

Some highlights of the Synergy Expert Meeting 2016

Social relationships and health: Collaborative and dyadic approaches

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Understanding social
relationships within the
contexts of health and
illness has a far-reaching

impact in terms of improving overall outcomes for individuals, communities as well as for government initiatives and social enterprises. At this year's Synergy Expert Meeting (EM) topics surrounding social relationships such as its scope, necessity, challenges and methods to integrate this approach into mainstream health-related research and practice were discussed. Facilitated by Dr. Gertraud Stadler and Prof. Urte Scholz and attended by nearly 25 experts from 10 countries, the meeting was an insightful and invigorating effort to further the field of social relationships and health both individually and through a consensus paper.

The two day meeting included several steps each of which helped us arrive at the crux of the upcoming consensus paper. The steps included (i) identifying key issues related to social relationships and health through the unique technique of speed dating, (ii) breaking into small group discussions with the aim of further unpacking each of the finalized key issues, (iii) listing the main questions that required additional investigation within these key issues, and (iv) taking consensus votes on these questions. The key issues that were discussed as well the main questions will be briefly described below.

Theories of and evidence for social relationships and health

Experts agreed that there was a need to discuss and understand the status of theories within the field of social relationships and health. Research in social relationships, particularly dyads, are often considered to be the participant and their partner or primary caregiver, thus limiting the scope of the meaning of dyads and, consequently, the related theory and research. Upon unpacking and extending the definition of dyads, the group agreed that it was imperative to challenge and think about the choice of a dyad. That is, to delve upon which

dyad could be used for the development of a particular theory. Indeed, the selection of the dyad, having a rationale for the same, examining the individual and dyadic factors linked to health can contribute vastly to the development of dyadic concepts and theory. Additionally, it was argued in the

small group discussion that it was vital to move beyond the idea of dyads to include the wider social network of the participant (e.g., extended family, the community, an activity group).

An essential and overarching issue identified by the experts was that the theories needed to consider their numerous micro and macro levels of outcomes for health psychology. In a more applied sense of the field, theories need to be focus on the inter-relatedness of these outcomes, thereby giving researchers a tool to measure the effectiveness of the theory and associated intervention. Similarly, research needed to take into account and be



inclusive of mechanisms theories. So far, these mechanisms theories have been support-focussed. Although crucial, the experts concluded that this was not the complete picture and emphasized the need to broaden the understanding of mechanism theories.

While discussing the evidence for social relationships and health, experts probed into the issues of reporting standards both for large social networks as well as dyads, accepting that future research should receive more support from the field. The evidence should comprise various details such as structural information (e.g. the type of dyad, the duration of the relationship), contextual information (e.g. levels of data assessed), and an adequate description of the materials used in the study. Experts posited that a key issue within reporting standards is that of the dearth for presentation of the results such that it elucidates the interrelation of the dyads (e.g. it may help to provide the effect size where it may be considered as meaningful information).

Research methods and interventions within social relationships and health

The mixed method approach is an increasingly popular research design in psychology as it offers both a large-scale quantitative and an in-depth qualitative understanding of behaviour and cognition (Creswell, 2013; Todd, 2004). Reflecting this, the experts unanimously supported the need to use mixed and multi methods to investigate the role of social relationships within health contexts. In terms of statistical methods, the discussions centred on the need to improve the dialogue on the fit of questions and models, to carefully consider which statistical methods and models to use (multilevel models, structural equation models,

dynamic systems modelling and so on), and to find a solution for issues surrounding power analysis within dyads. In terms of the qualitative methods, experts brainstormed on the types of methodologies to use (interpretative phenomenological analysis, grounded theory, content analysis and so on) and, importantly, whether the study should precede or follow the quantitative research arm as this impacted the types of research questions and methodologies that will be used.

A major issue that was discussed among the experts was how culture influences social processes and relationships and health. It was agreed that the role, significance, and impact of culture in health psychology are unavoidable and demand the attention of researchers (Yali & Revenson, 2004). Indeed, globalization affords us the opportunities to understand culture from multitudinal perspectives (e.g., Salant & Lauderdale, 2003). Consequently, a large part of the discussion was directed towards topics of immigration, cross-cultural aspects, and acculturation and the need to look at culture not in a unidimensional manner but to develop the nuances of culture within several contexts. Therefore, the experts suggested that, although

there is some contribution of cultural influences to health-related work, research and practice must take into account the many facets of culture within social relationships and health in future work (e.g., the role of collective medical decision-making on health outcomes for the patient, families' understanding of a diabetic diet in adherence behaviours).

Interventions are the gold standard research design to examine the impact of social relationships on health. Key questions that were discussed were the need for pre-trials, having reporting standards, and being ready for future challenges within the field. An interesting and



lively discussion centred on the existing research and scope of work on behaviour change techniques in improving health outcomes which harness participants' social relationships. Special attention, the experts concluded, needed to be given to providing a strong rationale and a careful selection of which relationship future research and practice should focus on.

Salant, T., & Lauderdale, D. S. (2003). Measuring culture: a critical review of acculturation and health in Asian immigrant populations. *Social science & medicine*, 57(1), 71-90.

Yali, A. M., & Revenson, T. A. (2004). How changes in population demographics will impact health psychology: incorporating a broader notion of cultural competence into the field. *Health Psychology*, 23(2), 147.

Experiences of participating in the Synergy EM 2016

This was my first Synergy EM. As an academician looking to expand my current research to include the role of large family networks in health outcomes, I was curious to learn and talk about new methodologies and approaches to understanding the field of social relationships and health. I was especially invigorated during the discussions on culture as this is an area close to my heart and is my expertise. As the only South Asian in the group, I was both heartened and privileged to share my knowledge and experience of working with an underrepresented culture in health psychology research. All in all, it was inspiring to interact with many colleagues in this field and to be able to contribute to a vital topic such as social relationships and health.



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References

- Creswell, J. W. (2013). *Research design: Qualitative, quantitative, and mixed methods approaches*. Sage publications.
- Todd, Z. (2004). *Mixing methods in psychology: The integration of qualitative and quantitative methods in theory and practice*. Psychology press.