# PSYCHOLOGY POSTGRADUATE HANDBOOK



### Health Psychology



#### **Background**

The field covers areas such as how individuals cope with illness and chronic disease, understanding and promoting healthy behaviours, psychological influences on the development of disease states, understanding and improving adjustment in health-care settings, patient-practitioner communication, adherence to treatment, determinants of health-related behaviours (diet, exercise etc), and understanding how individuals make sense of and react to health screening, symptoms and illness.

The impetus for the development of Health Psychology has stemmed from the fact that many of these areas of research and practice have not previously been directly addressed by medicine. The field has been bolstered by the usefulness of psychological models in explaining health-related behaviours and developing effective interventions in areas that have been problematic in the health field.

There is increased recognition of the need for health services to pay more attention to the psychological aspects of medical problems and to improve health care interventions. Increasingly, health professionals are dealing with chronic illness, psychosomatic illness, ageing and the problems of living with disability. All these areas have major Health Psychology components.

The University of Auckland is one of the first universities worldwide to offer a practitioner qualification in Health Psychology. Students who complete an MSc in Health Psychology or a Masters in Health Psychology together with the Postgraduate Diploma in Health Psychology are eligible to apply for registration with the New Zealand Psychologists Board. Graduates of the PGDipHealthPsych are currently working in hospital-based respiratory and diabetes services, rehabilitation services and pain clinics. Some are working in primary care for private health providers. Some graduates are also in private practice.

Postgraduate study in Health Psychology can also lead to research and health promotion careers within university, government, or hospital environments. Recent structural changes in the administration of health services in New Zealand have created a greater need for researchers well-versed in the health field to evaluate the benefits and liabilities of particular health service programmes and outcomes. At present there is a lack of skilled researchers to conduct

these evaluations. The continued push for cost containment and justification will also draw health providers into developing more effective and carefully assessed treatment programmes from primary through to tertiary services. A number of our graduates are currently working in research positions in New Zealand and overseas.

#### **Health Psychology facilities**

There are excellent facilities and resources for teaching and research in Health Psychology on the Medical and Health Sciences Campus of The University of Auckland. The Medical and Health Sciences Campus has close proximity and contact with medical institutions throughout the region. The campus also has ready access to clinical populations of special interest to Health Psychology, such as oncology services, cardiac services, neurology, obstetrics and gynaecology, specialist pain services and other tertiary and specialty centres.

These features are complemented by the existence of many other relevant health and exercise related resources, including the School of Population Health, Occupational Medicine, Centre for Health Services Research and Policy, Department of Sport and Exercise Science, Adidas Sports Medicine, Audiology, and Speech Language Therapy.

### Postgraduate Studies in Health Psychology

Research-based programmes at masters and doctoral (PhD) levels are available. In addition, there is a Postgraduate Diploma in Health Psychology (PGDipHealthPsych), graduates of which can apply for registration with the New Zealand Psychologists Board. Entry into all programmes is competitive and approximately 12-14 students are accepted into the basic Masters in Health Psychology programme each year.

#### Masters in Health Psychology

In past years, the health psychology masters program has been comprised of two, sequential 1-year degrees - a PGDipSci (Health Psychology) and an MSc (Health Psychology) degree. While the training remains essentially unchanged, these degrees have now been merged within a new two-year Masters in Health Psychology (MHealthPsyc) degree.

The Masters in Health Psychology is offered by the Faculty of Medical and Health Sciences. The programme is taught by Health Psychology researchers working in the Department of Psychological Medicine at the Grafton Campus and the Department of Psychology at the Tamaki Innovation Campus. The programmes are designed to give students a strong background in the theoretical, methodological and practical applications of Health Psychology. The courses aim to produce graduates with sound knowledge of health psychology and high quality research skills who are able to design and carry out effective health psychology research and interventions in community and health-care settings. They will be able to evaluate the effectiveness of health intervention programmes using sophisticated methodological approaches in the health area.

### University admissions and enrolment

Entry into the Masters in Health Psychology programme is limited and applications for entry close 1 December. The minimum requirement for entry is a Bachelor of Science or Bachelor of Arts degree with a major in Psychology. A research methods course such as PSYCH 306 from The University of Auckland or an equivalent is normally expected for entry into the programme. There is an interview selection process for the Masters in Health Psychology; the interviews are held in early December.

Students interested in enrolling in the Masters in Health Psychology need to complete an online application via Student Services Online AND submit two letters of recommendation, a personal statement and current CV to the Health Psychology Administrator.

#### www.studentservices.auckland.ac.nz

General postgraduate enrolment information is available from Faculty of Medical & Health Sciences Student Centre.

