgiving an offender might imply condoning the offence are examined. The aim was to determine dispositional and context-dependent factors that lead to concerns about condoning an offence, and whether such concerns inhibit forgiveness. The third presentation addresses forgiveness processes for individuals who have experienced severe transgressions in the past. A sample of migrants to Australia, including refugees from countries in which injustice was experienced, were surveyed about their experiences of injustice, disposition to forgive and coping styles. The relationship between those variables and current psychological well being are examined. The final paper explores a theoretical model of forgiveness and reconciliation in the context of the aftermath of the war in Sri Lanka. This field research examined factors that predict self-reported willingness to forgive.

Paper 1: Are there psychological benefits for expressing forgiveness and unforgiveness depending on the addressee?

Anne-Marie Coughlin and M. Wenzel (Flinders University)

Interpersonal offences are common, even daily, occurrences and are embedded within the social fabric of life. However, they can have enormous personal and interpersonal costs if left unchecked. Victims of such offences can be left harbouring feelings of anger, resentment and a desire to seek revenge. Forgiveness is one mechanism that can overcome these negative consequences by providing psychological benefits to the victim. It has been found that expressing forgiveness to a perpetrator satisfies certain psychological concerns experienced by victims. However, there are situations in which the perpetrator is not available and victims may turn to others to express their hurt and find support and validation. This analogue study investigated whether expressions of forgiveness and unforgiveness have equivalent benefits for a victim depending on whether the addressee is the perpetrator or a third person. Participants in this study were 123 university students who read a scenario and imagined themselves as victims. In the 2 (addressee) by 3 (expression) between-subjects design, participants were instructed to write to: a) an offender or b) a third-party expressions of either: a) forgiveness, b) unforgiveness or c) no expression. The dependent variables were ratings of the victim's perceived status/power vis-à-vis the offender, value consensus with the offender or third-party, and state self-esteem. It was predicted that the expression of forgiveness would have benefits when directed to the offender but the expression of unforgiveness would have benefits when communicated with a third party. The data did not support the hypotheses but showed that forgiveness relative to unforgiveness increased perceptions of status/power. Perceptions of status and power were positively related to state self-esteem. An important and novel theoretical idea that emerged from the research is that under certain circumstances unforgiveness may be part of the forgiveness process. Initial unforgiving expressions to a third party may have psychological benefits for the victim that may facilitate subsequent forgiveness of the victim.

Paper 2: Believing that forgiveness implies condoning an offender's actions: A measure of condoning beliefs and factors associated with those beliefs

Eleanor Wertheim, L. Blatt, and M. Donnoli (La Trobe University)

Forgiveness researchers and theorists often distinguish between constructs of forgiving versus condoning an offence. This distinction is considered important because injured parties who believe that forgiving means communicating acceptability of harm done would theoretically be less likely to forgive. Nonetheless, there is minimal research into condoning beliefs. The current research aimed to develop a measure of the belief that forgiving a specific offence would imply condoning it. We also examined: (1) how often community members link forgiveness with condoning the offending behaviour, (2) which dispositional and situational factors predict condoning beliefs, and (3) whether condoning beliefs predict unforgiveness of a specific offence after accounting for dispositional and situational factors previously shown to predict forgiveness. In Study 1, 415 adults (326 female, 98 male) from a university volunteer registry sample (n = 214) and social network community sample (n = 201) completed an on-line

questionnaire. They first completed measures of dispositional trust, agreeableness, neuroticism, and social desirability. Next, they described a specific hurtful transgression and completed measures of forgiveness of that transgression, trust of the offender, expected re-offending and items assessing belief that forgiving the offender would imply condoning the offence. Approximately one third of participants agreed that forgiving the offence would be condoning it. Regression analyses indicated those higher in neuroticism, lower in dispositional trust, distrusting the specific offender and expecting the offence to be repeated agreed more that forgiving would imply condoning the offence. The strongest predictors of forgiveness were greater general trust of the specific offender and lower condoning beliefs. A third sample comprised 58 participants in a wellness program (with a forgiveness component) run for individuals with cancer and their support persons. They completed a similar, shorter questionnaire pre- and post-program. Frequencies of condoning beliefs were similar to the other samples. Condoning beliefs at post program predicted forgiveness after controlling for pre-program condoning beliefs and forgiveness. Implications for theory and practice are described including making distinctions between forgiveness, reconciliation and condoning in general and in therapeutic contexts. The importance of ensuring that the forgiveness process maintains the safety of injured parties is also addressed.

Paper 3: The relationship between forgiveness, justice beliefs, coping and the psychological wellbeing of individuals from refugee backgrounds

Dominca Dorning and Eleanor Wertheim (La Trobe University)

Research to date suggests that forgiveness may be related to wellbeing in refugees. However, results vary and studies have considered the role of situational, but not dispositional, forgiveness. In addition, an individual's propensity to forgive perpetrators may depend on that person being seen to be held accountable for wrongdoing. This has not been investigated for refugees. The current study aimed to determine whether forgiveness forms part of the coping strategies utilised by refugees, and if not, what the barriers to forgiveness are. The importance of beliefs about justice and emotional forgiveness as an emotion-focused coping style was also investigated. A sample of 85 adults from refugee and/or migrant backgrounds was recruited from the Victorian Co-operative for Children's Services for Ethnic Groups (VICSEG). Participants completed self-report questionnaires in small groups or at home. Measures assessed demographic information; symptoms of anxiety, depression, and anger; past experience of traumatic events; re-settlement difficulties; coping styles; disposition to forgive; disposition towards emotional forgiveness; and beliefs about when to forgive. Hierarchical regression analyses were conducted on a sample collected from this ongoing study. Emotion-focused and problem-focused coping processes, and forgiveness variables were entered as predictors of psychological wellbeing, after controlling for relevant demographics, post-migration stressors and previous justice experiences. Of specific importance was whether dispositions towards emotion-focused coping strategies and emotional forgiveness would predict better psychological wellbeing. Analyses of refugees' attitudes towards forgiveness processes and the extent to which justice beliefs are associated with willingness to forgive were also of interest. The results of the study are discussed in relation to better understanding the mental health difficulties experienced by refugees and the factors which may contribute to their recovery and improve their quality of life in Australia. Drawing on the experiences of individuals who

overcame past wrongdoing will help advance knowledge of forgiveness processes and suggest future research into assisting those affected by injustice.

Paper 4: Intergroup forgiveness after prolonged conflict in a Sri Lankan sample

Rishani Panawenagge and Eleanor Wertheim (La Trobe University)

Many post-conflict societies face the challenge of re-establishing mutual trust and promoting forgiveness especially when communities have been divided by long term conflict. In order to restore damaged relationships, it is important to understand the attitudes and feelings relating to forgiveness of those affected by the conflict. The aim of this study was to examine potential determinants of forgiveness in a community involved in prolonged conflict. Drawing on the Reconciliation Orientation Model (ROM) of intergroup forgiveness, this study examined relationships between forgiveness, competitive victimhood, in-group identification, trust and empathy. A further variable, common in-group identity was also explored. The study was conducted in post-war Sri Lanka. One hundred and three Sri Lankan participants aged 18-85 (M_{age} = 44.4) were recruited using the snowball approach. The sample consisted of 65 females and 37 males. Demographic information was collected along with a self-report questionnaire that assessed the key variables. The relationships among the variables were found to be largely in line with previous research. Hierarchical regression analysis and Sobel tests confirmed trust to mediate the relationship between competitive victimhood and forgiveness, consistent with the ROM. Higher levels of empathy were also found to be associated with intergroup forgiveness behaviour after accounting for the other predictors, consistent with the hypothesised model. The findings add important knowledge to the intergroup forgiveness literature. The findings are useful for policy makers and those involved in reconciliation work, not only in Sri Lanka but also in other communities involved in long term conflict. Theoretical implications and directions for future research are also discussed.



