

Breakthrough or neat trick?

A radical attempt to assuage a man's obesity led to hyperbolic headlines heralding a revolutionary Alzheimer's treatment in January, after neurosurgeons in Canada reported their intervention had unexpected effects on the patient's memory (tinyurl.com/28dbw9).

Andres Lozano and colleagues at the University of Toronto inserted electrodes into the hypothalamus of their 32-stone patient after all other attempts to stifle his appetite had failed. But instead of affecting his desire for food, the deep brain stimulation apparently led the man to experience vivid memories from decades earlier.

Out of surgery, and with a battery sewn into his chest powering the electrodes, three weeks of hypothalamic stimulation appeared to improve the man's performance on

verbal memory tests, while leaving his other cognitive abilities unaffected. Moreover, low-resolution electromagnetic tomography (the man was too large to fit in a PET or fMRI scanner) showed hypothalamic stimulation was associated with increased activity in the patient's

temporal lobes. 'We feel stimulation drives the memory circuit in the brain,' Professor Lozano told us.

However, experts contacted by *The Psychologist* were less convinced. Professor Sergio Della Sala at Edinburgh University told us that the new finding is reminiscent of the work of Canadian neurosurgeon Wilder Penfield in the 1950s, who reported that some epilepsy patients experienced vivid

autobiographical memories after stimulation of their temporal lobes. 'This gave rise to the wrong view that our memory system works like a video camera whose recordings are stored

intact in the brain,' Della Sala explained.

'In fact, only few of his many hundreds of patients reported such experiences. Moreover, we do not know whether these were real memories or creations by the patients. The same applies to the recent observations that stimulation of the hypothalamus results in autobiographical memories. First it is just one case, second we do not even know whether those reported were real memories. Indeed, we now know that the memory system does not work like a video camera, and that it is very unlikely that a bunch of neurons would store specific memories. Memories are representations, and are likely to be spread across vast areas of our brain.'

Regarding the effect of the stimulation on the patient's verbal memory performance, Professor Della Sala said that there were issues surrounding a possible placebo effect and effects from repeated testing. 'I am persuaded that this is an interesting observation,' Della Sala told us. 'What I quibble about is that from a single, sporadic, unsubstantiated observation most newspapers and commentators are now claiming that this could be a breakthrough to treat Alzheimer's disease.' CJ



SEXUAL BOUNDARIES AND HEALTHCARE PROFESSIONALS

The Council for Healthcare Regulatory Excellence (CHRE), the health professions' watchdog, has published a set of three documents on clear sexual boundaries between healthcare professionals and patients.

The work was commissioned by the Department of Health in response to a series of inquiries into serious breaches of sexual boundaries by healthcare professionals. It was carried out in consultation with patient groups, professional bodies (including the British Psychological Society) and health professions regulators.

Speaking about the documents, CHRE Chief Executive Harry Cayton said: 'The relationship between a healthcare professional and a patient or carer depends on confidence and trust. A healthcare professional who displays any form of sexualised behaviour towards a patient breaches that trust, acts unprofessionally, and may, sometimes, be committing a criminal act. We hope that this common sense guidance will bring clarity to a difficult area, helping those who work in regulation and healthcare to prevent sexual boundary breaches by healthcare professionals.'

Three separate documents have been published; the responsibilities of health professionals; guidance for regulatory bodies' fitness to practise panels; and guidance for higher education institutions and training providers. All three documents are available from www.chre.org.uk. JS

NEW YEAR HONOUR

Professor Binna Kandola, a member of the National Employment Panel, received an OBE for services to disadvantaged people and to diversity.

NOT TO BE SNIFFED AT

It's been linked with trust and empathy, now a study by Paul Zak and colleagues has found the brain hormone oxytocin appears to increase people's generosity (tinyurl.com/25q2nh). In a financial game, participants made 80 per cent higher offers to playing partners after sniffing oxytocin than when on placebo. When the game changed to emphasise altruism as distinct from generosity, no effect of oxytocin was found.

STATUTORY REGULATION

For all the latest news, see www.bps.org.uk/statreg

The sound of smiling

In case you were ever in any doubt about it – yes, it is worth smiling down the telephone. Researchers at the University of Portsmouth have shown that listeners can hear whether someone is smiling solely from the sound of their voice.

