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Psychology for a healthy nation

Abstracts

The abstracts below appear in submitting author order (by surname). All abstracts appear as submitted by the authors. Content has not been edited.

Individual Research Paper (Paper #47)
Friday 11 October 2013 – 8:30am (Meeting Room 2)
Investigating culturally competent reflective practice in diabetes healthcare
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Cultural competence is a relatively recent term describing appropriate ways of working with Aboriginal and Torres Strait Islanders and increasingly diverse cultures in society. By interviewing diabetes practitioners, this study sought to investigate the interaction between scientific knowledge and the practice of diabetes healthcare with patients from non-Western cultural groups. A purposive sample of 22 participants (21 females and one male) included 18 nurses specialising in diabetes care, three psychologists and one dietician. Their ethnic backgrounds were 15 Anglo Australians; 5 Chinese; one Vietnamese, Egyptian and Dutch. Ages ranged from 27 to 59 years with a mean age of 45.7 years. Seventeen practitioners were in the 40 to 60 year age range.Diabetes practitioners' unique perspectives were sought as a guide to investigate the context and complexity of their practice. Grounded theory was used with references from the academic literature, combined with constructionist approaches, to create a framework suitable for analysis of the data. In response to their patients' cultural diversity diabetes practitioners developed skills complimentary to their evidence-based practice training. It was found through a reflective and patient-centred orientation, practitioners reported challenging the status quo of Western scientific ideology to reflect on their own and others' belief systems, power relations, communication, and psychological perspectives. Aristotle's rarely discussed concept of *phronesis,* or ethical knowledge, was a useful concept in the dynamic *culturally competent reflective practice* model describing practitioners' ethical and reflective practice. This study may also contribute to the larger debate in healthcare practice regarding flexibility versus fidelity in evidence-based practice, and to a greater understanding of the unique challenges faced by culturally focused interventions.

Individual Research Paper (Paper #200)
Friday 11 October 2013 – 2:00pm (Meeting Room 2)
Help-negation for undiagnosed symptoms of heart disease among general practice patients
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Heart disease is the number one cause of death in Australia but with early treatment, can be managed, halted, or reversed. Few people seek help early enough to benefit optimally from treatment; many deaths occur before medical help is sought. Help-negation refers to the process of help withdrawal or avoidance found among those experiencing clinical *and* subclinical levels of suicidal ideation, depression, and general

psychological distress (Wilson, Bushnell, Caputi, 2011). Over 20 help-negation studies now point to biological and neurological underpinnings for the help-negation process that may also impact help-seeking for symptoms of Heart Disease. Most research on help-seeking for symptoms of Heart Disease involves retrospective design using patients diagnosed and receiving treatment for an acute event such as heart attack. Understanding help-seeking for early symptoms of Heart Disease is crucial. If help-negation can be confirmed for Heart Disease, this has relevance for understanding the pathways to treatment and interventions to promote help-seeking in populations at-risk for Heart Disease. To examine the help-negation relationship for undiagnosed symptoms of Heart Disease and identify variables that may explain the relationship in undiagnosed samples. While patients sat waiting to talk with their GP about a non-heart related condition, two samples of over 300 patients each completed a self-report survey that measured current levels of undiagnosed symptoms of Heart Disease, current levels of depression and anxiety symptoms, and current intention to talk with a GP about heart symptoms. Among patients who were able to accurately label symptoms of Heart Disease, and believed that someone with these types of symptoms should talk to their GP about their symptoms, those who were *currently experiencing* higher levels of undiagnosed symptoms of a heart condition were *also* those with lower intention to talk with their GP about their heart symptoms, despite having immediate access to a consultation with their GP. This study provides preliminary evidence that the help-negation process occurs for undiagnosed symptoms of Heart Disease. The role of depression in explaining this relationship is discussed together with implications for professional psychology in the prevention of Heart Disease.

Poster Presentation (Paper #180)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
Reliability and factor structure of social herding, January effects, July effects, overreaction, overconfidence, information sources, psychological biases in decision making, propensity for risk, BIS15 and Anxiety scales in sample of 521 retail and institutional share investors

ABRAMSON, R. (Rachel Abramson & Associates), FINDLAY, B. (Swinburne University), & RAHMAN, S. (Queensland University of Technology)
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Little is known about the share investor. Demographic profiles of share investors have previously been reported (e.g., ASX Ltd, 2009; Lease, Lewellen, & Schlarbaum, 1974; NYSE, 2002. However, previous research on share market behaviour has primarily been based on secondary data (eg., Barber & Odean, 2001; Caparrelli, D'Arcangelis, & Cassuto, 2004; Coval & Moskowitz, 1999; De Bondt & Thaler, 1985, 1987; Johnston & Cox, 1996; Odean, 1998). Primary data has also been used (e.g., Chui, 2001; De Bondt, 1998; Felton, Gibson, & Sanbonmatsu, 2003). In each study, only one or two variables have been considered. Theoretical papers (e.g., Nofsinger, 2001; Thaler, 1999) and research on decision making (e.g., Kahneman, Knetsch, & Thaler, 1990; Kahneman & Tversky, 1972; Shefrin & Caldwell, 2001; Tversky & Kahneman, 1974) have helped shape thinking on investor behaviour. Due to the nature of past research, few scales exist to facilitate study of investor behaviour. This paper seeks to redress this imbalance. More specifically, this paper reports on the development, reliability coefficients and factor structure of eight scales for use with retail and institutional share investors. It also reports reliability coefficients and factor structure of the short form of the Barratt Impulsivity Scale (BIS15) and International Personality Item Pool (IPIP) version of the NEO-PI-R scale in a sample of 521 retail and institutional investors.

A structural equation model of investor behaviour in a sample of 521 retail and institutional investors
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It has long been recognised that share investors do not always make rational decisions in the sharemarket (e.g.., Wyckoff, 1922/2010; Graham, 1973). However, it was not until Warren Buffett's continued success through his investment vehicle, Berkshire Hathaway, that research interest in investor behaviour began. Some attribute success to psychological factors (e.g., De Bondt & Thaler, 1985, 1987). Others attribute it to artefacts of market risk (e.g., Chan, 1988; Fama & French, 1995, 1998, 2000). This debate has yet to be resolved. However, most studies were based on secondary data. Moreover, each study considered one or two variables alone. This lends itself to each study examining one aspect of investor behaviour and a scarcity of scales for use in the field. Abramson, Rahman and Buckley (2005) previously introduced a theoretical model of investor behaviour. A separate paper will introduce the reliability and factor structure of ten scales for use in this field. This paper refines and tests the Abramson, Rahman and Buckley (2005) structural equation model of investor behaviour in a sample of 521 retail and institutional investors.

Executive self-control exhaustion: Separating *depletion-recovery* from *training-interference* effects in sustained response inhibition and task switching performance
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Executive self-control has been consistently shown to rely on a limited energy source (Hagger, Wood, Stiff & Chatzisarantis, 2010). Recent cognitive and neuropsychological literature is converging on distinguishing several, empirically separable, and differentially depletable resource pools for cognitive control (Caron, Bryson & Smith, 2008; Fletcher & Henson, 2001; Was, 2007). Moment-to-moment capacity to switch between tasks or response mappings (shifting), to inhibit inappropriate responses (inhibiting), and to maintain the currency of working memory (updating) are key executive functions previously though to feed off – and hence, deplete the same self-regulation resource (e.g., Schmeichel & Baumeister, 2004). Growing evidence suggests, however, that the executive functions of shifting, updating and response inhibition may be differentially related to higher cognitive processing (Friedman, Miyake, Corley, Young, et al., 2006; Hofmann, Schmeichel & Baddeley, 2012) and may decline independently of one another (Persson, Welsh, Jonides & Reuter-Lorenz, 2007; St.Clair-Thompson & Gathercole, 2006; Was, 2007), thus questioning the notion of a single resource depletion. Current study examined the generality / specificity of executive performance decline following a socially sensitive judgment task (specifically targeting response inhibition capability) in a sample of 64 physical education students. The decline was captured with both a response inhibition measure (the Stroop interference effect) and a task-switching performance measure (switching costs in the classic Donders task). Results are more consistent with a training effect of sustained executive practice on the subsequent test performance than with the fatigue/exhaustion effects predicted by the resource depletion accounts. Findings are discussed in the context of establishing the boundary conditions for the single executive resource depletion hypothesis.

How To Session (Paper #204)
Thursday 10 October 2013 – 1:00pm (Meeting Room 2)
From pathology to promotion and prevention: A positive school psychology
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Based on one of the world's largest evidence-based whole-school approaches to wellbeing, this session focuses on the shift of St Peter's College's psychological service from a traditional welfare model to the wellbeing and prevention model (Seligman 2009, 2011). Traditional psychological services in schools predominantly target Caplan's (1964) tertiary prevention or treatment model for students presenting with disorders such as anxiety and depression. Typically these approaches can be economically challenging for schools to maintain, reach a minority of students and don't necessarily help to raise the overall wellbeing of the student population. This session will discuss how traditional and clinical approaches have been incorporated into the wellbeing framework, creating change in the 1:1 therapeutic setting and throughout the school to provide a wellbeing service for the whole-school community. Positive-psychology-infused treatment plans, interventions and applications will be discussed. This session is based on the applied research of a whole-school strategy for the integration of psychological services at an all boys school, 3-18 years old, St Peter's College in Adelaide, Australia (n=1338).

