Rarely is the British Psychological Society strapline of ‘Promoting excellence in psychology’ so to the fore as during a conference awards symposium. Here were four superb speakers in their own right, presenting separately but finding common threads through their work, showcasing the very best the discipline has to offer.

First, Dr Praveetha Patalay (University of Liverpool), winner of the Outstanding Doctoral Research Contributions to Psychology Award, outlined determinants and developmental trends surrounding child and adolescent wellbeing in the UK. In child mental health, the focus has been on psychopathology not wellbeing, and it’s an important distinction: the two are not as closely linked as you might think, and do not behave the same developmentally either. Using large-scale British cohort studies (which Patalay noted psychologists make less use of than other disciplines), we find that some of the aspects that matter for mental ill health don’t matter so much for wellbeing, and vice versa. For example, factors associated with wellbeing at the age of 11 include whether the young person likes and is engaged with school, feels safe in the local neighbourhood, and perceives their own family to be richer than friends. For mental illness, individual characteristics are more important, such as chronic illness, communication difficulties, special educational needs, and cognitive ability. Curiously, high family income is a risk factor for wellbeing, but protective factor for mental illness.

Spearman Medal winner Dr Michael Banissy (Goldsmiths University of London) researches how we share the experiences of others. First-hand touch and so-called ‘vicarious touch’, responding to another person being touched, recruit many of the same brain areas, can be socially modulated, and serve as a useful model to study empathy. Banissy takes this further by looking at the mechanisms underlying ‘mirror touch synaesthesia’ – those who actually map the sensations of other people onto their own body. It’s not just about a level of activation: people with mirror touch synaesthesia have differences in how they represent the self vs. other. They show a greater tendency to treat other people like themselves, and this may be mediated by reduced brain volume in the right temporal parietal junction.

Independent practitioner Dr Joanna North, recipient of the Award for Distinguished Contributions to Professional Psychology, certainly pressed the empathy buttons as she presented lessons from a decade of adoption support. The good news is that professionals are now more skilled at identifying the psychological and emotional impact of the adoption process on adoptees: ‘We didn’t have a language to talk about the process of adoption. We now allow children to think so much more about the experience.’ But that’s not to say the process is now smoother or less complex. ‘Adoption is a very political act now,’ North said. ‘There’s a tension between the right to find a birth parent as opposed to the right to remain cared for and safe for the rest of their lives.’ The idea of a craving for a biological parent has not been allowed to surface into consciousness, North said, and there are new ‘twists and turns’ to the process, particularly social media: ‘Children find their birth parents with a few clicks of the mouse.’ This can leave adoptive parents ‘devastated by the experience of what they perceived as absolute treachery of their adopted children’, the child broken by unfulfilled promises, and it’s ‘absolutely nobody’s fault’, North said. Many children do have a happy and secure experience, she acknowledged, but ‘conflict – between the biological, magnetic sense of belonging as opposed to the legal sense – is always going to be there’. So what can be done? North outlined interventions – weekly counselling, advice on development and behaviour, and the building of a coherent life story for the child which they have to learn to live with.
Finally, Professor Alex Haslam (University of Queensland), winner of the Presidents’ Award for Distinguished Contributions to Psychological Knowledge, introduced the new psychology of health: ‘unlocking the social cure’. As ever, his research is hugely collaborative, theoretically integrative and practically important. We’re ‘absolutely appalling’ at understanding the importance of social factors as predictors of mortality – people ‘embrace a medical model’ and assume it’s all about smoking, physical activity, weight, etc. ‘Scientifically speaking, this is a profoundly unsatisfactory state of affairs,’ Haslam warned. In fact, a large part of our sense of self derives from group memberships, and this ‘social identity’ is qualitatively distinct from and irreducible to personal identity. It’s the basis for group behaviour and associated social processes such as trust, influence, organisation and leadership, but it also has implications for self-esteem, control, belonging, social support, coping, resilience, purpose and meaning. From these ideas stem 15 hypotheses associated with the social identity approach to health, transcending ‘harmful’ sub-disciplinary boundaries. Drawing on data from the BBC Prison Study and more recent research, including with migrant populations, Haslam focused in on paranoia and psychosis. He concluded that contrary to the idea that psychosis has purely biological, genetic or intrapsychic causes, there are grounds for seeing it as the product of an interaction between these things and social context. The social psychological dimensions are ‘major not minor, foundational not peripheral, essential not incidental to effective intervention’. Yet, Haslam argued, compared with our investment in medical research, our investment in this line of inquiry is pitiful. ‘There’s a lot of low-hanging fruit here… social psychologists need to get out more’ in order to engage with issues of real-life significance.

These four psychologists certainly did just that, and we hope to publish their work over the coming year. JS

Desperately seeking validation

Were you one of the many people tweeting at this year’s Annual Conference? And if so, did you find yourself feeling boosted when someone liked or retweeted your post, or disappointed if they didn’t? Martin Graff, from the University of South Wales, has designed a new ‘validation scale’ to measure online behaviours such as paying ‘likes’ for ‘likes’ or accepting unknown friends on Facebook.