Past research in this area has tended to use actors or synthesised voices, but this new study by Amy Drahota and colleagues is notable for the clever way they created natural examples of people saying the same words either with or without a smile.

Eight speakers uttered the words 'I do in the summer' in response to 17 questions ranging from the banal 'Do you ever leave the house without a brolly?' to the more amusing 'Do you ever skinny-dip?'. The speakers' facial expressions as they answered were coded as either displaying a genuine 'Duchenne' smile, in which the skin around the eyes is creased,

a less intense, non-Duchenne smile, in which only the mouth moves, or as showing a suppressed or stifled smile.

Even listeners who were played back audio recordings of the 'I do in the summer' utterances were able to judge whether the speaker was smiling or not with more accuracy than would be expected if they were guessing. They were most accurate for Duchenne smiles, and less so for non-Duchenne or suppressed smiles. The mistakes made by the listeners were also useful to the researchers because they pointed to the acoustic cues being used to identify smiling.

Writing in the journal *Speech Communication* (tinyurl.com/3y6e7c), Drahota's team said their findings could

have practical applications: 'Although the present computerized voices are clear, they lack the emotional qualities which make human speech so meaningful and naturalistic... the present research findings have demonstrated some possible acoustical correlates that may help make synthetic speech sound more "smiley".' **CJ**

Culture's effect on brain activity

A person's cultural upbringing doesn't just affect their worldly perspective and thinking style, it can also change the way their brain responds to a simple visual task.

Trey Hedden at Stanford University and colleagues scanned the brains of 10 East Asians recently arrived in the USA and 10 Americans of European descent. Once in the scanner, the participants' task was to look at a series of lines within squares, and to judge whether the current line was the same length as the preceding one – an absolute task – or to make a relative judgement as to whether it was the same size in proportion to its square, as the preceding line had been to the square it was in.

The two cultural groups performed the tasks equally well, but dramatic differences were found in their brain activity depending on the task condition. The Asian

participants showed increased activity across a sprawl of brain areas when engaged in the absolute task compared with the relative task. By contrast, the European Americans showed the opposite pattern, with their brain being much more active during the relative task.

Writing in the journal *Psychological Science* (tinyurl.com/2gkme9), Trey Hedden and colleagues said the widespread increase in brain activity, when it occurred, probably reflected the engagement of sustained attentional control to help perform a task requiring greater deliberate effort – for the Asians this meant the absolute task, whereas for the Westerners it meant the relative task.

'We were surprised at the magnitude of the difference between the two cultural groups, and also at how widespread the engagement

of the brain's attention system became when making judgements outside the cultural comfort zone,' Hedden said. As for the direction of the findings, the authors speculate that 'Many ideas and practices prevalent in American cultural contexts require separating objects from their contexts and making independent or absolute judgments. In contrast, many ideas and practices prevalent in East Asian cultural contexts require connecting objects to their contexts and making interdependent or relative judgments.'

These brain imaging findings come after behavioural studies by Angela Leung and colleagues demonstrated that culture can affect people's thinking styles, such that people of Asian descent tend to visualise themselves from a third-person perspective, while people from a Western background

visualise themselves in the first-person (see their 2007 article from the journal *Psychological Science* at tinyurl.com/2wfv2n).

Leung, who is at Singapore Management University, told *The Psychologist* that an interesting avenue for future research would be to examine whether and how a bicultural person's thinking style and brain processes can change as they are exposed to different cultures. 'Such findings can shed light on the relative fluidity of brain functioning in response to psychologically meaningful contexts, thereby suggesting a dynamic interactive effect among individuals' cultural background, their person-level characteristics (e.g. levels of value endorsement and cultural identification), and the presenting features of situations (e.g. the presence or salience of cultural carriers in the situation).' **CJ**

BIRTH COMPANION

Professor Theresa Marteau (King's College London) has been appointed chair of Birth Companions, a charity that supports women prisoners during pregnancy and birth.

MUSIC THERAPY

More better-quality research is needed to establish whether music therapy can help reduce the symptoms of depression, a Cochrane review has concluded (tinyurl.com/3dtdzv). Anna Maratos and colleagues identified five relevant controlled studies, four of which reported a benefit of music therapy plus standard care beyond that observed for standard care alone. However, the trials were of low quality, providing no explanation of their randomisation procedures, and attempts to keep researchers blind to the treatment condition of the participants were incomplete or absent.