Individual Research Paper (Paper #30)
Wednesday 9 October 2013 – 4:15pm (Hall C)
Living in a fishbowl: Professional boundaries and overlapping relationships in rural Victoria
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For the rural psychologist overlapping (dual) relationships with clients may be inevitable. If health care is to be provided locally, ensuring access for all people, the rural clinician has little alternative than to practice in the context of overlapping relationships. Many metropolitan practitioners may have little experience of this situation and may not perceive the dilemmas associated with rural practice. Little empirical work has been conducted in Australia on how rural practitioners provide quality local care whilst negotiating the complex issues of overlapping relationships. The aim of this research was to investigate rural and metropolitan practitioners' beliefs and experience of overlapping relationships. Psychologists were recruited to the study by email or mail using the public register of the Psychologists Registration Board of Victoria. Participants were asked to judge the appropriateness of a psychologist's behaviour in ten hypothetical scenarios encompassing a range of overlapping personal/professional relationships. Four hundred and thirty-nine psychologists responded to the survey. Rural psychologists were more likely to report experiencing overlapping relationships compared with those from larger urban settings. Findings indicated that there were differences between Metro Urban (population ≥100,000) and Regional/Rural (population <25,000) practitioners' beliefs surrounding the appropriate/ethical behaviour of psychologists when responding to scenarios depicting boundary crossings. There were no differences between participants from Metro Urban, regional centres or rural areas for scenarios depicting incidental encounters with clients (e.g. chitchat in the supermarket) or for more extreme boundary violations (exploitation of a client). This research suggests most psychologists (65%) identify overlapping personal/professional relationships with clients including those working in large cities as an issue. The frequency of overlapping relationships experienced by rural practitioners indicates the need to develop national guidelines that can help practitioners manage overlapping relationships. These guidelines may help both experienced and inexperienced rural health professionals to negotiate the complex and changing world of professional and personal boundaries. If health care is to be provided

locally ensuring access for all, it is essential to support rural clinicians to continue to practice in their challenging environment whilst providing optimal care.

Poster Presentation (Paper #15)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The relationship between music attainment and AOA on verbal memory
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Previous research showed a relationship between music learning and enhanced cognitive skills. This study examined the impact of various music learning conditions on verbal memory. Twenty-three highly-trained musicians, 20 amateur musicians and 45 undergraduate controls were tested on various musical abilities and verbal memory. Results showed that when taking into account general education, the three groups differed significantly in their melodic organisation, temporal perception, incidental music memory and verbal memory. However, only the highly-trained musicians performed significantly better than the controls in both music and immediate verbal memory recall. Interestingly, early music learners who started learning music at age 7 or before did not outperform the late learners in both music and verbal memory. Musicians who were currently learning music were better in musical abilities but not verbal memory. The results reinforced previous studies showing a relationship between high music qualification or professional attainment and verbal memory.

Poster Presentation (Paper #225)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Aussie Optimism: A suite of mental health promotion programs spanning early childhood to adolescence
ROBERTS, C.M. (CHIRI - School of Psychology and Speech Pathology, Neurosciences and Mental Health), & **BAUGHMAN, N.** (CHIRI - School of Psychology and Speech Pathology, Neurosciences and Mental Health)
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Mental Health problems are becoming increasingly prevalent, and have in recent years been identified as the leading cause of the disease burden in Australia (Begg, Vos, Barker, Stevenson, Stanley, & Lopez, 2007). About 8.4% of the total burden of disease is experienced by children under the age of 15, with 23% of those children already suffering from internalising disorders, such as depression and anxiety. When mental health disorders begin in childhood and are left untreated, they often develop into more severe forms of the disorders and are more often associated with comorbidities, problematic behaviour, and substance use (e.g. Achenbach, 1991; Briggs-Gowan, Carter, Skuban, & Howitz, 2001). As there is an economic burden associated with medical and psychological treatment, it is argued that mental health promotion programs are needed which do not focus on deficits, but that instead build social and emotional competencies in children, so that internalising disorders could be prevented from developing. This paper introduces Aussie Optimism (AO): a unique suite of evidence-based mental health promotion programs designed for the use with (primarily) healthy children in schools, as a measure for the prevention of internalising disorders. AO now includes four programs for the use with children between the ages of five and 13: Feelings and Friends, Positive Thinking Skills, Social Life Skills and Optimistic Thinking Skills, each of which is designed to be developmentally appropriate in terms of social, emotional and cognitive skills typical for the given age ranges. The programs for the younger children focus primarily on identifying emotions in the self and in others, as a precursor for empathy and assertiveness, while the focus in the other programs is on attribution, communication and thinking styles. AO is based on current theories of anxiety and depression and incorporates empirically validated techniques to both prevent and combat symptoms of anxiety and depression (e.g., Stark, 1990; Kendall, 2006; Seligman, Reivich, Jaycox, & Gillham, 1995). AO has been shown efficacious in reducing

anxiety, depression and suicide behaviour, as well as reducing the uptake of alcohol and drugs in the teenage years (Roberts, Kane, Pintabona, Cross, Zubrick, & Silburn, 2010).

Individual Research Paper (Paper #82)
Friday 11 October 2013 – 2:00pm (Meeting Room 5 and 6)
The structural validity of Problem Solving Inventory – 12 item within an indigenous Australian population
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This paper tests a short form of the Problem Solving Inventory (PSI) in an Indigenous Australian population. Problem solving is universal as all people regardless of culture solve problems every day. Superior problem solving skills and confidence has also been associated with superior general and mental health, across all cultures. Nevertheless most of the problem-solving research has historically neglected the context of culture in the development and validation of instruments. Over the last decade the lack of cross-cultural validity of problem solving measures has been recognised and there has been a call to improve the cross-cultural validity of such instruments. The PSI has demonstrated structural validity among a number of culturally diverse samples; however it has not been validated in Australia. There also has been a tendency towards the development of short-form instruments for research and clinical practice. Short form instruments reduce assessment time when evaluating interventions or construct and reduce the imposition on the respondent. This is only possible if robust and valid short-forms of constructs are developed. This project combined the principals of cultural validity and development of short-form instruments when validating a 12-item short form of the Problem Solving Inventory an Indigenous Australian population. The PSI was administered to 103 Indigenous employees in a government organisation, along with measures of mental health and employee engagement. Confirmatory Factor Analysis was performed to test the validity of both the full scale and a pre-determined short-form. While there were some items that did not add to the structural validity, overall the PSI-12 demonstrated adequate structural validity within this population. The PSI-12 may serve to be a useful instrument for future research within the Indigenous Australian population.

Individual Research Paper (Paper #92)
Wednesday 9 October 2013 – 3:55pm (Hall D)
Help – How do I manage my loved one's OCD? Development and piloting of a support group for family members of people with Obsessive Compulsive Disorder
BEEKEN, S. (Swinburne), MOULDING, R. (Deakin), THOMAS, A. (Swinburne), NEDELJKOVIC, M. (Swinburne), & BHAR, S. (Swinburne)
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Obsessive Compulsive Disorder (OCD) is a leading cause of disability. To a greater extent than with most psychiatric conditions family members of people with OCD often become involved in the affected individual's symptoms - either through direct involvement in rituals, having to wait for rituals to be performed in order to do planned activities, or via attempts to stop the ritual. The behaviour by family members who become involved in OCD rituals has been termed "family accommodation". Rates of family accommodation have been reported between 88.2% and 96.9%. Research also has demonstrated that higher levels of family accommodation predict more severe OCD symptoms post-treatment. Furthermore, living with someone with OCD has a major impact on the quality of life of the family member - they report experiencing loss of personal relationships, loss of leisure time, and financial problems. The current research project conducted interviews with family members of people who experience OCD to identify their experiences living with OCD, the information they are provided with regarding OCD and the most significant challenges they had faced related to OCD. Based

upon this information and other research, a five session treatment support program was written which aims to educate family members about OCD and family accommodation (The Family Accommodation Support Program; FASP). Modules of this program include - strategies for the management of requests for family accommodation, normalisation of experiences and challenges, and opportunities to discuss what may have worked for other people. The program aims to increase people's sense of efficacy in managing OCD accommodation requests, to improve quality of life and to decrease the distress associated with living with someone who experiences OCD. This program is the first of its kind in Victoria and is currently being piloted at the Swinburne Psychology Clinic. This presentation will detail the development of the program, outcome data from the family interviews, and the available data from the pilot program.