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Sexual function and dysfunction: Understanding complex relationships

Marita McCabe (Deakin University)

This paper reports on three papers that investigate three different aspects of human sexuality. The first paper examines the concept and factors associated with “friends-with-benefits” relationships. These relationships have probably always existed, but have become a focus of research in the last few years due to the later age of young adults getting married and having children. The pros and cons of these relationships, the functions they serve, the types of people who form them, as well as the way in which they progress is explored in a qualitative study of 30 Australian adults who have experienced at least one of these relationships. The second paper reports on an internet-based treatment program that has been developed for female sexual dysfunction. Our previous research has demonstrated the high level of overlap between different types of sexual dysfunction in women, and we developed and evaluated an internet-based treatment program (Revive). This study reports on a major re-vamp of this program (Pursuing Pleasure), which incorporates mindfulness therapy, on-line chat sessions as well as involving the partner more strongly in the treatment process. The utility of such a program for treating female sexual dysfunction is discussed. The final paper reports on a study of 400 sexually functional and dysfunctional men to determine the most appropriate model to use to describe their sexual response cycle: a circular model (with response at one phase enhancing or detracting from response at a different phase) or a linear model (with response being primarily centered on a particular phase of the sexual response cycle). The level of overlap between different sexual dysfunction provides data on the above models, as well as the testing of the fit of both models. Although both models are supported, the data indicate that, as for women, the circular model is a better representation of the data. In sum, these three papers examine quite different aspects of human sexuality and demonstrate the complexity of factors that feed into a satisfying sexual relationship.

Paper 1: “Friends-with-benefits” and “sex-buddies”: The constructs of emerging and young adult’s casual sex relationships

Kylie Stone and Marita McCabe (Deakin University)

With an increase in women pursuing educational and career opportunities and a subsequent delay in marriage and children, casual sex relationships appear to be more common and less taboo among young adults than they were in the past. Over the last decade, sex researchers in the US have been investigating these trends, and have introduced new relational terms, such as “hookups,” “booty calls” and “friends-with-benefits.” However limited qualitative data exist on such terms, and no known research has been conducted in Australia. This study involved anonymous qualitative telephone interviews with 30 Australian adults aged 18-37 who had experienced a friends-with-benefits relationship. Interviews focused on how participants defined a range of relationship terms, the rules, advantages and disadvantages of casual relationships, and participants’ most recent friends-with-benefits experience. Preliminary results revealed that friends-with-benefits relationships could be divided into “pure” friends-with-benefits (friends, who then develop a casual sex relationship) and “sex-buddy” relationships (two people who have a casual sex relationship with limited or no friendship). Contraception patterns across these relationship types tended to differ, with friends-with-benefits participants using the contraceptive pill, while sex-buddies more commonly used condoms. Both types of relationships were found to occur during participant’s teens, twenties and thirties, with men and women equally reporting that they enjoyed their relationship experiences. Motivations for engaging in these relationships varied widely, from experimentation through to companionship. Friends-with-benefits relationships generally appear to be relationships that occur across several life stages but are most common during emerging adulthood (18-25 years). These relationships provide a safe environment in which to gain sexual experience and serve a number of functions. These include increasing relationship and sexual skills, boosting self-esteem, and providing emotional and sexual comfort for people who may be on the rebound or between serious relationships. This presentation will be of particular benefit to psychologists who work with young adults or in the area of relationships.

Paper 2: Incorporating mindfulness into an internet-based intervention for female sexual dysfunctions

Alice Hucker and Marita McCabe (Deakin University)

Female sexual dysfunctions (FSDs) can have a negative impact on women’s lives and the lives of their partners. Because of the embarrassment and shame that can surround FSDs, it has been suggested that internet-based interventions can offer the anonymity needed to make women feel more comfortable undergoing treatment for their sexual difficulties. Recently, Jones and McCabe (2010) evaluated the effectiveness of an internet-based cognitive-behavioural therapy (CBT) program, called Revive, for women with mixed FSDs. While significant improvements in sexual desire, arousal, orgasm, satisfaction and pain were reported by women who completed the Revive program, various limitations were apparent. To extend past research and address the limitations of the Revive program, an online treatment program for mixed FSDs is currently being run through Deakin University – the PursuingPleasure program. Thirty-nine heterosexual women in stable relationships have completed a

pre-treatment questionnaire and are currently completing the PursuingPleasure program, and 36 women have completed the pre-treatment control questionnaire (partners have also completed questionnaires). The program includes 6 online modules which incorporate psychoeducation, communication exercises, sensate focus exercises, partner engagement and CBT exercises. PursuingPleasure also incorporates mindful-meditation, a recent and promising addition to the CBT approach for FSDs, as well as email contact and fortnightly online chat groups. Both groups of women and their partners will complete a post-treatment questionnaire and a 3-month follow-up questionnaire. A comparison of the treatment and control group at pre-test and post-test will be conducted using MANOVAs to investigate changes in sexual functioning and relationship variables. Maintenance of treatment gains at a 3-month follow-up will be explored using paired samples t-tests. Investigations of other variables (etiological factors, stages of change, sexual self-image) will be conducted using multiple regressions. By implementing a program that builds on previous research and evaluates a more comprehensive internet-based intervention for FSDs, it is anticipated that increased treatment gains and lower attrition rates will be observed than past programs of this format. This study will help to determine the efficacy of internet-based treatment options for FSDs and further elucidate the role of mindfulness and partner engagement in FSD interventions.

Paper 3: Male sexual dysfunction: Models of sexual response

Catherine Connaughton and Marita McCabe (Deakin University)

Male sexual response (and dysfunction) has been conceptualised within the traditional linear model (i.e., sexual desire followed by sexual arousal followed by orgasm). However, emerging literature has suggested that men may experience two or more sexual dysfunctions simultaneously, which is contrary to the linear model depicting sexual response as a progression through discrete, non-overlapping phases. The overlap of sexual dysfunction across response phases suggests that sexual problems in one area may influence the onset of problems in other sexual areas. However, the extent to which this overlap exists is unknown. A circular model of sexual response has been proposed for women consisting of overlapping phases of variable order. This study considered the applicability of the circular model to sexually functional and sexually dysfunctional men. Four hundred men aged 18-65 who were currently in a heterosexual relationship completed an online survey investigating the factors included in the proposed circular model. Links to the study were placed on numerous organisational websites and men's health websites across several countries. Analyses were conducted investigating the prevalence of men who reported two or more sexual dysfunctions simultaneously. In addition, structural equation modelling to test the applicability of the linear and circular models of sexual response to both sexually functional and dysfunctional men was completed. Preliminary analyses demonstrated support for a circular model of sexual response due to a large proportion of men reporting two or more sexual dysfunctions across response phases. The current study provides a better understanding of both functional and dysfunctional male sexuality. In particular, the findings have important implications for the formulation of appropriate clinical interventions for men with male sexual dysfunction. In particular, the results suggest that clinical interventions may need to target multiple sexual aspects of dysfunction if they are to be effective.