ENHANCED DEBATE

In a commentary for *Nature* (tinyurl.com/243pzn), psychologists Barbara Sahakian and Sharon Morein-Zamir of the MRC/Wellcome Trust Behavioural and Clinical Neuroscience Institute in Cambridge, say they are aware many of their healthy colleagues are taking 'cognitive enhancers' such as Modafinil to fight jetlag or enhance their productivity. Sahkian and Morein-Zamir are calling on society to start discussing the implications of cognitive enhancers, and *Nature* is hosting a forum (tinyurl.com/2qpxff) on the topic. This latest endeavour comes just weeks after a British Medical Association discussion paper (tinyurl.com/36ybr9) raised many of the same issues, in some cases going further, to discuss the ethics of using transcranial magnetic stimulation, deep brain stimulation and genetic manipulation for the purposes of cognitive enhancement.

The trauma of war

Stark evidence of the mental health risks facing troops deployed in Iraq and Afghanistan has come from a large American study, unusual for the fact that it did not depend on retrospective report. More than 50,000 American military personnel completed demographic and psychological surveys between 2001 and 2003 as part of the millennium cohort study, with the first follow-up occurring between 2004 and 2006.

The second wave of data showed that troops who were deployed to Iraq and Afghanistan for the first time and faced combat situations were three times more likely to develop new post-traumatic stress symptoms than were non-deployed troops. Female troops, the divorced, current smokers, and heavy drinkers at baseline were all particularly vulnerable. However, being deployed but not having to face combat was not such a risk to mental health – post-traumatic stress among these troops was even lower than among the non-deployed.

Writing in *BMJ* (tinyurl.com/3d4q4p), Tyler Smith and colleagues said: 'The unpredictability and intensity of urban combat, constant risk of roadside bombs, multiple and prolonged tours, and complex problems of differentiating enemies from allies can leave many troops with high stress levels and possible lasting health consequences.' Indeed, among the 2.4 per cent of troops who had PTSD symptoms prior to the start of the study, 40–50 per cent still had them at the three-year follow-up. Perhaps surprisingly, those showing persistent problems tended to be the older, higher educated officers – yet this was the very same group who were the least

likely to report PTSD symptoms for the first time. The researchers said this could reflect a fear of stigma among this group.

The new American data also suggest rates of PTSD are higher in US troops than among the British, a difference that has been observed before. Meanwhile, a Ministry of Defence report published in January has identified 585 cases of traumatic brain injury (TBI) among 36,000 deployed British troops reporting injuries since 2003, with around 80 per cent thought to be mild. This works out as 0.5 per cent of deployed troops experiencing TBI. Because of the disparity with US figures indicating up to 20 per cent of its soldiers and marines have suffered TBI, some commentators have raised concerns that many British cases are still going undiagnosed. Derek Twigg, Under Secretary of State for Defence, said research into ways to improve prevention and diagnosis was ongoing.

Of course, the most vulnerable people at times of war are often the civilians. In January, clinical psychologists Howard Johnson and Andrew Thompson at the University of Sheffield published a review of studies looking at rates of

PTSD and its maintenance among civilian survivors of war trauma and torture (tinyurl.com/2rfsbo). Levels of PTSD varied hugely from 6 per cent to more than 90 per cent, probably reflecting the wide range of methods used, problems with translation, and the diversity of survivor experiences. Women and the elderly seemed to be more at risk, but the researchers said that could be because of the nature of their experiences rather than any inherent vulnerability. Protective factors included religious belief and family support.

'Relatively little research has looked at the impact of the conflict in Iraq on the civilian population,' Dr Thompson told us. 'Rates of PTSD in civilians may result in part from a dose effect, with trauma increasing in proportion to the intensity of stress suffered. Overall PTSD rates appear quite low, and there is clear value in further exploration of protective factors.'

Dr Johnson added that it is important when studying civilian war trauma to address 'indigenous manifestations of suffering' and that difficulties can arise from 'imposing a Western value system and diagnoses on non-Western experiences.' CJ

Organ donation

More than 8000 people in the UK are awaiting bodily organs, and the gap between the number of donated organs available and the number needed is widening. According to psychologist Sheila Payne of Lancaster University and colleagues, the main reason bereaved family members choose not to donate the organs of their deceased relatives is out of a desire to protect the body of the person they have lost.