How To Session (Paper #56)
Friday 11 October 2013 – 2:00pm (Hall C)
Dignity therapy; a brief psychotherapy for dying patients and their families
BENTLEY, B. (Curtin University), CHOCHINOV, H.M. (University of Manitoba), AOUN, S., O'CONNOR, M., & BREEN, L. (Curtin University)
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Introduction and aim: This 'how-to' session will provide an overview of dignity therapy, which is a brief manualised psychotherapy designed to alleviate existential and psychosocial distress in people who have a terminal illness, as well as moderate the bereavement experience of their family members. In dignity therapy, a patient is invited to discuss things they wish to be remembered by others in an audio- recorded interview conducted by a trained therapist. A transcript of the interview is created and then edited by the therapist and patient until a final document is produced. The document is given to the patient who can share it as they wish or bequeath it to their loved ones. Key learning outcomes and workshop format: This workshop will inform members of the audience about the empirical research that led to the development and validation of dignity therapy. Attendees will learn to identify: 1) areas of distress commonly experienced by patients at the end of life, 2) suitable candidates for the therapy and 3) the benefits that can be achieved by using dignity therapy. An overview of the steps of this brief therapy will be shared using video clips and interactive exercises. Information about further education and training opportunities will be given, along with information about how to integrate dignity therapy into practice in both institutional and private practice settings. Assumed prior knowledge: None. Practical involvement of participants: The How to Session will be presented in an interactive format to maximise audience participation in the discussion. There will be opportunities to share relevant experiences and for questions to be answered.   Learning materials supplied to augment the learning activity: Case studies will be presented. Video clips will be shown of a dignity therapy session conducted by Dr. Harvey Max Chochinov who developed dignity therapy. Samples from dignity therapy transcripts will be shared.

Poster Presentation (Paper #251)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
The impact of sleep knowledge on sleep patterns in healthy pre-adolescent Australian children, and its implications in the improvement of children's health and wellbeing
BENVENISTE, T. (Central Queensland University), BLUNDEN, S. (Central Queensland University), & THOMPSON, K. (Central Queensland University)
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There is an increasing frequency of sleep disturbances in the child and adolescent population and their relationship to children's health, development, and wellbeing has been well documented. Behavioural sleep disorders (sleep problems with a behavioural basis, such as unhealthy sleep habits or poor sleep hygiene) occur in approximately 20-40% of all children and are amenable to change with psychological behavior

management techniques. However, behaviour change is dependent on baseline knowledge and therefore sleep education. While parental Sleep Knowledge (i.e. knowledge of recommended sleep hygiene practices) has been reported as influencing children's sleep behaviours, the influence of the child's own sleep knowledge on sleep behaviours is poorly understood. This study aimed to evaluate the sleep knowledge of South Australian pre-adolescent children, and to compare it with their self-reported sleep patterns. A secondary aim is to assist the development and improvement of sleep education programs in Australia. This pilot study employed a cross-sectional design, utilising two self-report questionnaires, the "Children's Wellbeing Questionnaire" (CWQ) and the "Sleep Timing Questionnaire" (STQ). Both questionnaires were administered during school time, with permission from the school, parents, and child. A total of 65 participants (33 male) between ages 9 and 13 (m=11.25) completed the questionnaires. Sleep knowledge scores, extracted from the CWQ, showed an average of 64% correct answers. Particular questions, however, were answered incorrectly by more than half of the children. There were no correlations found between sleep knowledge and sleep patterns. These results suggest particular areas of sleep knowledge to target for sleep education programmes, and that children's sleep knowledge alone may not be sufficient to affect sleep patterns. Future research could further investigate the concept of sleep knowledge and its contribution to behavioural sleep disorders in children. Furthermore, other pathways to behavior change can be investigated as potential treatments for behavioural sleep disorders.

Individual Research Paper (Paper #261)
Friday 11 October 2013 — 2:20pm (Meeting Room 3 and 4)
Loneliness as a potential obstacle for successful housing of chronically homeless men
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Housing First programs have emerged as an important policy response in improving the housing outcomes of chronically homeless persons. Whilst some find the transition into housing relatively easy, others have difficulty with transitioning into and retaining tenancies. La Gory et al (1991) found many 'rough sleepers' have established social networks and removing them from these environments into secure housing can lead to loneliness, boredom and isolation (McDermott and Bruce, 2010). It has been argued that people who are lonely tend to be hypervigilent in their social interactions thereby contributing to social isolation (Gardner et al., 2005). This in turn can affect their capacity to sustain tenancies long term.
Aims: To assess whether participants differed in their level of loneliness at baseline, and to examine changes in loneliness over the first 12-months.
Method: A longitudinal study of chronically homeless men (n=75) housed through a 'housing first' program and surveyed at baseline, 6 and 12 months. Loneliness was measured through a single-item Likert scale, dichotomized into low and high loneliness.
Results: Participants with low loneliness (n=52) were compared to those with high loneliness (n=17) with respect to psychological distress, Quality of Life (social domain), disability, boredom and difficulty making friends. Logistic regression analysis found significant associations between loneliness and boredom, psychological distress and making/keeping friends. To examine change over time, a within subjects ANOVA was conducted. The results showed a decrease in loneliness between 6 and 12 months for participants classified with high loneliness; loneliness remained stable for those classified with low loneliness. There was no corresponding change in reported ability to make or keep friends for either the high or low loneliness groups.
Conclusion: Although loneliness and making/keeping friends were significantly associated at baseline, the two measures differed across time, with the former improving at 12 months and the latter remaining stable. This is inconsistent with previous research. It is

possible that changes in making/keeping friends might lag behind changes in feeling lonely, or that formal supports replaced informal supports (e.g. family and friends). Further analyses using additional waves of data will examine individual trajectories along with intensity of support provided.

How To Session (Paper #232)
Friday 11 October 2013 – 3:30pm (Meeting Room 3 and 4)
Promoting the healthy self in parenting from a framework for emotional resilience and well-being
BRABIN, P. (Private Practice) & **REHMAN, N.** (Private Practice)
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Evidence for the failure of promoting self-esteem is being increasingly documented. However, strategies to replace it typically focus on behavioural techniques with no description of the underlying self structure being addressed. For example, the notion of 'self-acceptance' is of little value without a clear sense of what is meant by *self*. Klein (2012) highlights this situation in indicating that the self has never been adequately defined and in Psychology its meaning is typically conferred by the context in which it is placed – e.g. self-esteem, self-confidence, self-handicapping, to name a few, are defined by the 'right hand component of these hyphenated compounds'. Horney's 1950 concept of self-realisation describes a qualitatively different view of self from the self defined by self-glory incorporating its mirror image, self-hatred. Brabin (2007) described these as the OK and not-OK selves – the not-OK self comprising the 'good' and 'bad' selves externally validated through approval and achievement, as often reflected in high and low self-esteem, while the OK self epitomises an internally validated self which focuses on managing living constructively. Brabin also explains the relationship of emotions in each of these self contexts. This *How to* session will provide a framework that describes the development of a healthy philosophical view of self, 'I'm OK', from the less mature externally validated self structure, 'I'm not OK' with its associated temporary relief as 'I'm not not-OK'. The pedagogical processes that flow from this developmental framework will be defined, particularly in terms of the specifics of supportive language to be used with children, and reflection on promoting the 'firm and kind' parenting style. Participants will be provided with an interactive opportunity to identify a shift from adherence to self-esteeming strategies to those promoting the development of the healthy view of self through ways of talking with children – promoting well-being associated with reduced emotional arousal and living better with others and the world.

Poster Presentation (Paper #43)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The right to grieve: Public perceptions of grief following bereavement
PENMAN, E. (Curtin University), **BREEN, L. (Curtin University)**, & HEWITT, L. (Curtin University)
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Bereaved people are influenced by implicit and explicit rules affecting expectations that others have of their grieving behaviour and, in turn, their experience of grief. Although a pattern of functioning must transcend cultural norms to be considered disordered, current public norms around grief have not yet been considered in the context of the DSM-5's proposed Persistent Complex Bereavement Disorder and ICD-11's proposed inclusion of Prolonged Grief Disorder. The aim of this study was to explore normative beliefs concerning grief and the factors that influence these norms. Three-hundred and forty-eight participants were randomly allocated to 1 of 12 bereavement vignettes and associated questionnaire exploring expectations of grief symptomatology, behavioural intentions (as measured by preferred social distance) and opinions towards pathologising grief. Time since death influenced expectations of grief, but not social distance; with participants expecting grief to decrease between two weeks and six months and then stabilise. Gender of the bereaved person and circumstances of the death did not

influence expectations of grief but did interact to influence social distance. Participants were less willing to interact with a man bereaved by a stroke than a woman, and the circumstances of the death were taken into account when evaluating the bereaved man, but not the bereaved woman. These findings highlight some of the many factors that influence the perceived appropriateness of grieving behaviour and provide valuable insight for future revisions to bereavement-related disorders in the DSM and ICD.

Symposium (Paper #302)
Friday 11 October 2013 – 10:30am (Hall C)
Public understandings and responses to climate change: The crucial role and findings of psychology-informed survey research and monitoring programs
BURKE, S. (Australian Psychological Society), **KROSNICK, J.** (Stanford University), **RESER, J.** (Griffith University), & **LEWANDOWSKY, S.** (University of WA; University of Bristol)
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Overarching abstract
This symposium profiles the work and findings of social, political, and environmental psychologists in Australia, North America, and Britain, with in-depth, social-science based survey research, addressing public risk perceptions, understandings, and responses to climate change. Such *survey research* is in many ways different from the kinds of climate change survey and polling reports Australians are continually exposed to, and such surveys have been telling a very different, consistent, and policy relevant story about public understandings and responses to climate change over the past decade. This more psychologically informed and nuanced picture is one of public risk perceptions and understandings which in many ways differ from climate change science accounts, and which evidence high acceptance, high concern, adverse psychological and social impacts, active engagement and psychological adaptation, strong expectations for government action, and the powerful intersection of climate change adaptation and mitigation. Media reporting of public responses to the threat of climate change, and to the interlinked environmental, social, and political issues surrounding climate change, has typically reflected a profound misreading of the Australian public's response to climate change, with such coverage having multiple psychological, societal, and environmental costs.