#### The Student Centre

Building 503, Ground Floor Faculty of Medical and Health Sciences 85 Park Road, Grafton Auckland

**Phone:** +64 9 923 2760

Email: fmhs@auckland.ac.nz

Open: 8.30am-4.30pm, Monday to Friday

#### International students

If you are an international student (that is, you do not have citizenship or permanent residency in New Zealand or Australia) then you should contact the International Office for application information (international@auckland.ac.nz).

## For information about Health Psychology programmes contact:

#### Claire O'Regan

#### Administrator, Masters in Health Psychology

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c.oregan@auckland.ac.nz

#### OR

#### Associate Professor Elizabeth Broadbent

#### Director of Masters in Health Psychology

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### Programme outlines

#### Masters in Health Psychology (MHealthPsych)

The programme requires a total of 120 points of which 60 points are from compulsory courses (listed below).

#### Compulsory courses

HLTHPSYC 714	Health Psychology	Tu	1-3pm	G	Semester One
HLTHPSYC 715	Research Methods in Health Psychology	W	12-2pm	G	Semester One
HLTHPSYC 719	Health Psychology Assessment	Th	10am-12pm	G	Semester One
HLTHPSYC 720	Health Psychology Interventions	Tu	10am-12pm	G	Semester Two

#### **Optional courses**

The remaining 60 points from other postgraduate courses are/can be selected from a variety of approved 700 level courses taught by Psychological Medicine, Psychology, Sport and Exercise Science and Population Health. For a complete list of the courses offered in these departments please refer to the relevant department handbooks.

Some relevant courses that students may consider are:

HLTHPSYC 716	Psychoneuroimmunology	М	2-4pm	G	Semester Two
HLTHPSYC 717	Emotions, Emotion Regulation, and Health	Th	10am-12pm	G	Semester Two
HLTHPSYC 743	Psychopathology and Clinical Interviewing	М	3-5pm	G	Semester One
HLTHPSYC 744	Research Topic in Health Psychology	TBC	TBC	G	Semester One/Two
HLTHPSYC 757	Psychosomatic Processes				Not offered in 2017
HLTHPSYC 758	Special Topic in Health Psychology	М	10am-12pm	G	Semester Two

NOTE: Timetable subject to change. Please see Student Services Online for up to date information.

 $G = Grafton Campus, T = T\bar{a}maki Innovation Campus, C = City Campus, TBC = To be co-ordinated.$ 

### Course prescriptions

#### **HLTHPSYC 714 Health Psychology**

#### 15 Points

Staff: Professor Keith Petrie

A review of the psychological factors involved in health and illness. Topics include the understanding of patient behaviour in medical settings, preventative health behaviour, cognitive models of illness, stress and illness, communication and adherence to treatment, the psychology of physical symptoms, and coping with chronic disease

#### HLTHPSYC 715 Research Methods in Health Psychology

#### 15 points

Staff: Associate Professor Elizabeth Broadbent

A review of the principal methods used in the design, conduct and analysis of studies in the health psychology area. This will include both quantitative and qualitative approaches to health psychology research.

#### HLTHPSYC 719 Health Psychology Assessment

#### 15 points

Staff: Assoc Professor Nathan Consedine

Extends content knowledge in health psychology through the development of skills in the assessment and evaluation of constructs commonly used in health psychological research and practice. Includes consideration of general issues in psychometric theory and the specific assessment issues commonly confronting widely-used health psychological research designs, as well as detailed coverage of specific content areas including illness cognitions, health-related psychophysiology, emotions and health outcomes.

Restriction: PSYCH 747, PSYCH 701 A & B

### HLTHPSYC 720 Health Psychology Interventions

#### 15 Points

Staff: Mr Malcolm Johnson

Reviews the underpinning theory base for approaches commonly used in health psychology interventions such as CBT, and applies these approaches to examples from the field of health psychology. Individual and group/community treatment targets will be considered, including common difficulties that impact on disease occurrence or management, and the psychological consequences of disease.

Restriction: PSYCH 748, PSYCH 701

### HLTHPSYC 743 Psychopathology and Clinical Interviewing

#### 15 points

Staff: Professor Keith Petrie

A review of the common psychological disorders encountered in clinical practice and health settings. Practical teaching of clinical interview and diagnostic skills is completed in class.

#### **HLTHPSYC 716 Psychoneuroimmunology**

#### 15 points

Staff: Associate Professor Roger Booth

An outline of the nature of the human immune system, its measurement and the limitations of current practices and models. The main focus of the course is the extent to which psychological processes such as stress, emotions and social interactions have been found to influence immune behaviour and the implications of these findings for health and well-being.