In a study commissioned by Transplant UK, Payne's team, led by Magi Sque at the University of Southampton, interviewed 26 bereaved family members from across the UK who had declined to donate their deceased relatives' organs. Among the reasons given for making this decision were the desire to observe the actual moment of death (in the case of life support being switched off), a discomfort at the timing the donation request was made, and a lack of knowledge about what the process of organ donation actually involves.

However, the leading reason for declining organ donation was a wish to protect the deceased person's

body and to prevent any further physical suffering. Bereaved relatives spoke in terms of bodily violation: 'I just couldn't bear the thought of L being split open: it would seem to me a violation', and desecration: 'If we had done that to G, I would have felt his body was desecrated'. These and other concerns meant that donation was declined even in the six cases where the bereaved family member reported that they were generally positive about organ donation, and that their lost loved one had been in favour of it.

The researchers said their findings suggest pro-donation campaigns should focus on the relatives' 'sacrifice' as well as on the 'gift of life' message that currently dominates. Writing in the *Journal of Advanced Nursing* (tinyurl.com/2q9a6m), they concluded that relatives' 'perceptions of the donation operation, or just the idea of the cutting of the body, may help to explain why, although there is general awareness of the benefits of organ donation and transplantation in many countries, refusal rates remain high at the bedside'. CJ

Anti-therapy editorial

In a forthright editorial for the *Journal of Psychopharmacology* psychiatrists David Nutt and Michael Sharpe have questioned the safety and efficacy of talking therapies for depression and anxiety. The pair argue that efficacy trials for psychotherapy rarely match the rigour of equivalent trials for drugs, and they raise particular concerns over the number of therapists who abuse their patients. Assuming a conservative estimate that abuse occurs in three out of every 100,000 patient-therapist exposures, they wrote, then this would be equivalent to an adverse effect risk that in drug treatment would raise grave regulatory concerns. '[B]efore rolling out psychotherapy in place of drug treatment,' they concluded, 'proper controlled assessments of efficacy and of safety need to be carried out.' CJ
| See also our January feature 'When therapy causes harm'

RESEARCH FUNDING NEWS

The ESRC is offering 20 joint interdisciplinary research studentships with the NERC. These are to encourage **postgraduate research on environmental issues** which combine approaches of both the environmental and social sciences. Closing date is 14 April 2008.
| www.nerc.ac.uk/funding/available/postgrad/schemes/jointesrc.asp

Other ESRC schemes available include **Postdoctoral Fellowships** – applicants for these should have no more than three years' active postdoctoral experience; and **Bilateral Agreements for research collaborations with overseas partners** (e.g. Australia, Germany, Ireland, Netherlands). Applications for research collaborations should be made via the Open Standard and Small Grants competitions. Both funding streams can be applied for at any time.
| tinyurl.com/2ys8hy and tinyurl.com/yox7kn

The Alzheimer's Society is once again offering **PhD studentships** (closing date 23 May 2008) and **Research Fellowships for postdoctoral researchers** (closing date 31 October 2008).
| tinyurl.com/2h1k2d

The BBSRC's **Longer Larger Grant scheme** (LoLa) provides funding for large grant proposals that tackle strategically important problems within the BBSRC remit. In particular it will support multidisciplinary research, often with numerous staff posts at the cross-discipline boundaries. It will also provide funding for up to five years. Proposals between £2m and £5m should be via this scheme. The deadlines for outline proposals in 2008 are 12 March, 22 July and 17 September.
| www.bbsrc.ac.uk/funding/grants/lola.html

The Wellcome Trust is offering **Enhancement Awards in Biomedical Ethics**. These awards enable groups of researchers to expand the research capacity of existing staff, provide opportunities for PhD studentships and provide support for the hosting of events. Awards will be for a five-year, fixed term period and provide funding of approximately £350,000. Preliminary applications should be made by 1 April 2008, with full applications being required by 31 August.