Presentation 1
Public opinion about global warming: The American case
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During the last 15 years, Jon Krosnick has conducted a program of research exploring what Americans believe about global warming and what they would like to see done about it. The research has explored fundamental beliefs, such as people's perceptions of whether the planet has been warming, what has caused it, and the degree of threat that it poses. Additional research has explored the priority that people place on the issue relative to others, how Americans would like to see international cooperation unfold on the issue, how much money people are willing to pay to reduce future emissions, whether people base their votes in Congressional and Presidential elections on the issue, how much government effort they would like to see devoted to the issue, and what specific policies people favour and oppose for reducing future warming and adapting to the likely effects of future warming. In this presentation, Dr. Krosnick will review the findings of this program of research and describe the findings of many experiments exploring the causes and consequences of beliefs and attitudes on this issue.

Presentation 2
Climate change surveys and public understandings, responses, and impacts: What is needed and why
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The presentation will provide a very brief overview of national survey findings from two comprehensive national surveys undertaken in mid-2010 and 2011 addressing public risk perceptions, understandings, and responses to climate change. A particular focus will be the nature and purpose of these surveys with respect to the creation of a national database and research platform for future monitoring research, and why crucial needs are not being met by most existing surveys. As well the challenging nature of the 'climate change' focus will be briefly examined, highlighting unresolved issues, very different disciplinary perspectives and assumptive worlds, and the politicisation of these findings. The intertwined fields of social and environmental psychology in this interdisciplinary space are also considered. The presentation will address how psychologists can play a very important role in communicating and endorsing a number of important theoretical, conceptual, and methodological improvements to existing social science-based survey research addressing climate change. The presentation concludes by asking whether a larger issue is that of 'giving psychology away', or 'bringing psychology in from the cold' in the context of climate change.

Presentation 3
Human cognition and acceptance vs. rejection of (climate) science
LEWANDOWSKY, S. (University of WA; University of Bristol)
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Although nearly all domain experts agree that human greenhouse gas emissions are altering the world's climate, a segment of the public rejects the scientific evidence. What are the reasons underlying this disparity between scientific reality and public perception? Why do people reject scientific evidence? I review some of the cognitive and psychological variables that determine people's responses to climate science and other scientific propositions (e.g., the fact that HIV causes AIDS or that smoking causes lung cancer). I examine both the "supply" side of the rejection of climate science, by conducting a blind test of "sceptic" interpretations of climate data, and the "demand" side, by exploring the variables that underlie the rejection of science. The rejection of climate science is largely a matter of ideology, with proponents of a laissez-faire free market being most likely to reject a variety of scientific propositions. I review the interaction between ideology and another variable that furthers acceptance of climate science, namely the underscoring of the scientific consensus. A further factor that appears to be involved in the rejection of science to varying extents is conspiracist ideation. There are numerous ways in which conspiratorial thinking differs from conventional scientific reasoning, which explains why rejection of science is often accompanied by appeals to presumed conspiracies.

Individual Research Paper (Paper #111)
Thursday 10 October 2013 – 10:50am (Meeting Room 1)
Mindfulness-based intervention for primary school aged children
BUTLER, E.L. (Swinburne University of Technology), WOOD, C.E. (Swinburne University of Technology), WILLIAMS, B. (Swinburne University of Technology), & CRAFTI, N. (Turning Point)
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Introduction: Early intervention for children with psychological problems reduces the risk of long-term negative outcomes. Treatment programs that target children from disadvantaged backgrounds require attention because these populations have lower access to mental health services and are at greater risk for psychological problems.

Evidence for the effectiveness of using Mindfulness based treatments with children is emerging. Such treatments might be of particular benefit for children from disadvantaged backgrounds due to their emphasis on experiential processes. Aims: To investigate the effectiveness of Mindfulness based intervention in reducing psychological symptoms in children from predominately disadvantaged backgrounds. Method: The study comprised two phases. The first phase involved a pilot study investigating the feasibility and acceptability of an adapted Mindfulness Based Cognitive Therapy program for nine Grade 6 children who attended a Primary School in a socially disadvantaged and culturally diverse area of Melbourne's Western Metropolitan region. Results of this pilot study aided in the development of a Mindfulness Based Intervention (MBI) that was evaluated in the second phase of the study with 76 children aged between 8 and 12 from the same Primary School. Children were allocated to either the MBI group, a Relaxation training (RT) group or Active Control (AC) group (a teacher run nonspecific health and wellness program). Results: There were significant pre to post-test improvements in self-reported levels of self-concept for the MBI group compared with the RT and AC groups with a large effect size. Reductions in self-reported anxiety were greater for both the MBI and RT compared to the AC group with large effect sizes. Conclusions: This study provided initial evidence that a MBI program offers some benefits for children from disadvantaged backgrounds in improving self-concept and self-reported anxiety. Further studies are needed to assess the generalizability of these promising findings.

Poster Presentation (Paper #318)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The effect of distractor stimulation on horizontal and vertical perceptual asymmetries
CASTINE, B. (Flinders University)
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The way we perceive our environment is slightly asymmetrical, with healthy people demonstrating pseudoneglect; a slight bias in the perception of objects and space. This study tested the effect of distractor stimulation on the magnitude of pseudoneglect in both horizontal and vertical orientations. Normal right-handed undergraduates (N = 45) participated in a forced-choice line bisection task. Experiments 1 and 2 employed horizontal pre-bisected lines surrounded by distractor stimulation presented in upper, lower and both (baseline) visual fields. Upper distractor stimulation produced significantly larger leftward response biases (pseudoneglect) compared to baseline stimulation in both experiments. Experiment 3 used the same paradigm rotated vertically. A trend for right distractor stimulation producing larger upward response biases (altitudinal pseudoneglect) compared to left stimulation was observed. Consistent with the activation-orientation hypothesis, the results support the finding that upwards shifts in attention recruit right hemisphere parietal regions resulting in leftward attentional biases. Additionally, shifts of attention rightwards activate left hemisphere ventral stream processing producing upwards attentional biases (altitudinal pseudoneglect). Consequently, the effects of distractor stimulation on horizontal and vertical perceptual asymmetries appear to operate by different mechanisms. This paradigm could be used with populations which experience severe perceptual asymmetries such as those with clinical neglect. The presentation of distractor stimulation could temporarily improve these neglect symptoms.

Friday 11 October 2013 — 9:15 am (Hall D)
Working with KidsMatter Schools and Early Childhood Education and Care Services — achieving outcomes for children's mental health
O'GRADY, L. (Australian Psychological Society)
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The KidsMatter mental health initiatives are based on a promotion, prevention and early intervention framework developed specifically for children attending early childhood education and care services (ECEC) and primary schools. KidsMatter supports schools and ECEC services to achieve outcomes for children's mental health by implementing strategies across four key areas: a positive environment; social and emotional development; working with parents and carers; early intervention for children's mental health problems. This session will provide information, tools and resources for psychologists interested in working with KidsMatter schools and ECEC services. The session will unpack the KidsMatter implementation process and identify ways in which psychologists can use the KidsMatter resources to influence the promotion, prevention and early intervention mental health strategies being implemented by schools and ECEC services. Key issues such as the various health roles which can support schools and ECEC services, understanding the school and ECEC service context and the relationship between schools and ECEC services and children's mental health will be explored. Participants will have the opportunity to reflect upon their own practice and share ideas for achieving outcomes for children's' mental health through working with schools and ECEC services. There is no prior knowledge required for the session.

Poster Presentation (Paper #147)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Suicide prevention literacy of Australian psychologists
CAVANAGH, S. (Australian National University)
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Suicide is a significant public health issue in Australia with 2,361 deaths from suicide in 2010. The evidence suggests increasing the suicide prevention literacy of the community and health and other gatekeeping professions may contribute to the prevention of suicide. This paper will offer a conceptualisation of suicide prevention literacy incorporating knowledge, attitudes, suicide intervention skills and confidence and willingness to assist. It highlights the research that indicates a lack of suicide prevention literacy is associated with lower suicide intervention skills, lower intent to assist someone at risk of suicide and lower confidence in assisting someone at risk — even amongst skilled professionals. The paper will report on the author's survey research examining the suicide prevention literacy of Australian psychologists and psychology students, highlighting areas of strength and areas requiring improvement. The research examines the different aspects of suicide prevention literacy concurrently and investigates predictors of suicide intervention skills, intentions to assist someone at risk and confidence in assisting. Implications for the education and ongoing professional development of psychologists will be explored.