This questionnaire was completed online by 344 respondents, together with the Rosenberg self-esteem scale and the Big 5 measure of personality traits. Perhaps unsurprisingly, he found that lower levels of self-esteem were linked to greater effort to get online validation and more likelihood of people deleting posts or profile pictures that didn’t get the desired response. These validation behaviours also showed negative correlations with personality traits such as conscientiousness, openness and agreeableness. Although we have not yet entered the social media dystopia depicted in one of Charlie Brooker’s Black Mirror episodes (‘Nosedive’), Graf did point out that online validation-seeking behaviour can have consequences on others, citing the example of people who use the dating site Tinder simply to clock up their ‘right swipes’ and with no intention of ever meeting their unsuspecting validators.

I was left wondering if this wasn’t such a bad thing after hearing the follow-up talk from Megan Davis. She looked at predictors of adverse outcomes in people who had met through online dating agencies. Davis cited a series of high-profile cases in which online dating had led to rape or physical assault; her research asks whether there may be clues in the messages sent in advance of the meet up. Her survey of 791 participants found that while men were more likely to be the target of online scams (22 per cent compared to 12 per cent), women were significantly more likely than men to experience a potentially dangerous face-to-face date after meeting online (46 per cent vs. 35 per cent). Gender differences aside, this is a strikingly high percentage. This is despite the fact that many people had spent time investigating their dates-to-be through googling and social media. In fact it turns out that checking someone out like this is virtually no help at all – people who did this were no less likely to experience an adverse event.

But what about the messages? Well, it seems that there are a few fairly obvious warning signs – for example excessive sexual content, or an arrogant or pushy attitude. But other reliable predictors included people who were very self-deprecating and those who said they were only going on a date because they had nothing better to do.

One caveat is that this research was based on people’s memories of the messages rather than analysing the text itself. Nevertheless, it offers some hope that there may in future be ways to prevent some of these very dangerous liaisons.

And in case you were wondering... Martin Graff got 41 likes for the picture he posted on Facebook of him next to his slides. CL
Many of the services and systems that exist to support children who have lived through domestic violence frame them as witnesses or victims. However, research reveals a different picture: children are not simply passive observers, but feel part of a family where violence occurs. Professor Jane Callaghan (University of Northampton) outlined why this shift to seeing children as agents who have a role within a family unit could lead to better protective legislation and improved access to services for them.

Sadly, the attitude towards children as collateral damage in families where domestic violence occurs is reflected in the availability of support for them: only around 9 per cent of children who are referred to domestic violence services also receive mental health support with CAMHS. Callaghan said domestic violence is seen as occurring in a dyad, not within a whole family, so children aren’t recognised as direct victims.

Callaghan and colleagues’ interview-based research with young people who have experienced domestic violence either don’t have one or have been misdiagnosed as ADHD and are framed as having social, rather than mental health, problems. Callaghan concluded this failure to hear children’s experiences tells them their experiences aren’t as significant. She added that psychologists should think about restoring a sense of fairness through social action, as well as a change in the legislative framework.

Lone mothers and their representation on reality TV can reveal much about common discourses around motherhood, said PhD student Rowan Sandle (Leeds Beckett University). She has examined 16 character narratives within reality-TV shows such as Benefits Street and said the storylines can provide guidelines for ways of living. She expressed concern about the negative representations of welfare recipients, which may have led to a hardening of anti-welfare sentiment.

Sandle said single mums are represented on these programmes in certain categories, including the ‘chav mum’ and ‘mouldable mother’ – both of these stereotypical views, she argued, supported patriarchal and government interests. The chav mum narrative usually involves a lone mother on benefits who is presented as jobless and vulgar. Sandle argued this type of ‘character’ acts as a figure that peels away from the feminine ideal and embodies government objectives of economic growth.

In more recent times the ‘mouldable mother’ narrative has become more prominent, Sandle said this figure support the aims of austerity by getting people into work. For example, on the Fairy Jobmother, participants in the programme are often presented as shameful and guilty at not having work, then once they have found a job are shown in a glowing light, as ‘whole’ people on the ‘best’ path morally speaking. This conflation of wellbeing and waged work puts the pressure to change on the individual, Sandle argued, rather than on changing the problems austerity has created.

Do black lives matter in the psychology curriculum and in higher education? As Dr Stephanie Davis (University of Brighton) starkly pointed out, it really doesn’t seem that way. While there are growing numbers of black and minority ethnic students at universities, there remains a static attainment gap between white and BME people: while more than 77 per cent of the former receive a first or 2:1, the number is just over 50 per cent among BME students.

During her own training, Davis said she found nothing in her curriculum related to her and her own black community, apart from the infamous Tuskegee Syphilis Experiment. Davis’s PhD on the lived experience of queer and trans people of colour made her realise the massive gaps in curriculum within psychology, and she had to turn to black feminist theory and post-colonial theories just to make sense of her participants’ words.

In Davis’ work she teaches a class on race and identity and emphasises that race is a socially constructed concept that emerged from colonialism and slavery. Propagating ideas that certain races and physical differences were tied to intellectual, psychological and physical difference justified slavery for many, as Davis pointed out, using race to help define who was privileged economically and who wasn’t.