The Trust is also offering **Research Fellowships for postdoctoral researchers**. Closing dates in 2008 are 1 August and 1 December.
| tinyurl.com/33s333 and tinyurl.com/2f67hs

The National Institute of Health (NIH) has three opportunities that may be of particular interest to psychologists:

Decision making in cancer: single-event decisions (R01). Deadline dates for application are 5 June and 5 October 2008.

| <http://grants.nih.gov/grants/guide/pa-files/PA-08-063.html>

Reducing mental illness stigma and discrimination (collaborative R01). Funding for research for partnerships to assess the effectiveness of existing stigma and discrimination reduction programmes and approaches, including media-oriented approaches. Deadline dates for application are 5 June and 5 October 2008.

| <http://grants.nih.gov/grants/guide/pa-files/PAR-08-040.html>

Translational research on the relationship of anxiety and depression (R21). Funding for three years. Closing date for letters of intention is 23 April, with full submissions required by 23 May.

| <http://grants1.nih.gov/grants/guide/pa-files/PAR-06-473.html>

info

For a list of current funding opportunities go to www.bps.org.uk/funds. Funding bodies should e-mail news to Elizabeth Beech on elibee@bps.org.uk for possible inclusion

OUT NOW IN BPS JOURNALS

Jon Sutton on some of this month's offerings

A special issue of the *Journal of Neuropsychology* brings together 16 papers in the field of face perception. From healthy children to adults with brain lesions, and from paper-and-pencil tests to functional brain imaging, they show the extraordinary diversity and fruitfulness of the approaches now being pursued. The guest editors point to several key trends in neuropsychology where studies of faces have been in the vanguard: the impact of functional brain imaging, the link to genetics, interest in development and change as well as fixed deficits, the interactivity of the system, and the value of the case series approach. (JoN)

Scanning obituary notices and contacting couples who had lost a child – a dirty job, but Leoniek Wijngaards-de Meij (Utrecht University) and colleagues did it in order to examine the relationship between parents' own and their partners' ways of coping. Restoration-oriented coping (defined as an active attempt to look towards the future and to rebuild one's life) buffered the negative effect of high-levels of loss-orientation on depression. For men, having a female partner high in restoration-oriented coping was related to positive adjustment. The authors say that 'an important next step would be to identify the processes underlying high restoration-orientation in women'. (BJCP)

Why do so many eating-disorder patients terminate treatment prematurely? Caroline Bjorck (Karolinska University Hospital, Stockholm) and colleagues compared those who had dropped out with patients who had completed treatment and those who were still in treatment after a year. Considering several explanations for the differences they found, the authors suggested that the most viable might be that patients who drop out may have more limited treatment goals. Together with less self-blame, it may be easier for these patients to disengage from treatment when they experience symptom improvement. At the same time, when questions of opening up and trusting the therapist come to the fore, separation anxiety may be awoken. Instead of choosing to engage in this new phase of therapy, such patients may decide to terminate in order to maintain their psychological equilibrium. (PAPTRAP)

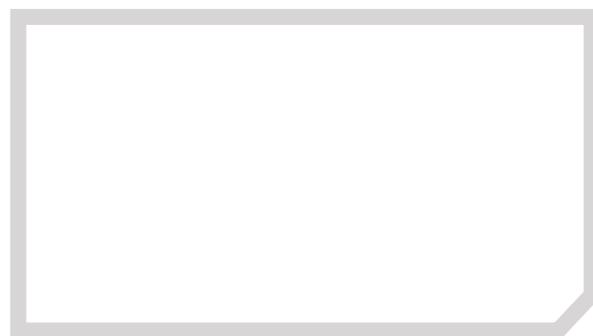
Depression relapse and drug maintenance

A Dutch study has found that risk of relapse is lower among depressed patients who stop taking antidepressants and participate in cognitive therapy, than it is among those patients who continue taking their medication (tinyurl.com/2c9bsd). The finding appears to contradict National Institute for Health and Clinical Excellence guidelines, which state that people suffering from recurrent depression should be maintained on antidepressant medication for two years.