### HLTHPSYC 717 Emotions, Emotion Regulation, and Health

#### 15 points

Staff: Associate Professor Nathan Consedine

Extends content knowledge in health psychology by focussing on the expanding literature linking emotions and emotion regulation with health outcomes. The course provides an overview of the nature and functions of emotions, discrete versus dimensional approaches, developmental and cultural considerations, and the links between emotions and cognitive processes.

Specific topics include direct and indirect pathways linking emotions and health, links between emotions and health-deleterious behaviours (e.g., smoking, drinking, diet), symptom detection, screening behaviour, treatment decision-making and adherence.

### HLTHPSYC 744 Research Topic in Health Psychology

#### 15 points

This course offer the opportunity for academic staff to provide a specific course of study for one or several students. It will allow students to study a particular topic in depth or to be an active contributor to an existing research project. Students interested in doing a special topic should do so by arrangement with one of the health psychology staff members. Topics offered by individual staff will be advertised at the beginning of each semester.

### HLTHPSYC 757 Psychosomatic Processes

#### 15 points

Staff: Malcolm Johnson

Explores the psychological and biological processes that contribute to persistent pain. The assessment of the relevant psychological variables and treatment approaches for these conditions are also canvassed.

#### Not offered in 2017

#### HLTHPSYC 758 Special Topic in Health Psychology

#### 15 points

### 2017 Special Topic Option: Self-Management in Chronic Illness

Staff: Dr Anna Serlachius

This course describes the concept of self-management and how it relates to managing the symptoms, treatment and psychological changes that occur after being diagnosed with a chronic health condition. Some of the most prevalent health conditions and relevant self-care behaviours will be covered including type 2 diabetes, cardiovascular disease, arthritis and cancer. A review of the psychological impact of having a chronic illness will also be covered, including coping with chronic illness. The course will also focus on designing self-management interventions, including a review of the frameworks for intervention development, implementation and evaluation.

### Masters in Health Psychology

#### HLTHPSYC 796 A/B Masters in Health Psychology Thesis

#### 120 points

Research theses are conducted under supervision in either the Department of Psychological Medicine, or with permission, in the Department of Psychology.

### Postgraduate Diploma in Health Psychology

#### Aim

This programme aims to train students in the skills that are necessary for them to be able to function as health psychologists working in health care settings, with patient populations and the public.

Graduates will have a sound knowledge of the social and psychological aspects of health problems and the application of suitable psychological interventions in health settings.

A goal of the PGDipHealthPsych is to provide a route to registration with the New Zealand Psychologists Board for students holding a Masters in Health Psychology.

#### Eligibility

Students normally apply for the PGDipHealthPsych towards the end of the first year of their Masters in Health Psychology. Upon acceptance into the PGDipHealthPsych programme, students are then required to successfully complete the

pre- internship course (HLTHPSYCH 746), usually alongside their Masters in Health Psychology thesis. The pre-internship course requires students to attend irregular teaching sessions and workshops and spend time on placement in various health settings arranged by the Department. This means that there is a one year delay between acceptance into and commencement of the PGDipHealthPsych.

Applicants will also have completed a course in Psychopathology and Clinical Interviewing normally HLTHPSYC 743 at The University of Auckland. Students can also apply for entry into the PGDipHealthPsych programme later, after completing their MSc in Health Psychology.

Application for selection closes at the end of October each year. Interviews occur towards the end of November. Application forms are available from the Department of Psychological Medicine administration.

#### **Enquiries**

Students seeking further information about the Postgraduate Diploma in Health Psychology should contact:

#### Malcolm Johnson

Director of PGDipHealthPsych
Department of Psychological Medicine
Faculty of Medical and Health Sciences
The University of Auckland
Private Bag 92019
Auckland 1142
New Zealand

Phone: +64 9 923 3092 Fax: +64 9 373 7013

Email: mh.johnson@auckland.ac.nz

For more information about the application process please contact Claire Davidson in the Department of Psychological Medicine.

#### **Programme Outline**

The PGDipHealthPsych involves the completion of two University courses (HLTHPSYC 746 Preinternship placement and HLTHPSYC 742A & B Professional Practice in Health Psychology) and a full year internship (HLTHPSYC 745A & B Practicum in Health Psychology).

The PGDipHealthPsych aims to produce graduates with interviewing skills necessary for gathering data in face-to-face health contexts. The programme also aims to produce psychologists

with the skills necessary to select, utilise and interpret assessment tools in Health Psychology, be able to produce testable formulations of the problems with which they are confronted and assist patients with appropriate interventions. The diploma programme also will provide students with an awareness of the need to be sensitive to the importance of different cultural, religious, spiritual and other beliefs and to ensure that graduates of the course are aware of, and conversant with, the need to work within clear ethical frameworks.