Individual Research Paper (Paper #307)
Friday 11 October 2013 — 9:30am (Meeting Room 3 and 4)
The Sonic Silence Exhibit: Raising awareness of noise-induced hearing loss and tinnitus in the general public
CHANG, P. (Edith Cowan University), HANNAH, A. (Scitech), & DUNSTALL, D. (Scitech)
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Many young people do not pay enough attention to the fact that listening to music or sounds at high volumes may damage their hearing. The Sonic Silence exhibit located at Scitech, the West Australian science museum, was designed to inspire a person to take

up safe hearing habits. The exhibit resembles a giant pair of headphones in which two people can sit in each of the headphone 'pods.' The game-play in the exhibit may include one or two players communicating with a computer programme or with each other. The exhibit appeals to everyone, but is especially aimed at the generations who are growing up listening to music on earphones via the ubiquitous smartphone and MP3 player. Exposure to loud sounds during leisure activities is a concern to young people and their parents, yet there are few ways to get the message across that overexposure to loud sounds may lead to hearing loss and tinnitus. This paper outlines the research evidence of using auditory simulations to promote the hearing conservation message by giving listeners an opportunity to 'hear' what a hearing loss and tinnitus sounds like. In terms of health promotion, the key outcome and deliverable was to design and manufacture an exhibit that was fun, novel, and interactive to raise visitor awareness about safe hearing habits. During game-play, the exhibit conveys a health promotion message about hearing loss and tinnitus designed for people of all ages, but especially aimed at young people and their parents. From its launch on 14 June 2012, it is estimated that each day, an average of 185 people – of all ages – climb into the headphone-shaped exhibit to listen to auditory simulations of hearing loss and tinnitus conveyed in a hearing protection message. The focus of this presentation is to report on the pertinent results relating to the high user satisfaction of the exhibit and the efficacy of the exhibit in encouraging people to take action to avoid situations that may cause hearing damage. In addition, the incorporation of psychology into the design principles of health promotion campaigns to change attitudes and influence behaviour-change is discussed.

Poster Presentation (Paper #39)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Recovery after unsuccessful in vitro fertilization: The complex role of resilience and marital relationships

CHOCHOVSKI, J. (The Cairnmillar Institute), MOSS, S. (The Cairnmillar Institute), & CHARMAN, D. (The Cairnmillar Institute)
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The failure rate of In Vitro Fertilization (IVF) is notoriously high, around 75% per cycle, and these unsuccessful attempts can provoke acute depression and other problems. Although practitioners often recommend cognitive reappraisal, rather than avoidance, to cope with these difficulties, previous research has not established the psychosocial determinants of adaptive coping styles. Arguably, resilience could encourage cognitive reappraisal, because resilient individuals feel confident they can overcome their emotions, whereas marital quality could prevent avoidance, because individuals feel secure enough to reflect upon their distress. Consequently, resilience and marital quality could facilitate recovery over time. To explore these possibilities, 184 women, all of whom had unsuccessfully completed IVF treatment, completed a questionnaire that gauged their levels of depression since their last IVF attempt as well as resilience and marital quality. Immediately after the unsuccessful attempt, resilience was inversely, whereas marital quality was positively, related to depression. However, as time elapsed, marital quality became increasingly beneficial and was negatively associated with depression. These findings imply that resilience can curb the initial distress; in contrast, marital quality may enable individuals to reflect upon their trauma, initially amplifying distress but eventually facilitating recovery.

Individual Research Paper (Paper #133)
Wednesday 9 October 2013 – 1:55pm (Hall D)
Gender differences in protective factors for suicide: Implications in clinical assessment and counselling interventions

CHOO, C. (Charles Darwin University)
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Current practices in suicide assessment include the usage of risk assessment, clinical interviews and the assessment of suicidal thoughts, intents, plans, lethality of previous attempts, symptoms of mental illness, hopelessness and willingness to live. A comprehensive clinical assessment to facilitate the formulation of effective interventions also incorporates the assessment of protective factors. Compared to research investigating risk factors for suicide, there has been less research conducted on protective factors. Worldwide data indicates that females have consistently lower rates of completed suicide compared to males. This study aims to examine the underlying gender differences in protective factors to assist in more targeted suicide prevention efforts. Medical records of 666 suicide attempters from January 2004 - December 2006 were studied. In this sample, 69.2% were female, 30.8% were male. The ages ranged from 10 to 85 years old ($M = 29.7$, $SD = 16.1$), with the highest rates for both genders occurring in those aged between 15 to 24 years old. Gender influences were found on the following protective factors: emotional support, regret of the attempt, and positive planning. In addition, cluster analysis showed underlying patterns of co-occurring factors. The results have important implications on gender specific clinical assessment, counselling interventions and primary prevention by promoting protective factors in vulnerable individuals.

Poster Presentation (Paper #93)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The effect of induced mood on hemispheric asymmetries for language and face processing

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The left cerebral hemisphere is specialised for processing words and positive emotion, while the right is specialised for processing faces and negative emotion. As processing positive and negative emotion increases neural activation in the left and right hemispheres respectively, this increased activation may facilitate performance on tasks controlled predominantly by that hemisphere. Consequently, through two divided visual field experiments, this study investigated whether induced positive mood enhanced performance on a lexical decision task, and whether induced negative mood facilitated performance on a face orientation task. Eighty-two right-handed participants (31 male, 51 female) aged 18 to 63 first completed questionnaires assessing handedness, trait mood and state mood. Positive and negative experimental mood groups then completed a musical mood induction procedure designed to induce positive or negative mood. A control group did not participate in mood induction. Participants then completed two divided visual field tasks. In the word task, participants made lexical decisions in response to 240 laterally-presented words (half concrete, half abstract) and nonwords. In the face task, participants indicated whether 120 laterally-presented faces were upright or inverted. Contrary to expectation, mood induction failed to facilitate performance in the hemisphere-congruent task. In the word task, participants responded more quickly and accurately to words presented in the right visual field (left hemisphere), and responded more quickly to concrete than abstract words. An anticipated interaction between visual field and concreteness was present, with more accurate responses to concrete words than abstract words in the left visual field (right hemisphere), but no difference in accuracy in the right visual field (left hemisphere). In the face task, participants responded more quickly and accurately to upright than inverted faces. These results suggest that induced mood does not moderate hemispheric

asymmetries for lexical decision and face orientation discrimination tasks. However, the idea of a moderating effect of mood should not be rejected before this study is repeated with experimental changes designed to overcome limitations associated with the mood induction procedure.

Poster Presentation (Paper #189)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Posttraumatic growth from workplace bullying
CONNELL, S. (Swinburne University of Technology), & KNOWLES, A. (Swinburne University of Technology)
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Workplace bullying poses a challenge to the health of Australian workers and workplaces. As part of a larger research project to investigate the subjective experience of workplace bullying, 89 narratives of workplace bullying and similar work experiences were collected from a non-clinical sample. These were analysed for themes of posttraumatic growth, or positive self-transformation arising from this difficult life experience. Consistent with Pals (2006), a full acknowledgement of the extent to which an individual's life can be disrupted by the experience and a coherent positive conclusion to the narrative were both found to predict growth attributed to the traumatic experience (of being bullied). It was concluded that the possibility of post-traumatic growth could inform treatment of individuals experiencing psychological and physical health impacts as a result of workplace bullying.

Individual Research Paper (Paper #291)
Friday 11 October 2013 – 3:00pm (Meeting Room 3 and 4)
Chronic lack of meaning and purpose in life: Deficits of value and self
COOK, J. (Camperdown Resilience Centre)
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Since Seligman's (2002, p. XIV) assertion that Positive Psychology provides a road to….meaning and purpose" there has been an explosion of empirical research on searching for, knowing and lacking meaning and purpose in life. Close relationships have long been found to be the main source of meaning across age groups and cultures. The recent literature supports the view that low meaning and purpose is a psychological matter associated with psychological dysfunction. However, the defining characteristics of chronic existential vacuum have not yet been identified. Using rigorous empirical phenomenological methodology, this study identified commonalities within diverse detailed descriptions of twenty-five volunteers who self-identified as having experienced life as without meaning and/or purpose for at least six months. Its results liken chronic lack of meaning and purpose in life to being trapped in a funnel of value deficit, in which the deepest, narrow circumference consists of identity constrictions. Low identity differentiation, low self-value and/or low value-efficacy were internally expressed in uncontrollability/unachieveability expectations, lack of positive mood and negative mood ranging from dissatisfaction to depression, anxiety and anger.   At the widest most visible circumference of the metaphorical funnel, identity restrictions manifested in deficits of value-constructive action. This paper presents the findings on deficits of value and on identity constrictions. It then posits that chronic lack of meaning and purpose is a clinical syndrome involving identity and executive dysfunctions of the frontal lobes. Furthermore, that these deficits result from attachment traumas affecting identity development or traumas that disconfirm established self/other schemas.   As suggested in Frankl's Logotherapy and Seligman's current recapitulation of it, commitment to self-transcendent causes may resolve temporary lack of meaning and purpose in those without identity deficits.   However, the current findings identify low self-differentiation, poor self-esteem and low value-efficacy as the necessary targets for therapeutic endeavour.   Indeed, for chronic experiencers the centrality of low value-efficacy is more

congruent with Seligman's learned helplessness theory than his current focus on meaning and purpose through self-transcendent commitments.