Claudi Bockting at the University of Amsterdam and colleagues followed for two years the progress of 172 patients with recurrent depression. After a period of recent remission, only around a

quarter of the group continued to take antidepressant medication as recommended by clinical guidelines. Their

patients who stopped taking their medication altogether (27 per cent). Moreover, among the patients who stopped



rates of relapse (60.4 per cent) were actually comparable to those observed for the patients who took their medication only intermittently (63.6 per cent), and substantially higher than for the

taking medication, relapse rates were lowest for those who had the help of cognitive therapy (8 vs. 46 per cent), suggesting post-remission therapy could play a key role in helping prevent relapse. CJ

EVENT REPORT

Christian Jarrett reports on a public discussion 'The New Science of Personality' at the Institute of Contemporary Arts on 14 January 2008

The Nash room at the Institute of Contemporary Arts was of an agreeable character, its high ceiling and neutral tones conveying a conscientious concern for the comfort of its occupants. Inside were gathered psychologist Daniel Nettle of Newcastle University; neuroscientist Keith Kendrick of the Babraham Institute, Cambridge; author Rita Carter and philosopher-medic Raymond Tallis. The quartet had convened to discuss the 'new science of personality', a movement grounded on a growing consensus on how we should describe personality (in terms of the 'Big Five' factors), even if we can't yet fully explain how it comes about.

Nettle opened proceedings by explaining what led him to write his recent book on personality, within which he heralds a renaissance in the field. Firstly, several

longitudinal studies, some spanning over 70 years, have shown the predictive power that basic pencil-and-paper personality tests can have. Lewis Termin, for example, found that personality measured in 1921 predicted mortality when measured in 1991. Meanwhile, advances in the human genome project and brain imaging have returned people's attention towards differences between individuals, revealing far larger inter-subject variation than was expected. Against this background, Nettle said: 'The Big Five provide a useful organising heuristic – rather like thermostats, different individuals have different thresholds that knock them into a given state, such as anxiety or arousal, depending on the situation.'

Kendrick fleshed out these arguments, literally, with an overview of the more

FROM THE RESEARCH DIGEST...

False confessions

Not surprisingly, confessions are extremely persuasive in court, but according to Jessica Klaver and colleagues, all too often these confessions are false, leading to the wrong person being found guilty. Now Klaver's team have used an elegant laboratory task to compare two types of interrogation technique and found that it is so-called 'minimising' questions and remarks – those that downplay the seriousness of the offence, and which blame other people or circumstances – that are the most likely to lead to a false confession.

Over 200 students were invited to take part in what they were told was a test of their personality and typing skills. During the typing part of the task, they were warned in advance that pressing the 'Alt' key would cause the computer to crash and a loss of all data. Subsequently, when the participants were required by the task to type 'Z' (near the 'Alt' key), the researchers contrived it so that the computer duly crashed, and the participants were accused of pressing the 'Alt' key.

Next the students were subjected to either 'minimising' remarks (e.g. 'Don't worry. It was just an accident' and 'This programme seems not to be working lately') or 'maximising' remarks that played up both the evidence for the student being guilty and the seriousness of the alleged error (e.g. 'You must have pressed it' and 'We have run over 50 people on this test in the past three weeks and the computer hasn't crashed once').

Overall, 43 per cent of the students subsequently signed a confession statement, stating falsely that they had indeed pressed the 'Alt' key. Crucially, the confession rate was four times higher among the students subjected to minimising remarks as opposed to maximising remarks.

The researchers said that in real life, minimising techniques 'give the suspect a false sense of security using flattery, offering legal or moral face-saving excuses for actions, conceptualising actions as accidental, blaming the victim and underplaying the seriousness of the charges'.

This item originally appeared in the Society's free Research Digest. For more and to sign up, see www.researchdigest.org.uk/blog

biological side of personality. That our characters are rooted in our brains was demonstrated most eloquently by the sad case of Phineas Gage – the railway worker whose personality was transformed after an iron rod left a large hole in the front of his brain. More recently advances have been made in how brain chemicals like dopamine and serotonin are linked with mood and sociability, and oxytocin with trust and bonding.

But that was as far as the mood of consensus reached. Speaking next, Rita Carter advocated an extreme situationist position: 'We are incredibly fluid,' she said. 'We develop habits of mind that become characteristic and which appear fixed, but a novel enough situation will provoke changes in behaviour that show nothing is fixed. There is no such thing as the self.' Carter added that the data back this up, citing one study that showed there was a less than 25 per cent chance of a person being classified into the same 'type' on repeated testing with the Myers-Briggs Type Indicator.

