

conference report

Social change and new challenges for health psychology: Highlights from the 20th conference of the European Health Psychology Society

by Emely de Vet & Benjamin Schüz, Co-Editors

Warsaw, Poland played host to the 20th annual meeting of the European Health Psychology Society, held from 30 August to 2 September 2006. The program featured six keynote lectures, 231 oral and 272 poster presentations. Contributions came from all over the world, with the United Kingdom, Poland, and the Netherlands being most represented.

The theme of this year's conference being "social change and new challenges for health psychology", professor Susan Michie spoke directly to this issue in her welcome address to conference delegates. Prof. Michie expressed that health psychologists need to be aware of the social significance of their research. Health psychology research may contribute to social change by examining such things as the causes of health inequalities in society, individual self-regulatory processes in health behaviour change or inter-individual differences in adjusting to stress and illness. She also underscored that a key task for the EHPS in the future will be to establish, maintain and improve strong links to research and funding programmes within the European Union and associated countries.

Social relevancy was especially prominent in Stevan Hobfoll's keynote, which sought to demonstrate the impact of stress on people's daily lives, in particular the role of major external stressors such as war, terror and natural disasters. While these stressors threaten psychosocial and economic resources, beneficial outcomes may also result, such as tightening social bonds within the family. Indeed, the development of posttraumatic stress disorder and depressive symptoms are indirectly impacted upon by resource gains and losses due to major stressors such as terrorism. Social support may play a protective role, thereby buffering the individual from the impacts of major stressors.

Professor Ralf Schwarzer's keynote built upon this idea by providing further insight into the various facets of social support and the way in which support may protect from negative stress

responses. He discussed the importance of shifting perspectives on the relationship between social support and self-efficacy. On the one hand, receiving social support might foster optimistic control beliefs, but on the other hand, self-efficacy might facilitate seeking and receiving social support.

EHPS 2006 Conference Evaluation (N = 54)

summarised by Andries Oeberst

Membership Status

Full Member = 33

Student = 13

Eastern European = 1

Non-member = 7

Previous EHPS conference attendance

Yes = 39

No = 15

Balance of programme

	Fine	Too much	Too little
Nr of orals	47	7	0
Nr of poster sessions	42	8	1
Nr of posters	37	15	0

Another socially relevant topic at the conference was the aging and life-span approach to health psychology. In many Western societies, medical and social improvements are allowing people to live longer lives. As the baby-boom cohort ages, continued efforts aimed at promoting (mental) health and prevention of degenerative diseases and illness in this stratum of the population presents a particular opportunity for health psychology both now and in the future.

Additionally, the communication of genetic risks, transforming societies, the role of social-economic status, social context and culture in health represent challenges for future health psychology research.

(Continued on page 13)

conference report (cont'd)

(Continued from page 12)

Health psychology can also contribute to social change by increasing our theoretical understanding of health behaviour change. Consistent with earlier EHPS meetings, this year's meeting emphasised testing health behaviour change theories and

The program quality

"How would you rate the quality of the..."

(1=poor/ 5=excellent)	M	SD	Range
...conference in general	4.2	0.8	2-5
...scientific program	4.0	0.8	1-5
...keynotes	3.6	0.8	2-5
...oral presentations	3.8	0.7	2-5
...poster presentations	3.7	0.8	1-5
...chairing 4.1	0.8	1-5	

The conference quality

"How was the..."

(1=poor/ 5=excellent)	M	SD	Range
...time schedule	4.2	0.7	2-5
...conference venue	4.1	0.8	2-5
...social program	3.9	0.9	1-5
...accommodation	4.0	1.0	1-5

summarised by Andries Oeberst

interventions based on these theories. It is noteworthy that the standards discussed and applied in the testing of these theories have improved to a great extent towards stricter testing, thanks to the introduction of the use of standardized protocols as suggested by the CONSORT statement. Not only has the testing of theories improved, the theories themselves have also experienced a shift. From motivational theories such as the Theory of Planned Behaviour to stage theories and goal and self-regulation theories, the focus has shifted from the more distal view of behaviour change as a result of motivational processes to a more proximal view of the micro-processes involved in the actual regulation of behaviour change. Such proximal views may imply that health behaviour change activities should be guided by individuals' prioritizing and setting of goals, their deciding on how to achieve a goal, and to planning the entire sequence of activities that is needed to achieve a goal.

Although there seems to be a shift in theorising on health behaviour change, most of health psychology models still rely on the assumption that

health behaviour change is a rational process determined mainly by cognitions. Although research suggests that cognitions and behaviour are less consciously controlled than previously thought, the models we apply remain untouched by these insights. In his keynote lecture, Professor Paschal Sheeran pointed out that health behaviour may be the result of dual processes. In his lecture he showed that health behaviour is caused by both rational as well as irrational processes. A future challenge of health psychology research and theorising is in translating both routes into effective health promoting interventions. One example for such dual processing would be the processing of risk information, where information on health threats is processed consciously and eventually transformed into protective measures, while at the same time eliciting emotional responses to health threats such as fear.

Alexander Rothman outlined that it is crucial to transfer these ideas into sound theory-based interventions which can then be used to test the assumptions of theory. This remains a key challenge for health psychology on its route towards increased scientific rigour and social impact.

"How would you rate the conference in terms of..."

(1=poor/ 5=excellent)	M	SD	Range
...value for money	4.0	0.8	2-5

"How well did the conference facilitated the following aims and objectives?"

(1=poor/ 5=excellent)	M	SD	Range
...dissemination of good quality research	4.0	0.8	2-5
...opportunities to meet and talk with colleagues	4.2	0.9	1-5

summarised by Andries Oeberst

In closing, the city of Warsaw provided an ideal setting for discussion of the role that health psychology can play in achieving social change. Many future challenges and opportunities were outlined, and we look forward to discussing the progress that a year brings at this year's 21st annual meeting in Maastricht, the Netherlands from 15-18 August 2007.