# **Annual EHPS Conference Report 2008**

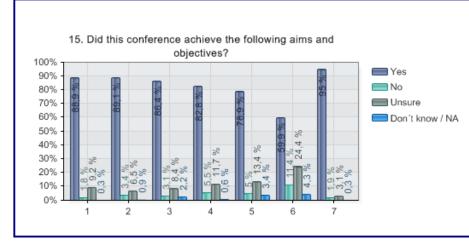
THE EUROPEAN HEALTH PSYCHOLOGIST

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This year a joint British Psychological Society Division of Health Psychology (BPS DHP) and EHPS annual conference was hosted by the University of Bath, UK. There was a total of 713 delegates. The keynote speakers were: Professor Joop van der Pligt, University of Amsterdam, the Netherlands; Professor Suzanne Skevington, University of Bath, UK; Professor Janice Kiecolt-Glaser, Ohio State University, USA; Professor Nichola Rumsey, University of the West of England, UK. Over 700 abstracts were submitted and almost 700 accepted. In the programme there were 152 oral presentations, 15 Symposia, 1 workshop and 441 poster presentations. The social programme included reception drinks at the Roman Baths and dinner and disco at Bath Pavilion.



Keynote Speaker Professor Van der Pligt



- 1. Enabled the dissemination of good quality research?
- 2. Included papers with a range of theoretical approaches to understanding health and illness?
- 3. Included papers that applied theoretically based interventions across health care settings?
- 4. Included papers with a range of methods to explore research questions?
- 5. Included papers with research questions of relevance to clinical practice?
- 6. Addressed issues of relevance to all aspects of a health psychologist's work?
- 7. Provided opportunities to meet and talk with colleagues?

### Responders to conference feedback

Three hundred and twenty seven (46%) of delegates completed the online feedback for the conference. Of the responders this year, 36% were full members of the EHPS (23% full members, 10.8% student members, 2.5% eastern European members), and 64% were non members, while 41% were a DHP member (22.3% full members, 18.6% student/trainee member) and 59% non members. Of those who responded, 53% had not attended an EHPS annual conference in the last five years, and 60% had not attended a DHP annual conference in the last five years. Only nine per cent had never attended a conference before with 41 per cent having been to a

social science conference, 34 per cent had been to an applied conference and 53 per cent another type.

### Conference aims and objectives

Responders' answers reflected an overall feeling that the aims of the conference were achieved. For the following aims, responders were required to answer yes, no, or unsure as to the achievement of the conference in those aims.

Overall, the majority of responders seem to believe the aims of the conference were met. However, 36 per cent of responders were unsure or did not feel that aim six was achieved. This may

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reflect a feeling that some of the research presented was not relevant to the field of health psychology or it could be that some people believed relevant health psychology issues were missing, such as health psychology in practice.

## **Conference ratings**

Various components of the conference were assessed using a rating scale (poor - excellent, 1-5). Mean ratings are shown below.

- How would you rate the overall quality of the conference? 4.0
- What was the quality of the symposia? 4.1
- What was the quality of the workshops? 4.2
- What was the quality of oral presentations? 4.1
- What was the quality of poster presentations? 3.9
- How was the timekeeping and chairing? 4.2
- How was the social programme? 3.5
- How was the overnight accommodation? 3.4
- How would you rate the conference in terms of value for money? 3.5

The components based around quality of the conference, presentations, workshops and timekeeping were rated favourably (3.9-4.2), while the components based on non scientific aspects of the conference social events, accommodation and value for money were rated a little less favourably (3.4-3.5), this was reiterated in the free response section.

#### **Balance of activities**

Participants were asked to rate the balance of activities at the conference with the options of either: fine, too much, too little, or don't know/NA. 'Fine' answers shown by per cent.

- → Number of workshops? 48.5 % (34.6 per cent don't know/NA)
- → Number of oral presentations? 80.6%
- → Number of poster presentations? 74.8%
- → Number of keynotes? 83.1%

It appears that the majority of responders were satisfied with the balance of each of the activities at the conference.

### Written responses

The overall impression of the conference from the free response section was positive, it was a successful meeting where an exhilarating environment was created which encouraged the exchange of research findings, examples of health psychology and practice to be shared and a community to network and discuss future research collaborations. The main points responders made on what worked well were the joint organisation of the DHP and EHPS, and the wider scope of research that this allowed for. The high quality standard of the scientific programme was repeatedly praised.

However a number of points were raised by delegates who highlighted some aspects that they would change to make the next conference even more successful. Both positive aspects and suggestions for improvement fall under four headings; conference organisation, scientific programme, accommodation and food and social events.

### **Conference organisation**

The general conference organisation was highly praised; in particular a positive aspect mentioned was the joint nature of the conference. This is the second joint conference between the British and European societies (the first was held at St Andrews in 2001). Delegates thought that bringing the two together made for a better quality and higher standard of conference and responders commented that they preferred the wider focus of the research. The organising committee and stewards (known as the 'Green Army' because of their distinctive t-shirts) were considered to be very helpful and attentive, and instrumental in creating a friendly environment within the conference.



The Green Army

A few ideas were highlighted which could improve future conferences. The considerable >

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number of delegates meant that keynote and plenary sessions were often crowded, it was suggested that the University of Bath was slightly too small a venue for a conference this size. With respect to future joint conferences between Britain and European societies responders suggested that a larger venue to accommodate everyone could be more beneficial. Furthermore, a number of respondents suggested moving refreshments away from the poster presentations, as the background noise reduced the ability to hear the presenters.