Poster Presentation (Paper #298)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
A Qualitative study of general practitioner's approach to management of parent patients with depression in a Queensland regional town: What about the children?
CORNELIUS, C. (James Cook University)
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The child of a parent with depression has been referred as a "lost" or "forgotten" child. Australia has acknowledged this and the needs of these children were included in national mental health policy in 2006. It remained unknown if the increased risk of mental health for children of parents with depression had filtered down into routine practice in the primary clinical care sector. This study aimed to understand if GPs in Queensland asked their parent patients with depression about their children during the consultation. This was a qualitative study based on the methodology of grounded theory. The data was collected by use of semi- structured interview with each of the 12 GPs who participated. The GPs practiced in a regional Queensland city or a rural town, and differed in mental health training, confidence and experience in working with patients with depression. Both genders of GPs were represented in equal numbers. The GPs reported that they had knowledge of the increased risk to these children gained from their clinical experience, but that they had not had formal training on this. Themes that emerged from the data included the need to get the parent well as they had a child to care for. There were three themes that related to the patient's child: assessment of the risk to the child; the child as a source of stress to the parent; and the child's wellbeing. It was found that the GPs in the study formed two main groups: A group of four GPs who did ask about the child's wellbeing, and those who did not ask. No difference, in demographic information, between the GPs who reported that they asked about the child's welfare and those who did not could be identified in this study. It is proposed that in line with current national mental health policy, training and information on this mental health prevention is given to GPs in such a way that it is accessible to all. It is further proposed that a family session be included as part of the patient's mental health care plan.

Professional Practice Forum (Paper #320)
Thursday 10 October 2013 — 10:30am (Meeting Room 5 and 6)
Australian school psychologists: Roles and expectations — Where to next?
STOPS, D. (Australian Psychological Society), & **JELLINS, L.** (ACT Education and Training Directorate)
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Following a forum in 2011 participant's views and thoughts were shaped into a national survey of school psychologists. Whilst the findings concurred with anecdotal observations, they also raised some important points for discussion. Nation-wide similarities in relation to the role of school psychologists seemed to prevail over the variation of job titles, and variation of roles that school psychologists undertake within state, territory and educational sectors, and geographical region within Australia. Psychologists believe that schools really need psychologists, but how much influence does the psychology profession have over school psychologists' roles? How do these perspectives influence access to psychological services? This professional forum is for school psychologists and those who are interested in school-based psychological services to participate in a discussion of the role of psychology within the Australian educational sector, and the future sustainability of this profession. How can school psychologists advocate for improved psychological services? What new challenges and roles should school psychologists be taking on as technology evolves?

Individual Research Paper (Paper #301)
Thursday 10 October 2013 – 11:10am (Meeting Room 2)
Psychology facing the times: Young onset dementia support group Facebook style
CRAIG, D. (Queensland Health)
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This presentation discusses a Young Onset Dementia (YOD) Facebook support group which helps lessen the sense of isolation, misunderstanding and fear of many relatively young people diagnosed with dementia worldwide. Relatively young people diagnosed with dementia can feel particularly isolated. One avenue available to assist them to connect with others is via Facebook. Useful for people around the globe, this tool allows users to: identify people experiencing similar things, whom they can contact openly or privately; gain easy access to YOD related newsfeeds; gain support in relation to queries; give voice to feelings and thoughts. The social medium of Facebook has proven an effective means of supporting people living with YOD. This group is often comfortable with computer technology and uncomfortable with 'aged care', 'memory clinic' and 'old-timer's disease'. Facebook provides an accessible option for linking people. Utilisation statistics show posts are typically seen widely within a short space of time, providing an excellent opportunity to disseminate information effectively. Posts by 'friends' of the page reach a wide audience from which peer support can be achieved promptly. Users can also elect to private message each other if they wish. Facebook's appeal has seen it become a powerful communication tool. The Facebook 'Young Onset Dementia Support Group Qld' page is a means readily available to assist people with YOD to establish age appropriate, 'on the same page' support.

Symposium (Paper #264)
Wednesday 9 October 2013 – 3:15pm (Meeting Room 3 and 4)
Undergraduate psychology curriculum: Innovations and challenges
CRANNEY, J. (UNSW)
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Overarching Abstract
This APS PsyEd Interest Group symposium focusses on innovations and challenges in the undergraduate psychology curriculum. Firstly, Morrissey et al. introduce the "Five senses of evolving success model" of university student success, and describe how this can provide a framework for the acquisition of psychological literacy. Secondly, Telley et al. focus on social and academic integration as a key predictor of student success and retention, and argue that integration strategies at the program level are the most effective. Thirdly, Bryan et al. discuss recent theoretical, empirical, and curriculum renewal work aimed at developing a named, unique identity for psychology undergraduates, with a clearly defined career outcome. Lastly, Cranney et al. describe the outcomes of an OLT-funded initiative that elaborates the concept of psychological literacy as the primary outcome of undergraduate psychology education.

Presentation 1
Integrating senses of success, psychological literacy and graduate attributes for undergraduate psychology students
MORRISSEY, S., O'DONOVAN, A., EATON, R., HAWKES, A., MURPHY, K., HOOD, M., & LIZZIO, A. (Griffith University)
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How do students really understand what their psychology major or undergraduate psychology degree is designed for? How do they know what they should know when they complete their program of study. How do they know whether they have been successful at University other than feedback on their courses?   At Griffith University Alf Lizzio has developed the *'Five senses of evolving success model"* which is designed to

help academics develop School/Department based strategies to enhance the experience of undergraduate students across the whole student lifecycle. We contend that this model is consistent with the philosophy outlined in recent publication relating to '*psychological literacy*' (Dunn & Cranney, 2011) and fits well as a framework for ensuring that *Psychology Graduate Attributes* (APAC, 2010) are attained. This paper presents work in progress that the School of Applied Psychology is currently undertaking to integrate the senses of success, with the notion of psychological literacy and the graduate attributes to provide a more developmentally appropriate and coherent undergraduate program. Preliminary data on students' perceptions of the senses of success will be presented.

Presentation 2
Are you feeling connected? How students perceive university integration and their own role in success
TELLEY, A.P., CHESTER, A., & YAP, K. (RMIT University)
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Important to the transition process from high school to university is how well a student integrates socially and academically – integration is a positive predictor of retention and GPA (DeBerard, Spielmans, & Julka, 2004). In this study, first year students were invited to participate in a longitudinal survey over the course of the 2011 Australian academic year (initial sample size was 241). At the end of semester two, eight students also participated in a follow up interview to examine how students approached the task of integration, and what made integration easier or more difficult. Quantitative results suggested that students accurately predicted their susbsequent integration across the academic year. In addition it appears that integration does not typically increase over and above what students already think themselves capable of. Qualitatively, results indicated that successful students took a proactive approach to integration by making connections with other students. A number of students who had previously commenced, but not completed, university noted how disconnected they felt during their first attempt, and how on their second attempt, knowing the importance of integration, they took a very different approach. Students also noted the difference between integration attempts made at the university and program levels. In general, students saw most integration occurring at the program level, and thought it more beneficial. Students identified more with their program of study than the institution as a whole. Universities need to educate students explicitly about the importance of integration, and then ensure that each student takes some responsibility for making these connections. The university can facilitate, but ultimately, the student must take action. Students identify, and connect most, with those immediately around them. For students therefore, integration happens at the program level, which means that university-wide attempts at integration often fall on deaf ears. In the Australian context, students identify with their program first, their school second, and the institution last of all. University policy should reflect how students see integration, and should respond by reaching students where it is likely to be most effective.

Presentation 3
Towards a unique professional identity for psychology undergraduates
BRYAN, J., RANZIJN, R., TUCKEY, M., PEARSON, E., HAYWARD, R., BALFOUR, C., & LUSHINGTON, K. (University of South Australia)
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Undergraduate psychology training in APAC-accredited programs provides students with a comprehensive understanding of the diversity of the discipline and skills in research methods and statistics, critical, creative and evidence-based thinking, and communication. One strength of the undergraduate psychology degree is its breadth of training, enabling students to be well-prepared for employment in a variety of occupations. The notion of psychological literacy emphasises the applicability of this

breadth to individuals, the community and globally. However, this strength is also a weakness, since given the diffuse range of career outcomes undergraduate students do not have a clearly defined identity unless they progress to postgraduate studies in psychology, as only a small proportion will be able to do. It is also a problem for their prospective employers, the public and policy makers, who likewise do not have a clear idea of what the graduates of psychology three- or four-year degrees are qualified to do. This paper discusses recent theoretical, empirical, and curriculum renewal work aimed at developing a named, unique identity for psychology undergraduates, with a clearly defined career outcome.

Presentation 4
Curricular approaches to psychological literacy as the primary outcome of undergraduate psychology education
CRANNEY, J., BOTWOOD, L., & MORRIS, S. (UNSW)
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The primary aim of this Office for Teaching and Learning Fellowship program was to engage stakeholders in psychology education in a review of the aims of the undergraduate (UG) degree program, and subsequently the expected learning outcomes and curriculum content. The key issues are: (a) large numbers of graduates of psychology major programs do not go on to further professional training in psychology, and (b) there is an increasingly recognised need for professionals and citizens with high levels of psychological literacy and global citizenship. Psychological literacy is the capacity to adaptively and intentionally apply psychology to meet personal, professional and societal needs. Global citizenship is the understanding of global interrelatedness, and the capacity to live, work and contribute positively as a member of global communities. These concepts were central to developing the pedagogy underlying the creation and revision of the standards. This work was undertaken within the context of (a) building, supporting and collaborating with networks of students, graduates, employers, and educators, as well as (b) contributing and responding to peak national disciplinary and professional bodies. The key outcomes were: (1) Substantial contributions to national and international meetings/forums and educator networks, with a focus on the operationalization, adoption and implementation of psychological literacy, associated learning outcomes, and Standards; (2) further network-based development, revision and implementation of: (a) psychological literacy as the primary outcome of UG education, (b) the learning outcomes as the basis for standards of accreditation and quality assurance, and (c) global citizenship as a desirable transdisciplinary outcome (see www.psychologicalliteracy.com).