Davis said colonialism has survived colonialism in so many parts of life for BME people: in cultural patterns, self-image and even people’s aspirations. However, in critical psychology post-colonial theory has remained on the sidelines and doesn’t feature in the curriculum. Davis implored universities and the British Psychological Society to speak more openly about oppression, consider how coloniality may unfairly shape the curriculum, and speak about the inequalities so many BME people still face.
Rebounding in bed

Is dreaming is a type of ‘overnight therapy’, allowing us to process the emotional experiences from our waking lives? Josie Malinowski, from the University of East London, has examined this possibility via research on the effects of the suppression of positive and negative thoughts on sleep, dreaming and wellbeing.

Participants in the three studies provided details of recent dreams and answered a range of questions relating to their emotional content and the overlap between positive and negative experiences from their waking life. Measures of thought suppression and intrusion, sleep quality and wellbeing were included. The findings supported the so-called ‘dream rebound effect’, in that people who suppressed their thoughts tended to have dreams that reflected the emotional experiences in their waking life. Follow-up research indicated that suppressing emotions associated with negative experiences only was related to dream content, as well as poorer sleep quality and more depression, anxiety and stress. No such effects were found for suppressing positive emotions.

The third study obtained more detailed information on the suppression of thoughts: suppression attempts (‘I always try to put problems out of mind’), intrusion (‘I have thoughts which I would rather not have’) and successful suppression (‘I am able to put aside problems and worries’). Findings indicated that the quality of sleep and the wellbeing of participants who scored more highly on thought intrusions tended to be poorer. Successful suppression had marginal benefits, whereas suppression attempts made no difference.

The findings suggest that suppressing negative thoughts may be counterproductive, as they can resurface in dreams and damage our sleep and mental health. If bottling-up our thoughts and worries can have such damaging effects, it seems important to find more effective ways to confront them during our waking life.

Merchants of knowledge

Does paying for education create ‘merchants of knowledge’? Dr Louise Bunce from Oxford Brookes University began her presentation with a warning from Socrates that the marketisation of teaching could have a corrupting effect on the process of learning. Are the ‘merchants’ within the university now willing to give students what they want rather than what they need in order to keep the coffers full?

Dr Bunce drew a distinction between the phrase ‘reading for a degree’ and ‘getting a degree’ as she introduced her study of 700 undergraduate students, which explored consumer identities and approaches to learning. In a previous study, Bunce and colleagues found that higher levels of consumer identity were associated with lower academic performance. To explore this further, this new study measured surface versus deep approaches to learning alongside consumer identity and academic performance. Results suggest that a surface approach to learning mediates the relationship between consumer identity and performance. These findings will worry those involved in teaching, particularly with the Teaching Excellence Framework just around the corner.

It is timely for us to ask how we can continue to engage students in an active process of learning, rather than reacting to the fee-paying culture ourselves, and simply becoming merchants, when we recognise that these ‘customers’ are not always right. As Bunce puts it, going to university is more akin to paying your gym membership than a simple transaction; you only get out what you put in.

The psychologist july 2017 conference
Researching ‘psychological flexibility’ at the individual, leadership and team level, Danielle Lamb (UCL) found that teams with higher psychological flexibility actually had lower service-user satisfaction. Lamb speculated that she may have received a more realistic picture from teams that were more flexible, more engaged with the research; or that how satisfied people are with the service they received might not be that related to long-term outcomes. ‘People may need to be pushed outside their comfort zones.’

Could pupil size be used as a measure to improve the accuracy of eyewitness identification? It’s known to be affected by valence and cognitive load, and Camilla Elphick (University of Sussex) found that participants asked to pick a suspect out of a line-up not only showed a strong pupil-size response when they were highly confident and got the right person; they also showed an increase when viewing the target but not making an identification, and no response when they said they were confident but actually ended up getting it wrong.

Plant extracts have performed important functions throughout our evolutionary history, and still do. But is there untapped potential? Mark Moss (University of Northumbria) found that 10- to 11-year-olds completing tests in a room infused with rosemary aroma performed better on tests of immediate serial recall, sentence span and counting span, compared with those in a room without the smell. Moss discussed potential mechanisms involving mood, quasi-pharmacological arousal, or a pharmacological route via 1,8-Cineole (which prevents the breakdown of acetylcholine).

Professor Rosalind Gill (Professor of Cultural and Social Analysis at City University of London) began her keynote with what she considered to be a ‘quite bold and unexpected claim’: that we are living in a society where the promotion of confidence, in particular to women, has become ubiquitous. It’s become ‘an article of faith, if not a cult’, Gill warned, and it risks us retreating from inequalities and injustices rather than confronting them.

Look around you. Women’s magazines fill their pages with the ‘confidence revolution’. Experiencing inequality in the workplace? ‘Lean in’, advise business leaders such as Sheryl Sandberg, and feel more confident. Worried about parenting? Train mums to be more confident. Gill feels that such examples of the ‘confidence cult’ show it has become so taken for granted it has almost been placed beyond debate, when in fact ‘we should always interrogate ideas and values’.