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Student research in psycho-oncology: Application of health psychology across the cancer pathway - from prevention through survivorship and palliative care

Vikki Knott (University of Canberra)

Dr Vikki Knott, Assistant Professor, Centre for Applied Psychology, University of Canberra, leads this symposium that highlights exceptional applied research completed as part of an Honour's or Master's degree in Psychology at the University of Adelaide or the University of Canberra from 2009-2011. Symposia comprise 5 presentations on applied research spanning the cancer trajectory from prevention/screening through survivorship and palliative care. Principles and theories in health psychology underpin these projects which incorporate either quantitative, qualitative or mixed methods. Samples include: adult patients and survivors with a variety of cancer diagnoses; oncology health professionals; parents of children with cancer, adolescents and young adults (AYAs); members of culturally and linguistically diverse (CALD) communities. AYAs and CALD groups continue to experience poorer outcomes following cancer and thus the results of the research are likely to have significant impact on the delivery of preventative strategies and the provision of psychosocial support services. Indeed, several of these projects were developed in collaboration with community organisations and consumer advocacy groups thus leading to strong research-to-practice translation. Titles of presentations include: Exploring cultural beliefs concerning health and ill health (cancer) among Chinese-Australian immigrants; The role of illness attribution and cultural views of cancer in determining participation in Cancer-Smart lifestyle among Chinese and Western youth in Australia; Exploring the psychosocial impact of cancer and Adolescents and Young Adults with cancer; Attitudes towards death and dying among CALD communities in receipt of palliative care; and, Non-disclosure of complementary therapy use in oncology: Development of a model for effective communication between doctor and patient.

Paper 1: Exploring cultural beliefs concerning health and ill health (cancer) among Chinese-Australian immigrants

Ethel Chung, Vikki Knott and D. Turnbull

Studies with ethnic minority communities have shown that cultural beliefs can impact on health behaviours across the cancer pathway, including the uptake of screening, and compliance with medical treatment. This study aimed to explore beliefs about health and illness among Chinese-Australian immigrants using a framework adapted from Medical Anthropology. Participants were recruited purposively to achieve maximum variation with respect to specific parameters including: age, country of origin, length of stay since migration, acculturation level, education level and occupation. Eighteen Chinese-Australians, aged 21 to 83 years were interviewed in their preferred language (e.g., Mandarin, Cantonese) using items derived from the Explanatory Model Interview Catalogue. Data were transcribed and analysed using thematic analysis. Health was commonly perceived as a balance between yin and yang. Different causes of cancer were described, including heredity, environmental pollutants, smoking, drinking, and folk causes, such as fate, excess hot energy and general imbalance in the body. A contradiction in philosophy underpinning western and eastern treatments appeared to result in scepticism towards western approaches to treatment. Western treatments were perceived as being too invasive or simply “did not get to the origin of cancer”. Some participants referred to cancer as an incurable disease. Conclusion: Cultural beliefs concerning cancer are pervasive and are likely to have a significant impact on an individual's receptiveness towards cancer prevention and treatment. Thus, a one-size-fits-all approach to health promotion may not be adequate when attempting to improve health outcomes across all cultural groups in Australia.

Paper 2: The role of illness attribution and cultural views of cancer in determining participation in Cancer-Smart lifestyle among Chinese and Western youth in Australia

Celine Wei, Vikki Knott and C. Wilson

Data suggest that cancer is a leading cause of premature death in Australia and over 50% of cancer incidence is said to be preventable through lifestyle improvements. Cross-national studies and studies with ethnic minority immigrants indicate that cultural beliefs can impact on individuals' perception and understanding about the causes for illnesses; which in turn, plays a crucial role in determining the behaviours one choose to engage in. The current study had two broad aims. The first aim compared young Chinese-Australians and Anglo-Australians' level of engagement in CancerSmart behaviours; cultural beliefs about cancer; and their causal explanations for causes of illness. The second aim of the study was to examine the impact of culturally-influenced health beliefs on specific CancerSmart behaviours. Both aims were assessed through an online questionnaire completed by a total of 189 participants (94 Western and 95 Chinese) with a mean age of 20.8 (SD = 3). Results indicated that Chinese participants have a significantly lower behavioural compliance with the Cancer-Prevention Guideline (CPG); they were found to engage less frequently in appropriate nutrition, physical activities and avoidance of smoking. With respect to comparisons of culturally influenced health beliefs, Asian participants were found to believe more strongly that cancer was associated with factors measured by

the Traditional Chinese Model (TCM). These include higher endorsement of supernatural, imbalance, and problematic social relationships as causes of illness than their Western counterparts. A 4-step mediational analysis was performed and the results confirmed that the relationship between cultural beliefs and physical inactivity is mediated by beliefs about supernatural factors as the causes for illness. In other words, those with higher Eastern cultural views of health care tend to explain illness as caused by supernatural factors (e.g. fate, bad luck, sinful act etc.), which in turn reduced their level of participation in physical activities. The results from the present study provide an indication of the aspects of cancer-preventive behaviour that require strengthening among Chinese students living in Australia. Moreover, by understanding the cultural beliefs of Chinese in Australia, and their impact on health-related behaviours, a strategy for formulating improved health communication and education can be developed, with a focus on culturally sensitive health promotion programs designed to decrease cancer risk.

Paper 3: Exploring the psychosocial impact of cancer and Adolescents and Young Adults with cancer

Helen Wilson and Vikki Knott

There have been virtually no improvements in survival outcomes for Adolescents and Young Adults in the past 20 years, despite improvements of 50% in cancer outcomes for all other age groups. It is claimed that Adolescents and Young Adults are twice as likely to survive cancer if they receive their treatment within a paediatric facility as opposed to an adult one; however, the precise reasons for this are largely unknown. There is a lack of clinical studies relating to the efficacy of treatment within this population. Similarly, there is a dearth of psychological literature examining the psychological impact of experiencing cancer at a critical developmental period; that is, when transitioning into Adulthood. This study will attempt to explore the psychological impact of cancer on the development of adult identity (e.g., work/educational expectations, social and personal identity). In particular, the study will attempt to identify positive/negative factors linked with receipt of care in Paediatric versus Adult facilities. A purposive sampling framework with maximum variation will recruit participants across a variety of age groups, diagnoses and backgrounds. Focus groups and semi-structured interviews will be conducted until data saturation achieved. Interviews will be recorded, transcribed, and assessed for themes using Braun and Clark's (2006) 6 stages of coding. It is envisaged that the results will lead to improved understanding of the psychosocial impact of cancer on developing adults. Furthermore, the identification of factors associated with the receipt of treatment in different facilities may also assist with the provision of appropriate psychosocial care. Although future quantitative work may be required to assess for the generalisability of the findings, it is envisaged that this pilot work may inform future advocacy agendas for community action groups such as CanTeen.