But Raymond Tallis couldn't have agreed

with Carter less, arguing that the whole intelligibility of our existence depends on our sense of self. 'The self is a complex notion that is easy to misplace or to look for in the wrong place, just as David Hume did when he wrote "I never can perceive this self without some one or more perceptions; nor can I ever perceive anything but the perceptions".' But though Tallis defended the notion of selfhood, he had little time for the science of personality. 'There can't be a new science of personality,' he said, 'because there hasn't been an old science.'

Carter retorted that it is just this folk sense of self espoused by Tallis that is holding up the science of personality. 'Until people give up this superstitious idea of the self – like a modern-day soul – the project of the science of personality will be delayed,' she said.

'Am I alone then in finding my life so coherent, with such a strong sense of inner stitching?' Tallis asked. 'Does everyone else just experience a kaleidoscope of sensation?' A smiling Nettle couldn't resist: 'More or less, yes,' he answered.

MORE FROM BPS JOURNALS

Jon Sutton continues this month's round-up

Pointing to the fact that only five out of 40 articles in four recent volumes of JOOP included a practitioner as an author, Alan Walker (East Carolina University) encourages practitioners to become more involved in the publication process by working with their supervisors in negotiating time for research and in actively seeking out academicians to collaborate with. Walker praises the academicians actively involved in consulting and practitioners actively seeking to be involved in the research and publication process: 'Liaisons who serve as ambassadors in bridging the science-practice gulf are the potential heroes of our profession. They are the true scientist-practitioners.' (JOOP)

According to a study led by Fiona Gillison (University of Bath), psychological adjustment to the transition from primary to secondary school takes place relatively quickly, and the negative impact on quality of life (QoL) observed for some children is short-lived. Improvements in QoL were predicted by improvements in perceived relatedness (feeling that one is connected to and cared for by others) and perceived autonomy (the need for personal agency). (BJEP)

Behavioural inhibition in infants is a hypothesised predictor for shyness, social anxiety and depression in later childhood, adolescence and even adulthood. Now a study by Eva Moehler (University of Heidelberg) and colleagues has found that infant crying to unfamiliar stimuli at four months of age is a significant predictor of behavioural inhibition in the second year of life, suggesting the possibility of a simple measure of a temperamental anxiety disposition at a very young age. (BJDP)

According to Frenk van Harreveld and colleagues at the University of Amsterdam, when there is no chance to do better in the future, people are inclined to engage in psychological forms of repair work (such as comparing their own outcomes to those experienced by less fortunate others). The authors say that 'misery seems to love (and even actively look for) company'. If however there is a subsequent opportunity, people are more inclined to engage in behavioural strategies such as seeking information that might prevent future regret. (BJSP)

Boozenight before Xmas

Chris Hackley on what happens when research traditions collide in full view of the media

Our three and-a-half-year ESRC project on young people, alcohol and identity left us struck by the importance of drinking stories for many young people's sense of identity within their friendship groups. Being drunk could actually be viewed not as a source of embarrassment but of prestige for some young people. Consequently, when the Christmas anti-drink campaigns began with a TV ad made by drinks company Diageo playing on the shame of being drunk, we realised that it was unlikely to be seen as a powerful deterrent. We did not set out to examine the effectiveness of 'social' marketing and advertising campaigns, but this incidental finding of our research connected in quite an immediate way with policy debates on 'binge' drinking. So I and my colleagues, Christine Griffin, the project leader, Willm Mistral and Andrew Bengry-Howell of Bath and Isabelle Szmigin of Birmingham agreed a press release.

Since we are from three different universities our first challenge was to try to control the message to be released by our respective PR offices. Three different versions, all landing in journalists' in-trays, would confuse them, dilute the impact, and make us look unprofessional. We had to rein in the instinct of some PR officers to spin press releases by attributing them solely to their own academic as a series of direct quotes. No one would care if one academic felt that Diageo's ads had a flawed premise; but with all three universities, not to mention the ESRC, emphasised clearly in the text of the release, we might just have a story. We

agreed a version that our project leader's PR office at Bath would release nationally, while the others were to release locally on 7 December with an embargo to 10 December to increase the chance of more coverage.



Being drunk could actually be viewed as a source of prestige for some young people

On 10 December headlines like 'Anti-drink adverts are backfiring' (*Daily Telegraph*) 'Anti-drink campaign aimed at the young is just wasted' (*The Times*) and 'Binge ads fun' (*The Sun*) were the result. The press release spread over the internet on scores of alcohol, health and news sites. We were contacted all day for radio and TV appearances. *BBC Breakfast* sent

a car to pick me up and I was on the couch with Bill and Sian at 6.30a.m.