Gill argues that this is all part of a neoliberalist, individualised shift that psychologists should be seeking to understand and engage with. ‘I realise I’m at risk of walking away with the “Most Hated Person, Brighton 2017” award,’ she said: ‘This is a bit polemical.’ Yet the audience seemed much in agreement that we live in a society that depends upon and helps to foster selves who are entrepreneurial, self-motivated, risk-taking, resilient, and who take responsibility for the design and outcome of their life — no matter how little control they actually have. Notions of ‘character’ and ‘disposition’ have come to the fore under neoliberal capitalism, promoting ‘resilience’, ‘aspiration’, and ‘confidence’ particularly amongst women.

Now Gill admits that it’s hard to argue against resilience and confidence as desirable traits for anyone. But it’s the promotion of confidence as a solution to inequality and injustice that she objects to: that you should on no account see your insecurity as in any way connected to a sexist culture. Individualised, cognitive and psychic, embodied solutions are almost exclusively addressed to women. Psychologist Amy Cuddy, in her hugely popular TED talk, advises you to ‘fake it till you make it’, and companies expound ‘Love Your Body’ images and discourses while they are invested in getting us to hate them. ‘Blaming women for having the “wrong” attitude’, Gill said, ‘completely exculpates wider culture and hostile surveillance of women’s bodies.’

Concluding with some amusing (deliberately or otherwise) videos, including the ‘Jane Street’ spoof, Professor Gill’s was an inspiring alternative to a ‘fix the women don’t change the world’ message. JS
A window of opportunity at a dark time

Suicide still can’t be reliably predicted. Despite hundreds of theories and piles of research it still remains a huge societal issue: someone dies by suicide every 40 seconds worldwide. Professor Daryl O’Connor (University of Leeds) has been working with colleagues, and twin brother and suicide researcher Professor Rory O’Connor (University of Glasgow), to see if a blunted response to stress could uncover one of the mechanisms behind suicide.

O’Connor is particularly interested in the role of cortisol and its function, or dysfunction, in the stress response. Cortisol is the primary effector hormone of the HPA axis (hypothalamic–pituitary–adrenal) and excessive, repetitive activation of the cortisol system leads to dysregulation of the HPA axis. We also know, O’Connor said, that cortisol is linked to cognitive control and emotion.

O’Connor’s group wanted to explore both the role of cortisol as well as family history of suicide or suicide attempts. Their experiment involved 160 participants; controls, who had never considered suicide, ideators who had thought about suicide within the previous 12 months, and attempters who had tried to die by suicide. Their cortisol was measured for its baseline levels and after the Maastricht Acute Stress Test, one month and six months later; their personal and family suicide histories were also taken.

The highest levels of physical and emotional neglect as children were found among the suicide-attempt group: this group had also experienced the highest levels of physical, emotional and sexual abuse as children. This group released significantly lowered cortisol when compared to controls, even when controlling for age, BMI, gender and time of day. These findings became even more marked when dividing this group into those who had attempted suicide within the last 12 months compared with a more historical suicide attempt. Those who had a more recent attempt showed a much more blunted cortisol response. However, as O’Connor pointed out, there was a silver lining: those with historical suicide attempts were slowly beginning to show a more normal stress response.

Could this dysregulation of the cortisol system be heritable? O’Connor and colleagues found those who had attempted suicide and had a family history of suicide had an additional vulnerability to suicide indicated by a dysregulated stress response. However, the finding that O’Connor said ‘blew him away’ was that they could predict future suicidal behaviour by the amount of cortisol released in the lab – those who released significantly less cortisol were significantly more likely to want to die by suicide four weeks after the measurement in the lab. The effects of having a recent suicide attempt, O’Connor said, highlight a window of opportunity for intervention.

The paper: tinyurl.com/mwk2snw

Powerful tales of nature and well-being

‘Nature is awe-pice’, according to one of the children that Lucy Forbes from the University of Westminster spoke to during her research to inform the development of a green exercise intervention to build resilience in children (it’s ‘awesome’ and ‘epic!’).

Green exercise is physical activity undertaken while being exposed to nature. Forbes explained that children no longer interact with nature as much as they used to in the past, spending around 10 per cent of their time outside compared with 40 per cent 30 years ago. Worrying figures suggest that there are potentially three children in every classroom of 5- to 6-year-olds with a mental health issue, and 50 per cent of later problems are established between the ages of 10 and 14. Forbes hopes that her ethnographic work with schools that already have some green provision will help her to develop a theoretical framework to inform an intervention. From her observations so far, she has noticed the creative elements in children’s outdoor free play, such as building things from mud and wood, as well as the potential for enhanced social connections, which could be incorporated into an intervention.

Other conference talks also highlighted the importance of the outdoors for our wellbeing, including Jo Brooks from the University of Huddersfield. She was awarded a small amount of funding to evaluate a charity that provides support for people in recovery from mental illnesses, providing green settings where people undertake activities as varied as beekeeping and tending to allotments. Brooks undertook a qualitative study to seek the views and experiences of charity staff and volunteers as well as organisations that hosted the
volunteers. An important finding was that being labelled as a ‘volunteer’, rather than a ‘service user’, appeared to remove the stigma associated with mental health recovery. Furthermore, the individual benefits appeared to be invaluable: some volunteers who at first were unable even to travel independently to their placements were able to flourish with individual support.