Paper 4: Attitudes towards death and dying among CALD communities in receipt of palliative care

Gwenda Gilligan and Vikki Knott

Attitudes towards death have changed significantly over time. In the early 19th century the concept of 'tame death' (Moller, 1996) saw death as normal and natural; however, Moller (1996) describes the modern characteristics of dying some of which include: a high level of medical technology, a complex definition of death and active intervention in the dying process. The major aim of this research is to gain knowledge and insight into understanding the diverse cultural views of community members living in the ACT concerning palliative care, with a particular focus on attitudes towards death and dying and needs and preferences for end-of-life care. A purposive sampling framework, utilizing maximum variation, will be used to recruit participants into this project. The aim of such a sampling framework is to gain a rich understanding of the issues from a wide variety of views (i.e., cultures). In consultation with the small steering group established for this project, representation from particular cultures will be sought. A semi-structured and evolving interview schedule will be used to guide the interviews; this approach allows for spontaneous talk and themes to emerge without the prior prompting of researchers. The aim of such an approach is gain an in-depth understanding of the issues at hand rather than to quantify the nature of the phenomena under study. A core value of palliative care in the ACT is to provide a culturally sensitive service which integrates the physical, psychological, spiritual and social needs of patients, their families and carers. Thus, it is envisaged that the results of this study may assist in the provision of recommendations concerning the unique needs and preferences of particular cultural groups when in receipt of palliative care. The results of this study will provide knowledge relevant to advancing the ACT Palliative Care Strategy 2007-2011.

Paper 5: Non-disclosure of complementary therapy use in oncology: Development of a model for effective communication between doctor and patient

Laura McLaughlan and Vikki Knott

Non-disclosure of complementary medicine (CM) use by cancer patients is of significant concern to oncology professionals. Evidence suggests that there can be significant interactions among particular CMs leading to increased toxicity and/or reduced efficacy of chemotherapy. In contrast, patients who use CMs cite a range of reasons for use including: improved survival, detoxification following treatment, increased immunity, individual control and improved quality of life (QoL). This study aims to identify the perceived benefits/risks of CM use from the perspective of patients and health professionals; identify factors linked with open and trustful communication between oncology professional and patient thus potentially facilitating open disclosure. Semi-structured interviews with oncology health professionals CMs will be conducted. Questions will focus on definitions of Complementary and Alternative Medicines (CAMs), benefits/risks associated with CM use, reasons for non-disclosure of CM use, interactional styles of health professionals (to facilitate disclosure), and exploration of issues of trust using constructs relevant to developing models of effective doctor-patient communication. Data will be transcribed, and assessed for themes. The aim will be to develop a conceptual model that could be used to facilitate the disclosure of CM use during consultations with oncology professionals. Further empirical work, utilizing a larger population is planned to further

elucidate knowledge regarding effective doctor-patient communication to facilitate full disclosure of CM use.



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Supporting and engaging aged care staff through change: The role of psychological theory and evidence-based practice

Catherine Hudgson (Eastern Health, Melbourne)

In hospitals across Australia and particularly in the Aged Care and Aged Psychiatry specialties, psychologists have been conspicuous by their scarcity. Psychologists working in these areas have been well represented at a national level by experienced leaders in geropsychology, who have advocated for the central role of psychology in these areas. They have also looked at exploring innovative ways of attracting new psychologists to working in an area which has not traditionally been attractive and of providing sufficient high quality training experiences to prepare these new professionals. In spite of these efforts, those of us working in this area remain a rarity and often find ourselves struggling to meet the demand for psychological services. One of the defining characteristics of working in geropsychology is the importance of working with carers, which may be family, but are frequently professional carers, in a range of settings. As a sole psychologist in a service, we often rely heavily on these carers to support and implement psychosocial interventions. In this symposium, a group of professionals (psychologists and a nurse) will present papers describing projects they have undertaken in an attempt to transfer psychological theory and evidence-based treatment strategies into routine practice by nursing and/or care staff. The first paper will present a project which aimed to implement Tom Kitwood's person centred care philosophy with a group of staff in an aged care residential facility. The second paper describes the introduction of a new psychological service in an aged care and rehabilitation unit, which until now has not addressed the psychological needs of its patients. The final paper will describe the psychological support required to reduce the number of seclusions and restraints used on an acute aged psychiatric ward. We see this kind of work as the future of geropsychology in public health, but acknowledge the challenge. It is hoped that psychologists working in similar and related areas will share their experiences in a productive discussion.

Paper 1: From theory to practice: The efficacy of a novel approach at integrating Tom Kitwood's person centred care philosophy into the everyday practice at a nursing home for residents with dementia

Catherine Heal and Catherine Hudgson (Eastern Health, Melbourne)

Residential Support Programs are part of many Aged Persons Mental Health Services across Victoria. This presentation reports on the experiences of a multi-disciplinary team with many years' experience of working with aged care residential facility staff. Primarily the team is involved in helping these staff to manage their residents who have dementia and behavioural problems. It has been this teams' collective experience that many behavioural problems are directly related to the staffs' approach and the lack of person centred care in many facilities. Consequently this team has over a number of years trialled many educational approaches with mixed results. This presentation reports on a novel approach which was comprised of a truly intensive program of 12 weekly 2 hour sessions. Each session had a distinct theme and five of the sessions covered Tom Kitwoods psychological needs of persons with dementia: comfort, attachment, occupation, identity and inclusion. Other themes explored included dementia more generally, personality and sexuality. The challenge of transporting such learning across and into staff practice and culture was tackled in a novel manner. Specifically each session included a maximum of 30 minutes didactic teaching and the majority of time was spent exploring in depth how the issues presented could be related to their individual residents. Time was taken to explore what staff could do in a practical sense to ensure that the psychological needs of the residents were met. This project is unique in the amount of time allocated to operationalizing each psychological need of a resident with dementia and ensuring that staff had a practical plan for implementation. The program was evaluated using a simple pre and post measure design. Measures included dementia care mapping, Maslach burnout inventory and a self-efficacy questionnaire. Results will be shared with participants during the symposium presentation.

Paper 2: The impact of a new clinical psychology service in rehabilitation wards for the aged

Susie Joseph, K. George and H. Sivakumaran (Eastern Health, Melbourne)

This paper describes the process of having the services of a clinical psychologist for the first time in 3 subacute rehabilitation wards at Peter James Centre, Eastern Health. The services of the Clinical psychologist only began in January 2010. Initially there was a need to educate the staff regarding the role of a clinical psychologist and to be able to identify and refer patients requiring psychological intervention for their overall well being in the process of their rehabilitation. Data was gathered for a period of 12 months. This study looks into the demographic details of patients, reasons for referral their diagnosis and mental health outcomes within a multidisciplinary program. An attempt is made to evaluate the impact of psychological evidence based intervention in enhancing clinical progress in patients with medical co-morbidities as well. Referrals were from the Neurology Rehab ward, Orthopaedic Rehab Ward, and Geriatric Evaluation and Management wards. A retrospective look into the psychology service, outcomes for the patients and the influence on other allied health and nursing staff were examined. Preliminary review of the data reflects an increase in referrals not only by the

medical team but also from other allied health and nursing staff. The role of a clinical psychologist in the rehab wards is therefore more clearly defined. This is contributing to an ongoing process of culture change and having a significant impact on the multidisciplinary team, with a concurrent need for ongoing education regarding psychological issues for the other allied health staff and nursing staff. There is now an enhanced clinical recognition of patients' emotional needs while in rehabilitation.