Symposium (Paper #267)
Friday 11 October 2013 – 10:30am (Meeting Room 2)
Work-integrated learning (WIL) in the undergraduate (UG) psychology curriculum
CRANNEY, J. (UNSW)
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Overarching Abstract
This APS PsyEd Interest Group symposium focusses on WIL in the UG psychology curriculum. Interest in WIL has been driven by (a) the general global emphasis on increased accountability of higher education providers to students in terms of employability, and (b) the fact that less than half of psychology major students progress to professional psychology training. First, O'Shea describes the impact on third-year psychology students of undertaking work-based placements. Measures include student attitudes towards their transition into employment, occupational self-efficacy, career adaptability, recognition and practise of psychological literacies, development and practise of generic employability skills and of professional skills and identity. Second, Hamilton et al. present a review of capstone and WIL experiences, and make

recommendations regarding their value and implementation. Third, Donnelley presents competing arguments for and against extending current UG units to include WIL components in the standard/accredited UG psychology curriculum. Finally, O'Shea describes her application of the Dedicated Education Unit (DEU) model of skill training for UG students. She argues that the model effectively addresses the issues of resourcing, availability of opportunity to students, and how to deal with student variability. She discusses the process of integrating such experiences purposefully into the UG psychology curriculum.

Presentation 1
What is the impact of compulsory WIL experiences on undergraduate psychology students?

O'SHEA, A. (University of Southern Queensland)
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Historically, undergraduate psychology degrees in Australia have tended to focus primarily on developing within students the graduate attributes of critical thinking, research training and knowledge of psychological theory, while the development of practical skills, and experience in rehearsing these skills is undertaken during postgraduate training. However, only a relatively small proportion of students studying undergraduate psychology continue into postgraduate training. Students exiting at the end of their third year and moving into roles within psychology-related industries need to be as prepared as possible for engaging with the work opportunities available to them upon completing their qualification. To address this, a number of Australian universities are implementing Work Integrated Learning initiatives at the undergraduate level. This paper will focus on the impact on third year psychology students of undertaking work-based placements with regard to student attitudes towards their transition into employment, occupational self-efficacy, career adaptability, recognition and practise of psychological literacies, development and practise of generic employability skills and of professional skills and identity. The reported results from these measures will be used to further develop more informed and relevant learning outcomes for undergraduate WIL programs.

Presentation 2
Increasing work readiness and psychological literacy of Australian psychology undergraduates through a capstone and work-integrated learning experience

HAMILTON, K. (Griffith University), FARRELL, L.J. (Griffith University), MORRISSEY, S.A. (Griffith University), O'DONOVAN, A. (Griffith University), ELLUL, M.C. (Griffith University), & WEINBRECHT, T. (Griffith University)
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Introduction: Capstone courses, which include a work integrated learning (WIL) experience, may play a critical role in graduate work readiness. One of the aims of the capstone experience in the discipline of psychology is to promote and develop psychologically literate citizens ready for engagement with professional workplace practice. Psychological literacy is the ability to apply psychological skills and knowledge to real life contexts and includes concepts such as critical thinking, effective communication, acting ethically, being insightful and reflective, and respecting diversity. The transition from student life to the professional workforce can be a challenging time and, thus, there is an urgent call to implement capstone courses into the undergraduate program so as to support students and enhance work readiness. Aim: This paper aims to showcase a review of the literature surrounding undergraduate psychology capstone courses and WIL experiences in an Australian context and how such courses may improve work readiness and psychological literacy. Method: A search of the literature via major psychology databases on work readiness, psychological literacy, capstone courses, and WIL was undertaken. Results: Capstone and WIL programs offer students the opportunity to integrate previous learning and apply their knowledge to new experiences

in preparation for the workforce. Such programs provide students with an opportunity to identify, reflect, value and extend on the knowledge and skills obtained in their undergraduate degree and, thus, enable them to be work ready. Work readiness is shown to play an important role in terms of long term job performance, success in the work environment, and career advancement. Furthermore, psychology graduates who have had the opportunity to develop and enhance their sense of professional identity and self-efficacy through a capstone course and WIL experience are more likely to make a smooth transition into professional work practice. Conclusion: Undertaking a capstone course and WIL experience in the discipline of psychology helps to promote and develop psychologically literate citizens ready for engagement with professional workplace practice. As such, it is recommended that final year students are provided with opportunities to apply their knowledge and analytical skills to real-world situations.

Presentation 3
Work-integrated learning for psychology undergraduates: Pre-professional skills or fostering the illusion of competence
DONNELLY, J.F. (Southern Cross University)
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A wide range of employers are using non-clinically trained psychology graduates to provide a range of mental health services, especially in rural and regional Australia. Recent discussions among some psychology training providers in Australia and community-based employers of psychology graduates, have suggested that improving *pre-professional skill development* for psychology undergraduates should be a priority. This is in contrast with an apparent rejection at the national level of the idea that we should have a *psychology assistant* level of training for students who either do not academically qualify for or cannot obtain either Masters level clinical training or access to a 4+2 supervisor. Although there are some accepted supplementary training opportunities available to psychology undergraduates that may provide some exposure to clinical-like work (e.g., Lifeline, cadetships in non-government agencies, volunteering), there is significant variance across programs in what is available to undergraduates and the oversight of how their labour may be used. The increase in competition for university clinical placements due in part to applications from currently registered psychologists, coupled with the paucity of 4+2 supervision opportunities in rural and regional areas has reportedly driven graduates to "accept whatever they can get" to further their training and improve their chances at admission or advancement within organisations. The current discussion paper presents the competing arguments for and against extending current undergraduate units to include *work-integrated learning (WIL)* components to the standard/accredited undergraduate psychology curriculum. The author presents a sample of perspectives offered by NSW disability and aged care services, Medicare Local, local employers in government and non-government agencies, and registered and clinical psychologists on what the undergraduate training requirements should include. They note how non-clinically trained, 3- and 4-year graduates might contribute or detract from mental health service provision in Australia. What specific experiential learning activities should be allowed for undergraduates given the limits currently set for what psychology trainees are allowed to do without approved, clinical supervision are discussed. Lastly, quality guidelines for work-integrated-learning as developed for other disciplines are offered as the standards for what psychology would need to provide if a WIL model was more fully adopted.

Presentation 4
Reducing resource requirements and costs of work-based skills training for undergraduate psychology students: Implementing the dedicated education unit model in work integrated learning
O'SHEA, A. (University of Southern Queensland), & McDONALD, M. (Education Queensland)
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Many of the objections regarding the introduction and implementation of work integrated learning (WIL) as a compulsory component within the undergraduate psychology curriculum centre around issues of resourcing, cost and availability of suitable opportunities for students. This paper will outline how one model of student practitioner skills training, the dedicated education unit (DEU) has been adapted for an undergraduate psychology WIL program and successfully implemented within a number of secondary education institutions. In these units, third year psychology students, individually or in small work teams, design, develop and implement positive psycho-educational training to secondary students identified as at risk of disengagement from education and training. The benefits of using the DEU model for undergraduate psychology skills training will be discussed, along with analysis of student and host evaluations on the impact of the experience in developing the student sense of career adaptability, employability and professionalism. Additionally, it will review the outcomes from and lessons learned during the first three years of this project. Discussion will outline how effective the model has been in addressing the issues of resourcing, availability of opportunity to students, dealing with student variability in terms of readiness for compulsory, practice-based courses and the process of integrating such experiences purposefully into the undergraduate psychology curriculum.

Poster Presentation (Paper #59)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Critical input features for global shape processing
CRIBB, S. (University of Western Australia), BADCOCK, D. (University of Western Australia), & DICKINSON, J.E. (University of Western Australia)
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Radial Frequency (RF) patterns, developed by sinusoidally modulating the radius of a circle, are a stimulus class that has been used to investigate local and global contributions to visual processing of shape. RF patterns are globally processed up to frequencies of 8-10. This means the visual system integrates local information around the contour and the shape is perceived as a whole. At higher frequencies, RF patterns have more tightly curving points of maximum curvature and smaller polar angles between. One of these factors may prevent global processing, but previous studies have been unable to dissociate them, as they change simultaneously. This study aimed to directly investigate which features of RF patterns might be critical for global shape processing. This was achieved with the use of novel stimuli, rectified RF patterns, which have tight curvature separated by wide polar angles. Five observers completed two experiments using a two-interval forced-choice task in conjunction with the method of constant stimuli. Experiment one measured absolute thresholds for rectified RF5 patterns with one through to five cycles. For both negatively and positively rectified patterns, threshold improved at a rate that significantly exceeded probability summation. This demonstrates that these stimuli are globally processed, suggesting mathematically smooth curvature is not critical for global processing. Experiment two used a 2x2 interval forced choice design to determine whether observers could discriminate between these stimuli at absolute threshold, suggesting separate mechanisms process the stimuli. It was found that they could not, and a single channel is sufficient to account for global processing of all stimuli. As curvature cannot account for the lack of global processing of high frequency RF patterns, it is suggested that wide polar angles are a likely critical input feature for global shape processing. Furthermore, as a single channel accounts for

global processing of both conventional and rectified RF patterns, it is suggested the mechanism underlying global processing is broadly tuned for curvature and tightly tuned for polar angle. At threshold level, observers do not appear to have access to information regarding degree of curvature, suggesting this cannot be used as an identification cue.