#### HLTHPSYC 742A & B Professional Practice in Health Psychology

#### 30 points

This course provides an in depth examination of the professional issues that impact on the practice of health psychology as well as training in the assessment and intervention skills necessary to practice health psychology. Models of practice, assessment, intervention, mental health diagnosis, ethics, the laws that affect practitioners, professional interrelationships, and cultural issues are all analysed using case information drawn from students' experience in HLTHPSYC 745 A & B Practicum in Health Psychology. Where necessary, additional case material will be used.

To complete this course students must enrol in HITHPSYC 749 A& B

### HLTHPSYC 745A & B Practicum In Health Psychology

#### 90 points

The course provides supervised experience practicing as a health psychologist in a variety of settings as approved by the Director of the PGDipHealthPsych and Head of Department of Psychological Medicine. The goals of the Practicum in Health Psychology are to develop the knowledge and skills necessary to practice safely and ethically as an independent health psychology practitioner in a variety of health settings.

To complete this course students must enrol in HLTHPSYC 745 A& B

### HLTHPSYC 746 Pre-internship Placement

#### 30 Points

Requires students to undertake 300+ hours in at least two approved clinical placements in addition to associated workshops and training over a twelve month period.

#### Doctor of Philosophy (PhD)

Staff at this University also offer supervision for research based study towards a PhD. Most areas of Health Psychology are covered by staff interests and students with good quality Masters degrees are encouraged to apply for entry to the PhD programme. The PhD programme is aimed at preparing students for a research or academic career in the field. PhD candidates will critically investigate and evaluate a specific topic in Health Psychology using appropriate research methodology, with the aim of making an independent and original contribution to knowledge.

More details concerning the PhD degree at The University of Auckland as well as guidelines and regulations can be obtained from the School of Graduate Studies:

www.auckland.ac.nz/sgs

### **Staff**

#### Roger Booth, PhD

**Position:** Associate Professor in Psychological Medicine

**Discipline:** Psychoneuroimmunology

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Medical and Health Sciences Campus

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#### **Research Interests:**

Psychoneuroimmunology; self-determination and the immune system; immune networks in health and illness; emotional expression, immunity and health; immune regulators and symptom experience.



#### **Recent Publications:**

Darragh, M., Yow, B., Kieser, A., Booth, R. J., Kydd, R. R., & Consedine, N. S. (2016). A take-home placebo treatment can reduce stress, anxiety and symptoms of depression in a non-patient population. Aust N Z J Psychiatry, 50(9), 858-865.

Darragh, M., Booth, R. J., & Consedine, N. S. (2016). Trait predictors of placebo responses in itch. Psychol Health Med, 21(6), 769-775.

Darragh, M., Booth, R. J., & Consedine, N. S. (2016). 'Oxytocin' for the outwardly oriented: Evidence for interactive effects in placebo responding. J Psychosom Res, 83, 10-15.

Fogarty, F. A., Booth, R. J., Gamble, G. D., Dalbeth, N., & Consedine, N. S. (2015). The effect of mindfulness-based stress reduction on disease activity in people with rheumatoid arthritis: a randomised controlled trial. Ann Rheum Dis, 74(2), 472-474.

Darragh, M., Vanderboor, T., Booth, R. J., Sollers, J. J., 3rd, & Consedine, N. S. (2015). Placebo 'serotonin' increases heart rate variability in recovery from psychosocial stress. Physiol Behav, 145, 45-49.

Darragh, M., Chang, J. W., Booth, R. J., & Consedine, N. S. (2015). The placebo effect in inflammatory skin reactions: the influence of verbal suggestion on itch and weal size. J Psychosom Res, 78(5), 489-494.

Darragh, M., Booth, R. J., & Consedine, N. S. (2015). Who responds to placebos? Considering the "placebo personality" via a transactional model. Psychol Health Med, 20(3), 287-295.

Lillis, S., Yielder, J., Mogol, V., O'Connor, B., Bacal, K., Booth, R., & Bagg, W. (2014). Progress Testing for Medical Students at The University of Auckland: Results from The First Year of Assessments. Journal of Medical Education and Curricular Development, 1, 41-45.

Darragh, M., Booth, R. J., & Consedine, N. S. (2014). Investigating the 'placebo personality' outside the pain paradigm. J Psychosom Res, 76(5), 414-421.

Koschwanez, H. E., Kerse, N., Darragh, M., Jarrett, P., Booth, R. J., & Broadbent, E. (2013). Expressive writing and wound healing in older adults: a randomized controlled trial. Psychosom Med, 75(6), 581-590.