Paper 3: The role of a clinical psychologist in reducing restraints and seclusion in an acute aged inpatient unit

Hemalatha Sivakumaran, K. George and K. Pfukwa (Eastern Health, Melbourne)

The use of restraints and seclusion in inpatient mental health settings has drawn considerable international and national debate with regards to its legal, ethical and clinical dilemmas for both staff and patients. In 1992, Australia became a signatory to the UN principles for the protection of individuals with mental illness and the improvement of mental health care. In 2005, focus on the use of restraints and seclusion in Public Mental Health Services became an Australian National Safety Priority. With little published research that has assessed current practice issues that could contribute to a lower incidence of seclusion and physical restraints in acute aged inpatient settings, this study captures changes in practice that have led to a significant reduction in restraint and seclusion rates in an acute aged person's mental health unit. Quantitative data was gathered in 2009 as a quality activity by a multidisciplinary working party, from reports prepared for the Chief Psychiatrist's Office in Victoria, as well as a random documentation audit of patient files. Qualitative data was gathered from a short nursing staff survey and interviewing management. Four major factors were found to have influenced change. These include leadership and support from management in nursing practices, increased multidisciplinary team input, renovations to the inpatient setting and changes in treatment related factors such as collection of behaviour management history and improving documentation in patient files. The role of a clinical psychologist on an acute setting and how he/she can contribute in enhancing clinical care such as this is explored. Experiences like this could provide insights and practical strategies that can be applied in other aged inpatient units as well.



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Systemic approaches to promoting positive adaptation in young people at risk of developing social and emotional problems

Erica Frydenberg (University of Melbourne)

The prevention paradigm emphasises the importance of averting psychopathology by promoting young people's resilience rather than relying on the treatment of mental health issues once they arise. Schools are a key source of the skills and competencies that aid young people's development. Hence, the promotion of resilience is increasingly gaining status as an important goal of welfare and psychological services in schools. This symposium examines several such approaches to the promotion of resilience and healthy development in secondary school students. Our research examines healthy adolescent development from a systemic perspective, viewing positive adaptation as taking place both within the young person and as a process involving mutually beneficial transactions between the individual and the multiple contexts in which they develop, such as the peer, school, and community systems. Our findings highlight the importance of the perception of belonging and positive social connectedness in the promotion of resilient outcomes. Importantly, this finding appears to retain stability across culturally diverse samples. Furthermore, resilience and positive outcomes were common in the young people we sampled, challenging deficit-focused notions of the inevitability of ill-health following adverse circumstances such as trauma. At present, there appears to be a disconnect between knowledge gained through empirical research and current practice and policy in this area, and we make practical recommendations to address this divergence. The first presentation provides a review of current knowledge regarding resilience and positive coping in young people at risk for developing mental health problems. The second presentation examines the concept of school connectedness as an important factor promoting young people's resilience, and how suspension and expulsion impact upon this critical protective factor. The third presentation examines resilience and coping in young people from refugee backgrounds facing the challenges of re-settlement, and evaluates an intervention to promote positive social relationships among these students. The final presentation evaluates the psychometric properties of a measure of resilience for Australian young people, which provides a valuable tool for guiding resource-allocation and gauging the efficacy of resilience interventions.

Paper 1: Resilience through coping skills for young people's social emotional development

Associate Professor Erica Frydenberg (University of Melbourne)

Teaching coping skills provides the opportunity for young people to focus on what they do to deal with their circumstances, what they might do differently and how they can achieve positive growth in human development. 'The Best of Coping' (BOC: Frydenberg and Brandon, 2007) and a CD-Rom version called 'Coping for Success' (Frydenberg, 2007) are both underscored by the principle that we can all do what we do better. Three separate studies with a collective sample of 325 students in regular school settings who were identified as at risk for depression, learning disabilities or who were performing poorly completed the Adolescent Coping Scale, using a pre-test–post-test design, and completed the BOC program. There was a significant decrease in the level of non-productive coping in the 'at-risk' group compared to the resilient group post program. The 'at risk' group reported a decrease in usage of worry and wishful thinking. A comparison of the pencil and paper BOC with the CD-Rom format was assessed with 222 Year 8 students. Findings showed that a change in coping style over time was observed. Consistent with previous research there is generally a slump in an individual's use of coping skills during the 14-16 year age period, particularly for girls compared to boys. It is important that each group in each context learn about the principles of coping and about their own coping. Incorporating coping constructs and coping language into everyday life and activities means that coping can be part of young people's lives. It can be used to develop strategies to enhance positive emotions, build resilience and well-being. In the school context it can be part of the hidden curriculum as well as the explicit curriculum that is exemplified by coping skills training. Such coping programs can enhance engagement in the classroom and promote positive communication. It is useful for young people and the adults around them to utilise similar coping language to enable personal growth to occur. Above all we want to facilitate the skills of self-assessment so that healthy development can occur and the tools for stress management are learned.

Paper 2: Defining the margins: Understanding school discipline and school community from the young persons' perspective

Broderick, D. J. (University of Melbourne & Murdoch Children's Research Institute)

For over 375,000 young Victorians the secondary school environment is one of the primary sources of social interaction and experiences that will shape their identity and future pathways. Despite sharing a largely standardised academic curriculum, a degree of disparity exists between and within Victorian schools in terms of the formulation and implementation of codes of conduct and disciplinary practices. For many young people experiencing social or behavioural difficulties, tenuous links with school can be further eroded if faced with exclusionary discipline measures such as suspension or expulsion (DeRidder, 1991). This presentation examines the findings of a qualitative research subcomponent of a broader ARC funded research study known as the International Youth Development Study (IYDS). This component of the study involved 50 semi-structured qualitative interviews with Victorian young people ranging in age from 16-20 years, focusing on topics including codes of conduct, disciplinary measures, and community with the school environment. The aim of this study was to develop a greater understanding of how young people experience, interpret and are impacted by the elements described above. In an effort to

represent a variety of perspectives, participants were recruited from a wide range of regions (urban and rural) and schools (government, independent, and Catholic) across Victoria. Efforts were also made to ensure that early school leavers were involved in the study. The interviews explored the perspectives of young people concerning the formulation and implementation of school codes of conduct, experiences of exclusionary discipline practices such as suspension and expulsion, and the concept of school community and the role that this plays in the lives of young people. A number of themes emerging from the study will be examined in this presentation including perceived inconsistencies in the enforcement of codes of conduct, as well as the important role of school community in the lives of young people experiencing academic or personal issues. The varied ways in which young people understand exclusionary discipline procedures and the significant impact that this has upon school connectedness will also be explored. Finally, the presentation will conclude with a discussion of inclusive behaviour management and alternatives to exclusionary discipline.

