Culture, Health and Illness Representations: reflective perspective on the 2007 SYNERGY workshop

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The 2007 SYNERGY workshop took place in August at the University of Hasselt in Belgium. This workshop was facilitated by Michael Diefenbach, Jeanne Edman and Alison Karasz and attracted 14 participants from seven different nations. Katja Rüdell organized the workshop with guiding input from Lynn Myers.

Prior to the workshop participants were invited to share their goals and aspirations for what they wanted to achieve at the 2007 SYNERGY workshop. The goals were:

1) To meet other researchers in this area, be able to talk freely and openly about research problems with cross-cultural groups, to learn from their experiences and exchange ideas.
2) To develop a collaborative research project or identify people that could be drawn on for future collaborations.
3) To advance the dialogue in Europe about the influence of culture on illness perceptions and other health-related psychological constructs.

It is helpful to use these goals as a framework to reflect on what was achieved at the 2007 SYNERGY workshop. Feedback from participants suggests the first goal was achieved successfully. Participants were able to present their own work in a collegial and professionally supportive atmosphere, generating much open discussion of the rewards, challenges, and possible future directions for research in the area of culture, health, and illness representations. The international diversity present among workshop participants was a strong positive feature as it enriched discussions, and enable vigorous debate of the different approaches to research focusing on culture and illness representations at both a theoretical and practical level.

The tone of the workshop was characterized by motivated interest in this area, engagement, openness to new ideas, and respect for the useful contributions of all participants in this workshop. A wide range of prior experience was evident. This contributed greatly to the quality of the workshop, as experts in different areas took turns to lead discussion. Topics included; definitions of culture, psychometric issues for cross-cultural validity, anthropological research methods, culture and self-construal, models and theory to inform research development, and practical and conceptual issues to consider in the conduct of cross-cultural research. The breadth of presentations spanned many regions of the globe. By taking part in this workshop, we feel we learnt a great deal from other participants, and very importantly we also know now who to approach for more advanced expertise in specialized areas.

In terms of the second goal, it emerged during the workshop that approaches to research questions and methodologies were very different between different members. Although we spent some time discussing various options for cross-cultural health related research we could not spend as much time on developing collaborative research projects as perhaps initially envisaged. However the premises for such work were explored and the group worked on a consensus agreement detailing common guidelines for good cross-cultural health related research. Furthermore the workshop enabled researchers to identify other individuals that shared interest for a common research question. We therefore felt that this objective was partially achieved. In our view the enthusiastic sharing of ideas at this workshop helped to identify areas of common interest, creating a fertile environment for future collaborations.

In relation to the last objective, the workshop fully addressed its potential. Whereas European health psychologists have actively contributed to our growing understanding of health inequalities and the contribution of socio-economic status to variance in health; we have not yet developed expertise that clearly informs researchers how best to define (Continued on page 82)
culture and how to measure it in health-related psychological research. This is identified as an important unanswered question. It seems that despite the high level of migration between European states, and the fluid ability to work and live in different states, there has been limited examination of how culture and health care differences influence our models. Sharing views and expertise created the beginning of a scientific dialogue on how to deal with these issues in research and health practice.

In order to advance dialogue about the influence of culture on illness perceptions and other health-related psychological constructs, we need to provide conceptual clarity regarding the definition and measurement of culture in health psychology research. This was discussed at length in the workshop. One promising approach to the assessment of culture in health psychology could be to use self-construal of the individual within a cultural environment, with assessment via proxy indicators such as nationality, language, religion, and ethnic background. The implication is that conceptually culture might sit within theoretical frameworks that represent the self-system, rather than an upstream antecedent of social cognitive variables (as this places culture external to models of, for example, the self-regulatory system).

Practical issues were also considered, with workshop participants working collectively to identify examples and principles of ‘good research practice’. This generated excellent critical discussion, for example, regarding the merits/pitfalls of forward and back translation. We also considered how variation in different cultures and health settings might affect the reliability and validity of our research.

In summary the 3-day SYNERGY workshop was highly successful in advancing dialogue about the influence of culture on illness perceptions and other health-related psychological constructs. We believe dialogue at the workshop has created platform for future collaborative opportunities to emerge. We would like to extend our gratitude to Professors’ Michael Diefenbach, Alison Karasz, and Jeanne Edman for doing such an excellent job of facilitating the workshop, and thank Jeroen Meganck for his superb organisational skills and warmth in welcoming SYNERY participants to Hasselt. Finally we wish to thank our fellow participants for creating a positive atmosphere of openness and collegiality at this workshop, and for contributing three days of very stimulating discussion.

SYNERGY 2007 sowed the seeds for an international agenda for cross-cultural research within health psychology - we look forward to continuing growth in this important area of health psychology.

CREATE 2007 reflections

On the use of theory in Intervention Mapping

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Set in the charming city of Hasselt, Belgium and a short distance from the site of the 2007 EHPS conference in Maastricht, the Netherlands, the 2007 CREATE workshop provided participants with an intensive introduction to Intervention Mapping (IM; Bartholomew, Parcel, Kok, & Gottlieb, 2006). Facilitated by Prof. Gerjo Kok, Prof. Herman Schaalma and Dr. Rob Ruiter, the timeliness of a course on intervention design was both notable on a personal level as I begin my PhD, but I suspect also useful to the wider community of new European health psychologists in training. Indeed, the focus of health psychology has clearly shifted away from simple cross-sectional designs re-testing well-known theories and moved towards efforts at engendering actual health behaviour change. The complexity involved therein is suggestive of the need for frameworks to guide researchers interested in designing behaviour change interventions.

Emerging from the health promotion literature, Intervention Mapping provides researchers with a systematic series of steps aimed at designing and evaluating interventions. The steps delineated in IM guide the development of interventions iteratively to ensure maximal consideration of potentially relevant factors that contextualise the behaviour targeted for change. In particular, IM highlights the need to conduct a needs assessment (Step 1), to specify the determinants of the targeted behaviour and the change