### Scientific programme

There were few suggestions made in relation to improving the scientific programme. Responders commented on the wealth and high quality of oral and poster presentations and many responders made very positive remarks about the excellence of the keynote speakers. Some delegates however felt that a wider variety of papers and theories needed to be presented, in particular more focus on health psychology in practice and 'real world' examples, in exchange for a less academic focus. A small number felt that there were too many papers presented, however a similar number felt that there were too few, illustrating that delegates have different expectations and thus not all can be completely satisfied. The rating scale responses, however, suggest that the majority of delegates thought that the number of oral presentations was fine. Many responders put forward suggestions for future keynote speakers, from multiple areas of health psychology. These will be taken into consideration for future conferences

#### Accommodation and food

Two concerns were raised by delegates in relation to accommodation and food. A number of those who staved in university accommodation were unhappy with the quality and comfort of their room; they did not provide the luxuries that some hotels do. However using university accommodation allowed these delegates to be just walking distance away from the main conference venues and also kept conference price to a minimum. The other point discussed by some delegates was the quality of the lunch provided, a number asked for more fruit and a healthier option, especially due to the nature of the conference. By providing lunch in individual bags, it allowed delegates the freedom to move around the campus and take advantage of the picturesque open space, however some felt that a seated lunch area would allow for further networking.

#### **Social events**

The social calendar was very busy, and on the whole enjoyed and appreciated by delegates. The tour of the roman Baths was a highlight for many and responders commented that Bath was a beautiful city that provided a fantastic back drop to the conference. Positive comments were also made about the meal event on the Wednesday evening where a number of restaurants were booked throughout Bath and hosted by DHP and EHPS representatives. However feedback about the conference dinner on the Thursday evening was more mixed. The venue was very crowded and there unfortunately was insufficient seating for the number of delegates. People had to queue for their buffet dinner and it was felt by many that a sit down meal would have been more appropriate. The lack of space and seating was predominately caused by the huge numbers that attended, it was suggested that the dinner could have been held in two venues or at two sittings. This is something that will be taken on board for future joint conferences. However for most who commented on this aspect, this did not ruin the enjoyment of the evening

"I think the obvious thing to change was the conference dinner, however this was a small glitch in an otherwise very well organised conference"

## Training and professional development

There were a number of pre conference workshops this year: 'Missing data analysis', 'Writing highly cited health psychology papers and what to do when one is rejected' along with a CREATE workshop on 'Risk perception and risk communication' and a Synergy workshop on 'Internet-based health psychology interventions: maximising their potential'. In addition a 'Meet the experts' session took place before the start of the conference to allow experienced psychologists to pass on their knowledge. A single workshop took place during the conference: 'Preventing type 2 diabetes: Are recommendations on achieving lifestyle change from the IMAGE guideline development project valid and achievable?' Finally, there was one post conference workshop on 'Discourse analysis'.

### **DHP** and **EHPS** joint conference

This year's conference was jointly organised by the British Psychology Society Division of ▶

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Health Psychology (DHP) and the European Health Psychology Society, which allowed for a mix of work from other countries as well as the UK. Responders commented on how well this worked and reported that the two societies contributed to a more international perspective on Health Psychology. Additional comments were made that this allowed for good networking opportunities and for a variety of opinions and ideas to be exchanged. Suggestions on improvements for future joint DHP and EHPS conferences were that presenters could talk more clearly as many delegates were not native English speakers.

### **Poster presentations**

This year the poster sessions were organised in a different format to previous DHP conferences, there were four dedicated viewing sessions in the main hall in which 441 posters were presented in total. Poster sessions were chaired and themed in groups of up to six posters. Each presenter gave a 2-3 minute summary of their work, followed by a 3 minute group discussion facilitated by the chairs. The delegates were very positive about the poster sessions, saying that the format helped to promote informal discussion, the large room allowed delegates space to move around the poster displays in a relaxed environment. The only critical point raised was that due to the refreshments being served in the same location, it was sometimes difficult to hear the presenters over the background noise.

#### **Final comment:**

## Jo Hart (National Conference Organiser) & **Karen Rodham (Conference President)**

In spite of some of the practical and logistical constraints which we worked hard to overcome, and from which we have learned valuable lessons for future conference organisation, we are very pleased with the feedback received. This was the largest health psychology conference that has (to date) been organised in Europe and thus highlights the growth of health psychology in the UK and in Europe. We were thrilled with the number of high quality submissions to the conference - this level of excellence was reflected in the media coverage that the conference generated in the UK, Europe and further afield, including India.

As Conference Organisers, we would like to thank the following for their involvement in the conference: Dr David French, Chair of the Scientific Committee: The DHP and EHPS Committees for advice and support in promoting the conference; the British Psychological Society Conference and Media Office for supporting the conference; the Stewards who worked tirelessly to ensure the conference ran smoothly; Christina Shoesmith who managed the Registration Desk; Dr Henderson (Incoming Caroline National Conference Organiser); Dr Di Harcourt and Dr Julie Turner-Cobb who managed the press releases; Exhibitors for sponsoring the conference; Taylor and Francis for sponsoring the drinks reception; Bath Chairman, Councillor Belotti for sponsoring the Roman Baths drinks reception; finally the University of Bath for hosting the conference (especially Sarah Bull).

Both societies and the organisers take your feedback very seriously. A number of outcomes from the conference feedback are in progress:

- Both the DHP and the EHPS have initiated large scale reviews of their annual conferences
- In the short-term, feedback has been given to the organisers of both 2009 conferences and they have already implemented changes
- Jo Hart, on behalf of the organisers, felt that some aspects of the conference did not meet expectations, and therefore complaints to both the University of Bath and those in charge of the conference dinner; negotiating substantial reductions from both these organisations (over £18,000). This amount plus a small surplus will be given to the DHP and EHPS, in the proportion agreed in their contract. We know that this additional money will be put to good use in the societies.