Paper 3: Working towards improving relationships in a culturally and linguistically diverse school context: understanding the needs of young refugee students

Georgina Cameron, Erica Frydenberg & A. Jackson (The University of Melbourne)

This research involved trialling a six week classroom-based conflict resolution program within mainstream and English language school settings. In particular, the study aimed to better understand the social and emotional needs of students with refugee backgrounds. The program, Play Fighting Fair, worked to create an inclusive classroom environment by strengthening relationships between students and staff. Pre and post-test data was collected from 80 students regarding their exposure to traumatic events, time in Australia, psychosocial functioning and coping styles—productive, non-productive, reference to other (Adolescent Coping Scale; Frydenberg & Lewis, 1993). Within the sample, students with refugee backgrounds (38 in total) tended to be older, were more likely to be of Middle Eastern or African origin, to have been in the country less than a year and be attending a specialist English language school than non-refugee immigrant (19) and local (20) students. As expected, significant positive correlations were found between exposure to trauma and age, as well as exposure to trauma and non-productive coping style across the sample at baseline. Contrary to expectation, refugees were not found to indicate more exposure to traumatic events compared to immigrant or local students controlling for age. Follow-up analyses on traumatic event items revealed that refugees were more likely to have been exposed to a sudden death of a person, fire and war-zones. Refugee, immigrant and local students were compared on coping styles at baseline. When asked how they coped with conflicts refugee students indicated reference to other coping style significantly more than immigrant or local students. In particular, refugee students were more likely to use coping strategies such as seeking spiritual support or seeking to belong. For refugee students, the effect of seeking spiritual support was higher in English language school settings compared to mainstream, and vice-versa for the effect of seeking to belong. Findings are discussed in relation to: (1) how experiences of trauma may affect the resolution of conflict within relationships, (2) the role of spiritual support within Australian secondary schools, and (3) the adaptive or maladaptive value of seeking to belong in interpersonal conflicts.

Paper 4: Psychometric validation of the Resilience Assets Survey (RAS)

O'Connor, M. (The University of Melbourne), Olsson, C. (The University of Melbourne), Morrell, R. (Stride Foundation), Hill, J. (Stride Foundation), Mitchell, B. (Stride Foundation), & Wicking, P. (Stride Foundation)

Measures of adolescents' welfare have traditionally focused on risks and deficits, and interventions have predominantly aimed at the reduction of problem outcomes, such as substance abuse or teenage pregnancy. Although such problem outcomes are undeniably worthy of our attention, an exclusive focus on indicators of maladjustment fails to describe the full range of adolescent functioning. As Masten and colleagues describe, resilience is an 'ordinary magic' that is common among children and young people facing disadvantage. Hence, practitioners and researchers are increasingly broadening their focus to also encompass young people's resilience, strengths and assets, both as important factors in their own right and as a strategy for reducing problem outcomes. The developmental assets perspective provides a framework for examining the social, environmental, and psychological resources that enhance young people's educational and health outcomes in both high risk and normative settings. However, there are currently few empirically tested measures that provide a robust assessment of both the internal and external developmental assets of Australian young people. A reliable and valid measure with demonstrated utility with Australian young people would provide a valuable tool for evaluating intervention outcomes, and for directing intervention efforts in Australian schools. This presentation examines the psychometric properties of a new measure, the Resilience Assets Survey, adapted from Benson, et al.'s measure for use with Australian young people. Two hundred and fifty students in years 7 to 9 completed the survey online at two time points. A Confirmatory Factor Analysis was performed to examine the fit of the hypothesised structure of the measure to the current sample. Construct validity was examined through association with the General Health Questionnaire (GHQ). Test-retest consistency was also examined. The outcome is an efficient and cost-effective measure of resilience capable of informing practice and policy by providing strategic information on psychosocial resources that promote resilience during the adolescent years. Possible applications of this measure in educational settings will be discussed.



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The nature of our psychology students

Frances Martin (University of Tasmania)

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). In our current society, students come to University from a variety of backgrounds with a variety of skill sets. Whereas we know that only a small percentage of our first year students will become practicing psychologists, we know little about these students or the remainder of the cohort: the vast majority of them. Indeed, we know little about the nature of the student cohort which we then attempt to encourage to learn. In this symposium we will attempt to untangle the nature of the cohort of psychology students in terms of their personality, learning strategies, understanding of the nature of science, capacity to act in an academically ethical manner to avoid academic misconduct, and entry level literacy skills.

Paper 1: The relationships between personality, learning approaches, career decision making and academic success: A longitudinal approach

Lorelle Burton and D. Denaro (University of Southern Queensland)

The primary aim of this study was to investigate the relationships between personality, learning approaches, self efficacy and career decidedness in a sample of 415 (393 distance; 22 on campus) first year students enrolled at the University of Southern Queensland (USQ). Grade Point Average (GPA) for year 1 (GPA1) and year 2 (GPA2) were the measures of academic success. Multiple regression analyses indicated that Conscientiousness and Openness to Experience each positively predicted the Deep and Strategic approaches, respectively, and negatively predicted the Surface approach. Extraversion and Neuroticism each positively predicted the Surface approach. Conscientiousness, Openness to Experience, and Agreeableness each positively predicted GPA over time (GPA1 and GPA2). The Surface negatively predicted GPA1 and GPA2, respectively. Major Satisfaction positively predicted both GPA1 and General Self-Efficacy positively predicted GPA over time (GPA1 and GPA2). Hierarchical regression analyses indicated that the key positive predictors of academic success in first year were the Strategic approach and Agreeableness trait. The Surface approach negatively predicted GPA1. First year academic

success was the strongest predictor of second year success, with GPA1 accounting for 52.8% of GPA2 variance. When controlling for GPA1, the traits Conscientiousness and Agreeableness were key positive predictors of GPA2. The implications of these findings for curriculum design and delivery and for transition programs for commencing students will be discussed.

Paper 2: Literacy levels of first year psychology students

Frances Martin (University of Tasmania), S. Provost (Southern Cross University), B. Lusk, A. Peacock and C. Pritchett (University of Tasmania)

Written communication skill remains the single most critical attribute for success in higher education and universities invest considerable time and resources to the provision of instructions and feedback about student writing. For students in the sciences, the transition into university writing is made particularly difficult by the need to adopt a different “style”, suitable for the scientific discipline being studied. It is also made difficult by the entry level literacy skills of students. One-hundred and forty six first year psychology students completed a verbal and numerical literacy test (maximum score 20) and also a good and poor writing discrimination exercise (maximum score 15). In this cohort, students verbal literacy levels ($m=13.5$) were lower than their numerical literacy levels ($m=14.7$) with an overall mean 13.7. Data indicated that the literacy levels of entering students are poorer than might be expected and a strong correlation between students’ literacy levels and their discrimination ability ($m=10.9$) was found.

Paper 3: Assessing students’ epistemological beliefs and their relations to approaches to studying

S. Provost (Southern Cross University), Frances Martin and A. Peacock (University of Tasmania)

Undergraduate education in psychology is intended to provide students with an understanding of the scientific basis of the discipline, and an appreciation of the importance of scientific enquiry in the establishment of principles that shape practice. Paradoxically, the degree to which our students have in fact internalised the tenets of science in their degree is usually left untested, at least partly because there is not an obvious instrument available to provide such an assessment. First-year students at the University of Tasmania ($N=214$) completed a survey during the second half of 2010 which included Hofer’s epistemological beliefs inventory, an epistemological beliefs scale developed by the current authors, and the R-SPQ-2F. The psychometric properties of both epistemological beliefs scales were not ideal, but their interrelationship with other variables suggests that they may provide some useful information regardless. In particular, the Deep Approach subscales of the R-SPQ-2F were correlated with factors within the authors’ instrument, whereas the Surface Approach subscales correlated with subscales of Hofer’s instrument. The views of psychology students on some of these scale components also differed from that of other groups of students (e.g., science, arts, and business). The development of an instrument to identify students’ epistemological and ontological perspectives is important to inform teaching practices and for assessment of graduate attributes. The present results provide direction for future efforts towards this goal.