Staff at the charity strongly believed that the nature element of the project played a key role in these transformations. For example, undertaking a task in the outdoors had very different social benefits to simply attending a service-users group in an indoor setting. Working on a focused task requires cooperation, but also allows for social connections to build in a less formal way than they would on a face-to-face basis. Brooks advocated the benefits of using a pragmatic qualitative approach to explore small-scale interventions, which are valued by policy makers and practitioner communities. She called for qualitative researchers to pool the findings of such projects in order to strengthen the case for continued funding for important community-level interventions.

There are also clear benefits in volunteering your time to help within nature-based settings, as Jenny Mercer from Cardiff Metropolitan University explained. While most research explores benefits to patients, she focused on those giving their time to support the patients receiving ‘green care’. A huge range of positive outcomes were identified, including increased social connections and individual development. Mercer highlighted that volunteers may get similar benefits from other settings, but green care appeared to have additional impacts, such as feeling a connection with nature, opportunities for exercise, feeling peaceful and enjoying being out in the fresh air. She interviewed 33 people who were working in diverse settings, such as within a care farm and an organic garden project. Participants were either young adults, such as students, or retired people. Mercer suggested that volunteers may experience similar therapeutic benefits to the service users, perhaps helping them to deal with the stresses and strains of everyday life.

All three studies underscore the importance of qualitative research in broadening our understanding of the impacts of interventions in general. Randomised controlled trials are important for assessing and quantifying impacts and securing funding, but we should be mindful of what is lost when employing these designs. Qualitative research can tell powerful stories about meaningful changes to individual lives, and reveal facets of the experience that the researcher would struggle to measure. It is apparent from these studies that we should try to get out into nature much more as it could have a big impact on our wellbeing.

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**Sexuality, sexism and counter-stereotypical contact**

The ‘one drop’ rule of blackness describes the idea that having one black ancestor is enough to make a person be considered black, but having a single white ancestor does not make you white. Keon West (Goldsmiths University of London) found that this sort of asymmetrical definition also applies to homosexuality. Heterosexual, mixed gender, participants read a vignette of a male character who self-identified as gay or straight, but who did something out of character with that. Participants rated the character’s sexual orientation before and after the vignette; the straight character was less likely to still be considered straight if he kissed a man, whereas the gay character was still generally considered homosexual if he kissed a woman. The effect was replicated in a follow-up study with all female participants where the characters depicted were women, and in both studies the finding was present even when initial perceptions of the character’s masculinity/femininity were controlled for. It seems that one touch is all it takes to be perceived by others as gay.

Miriam Taschler, an undergraduate student working with West, presented her research into whether intergroup contact can reduce sexism. Male and female adults in two separate studies were asked about the quantity and quality of their contact with counter-stereotypical women, that is women of a higher social status than themselves. More contact with counter-stereotypical women predicted less hostile sexism, which in turn predicted less intention to rape (amongst men) and less projected sexualised response to rape (amongst women).
Stop skipping after kipping!

A decade ago, Professor Louise Dye (University of Leeds) and her team looked for studies of the cognitive and behavioural effects of breakfast. ‘We thought there would be hundreds,’ she said. They found only 45 with objective measures of performance, and most of these looked at acute effects in well-nourished children. Ten years later, ‘giving breakfast at school is a massive industry’, and psychologists have got plenty on their methodological plate... studies are often sponsored by industry and related to specific products, and it is very difficult to ‘blind’ studies (‘you know if you got breakfast or not’).

Why so interested in breakfast? It’s modifiable, part of most people’s dietary habits after a longer overnight fast, and it should set you up for the day: there’s higher brain glucose metabolism in the morning, and that’s vital for the functioning of our energy-hungry brain through the day.

That initial review found an advantage for those who had consumed breakfast, but little effect of breakfast type – ‘we can’t really say that Shreddies or Cheerios would be better than the other’. Dye and her team published a recent update, looking at ‘intervention studies’ only (again finding 45). There were beneficial effects on attention, memory and executive function, and better maintenance of function over the morning. These effects were, however, more apparent in undernourished children.

As with so many areas in psychology, confounding variables abound. ‘If you put a poster up and say come and do a breakfast study, who comes? People who like breakfast... they were a bit whingeing on the days they didn’t get breakfast.’ And IQ seems to play a role: in one unpublished study controlling for it, participants learned the same amount when they had breakfast, but got there faster. Using the Corsi block tapping task, Dye concluded: ‘If you are average or below and you miss breakfast, your performance will be worse; if you have a lot of cognitive resource because you are more intellectually able, missing breakfast won’t make much difference.’

With the Children’s Society reporting in 2012 that 45 per cent of teachers say they have hungry children in their classes, and many programmes supported by big companies, breakfast is high on the agenda of politics and industry. Putting it all into perspective, Dye mentioned a 2013 study from Nkhoma in Malawi, which found a nutritional benefit but not a cognitive benefit. Why? Well, perhaps because everybody was getting a 25 per cent reduced ration so that nobody missed out. This speaks to how people might use psychological data, Dye said. ‘You could say “This had no benefit, why are we giving this overseas aid?”; or you could say “These people should be getting more”.’