#### Elizabeth Broadbent, PhD

**Position:** Associate Professor in Psychological Medicine

**Discipline:** Health Psychology

Room: 12005, Department of Psychological Medicine

Level 12, Auckland Hospital Support Building

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#### Research interests

Stress and wound healing, illness perceptions, patients' drawings of their illness, risk perceptions, human-robot interactions in healthcare; embodied cognition.



#### **Recent publications**

Broadbent, E. (2017). Interactions with robots: The truths we reveal about ourselves. Annual Review of Psychology, 68, 10.1146/annurev-psych-010416-043958

Wilkes, C., Kydd. R., Sagar, M., Broadbent, E. (2017). Upright posture improves affect and fatigue in people with depressive symptoms. Journal of Behaviour Therapy and Experimental Psychiatry, 54, 143-9.

Grünich, K., Garcia-Hoyos,V., Stinear, C., Ackerley, S., Tiemensma, J., & Broadbent, E. (2016). Kinematic measures of brain drawings are associated with illness perceptions in people with stroke. International Psychogeriatrics. DOI: http://dx.doi.org/10.1017/S1041610216000727.

Richardson, A., Moreton, R., & Broadbent, E. (2016). Illness perceptions and coping predict post-traumatic stress in caregivers of patients with head and neck cancer. Supportive Care in Cancer, 24, 4443-50.

Sagar, M., & Broadbent, E. (2016). Participatory medicine: Model based tools for engaging and empowering the individual. Interface Focus, 6, 2. Doi:10.1098/rsfs.2015.0092

Jones, A.S.K., Ellis, C.J., Nash, M., Stanfield, B., & Broadbent, E. (2016). Using animation to improve recovery from acute coronary syndrome: A randomized trial. Annals of Behavioral Medicine, 50, 108-118.

Broadbent, E., Kerse, N., Peri, K., Robinson, H., Jayawardena, C., Kuo, T., . . . MacDonald, B. (2016). Benefits and problems of health-care robots in aged care settings: A comparison trial. Australasian Journal on Ageing, 35, 23-29.

Ramondt, S., Tiemensma, J., Cameron, L.D., Broadbent,, E. & Kaptein, A.A. (2016). Drawings of blood cells reveal people's perception of their blood disorder: a pilot study. Plos One. 11 (4); e0154348

Broadbent, E., Vurnek, M., Weinman, J., Tarlton, J., Whiting, C., Amirapu, S., . . . Koschwanez, H. (2015). Sleep and skin composition. Brain, Behavior, and Immunity. Doi: 10.1016/j.bbi.2015.07.029

Robinson, H., Jarrett, P., & Broadbent, E. (2015). The effects of relaxation before or after tape stripping on skin barrier recovery: A preliminary study. Psychosomatic Medicine. 77, 844-52. DOI: 10.1097/PSY.0000000000000222

Broadbent, E., Wilkes, C., Koschwanez, H., Norton, S., Weinman, J., & Petrie, K.J. (2015). A systematic review of the Brief IPQ. Psychology & Health, 11, 1361-85. DOI:10.1080/08870446.2015.1070851

#### Nathan S. Consedine, PhD

**Position:** Associate Professor in Psychological Medicine

**Discipline:** Health Psychology

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#### **Research Interests:**

Discrete emotions (eg, fear, embarrassment, disgust), emotion regulation, and health, cancer screening, health disparities and

ethnic differences, medical help-seeking and decision-making, self-disclosure, lifespan socioemotional development, physician compassion.



Darragh, M., Yow, B., Keiser, A., Kydd, R. R., Booth, R. J., & Consedine, N. S. (2016). A take-home placebo treatment reduces, stress, anxiety, and symptoms of depression in a non-patient population. Australian & New Zealand Journal of Psychiatry, 50 (9), 858-865.

Darragh, M. Chang, J. W. H., Booth, R. J., & Consedine, N. S. (2015). The placebo effect in inflammatory skin reactions: the influence of verbal suggestion on itch and weal size. Journal of Psychosomatic Research, 78 (5), 489-494. DOI: 10.1016/j.hpsychores.2015.01.011

Fernando, A. T., Skinner, K., & Consedine, N. S. (2016). Increasing compassion in medical decision-making: can a brief mindfulness intervention help? Mindfulness.