Paper 4: The impact of an online mastery exercise on introductory psychology student's writing and plagiarism

Fiona White and C. Owens (The University of Sydney)

From 2009 to 2010 the School of Psychology at the University of Sydney introduced an online mastery exercise for first year students to learn the correct APA writing style, and thus maintain low levels of 'resource' plagiarism. This online exercise was introduced in Week 2 of Semester 1, and contained 7 questions that related to correct referencing, use of quotations, citing secondary sources, penalties for plagiarism, and sharing work with other students. The exercise allowed students unlimited attempts to earn course marks – and around 70% of students in each cohort successfully completed it. Evidence of improved writing, as a result of this exercise, remains difficult to judge due to a distribution marking policy, however plagiarism results have been promising. For example, despite the large size of our first year cohorts (Sem 1 n=1,818; Sem 2 n=1,408), plagiarism rates were kept well below 0.5%. Interestingly however, whilst 'resource' plagiarism is declining, 'student-to-student' plagiarism continues to prevail, suggesting that more than our purely educational approach is needed for some students.



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What do we know about the well-being of Australia's oldest-old? Charting new territory using the DYNOPTA dataset

Davina French (Australian National University)

The Australian Government Productivity Commission reports that the number of Australians aged 85 years and older is expected to quadruple by 2050, to 1.8 million individuals or 5.2% of the population. At present however, their smaller numbers and relatively poor health mean that these 'oldest-old' Australians are seldom represented in sufficient numbers in single datasets to study their psychosocial needs and circumstances as a separate group. In order to meet the growing demand for services that will result from predicted demographic changes, it is imperative that we understand how needs and concerns may vary across the older age groups. The Dynamic Analyses to Optimise Ageing (DYNOPTA) dataset has pooled and harmonised data from nine Australian longitudinal studies of ageing. These include three nationally representative studies and six regional studies covering Sydney and the Blue Mountains, Melbourne, Adelaide and the Canberra region. The total sample comprises 50,652 participants aged 45-103 years at baseline; 77.2% are female, reflecting inclusion of the Australian Longitudinal Study of Women's Health. On average, participants have provided 3-4 waves of data over a follow-up period of 9 years. The pooled dataset contains demographic information, psychological assessments (eg cognition, mental health), health risk factors (eg drinking and smoking) and indicators of physical health (sensory function, medical conditions, disability and death). This large dataset includes 1,156 individuals aged 85 years or older at baseline (56.4% female). We are therefore able to make a number of novel contributions towards documenting and understanding the well-being of Australia's oldest-old. In this symposium we report a range of mental and physical health outcomes, and the relationships between them, for 'older' persons across the span of ageing. Our findings illuminate some of the ways in which age-specific studies of older Australians' wellbeing may challenge current conceptions of ageing. Using a combination of longitudinal and cross-sectional analyses, we conclude that older persons are a heterogeneous group whose well-being may change across the ageing years in previously unidentified ways, and that datasets such as DYNOPTA can offer a powerful and rigorous approach to answering these and future questions about the well-being of Australia's oldest-old.

Paper 1: Deriving prevalence and identifying predictors of transition to depression for the older Australians in the DYNOPTA project

Richard Burns, P. Butterworth and K. Anstey (Australian National University)

Estimates of depression prevalence in older adults have been limited by the lack of large numbers of very old participants, representativeness, and longitudinal data. These limitations can be extended to identifying the predictors of transition to depression. This presentation will describe the DYNOPTA harmonisation project and then demonstrate its utility by 1) demonstrating the value to analysing longitudinal data in determining prevalence of depression in older Australians; and 2) highlighting the need to utilise advanced statistical methodologies in the analysis of harmonised longitudinal datasets to determine predictors of transition to depression. As DYNOPTA studies originally utilised different depression and mental health measures, the harmonisation of depression scales will be described. We then report on the prevalence and predictors of depression transition amongst community living participants (N = 44 812) who were aged 45-103. Cross-sectional and longitudinal analyses differed in their findings on the prevalence of depression. Whilst cross-sectional analyses indicate no decreased likelihood of depression with increasing age, longitudinal analyses indicated a significant decrease in likelihood of depression with increasing age. To identify predictors of transition to depression, comparisons of a Fixed Effects Logistic Regression with a Multi-Level Random Effects Logistic Regression model which adjusted for subjects nested within contributing DYNOPTA studies, indicated significant and substantive differences in the results from both analyses. By ignoring the hierarchical nesting of subjects to their contributing study, retirement was associated with an increased likelihood of depression (OR = 1.29; p = 0.021; 95% CI: 1.04 - 1.61), whereas in the multi-level model, retirement state was unrelated to likelihood of transition to depression (OR = 1.09; p = 0.529; 95% CI: 0.83 - 1.44). The pooling of existing datasets has enabled us to develop the capacity to better inform on the health of older Australians which in this instance describes the reduced likelihood of depression for community-living older Australians. Furthermore, we demonstrate the importance of considering methodological issues when interpreting findings from longitudinal studies of ageing.

Paper 2: Alcohol use and depression: From middle age to the oldest old

Robert Burns, Davina French, Robert Tait and K. Anstey (Australian National University)

In late life moderate alcohol use is associated with reduced cardiovascular mortality and lower risk of chronic disease such as dementia. While alcohol use disorders are associated with mental disorders in young adults, there are few data on level of alcohol use and mental health outcomes in older adults, particularly the oldest old. We sought to examine the relationship between screening positive for depression and differing levels of alcohol consumption, particularly for older adults. Data were drawn from the DYNOPTA study which has pooled nine longitudinal ageing studies. From current guidelines, alcohol consumption was classified using standard drinks per day as: abstinent, low risk (<0 - <2), long-term risk (>2 - <4) short-term risk (>4). Probable depression was classified after harmonising various standard instruments (e.g. Centre for Epidemiological Studies Depression scale). Eight studies collected data on both depression and alcohol use. Of 45864 participants, 42160 (>99.9%) had data on both

measures. There were 33784 women: the proportion by 10 year age group ranged from 50-88%. Alcohol classification showed 8559 abstinent, 29714 low-risk, 2633 long-term risk and 1254 short-term risk participants. Using generalised estimating equations to control for clustering (study), increased odds of depression was associated with former and current smoking, younger age-group, not being partnered, leaving school by age 15. There was a significant sex by alcohol interaction, with female low-risk and short-term risk drinkers having increased odds compared to their male counterparts and the abstinent having greater odds than the low-risk drinkers. The age by alcohol interaction was not significant. In the oldest group (85+ years), only six drank at short-term risk (none were depressed) and were excluded. The only factors to significantly increase the odds of depression were current and former smoking, leaving school by age 15 and abstinence (OR 2.39). Guidelines suggest that older adults consult a health professional to determine a safe level of consumption. These data suggest that neither low-risk nor long-term risk drinking levels increase the odds of depression for the oldest-old while abstinence remains a marker for those at risk of depression.