Closer to home, research has found that those who rarely consumed breakfast are unlikely to get the highest GCSE grades. However, this relationship was specific to adolescents from low/middle SES backgrounds only – were high SES children more likely to get a tutor? Dye pondered. Again, it comes down to having ‘more resource to do something about it’.

When a definition of breakfast for many is ‘last night’s takeaway leftovers’, does Dye recommend it? Yes – ‘Something is better than nothing, but make your choice on nutritional benefits, not cognitive.’

Nutrition is unique in that it can directly modify our genetic structure and mediate how genetic factors are expressed. Think about that next time you bolt without at least a bite! JS
Holding back the tide – extending working lives in the NHS

It is increasingly likely that the NHS will experience unprecedented staff shortages over the next 10 years. This has serious implications for service provision and the wellbeing of the staff that remain. The abolishment of the mandatory retirement age and changes to the UK state pension age (currently 67) means that people are now having to work for longer. Nonetheless, despite the staff shortages, there has been a surge in applications for retirement from the NHS in the last few years – many from people who are in their 50s who could be working considerably longer. It is therefore crucial to identify the ‘push and pull’ factors that encourage and discourage people to remain working for the NHS.

The Medical Research Council has funded a four-year project to examine the implications of extending working lives in the NHS and to identify ways to retain an ageing workforce. Two linked studies from this research programme were presented, drawing on data from people working in six NHS trusts and professional bodies and trade unions, together with the secondary analysis of a UK-wide NHS employee questionnaire and the Labour Force Survey.

The first study, presented by Deborah Roy from the University of Bath, considered the role played by job demands and job commitment to the NHS in predicting intentions to quit in Allied Healthcare Professionals (AHPs). Dr Roy explained that a strong commitment to the values of the NHS and the deeply satisfying nature of patient care means that staff are prepared to work above and beyond the call of duty. There are concerns, however, that growing demands and fundamental changes to the structure of the NHS (such as the franchising of services) are reducing staff commitment and satisfaction, with serious implications for retention.

More than 1000 staff completed questionnaires that assessed psychosocial aspects of work (such as job demands, resources and flexibility), together with levels of job satisfaction and NHS commitment. Participants were also asked whether they wished to leave or remain and to provide the reasons for this. Age, job demands and satisfaction were found to be the key predictors of intention to quit within 12 months, but high commitment and satisfaction offset the negative effects of job demands and encouraged people to remain. A particularly powerful message from this study was that AHPs were 3.5 times more likely to wish to leave the NHS in the next 12 months when they were working under conditions of high demand. They were six times more likely to plan to remain for every unit increase in NHS commitment.

The second talk, presented by Andrew Weyman (also from the University of Bath), considered the factors that push health professionals towards leaving the NHS. Over 1600 staff from different functions identified the most important factors that motivate people in their profession to quit. Options included time pressure, working hours, shortages of staff and resources, mental and physical demands, lack of flexibility, low pay, bureaucracy and a lack of recognition for effort. A paired comparisons method was used to consider the relative importance of these factors to quitting. Regardless of job type, staff shortages, job demands and time pressure were the key factors thought to drive an early exit. Pay and working hours were generally considered to be less important. Few age differences were found; as Dr Weyman observed, ‘if you can cope with the pressures early on, then you are likely to remain’.

The demand for healthcare staff is currently exceeding supply. There are serious concerns that rising job demands and poor resourcing will encourage many more staff to leave the NHS over the next few years with serious implications for the quality of health care. Cuts to nursing and other training bursaries and concerns about the implications of Brexit for recruiting staff from other countries are likely to compound these pressures. The findings of this research suggest that further privatisation in the face of growing demand might erode commitment to the NHS and encourage a mass exodus. A further threat to commitment and satisfaction appears to be the change in pensionable age and the decreased value of an NHS pension, which is something that staff see as a reward for many years of hard work and dedication to the welfare of patients. The speakers recommended that, in order to improve retention, staff need reassurance that core NHS values of fairness, altruism, universality and collectivism will be adhered to in the future and that the pension age will not be extended further.
Power of peers

Several talks emphasised the power of peers in health support. Sophia Chambers (University of Southampton) interviewed 31 users of the ‘Soberistas’ online network for people concerned about their alcohol use. Interacting with peers enabled users to develop a hidden identity and access support whilst protecting their ‘normal’ lives; being accountable to others online could act as a mechanism of change.

Nancy Doyle (City University London) conducted a narrative systematic review to identify important factors in coaching interventions to improve working memory in adults, such as those with dyslexia. Although coaching tends to be a 1:1 technique, successful studies tended to include some form of peer interaction, such as a group discussion, as well as an opportunity to practise the skills learnt before a follow-up session.

Peers can also play an important role for health professionals themselves. Iliana Makri (University of Liverpool) used IPA to analyse interviews with trainee and foundation doctors about their experiences of transitions between work placements. Having a supportive outsider, a friend to offer support who was not a doctor themselves or was a medic in a different role, appeared to buffer doctors’ wellbeing and help them to manage the change. AJ

‘You know your problem...’

...you keep it all in’, sang The Beautiful South in 1989. According to this symposium on emotional expressiveness interventions, they had a point.