Friis, A., Johnson, M. H., & Consedine, N. S. (2016). Paradoxical effects of self-compassion on mood and teeth flossing behavior in an experimental setting. Mindfulness. E-pub: 30th July, 2016. Friis, A., Johnson, M. H., Cutfield, R. & Consedine, N. S. (2016). Kindness matters: An RCT of a self-compassion intervention improves depression, distress, and HbA1c among diabetes patients. Diabetes Care. Online First: June 26th, 2016. DOI: 10.2337/dc16-0416

Reynolds, L. R., Bissett, I. P., Porter, D., & Consedine, N. S. (2016). The "ick" factor matters when it matters most: disgust prospectively predicts avoidance in chemotherapy patients. Annals of Behavioral Medicine. E-pub: July 13, 2016. DOI: 10.1007/s12160-016-9820-x

Tuck, N. L., Grant, R., Jackson, A., Brooks, A., & Consedine, N. S. (2016). Beyond self-report: performance measures of emotional competencies predict symptoms of depression and anxiety, physical symptoms, self-rated health and immunoregulatory molecules. Annals of Behavioral Medicine. Online First: June 20th, 2016. DOI: 10.1007/s12160-016-9809-5

Tuck, N. L., Grant, R., Sollers, J. J., Booth, R. J. & Consedine, N. S. (2016). Higher resting heart rate variability predicts skill in expressing some emotions. Psychophysiology. Online First: August 26th, 2016. DOI: 10.1111/psyp.12755

Reynolds, L. R., Bissett, I. P., & Consedine, N. S. (2015). Predicting the patients who will struggle with anal incontinence: sensitivity to disgust matters. *Colorectal Disease*, 17 (1), 73-80.

Reynolds, L. M., Lin, Y-S., Zhou, E., & Consedine, N. S. (2015). Does a state mindfulness induction moderate disgust-driven social avoidance and decision-making? An experimental investigation. *Journal of Behavioral Medicine*, 38 (1), 98-109. DOI: 10.1007/s10865-014-9582-5

Sistig, B. Hatters-Friedman, S., McKenna, B., & Consedine, N. S. (2015). Mindful yoga as an adjunct treatment for forensic inpatients: A preliminary evaluation. *Journal of Forensic Psychiatry and Psychology*. DOI: 10.1080/14789949.2015.1062996



#### Malcolm Johnson, MA, DipClinPsych

**Position:** Senior Lecturer in Psychological Medicine

Discipline: Clinical and Health Psychology

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#### Research interests

Pain assessment and management; attention, information processing and pain; anxiety and pain; confidentiality and professional practice.

#### **Recent publications**

Bean, D. J., Johnson, M. H., Heiss-Dunlop, W., Lee, A.C., & Kydd, R. R. (2015). Do psychological factors influence recovery from Complex Regional Pain Syndrome Type-1? A Prospective Study. *Pain* doi: 10.1097/j.pain.0000000000000282

Friis, A. M., Johnson, M. H., Cutfield, R. G., & Consedine, N. S. (2015). Does kindness matter? Self-compassion buffers the negative impact of diabetes-distress on HbA1c.. *Diabetic medicine: a journal of the British Diabetic Association*. doi:10.1111/dme.12774

Bean, D. J., Johnson, M. H., Heiss-Dunlop, W., & Kydd, R. R. (2015). Factors Associated with Disability and Sick Leave in Early Complex Regional Pain Syndrome Type-1.. *The Clinical journal of pain*. doi:10.1097/ajp.000000000000034

Rae, N., Johnson, M.H., & Malpas, P. J. (2015) New Zealanders' Attitudes toward Physician-Assisted Dying. *Journal of Palliative Medicine*. 18(3): 259-265.

Bean, D. J., Johnson, M. H., & Kydd, R. R. (2014). The outcome of complex regional pain syndrome type 1: a systematic review. *J Pain*, 15(7), 677-690. doi:10.1016/j.jpain.2014.01.500

Pak, N., Devcich, D. A., Johnson, M. H., & Merry, A. F. (2014). Is refractory angina pectoris a form of chronic pain? A comparison of two patient groups receiving spinal cord stimulation therapy.. *N Z Med J*, 127(1391), 52-61. Retrieved from http://www.ncbi.nlm.nih.gov/pubmed/24732252

Malpas, P.J., Wilson, M.K.R., Rae, N., Johnson, M.H. (2013) Why do older people oppose physician-assisted dying?: a qualitative study. *Palliative Medicine* doi: 10.1177/0269216313511284

Ho, P. C., & Johnson, M. H. (2013). Behaviours and beliefs about pain and treatment among Chinese immigrants and New Zealand Europeans.. *The New Zealand Medical Journal*, 126(1370), 10-22.

Baxter, H.J., Johnson, M.H., & Bean, D. (2012) Efficacy of a character strengths and gratitude intervention for people with chronic back pain *The Australian Journal of Rehabilitation Counselling*, 18 (2), 135-147.