Paper 3: Intra-individual and inter-individual effects of cognitive impairment on decline in hearing during late life

Kim Kiely (Australian National University), B. Gopinath and P. Mitchell (University of Sydney), M. Luszcz (Flinders University) and K. Anstey (Australian National University)

Common-factor theories of cognitive ageing have been proposed to explain the increasing association between sensory and cognitive functioning in late life. This paper will investigate probable cognitive impairment in relation to changes in hearing thresholds in older adults. Data were drawn from the Australian Longitudinal Study of Ageing and the Blue Mountains Eye Study as part of the DYNOPTA project. The pooled sample comprised 4,221 individuals (47% male), who were followed over 4 measurement occasions for up to 12 years. The mean age at baseline was 73 years (range 50–103). Hearing was assessed by unaided pure-tone thresholds averaged over frequency ranges that are important for speech perception, specifically 0.5, 1, 2, and 4 kHz (PTA_{0.5,1,2,4}kHz). Cognitive impairment was assessed by the Mini Mental State Examination (MMSE). Random coefficient models were employed to evaluate inter-individual and intra-individual effects of MMSE on change in hearing thresholds. At baseline, hearing loss was prevalent in 89% of men and 87% of women aged 85 years and older. The overall prevalence of hearing impairment (PTA>25 dB) co-morbid with probable cognitive impairment (MMSE<24) was 8%, and probable cognitive impairment was associated with increased risk of hearing loss after adjusting for age and sex (OR=1.7, SE=0.25, p<.001). Age and sex adjusted random coefficient models revealed significant effects for inter-individual differences in MMSE on both intercept ($\beta=-0.79, SE=0.08, p<.001$) and change ($\beta=-0.40, SE=0.01, p=.002$) in pure-tone hearing thresholds. There were also significant effects of intra-individual change in MMSE score on hearing thresholds ($\beta=-0.15, SE=0.04, p<.001$). Associations remained significant after adjusting for socio-demographic, health and lifestyle covariates. Lower cognitive functioning was associated with faster age-related declines in hearing. These findings join a growing literature which links cognitive impairment with hearing loss. However, it is unclear whether these results are explained by a common underlying neurological factor, or simply reflect the difficulties experienced by individuals with sensory loss when completing standard cognitive assessments. With age-related hearing loss being the most prevalent chronic condition in the

oldest-old, it is important to consider how this sensory loss influences the screening, assessment, diagnosis and management of individuals with dementia or other neuropsychological conditions.

Paper 4: How is your health? The meaning of self-rated health changes with advancing age among older Australian adults

Davina French and K. Anstey (Australian National University)

Self-rated health (SRH) is used worldwide to assess health status with a single self-report item. The relationship between SRH and mortality is surprisingly robust, but the meaning of individual responses to questions such as 'How is your health in general' is less clear. Age and gender differences in the determinants of SRH have been found, but few studies have examined these among the oldest-old, those aged 85 years and older. We aimed to establish the relative importance of different aspects of well-being for self-ratings of health across the ageing span. This may shed light on the health priorities of older individuals, who are likely to be experiencing multiple symptoms and disabilities. Using cross-sectional data from the four DYNOPTA studies that included all necessary variables ($n=14,705$), we compared the association of physical health (current medical conditions, disability) and mental health (probable depression) with SRH in persons aged 60-103 years. Generalised estimating equations (controlling for age, sex, marital status and education and nested by study of origin) showed that binary variables representing current medical conditions (≥ 1 vs none), disability (some difficulty with self-care vs none) and probable depression (yes/no) were all independently associated with SRH. Disability also interacted with age, suggesting that its influence differed across age-groups. Separate regressions for each 5 year age-group showed that poor SRH became less strongly associated with physical disability among those aged 80 years and over; odds ratios (95% confidence intervals) remained significant but reduced from 7.31 (5.02-10.64) at age 60-64 years to 1.75 (1.17-2.63) at 85 years and over. The association of mental health with SRH was however relatively stable across age (odds of poor SRH increased around fivefold with probable depression), making this the strongest associate of SRH in older age-groups. As old-age progresses, reports of poor health may be more closely related to psychological symptoms than to physical problems. Health professionals and aged-care providers should be aware that salient medical needs and functional limitations may not be of primary importance to older persons themselves, for whom psychological wellbeing may take centre stage.



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What's so depressing? Diversity, marginalisation and youth mental health

Heather Gridley (Australian Psychological Society)

Mental health, particularly that of young people, has become foregrounded in recent state and federal elections and community campaigns. In this symposium, three papers are presented that highlight the documented connections between experiences of marginalisation, oppression and discrimination and serious psychological distress. The focus is on the responsibilities of the mental health system and the wider community to foster the conditions necessary for prevention of mental health problems, and recovery from mental illness.

Paper 1: 'Just make it ok to go there': Engaging young people in mental health care

Debra Rickwood (University of Canberra)

This paper provides an overview of current research in the areas of young people's help-seeking behaviour; factors affecting mental health and wellbeing, promotion, prevention and early intervention for mental health, and recovery from mental illness. The particular focus is on entry points and access to mental health services for young people.

Paper 2: Good news and bad news: Health, wellbeing, agency and experiences of homophobic abuse among today's same-sex attracted young Australians

Marisa Monagle (University of Ballarat) and Lynne Hillier (Australian Research Centre in Sex Health & Society, LaTrobe University)

Despite many changes in Australian society over the last decade in visibility and the law, same sex attracted young Australians remain a group that suffers high levels of homophobic abuse and assault, especially at school. In the latest national study of over 3000 of these young people, 61% had been verbally abused and 16% physically assaulted because of their sexuality, with severe impacts on their

lives at school which is the site of 80% of the abuse. Moreover, there was a strong relationship between abuse and negative health outcomes, with those who had been abused feeling less safe and being more likely to harm themselves and attempt suicide because of homophobia. Despite these health concerns there is also evidence over three national studies that these young people, more than ever before are seeking social justice and equal rights to their heterosexual counterparts in a number of spheres including the right to marry their same sex partners. These young people are more likely to have disclosed their sexuality to others and to have received support, to feel better about their sexuality and to be involved in activism more than previous cohorts. This paper discusses the apparent contradictions in rises in abuse and increased wellbeing and agency, and how these findings may inform the practice of those who work with young people in Australia.

Paper 3: ‘You can’t really address our health problems without addressing our social and emotional wellbeing’: Closing the Gap in Indigenous mental health outcomes

Heather Gridley (APS), Yvonne Clark (University of Adelaide) and Stephen Meredith

There has been little mention of the mental health issues of Indigenous people in the public debates about mental health over the last 12 months, yet the suicide rate within some age groups is up to four times that of the non-Indigenous population, and research shows that Indigenous people are under extreme social and emotional pressure. Conversely, the Close the Gap campaign has so far prioritised inequities in physical health more than mental health, perhaps because the term carries some stigma in Indigenous communities, who tend to refer more holistically to ‘social and emotional wellbeing’. Indigenous psychologists take the view that institutionalised racism - whereby Indigenous people have reduced access to educational and employment opportunities, health services and housing - is a major contributor to mental health problems among Indigenous people, and particularly to pervasive despair amongst many Indigenous young people.