Some of the talks were about therapeutic writing, which involves writing down your deepest thoughts and feelings about emotional issues, a method that has been associated with improved mental and physical health. Dr Catherine Loveday from the University of Westminster recruited students who were facing the stress of an upcoming presentation. She asked half to write about how stressful this event would be and half to write about brushing their teeth. Whilst all participants experienced an increase in stress in the run-up to the presentation, the drop in stress afterwards was related to the emotional content of their writing. In other words, writing about stress may help you recover from it.

A study from Dr Mark Wetherell (Northumbria University) aimed to help caregivers, a group of people under a lot of stress and with little time to incorporate this practice within their own homes. Rather than writing about their ongoing stresses, caregivers were asked to write about finding the positives in adversity, as this has been shown to enable people to seek out social interactions and support. Findings suggested that this intervention could bring about changes in wellbeing though the expression of positive emotions, and it was feasible to undertake these tasks in the home. However, not all carers were able to engage with the task, and some even swore at the researchers, incredulous at the request.

These individuals may have been better participants for Dr Richard Stephen’s study on the effects of swearing on strength and power performance. ‘Lalochezia’ is a term used to describe the use of foul language to relieve pain. Stephens, from Keele University, has conducted previous studies that have demonstrated that participants who swear out loud whilst their hands are immersed in ice cold water are able to withstand the pain for longer. He has now found that participants who swore increased their pedalling power and exerted more grip force. But why does this occur and should we use swearing more strategically in our daily lives? Stephens suggests that swearing could raise levels of aggression, leading to an increased ability to withstand pain. It is also linked to emotion and letting off stream. Another explanation could be that swearing is linked to disinhibition, such that we are less concerned with possible embarrassment associated with over exertion or injury. So much so, we let down our guard and focus more on the task at hand, leading to increased performance.

Professor Daryl O’Connor (University of Leeds) then described important links between perseverative cognition and health behaviours. Perseverative cognition is a term to describe thinking about negative past or future events and includes rumination and worry, which are linked to stress. In a systematic review O’Connor found that perseverative cognition was associated with increases in health risk behaviours such as substance use, alcohol consumption, unhealthy eating and smoking. He pointed out that most of the 19 included studies did not specifically set out to explore health behaviours, and so this might be an important area to explore further within the literature. High levels of rumination and worry might impede people’s ability to engage in emotional expression in general, and could mediate the effect of emotional expressiveness interventions.

Overall, the message from this symposium is that letting off steam and expressing our emotions is important for wellbeing. So perhaps next time you are facing a challenging event, you could put this to the test and write about the stress you’ll feel, or failing that, pick your favourite swear word and let it all out. ED
Imagine going to work on a Monday as ‘Chief Transformation Officer’ for NHS England. Yikes! Dr Helen Bevan OBE doesn’t seem too fazed: ‘All of my good ideas are battles, and new truths begin as heresies,’ she said (quoting Adam Katz and Thomas Huxley respectively).

As part of ‘Horizons’, a small group of people within NHS England who support large-scale change, Bevan said she would rather be in this country using the health system than anywhere else in the world. The team are moving towards five big things, ‘which we see everywhere’.

First, change is becoming larger scale, more disruptive. IBM told her: ‘We rarely see two-, three- or four-year change projects any more. Now it’s 30-, 60-, 90-day change cycles.’ Pilot projects are being replaced by rapid tests and prototypes. There’s no point designing for a world that might be unrecognisable by the time you’re ready to serve it.

Bevan pointed to ‘acceleration of connectedness’, a radical shift in the communication paradigm from top down. Relatedly, hierarchical power is diminishing. Hierarchies are designed for divisions not connectedness; they are slow and risk-averse.

The ‘maker movement’ is growing: a renaissance around craft, DIY, and patients as experts and collaborators. Bevan highlighted ‘Maker days’ in Hammersmith and Fulham to address childhood obesity, and the Nightscout Project where diabetic patients, frustrated with the pace of change and availability of solutions, made their own glucose monitors.

Finally, Bevan suggested that ‘change is moving to the edge’. Research and development takes place ‘with one foot in the organisation, one foot outside’. She cited Ayelet Baron, saying that diversity leads to more disruptive thinking, faster change and better outcomes. ‘New power’ is made by many, pulled in, shared, and open. People can gain more power and control in their own lives through avenues such as Massive Online Open Disease Oriented Communities (there are around 60,000 online for diabetes alone).

Bevan exhorted the audience to make more use of social resources for change – they grow with use rather than diminish. ‘Move to change platforms rather than change programmes. Create the conditions for change and then get out of the way.’ She described the ‘Change Challenge’ – a project with the Health Service Journal and Nursing Times to ‘tap the collective brilliance of the NHS’; 14,000 contributions identified 10 barriers to change. A key one in this context: frontline staff can feel overloaded with strategies!

Bevan concluded that we should learn from this and similar research, such as Google’s Aristotle project, that the key to high-performing teams that deliver change is ‘psychological safety’ in the team.