Johnson, M.H., Stewart, J., Humphries, S.A., & Chamove, A.S. (2012). Marathon runners' reaction to potassium iontophoretic experimental pain: Pain tolerance, pain threshold, coping, and self-efficacy. *European Journal of Pain*. 16(5):767-774 DOI: 10.1002/j.1532-2149.2011.00059.x



#### Keith Petrie, PhD, DipClinPsych

**Position:** Professor in Psychological Medicine

**Discipline:** Health Psychology

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#### Research interests

The role of patients' perceptions of illness and outcome in chronic illness; patient reassurance; symptom appraisal and delay in seeking

medical care; the influence of psychological factors on immune activity; the effect of environmental worries and concerns about modernity on health perceptions and symptom reporting; fatigue in aircrew during international long-haul operations.

#### **Recent publications**

Faasse, K., & Petrie, K.J. (2016). From me to you: The effect of social modelling on treatment outcomes. Current Directions in Psychological Science.

Colgan, S.L.E., Faasse, K., Pereira, J,A., Grey, A., & Petrie, K.J. (2016). Changing perceptions and efficacy of generic medicines: An intervention study. Health Psychology. doi: 10.1037/hea0000402

Bright, E., Petrie, K.J., Partridge, A.H., & Stanton, A.L. (2016). Barriers to and facilitative processes of endocrine therapy adherence among women with breast cancer. Breast Cancer research and Treatment, 158, 243-51. doi:10.1007/s10549-016-3871-3

Palmquist, E., Petrie, K.J., & Nordin, S. (2016). Psychometric properties and normative data of the Modern Health Worries in a Swedish Sample. International Journal of Behavioral Medicine. doi: 10.1007/s12529-016-9576-5

Petrie, K.J., Faasse, K., & Thomas M.G. (2016). Public perception of risk from the Ebola virus, willingness to vaccinate and likely behavioural responses to an outbreak. Disaster Medicine and Public Health Preparedness. doi: 0.1017/dmp.2016.67

Duyck, S., Petrie, K.J., & Dalbeth, N. (2016). "You don't have to be a drinker to have gout, but it helps": A content analysis of the depiction of gout in popular newspapers. Arthritis Care & Research. doi: 10.1002/acr.22879.

Bartley, H., Faasse, K., Horne, R., & Petrie, K.J. (2016). You can't always get what you want: The influence of choice on nocebo and placebo responding. Annals of Behavioral Medicine, 50, 445-451. doi: 10.1007/s12160-016-9772-1

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#### Anna Serlachius, PhD

**Position:** Lecturer in Psychological Medicine

**Discipline:** Health Psychology

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#### Research interests

Self-management in chronic illness, health technology interventions in chronic illness, stress and coping, cardio-metabolic health, protective factors in chronic illness (e.g. social support, optimism), using a life course approach to understanding chronic disease



#### **Recent publications**

Serlachius, A., Elovainio, M., Juonala, M., Shea, S., Sabin, M., Lehtimäki, T., Raitakari, O., Keltikangas-Järvinen, L., Pulkki-Råback, L (in press). The Association between Social Support, Body Mass Index and Increased Risk of Prediabetes: The Cardiovascular Risk in Young Finns Study. International Journal of Behavioral Medicine.

Pulkki-Råback L., Elovainio, M., Hakulinen, C., Lipsanen, J., Kubzansky, L., Hintsanen, M., Serlachius, A. et al. (in press) Positive psychosocial factors in childhood predicting the risk for type 2 diabetes in adulthood. American Journal of Preventive Medicine.

Serlachius, A., Juonala, M., Pulkki-Råback, L., Elovainio, M., Shea, S., Sabin, M., Lehtimäki, T., Raitakari, O., Keltikangas-Järvinen, L., Pulkki-Råback, L. (2016) High perceived social support protects against the intergenerational transmission of obesity: The Cardiovascular Risk in Young Finns Study. Preventive Medicine, 90:79-85. doi: 10.1016/j.ypmed.2016.07.004. [Epub ahead of print]

Serlachius, A., Pulkki-Råback, L., Elovainio, M., Hintsanen, M., Mikkilä, V., Laitinen, T.T, Jokela, M., Rosenström, T., Josefsson, K., Juonala, M., Lehtimäki, T., Raitakari, O., Keltikangas-Järvinen, L. (2015). Different Effects of Optimism and Pessimism on Ideal Cardiovascular Health: The Young Finns Study. Psychology & Health, 30(10):1221-39.

Pulkki-Råback, L., Elovainio, M., Hakulinen, C., Lipsanen, J., Hintsanen, M., Jokela, M., Kubzansky, L., Hintsa, T., Serlachius, A. et al (2015). Cumulative Effect of Psychosocial Factors in Youth on Ideal Cardiovascular Health in Adulthood: The Cardiovascular Risk in Young Finns Study. Circulation, 131: 245-253.