Some aspects of the coverage were unnerving. I suffered a heart-pounding panic attack during my BBC appearance but managed to hide it fairly well. There was no opportunity to rehearse. I was ushered straight on to the famous red sofa as the show was being broadcast. They introduced the item, showed one of the ads on a monitor and we were on. After what seemed like milliseconds I was being driven out of the BBC Television Centre. It wasn't until I watched the recording later that I realised I'd been given plenty of time to try to put over my points, but the pumping adrenalin had made time contract.

Later that day Radio Five Live put me on a live debate with Diageo's Marketing Director. Diageo insisted that their research, commissioned from prestigious market research agency Millward Brown, had suggested that young people were indeed wary of the social stigma that might result from getting too drunk. They had thousands of respondents. We had 94.

I felt I held my own, though arguing across two pretty incompatible research paradigms (academic discourse analysis versus large-scale commercial research survey) was difficult to do on radio. Another difficulty was that people seemed to assume that our research had been about the effectiveness of anti-drink advertising, when it was about identity with an incidental connection to advertising. Finally, the week ended on a frustrating note as BBC *Newsnight* researchers had lengthy conversations with me for their 'Boozenight' special but later dropped me for a man who'd written a book about wine.

I looked at some of the internet blogs that grew around the topic on the AOL, BBC and other websites, and the main theme seemed to be 'here is another bunch of academics spending huge sums of public money to discover the obvious'. The idea that many young people think getting embarrassingly drunk is excellent fun is not exactly counter-intuitive. But

DUNCAN PHILLIPS/REPORTDIGITAL.CO.UK

contribute

This is the page of the Society's Press Committee, which aims to promote and discuss psychology in the media.

If you would like to comment on a recent newspaper article, TV or radio programme involving psychology, if you

have tips for others based on experiences, or if you know of a forthcoming programme or broadcast, please contact the

'Media' page coordinating editor, Fiona Jones (Chair, Press Committee), on F.A.Jones@leeds.ac.uk

the story emerged because Diageo were convinced by their research that drunkenness carries a social stigma for young people, and they used that as the main creative theme for their campaign.

I can't speak for my colleagues, but I was happy with the way the publicity went. Our PR offices did a fantastic job and the story was reported with a high level of integrity. Most versions stuck closely to the original press release. *The Sun*, naturally enough, used a little creative licence to liven the story up, but what they said was not an unreasonable inference of what we'd said. Since embarking on the project we were conscious that some element of public policy engagement would be appropriate, but we were very wary of our research fuelling more populist 'binge drinking' headlines. We reviewed and discussed transcripts for more than three years. Finally, we all agreed on a sense of the data sets that we felt had solid intellectual integrity. The opportunity for this publicity then came by accident.

As for the central debate the issue

sparked, we must defer to the marketing expertise of corporate giants like Diageo. But I tell my advertising students that every creative brief has to have a clear and supported reason for the consumer to believe the proposition in the ad. Our research suggested that many, if not all,

"arguing across two pretty incompatible research paradigms was difficult to do on radio"

young consumers would simply not believe the proposition in Diageo's ads. Getting drunk in their group does not risk their friendships. In fact it almost appears to be a prerequisite for group membership in some cases.

And what of all this? Was there a point to it? The issue is very sensitive for the advertising and alcohol industries. The Diageo campaign was part of the alcohol industry's initiative to appear more socially responsible. Alcohol brands spend millions on advertising, and commercial media need that revenue. We were not criticising British advertising, the advertising regulators or the alcohol industry. None of them has anything to gain from alcohol misuse among young

people. We were contributing to the debate around alcohol by drawing attention to one possible flaw in the assumptions behind alcohol strategy and public policy.

The government will launch another anti-drinking TV campaign in April. Word is that this too will play on the negative implications of excess drinking. When Sian Williams on *BBC Breakfast* asked me 'What would you do?' I didn't have an easy answer. But at least we said something we think is true and important. Our research may not be in the public eye again but the profile it achieved might help us in disseminating more complex aspects of our findings. Diageo have written to us to ask us to discuss our research, and we've accepted their invitation. We won't agree. But the conversation might be interesting.

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Reference

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