Your reporters:
Emma Davies (Oxford Brookes University)
Alana James (Royal Holloway University of London)
Gail Kinman (University of Hertfordshire)
Catherine Loveday (University of Westminster)
Ella Rhodes (Journalist)
Jon Sutton (Managing Editor)

For much more from the conference, including Peter Kinderman’s Presidential Address and public lecture; keynotes from Martin Seligman and Celia Kitzinger; a ‘replication crisis’ workshop; a round-up from the posters; and much more, see tinyurl.com/confrep17

We hope to feature articles by/interviews with many of the conference speakers over the coming year.

For information on next year’s event, see www.bps.org.uk/ac2018

Thinking time for frontline staff

Frontline staff such as social workers and Missing Persons Officers, who work to tackle child sexual exploitation, face high levels of stress, burnout, and vicarious trauma yet are likely to have too little clinical supervision due to lack of time. Tania Rodrigues (Clinical Psychologist, University of Sheffield) thematically analysed frontline workers’ experiences of Thinking Time, a clinical supervision model designed to be practical (part of the wider AMBIT model developed by Dickon Bevington). Thinking Time was seen to offer a supportive space for reflection and to have a restorative function, but getting enough time to access it was still a challenge for staff.
Tying it all together

‘I’ve never had any goals in my life, and I think that’s just fine.’ So opened a funny, witty keynote speech by James Pennebaker, which outlined his journey from physical symptoms, to expressive writing and eventually... Donald Trump. The University of Texas Professor began his prolific research career looking into how people read their bodies, and why some struggle so much with apparent ill health.

In his early work Pennebaker found students who had experienced early sexual trauma had the worst health, and further work revealed that any major trauma that people kept secret had the same effect. This secrecy, Pennebaker said, seemed to be particularly important. So what might happen if these people were asked to write about it in a lab?

He asked participants to write about a traumatic experience they hadn’t spoken about much, for 15 minutes a day for four days. Despite an initial hour or so of feeling down after writing, the measurable results were quite astonishing. Pennebaker accessed the records of participants from the University Medical Centre – the experimental group visited the medical centre at half the rate of controls, while further studies saw changes in immune function in people who did expressive writing.

Why might this work, and for whom? Pennebaker suggested the mere act of labelling and acknowledging emotions can help to organise experiences, construct narratives and bring parts of a trauma together. Also when people have a ‘still mind’ they make better humans and better friends: this in turn brings about positive changes in an individual’s social engagement.

Pennebaker became interested in the content of people’s expressive writing and he and colleagues developed a computer program LIWC (Linguistic Inquiry and Word Count) to categorise words within writings into linguistic, psychological and topical categories. He found a number of writing changes throughout expressive writing that predicted health improvements; the more people used positive emotional words in writing, the more likely they were to benefit. Even if the positive words appeared in a sentence such as ‘I’m not happy, no one cares, there’s no joy’, that was a start: at least they were somewhere on the continuum.

Later he began looking into the use of content words, which make up about 99 per cent of most people’s vocabulary, and function words, the pronouns, prepositions and articles, which make up around 1 per cent of vocabulary but about 65 per cent of all the words we say and hear. Pennebaker said these function words are processed by the brain in a distinct way. They are the hardest to master when learning a second language, and perhaps most importantly these words are social – by analysing them we can get into the head of the author and the relationship between an author and target, he added.

There are many examples of the power of these function words. Surprisingly while we might think that people who use the word ‘I’ more are raging narcissists, they tend instead to be people who are depressed. In another surprising finding Pennebaker has found people who use the word ‘I’ more tend to be lower status: this could reflect a leader’s focus on other members of a group rather than themselves, an attribute Pennebaker calls ‘clout’.

In spoken interactions the function words people use, and whether people match their styles of using such words, can be extremely telling. In one study Pennebaker looked at the instant messages of 86 young college couples and could predict whether they’d be together three months later (even though there was no relationship between their own ratings and predictions for the future relationship).

Factor analyses of function words can reveal much about thinking styles too. Pennebaker has also looked at students’ college application essays. The high use of nouns, articles, and prepositions reveals someone thinks in an analytical way, while narrative thinking is linked to a lower use of function words and higher use of pronouns, auxiliary verbs and common adverbs. Interestingly analytic thinking correlates with IQ and social class, and better performance at university... it is a marker of complex thinking.

Worryingly, then, Pennebaker revealed he and colleagues have been looking at the words used by the current US President Donald Trump and found he was the lowest on analytical thinking of anyone they had examined. Following this he analysed presidential debates and inaugural addresses going back to George Washington, and found a pattern; since 1980 the candidate with the lower score in analytic thinking has won [apart from Bill Clinton].

In fact, since around 1910 the level of analytic thinking among presidents has been declining in a linear fashion, and the five presidents with the lowest levels of analytic thinking have been last six presidents. Clout, on the other hand, has been increasing in a linear fashion since Woodrow Wilson – Trump and Obama had almost identical levels. Pennebaker concludes voters look for presidents with confidence who don’t appear that intelligent. Worryingly, this same pattern can be seen for British Prime Ministers.

Pennebaker took some time to assure people, particularly recent graduates, that while his career seems well planned out, it hasn’t been. He said: ‘I’ve been bouncing around and gone this way and that way. For those of you thinking about creating a career, it’s really fun doing that... the art form is tying it together to make it sound more coherent afterwards.’

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