Serlachius, A., Scratch, S., Northam, E., Frydenberg, E., Lee, K., Cameron, F. (2014). A randomized controlled trial of cognitive behaviour therapy to improve glycaemic control and psychosocial wellbeing in adolescents with type 1 diabetes. Journal of Health Psychology, 1157-69. Doi: 1359105314547940. [Epub ahead of print]

Serlachius, A., Northam, E., Frydenberg, E., & Cameron, F. (2012). Adapting a Generic Coping Skills Programme for Adolescents with Type 1 Diabetes: A Qualitative Study. Journal of Health Psychology, 17(3):313-323.

#### Lisa Reynolds, PhD, PGDipHealthPsych

**Position:** Lecturer in Psychological Medicine

**Discipline:** Health Psychology

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#### Research interests:

Emotion and avoidance in cancer screening and treatment, medical help-seeking and decision-making, disgust, mindfulness, compassion.



#### **Recent publications:**

Reynolds, L. M., Bissett, I. P., Porter, D. & Consedine, N. S. (2016). The 'ick' factor matters: Disgust prospectively predicts avoidance in chemotherapy patients. Annals of Behavioral Medicine. 1-11. dos:10.1007/s12160-016-9820-x

Reynolds, L. M., McCambridge, S. A., & Consedine, N. S. (2015). Self-disgust and adaptation to chronic health conditions: Implications for avoidance and withdrawal. Chapter in Powell, P.A., Overton, P.G., & Simpson, J. (Eds.), *The Revolting Self: Perspectives on the Psychological, Social and Clinical Implications of Self-Directed Disgust.* London: Karnac Books

Reynolds, L. M., McCambridge, S. A., Bissett, I. P., & Consedine, N. S. (2014). Trait and state disgust: An experimental investigation of disgust and avoidance in colorectal cancer decision scenarios. *Health Psychology*. 33(12), 1495-1506. doi: 10.1037/hea0000023

Reynolds, L. M., Lin, Y.S., Zhou, E., & Consedine, N. S. (2014). Does a brief state mindfulness induction moderate disgust-driven social avoidance and decision-making? An experimental investigation. *Journal of Behavioral Medicine*. 38(1). 98-109. doi: 10.1007/s10865-014-9582-5

Reynolds, L. M., Bissett, I. P., Porter, D., & Consedine, N. S. (2014). Eyes wide open: Tread carefully with mindfulness training during chemotherapy. *Psycho-Oncology*. 23(Suppl. 3), 123. doi: 10.1111/j.1099-1611.2014.3694

Reynolds, L. M., Consedine, N. S., & McCambridge, S.A., (2014). Mindfulness and disgust in colorectal cancer scenarios: Non-judging and non-reacting components predict avoidance when it makes sense. *Mindfulness*. 5(4). 442-452. doi: 10.1007/s12671-013-0200-3

Reynolds, L. M., Bissett, I. P., & Consedine, N. S. (2014). Predicting the patients who will struggle with anal incontinence: Sensitivity to disgust matters. *Colorectal Disease*. 17(1), 73-80. doi: 10.1111/codi.12781

Reynolds, L.M., Consedine, N.S., Pizarro, D.A., Bissett, I.P. (2013). Disgust and behavioral avoidance in colorectal cancer screening and treatment: a systematic review and research agenda. *Cancer Nursing*. 36(2). doi:10.1097/NCC.0b013e31826a4b1b



### 2017 academic year

#### Semester One - 2017

Semester One begins	Monday 6 March 2017
Course withdrawal deadline	Friday 17 March 2017
Course withdrawal deadline (double semester course)	Friday 31 March 2017
Mid-semester break/Easter	Friday 14 April – Saturday 29 April 2017
ANZAC Day	Tuesday 25 April 2017
Graduation	Monday 1, Wednesday 3, Friday 5 May 2017
Queen's Birthday	Monday 5 June 2017
Lectures end	Friday 9 June 2017
Study break	Saturday 10 June - Wednesday 14 June 2017
Exams	Thursday 15 June - Monday 3 July 2017
Semester One ends	Monday 3 July 2017
Inter-semester break	Tuesday 4 July - Saturday 22 July 2017

#### Semester Two - 2017

Semester Two begins	Monday 24 July 2017
Course withdrawal deadline	Friday 4 July 2017
Mid-semester break	Monday 4 September - Saturday 16 September 2017
Graduation	Tuesday 26 September 2017
Labour Day	Monday 23 October 2017
Lectures end	Friday 27 October 2017
Study break	Saturday 28 October - Wednesday 1 November 2017
Exams	Thursday 2 November - Monday 20 November 2017
Semester Two ends	Monday 20 November 2017

#### Semester One - 2018

Semester Two begins	Monday 26 February 2018
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### Notes

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