Individual Research Paper (Paper #314)
Thursday 10 October 2013 – 10:30am (Meeting Room 7)
ERA 2012 versus ERA 2010: Like the curate's egg... good in parts
CROWE, S.F. (La Trobe University)
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Introduction: In 2012, the Australian Research Council conducted the second *Excellence in Research for Australia* (ERA) analysis, which applied to research undertaken between 1 January 2005 and 31 December 2010. This comes following the initial ERA which analysed the publications from 1 January 2003 to 31 December 2008.
Aim: The aim of this paper was to assess the health of the research enterprise in psychology as measured by the ERA and to attempt to ascertain any trends and lessons from this data.
Method: The ERA process involved evaluating research outputs (books, journal papers, conference presentations etc.), as well as other performance measures of the 41 academic organizational units (AOU). Three FORs are relevant to psychology 1701, psychology, 1702, cognitive sciences and 1799 other psychology and cognitive sciences. Also of relevance to many of AOUs is the code 1109, neuroscience.
Results: The results of the analysis revealed many interesting outcomes. Focusing upon the 1701 code: in 2010 28 of the 41 of the universities reviewed had produced a sufficient set of material to be able to be assessed, with 13 not assessed due to the low volume of production. This number had improved to 30 of the 41 in 2012. Of the units assessed in 2010, 43% were rated at or above world standard, and this had improved to 70% in 2012. The average national rating for the 28 AOUs in 2010 was 2.6, and this had improved to 3.1 in 2012. Seventeen of the 41 departments had improved their performance from 2010 to 2012, with only three having deteriorated. The data also revealed a strong move away from the 1702 (Cognitive Sciences) from 11 assessed in 2010 to only 7 in 2012 and of the universities assessed all had either deteriorated or stayed the same.
Conclusion: The data reveals an overall improvement in performance across the board with most universities improving or at least holding their ground. While many claims about game playing with regard to the handling of this data have been made, no clear indication of this was noted. The implications of this data, as well as the scope to the next ERA, will be discussed.

Poster Presentation (Paper #18)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Revising the Australian Self-Reported Delinquency Scale and the psychosocial control framework of delinquent behaviour: A stakeholders' study
CURCIO, A.L. (University of Canberra), MAK, A.S. (University of Canberra), & KNOTT, V.E. (University of Canberra)
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Delinquency and other adolescent problem behaviours, especially problem drinking, are on the increase in Australia, leading to significant concern and justification for early intervention. Despite evidence of empirically tested theories and measures of delinquency, such as psychosocial control theory (Mak, 1990) and the Australian Self-Reported Delinquency Scale (ASRDS; Mak, 1993), there is a need to revise and review their utility in regards to describing and explaining contemporary adolescent problem behaviours. As such the aims of this preliminary study were twofold. Grounded in thematic analysis, the overriding aim was to access information, through focus groups, regarding perceptions of current forms of rule-breaking behaviours and their causes

using a theoretically-flexible framework. Participants comprised three separate stakeholder groups: six male adolescents aged 17; seven mental health professionals experienced at working with young people; and six police officers. Comments on the original ASRDS resulted in a number of suggested changes in wording and deletion of out-dated items, as well as the addition of cyber behaviours (e.g., online stalking/trolling, and sexting). Additional items such as purchasing cigarettes, consuming or dealing illicit drugs, cruelty to animals, obtaining or forging a fake identification or other documents, and illegally downloading music and movies were endorsed by all groups. Consensus regarding risk factors for engaging in rule-breaking behaviours was also evident among stakeholders. Risk factors identified included: lack of parental attachment, parental neglect or modelling of inappropriate behaviours, peer attachment, sensation seeking, impulsivity, poor school bonding, lack of perceived seriousness of actions, cultural norms, and mental illness. With the exception of mental illness and cultural factors, these risk factors were consistent with the components of Mak's (1990) psychosocial control theory of delinquency. The current stakeholder consultations will inform future quantitative research using a revised self-reported delinquency scale and an expanded psychosocial control theory. This new approach may be useful in underpinning interventions aimed at addressing adolescent delinquency, problem drinking, and possibly additional types of problem behaviours.

Psychology Central 5 (Paper #331)
Friday 11 October 2013 — 9:30am (Meeting Room 7)
APS Institute: Overview of professional development and training
DAVIDSON, G.R. (Australian Psychological Society)
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The Australian Psychological Society has established a new institute for professional education and training, to be known as the APS Institute. This session will provide an overview of the APS Institute's current professional development offerings, new programme initiatives, market positioning, and quality assurance mechanisms as well as offer an opportunity for member feedback.

Professional Practice Forum (Paper #120)
Wednesday 9 October 2013 — 1:15pm (Plenary Hall A and B)
Nothing is private? The ethics of psychologists' professional and private conduct
DAVIDSON, G.R. (Australian Psychological Society), **LOVE, A.W.** (Victoria University), **MORRISSEY, S.A.** (Griffith University), & **ALLAN, A.** (Edith Cowan University)
g.davidson@psychology.org.au

This forum considers the proposition that all conduct in which a psychologist engages, whether as a psychologist or as a private individual, reflects on the profession and should be open to scrutiny, i.e., nothing is private. The first presentation argues that the ethics of good conduct premised on Aristotelian ideas of character and virtue are contradictory to the tendency in duty ethics to separate ethical decision making from the lived example of the decision maker. Virtues such as integrity, trustworthiness, and honesty only exist as whole-life qualities associated with lived goodness and form the basis of others' appraisal respect for psychologists on which public trust in the profession depends. Examples of so-called private behaviour that could lessen such trust are examined and the idea of maintaining privacy in an age of mass media is questioned. The second presentation argues that individuals are not psychologists every hour of every day and that the profession has no business interfering with persons' autonomy when they are not performing the role of psychologist. Furthermore, ethical standards should apply only when psychologists' conduct can be fairly considered as falling within the ambit of their professional responsibilities. The distinction between public and private is premised on the idea of boundaries and on the expectation that psychologists will manage boundaries between their private and professional lives. Case material will be

presented to support the assertion that there is much that is private and, as such, no business of the profession. The third presentation examines the question of when a psychologist is not a psychologist by drawing on the case of a psychologist who relinquished registration because the situation suggested that the morally right course of action may be contrary to the APS Code of Ethics. Relinquishment of registration was considered to be a way of protecting the profession's public reputation. Subsequently, the non-registrant was sanctioned by a registration board for breaching the Code, raising questions about when a psychologist ceases to be or act as a psychologist. Presentations will be followed by facilitated discussion and debate.

Poster Presentation (Paper #179)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Social psychological and linguistic determinants of educational adjustment amongst Thai university students enrolled in Thai university English language courses: A path model
KIM, Y.H. (Prince of Songkla University), & **DAVIDSON, G.R.** (Australian Psychological Society)
g.davidson@psychology.org.au

Previous research with a first year English cohort of Thai students found that psychological and psycholinguistic factors, but not English proficiency, were reliable predictors of educational adjustment to university, suggesting the need for a more detailed investigation of influence of a broader range of social psychological and psycholinguistic factors on educational adjustment. The present research examined the influence of perceived parental opinions about learning English, attitudes toward learning English, desire to learn English, English language self-efficacy, perceived English proficiency, and foreign language classroom anxiety, as well as English proficiency as measured by TOEIC and year of study, on the educational adjustment of Thai students enrolled in Thai university first year (n = 159) and advanced (n = 74) English language courses. Questionnaire measures were translated from English into Thai using a combination of the back-translation and committee techniques, followed by field testing to ensure translated items and instructions were comprehensible. All internal reliabilities were in the range of 0.77 – 0.90. Path modeling using SPSS AMOS^{TM} 7 showed that the proposed model of social psychological and linguistic influences on educational adjustment fitted the data well (NFI, IFI, CFI = 0.99, RMSEA = 0.058). Perceived parental opinions about learning English significantly influenced students' attitudes toward learning English and desire to learn English and these social psychological variables in turn significantly influenced the psycholinguistic variables of English language self-efficacy, perceived English proficiency and foreign language classroom anxiety, as hypothesized. Furthermore, parental opinions about learning English, attitudes toward learning English, perceived English proficiency, and foreign language classroom anxiety significantly influenced educational adjustment to university, as hypothesized. However, contrary to previous research with bilingual Canadians, neither the social psychological nor the psycholinguistic factors significantly influenced English proficiency; and level of English proficiency and year of study negatively influenced educational adjustment to university, i.e., students with higher TOEIC scores and in advanced level courses reported lower levels of educational adjustment. Implications for selection, instructional support and educational counseling of Thai students enrolled in Thai university English language courses are considered.

Professional Practice Forum (Paper #319)
Friday 11 October 2013 – 10:30am (Meeting Room 5 and 6)
Can classroom profiling contribute to closing the gap in Indigenous educational outcomes? Managing behaviour in a safe, supportive and disciplined school environment
DAVIDSON, M. (Queensland Department of Education, Training and Employment), & CANN, K. (APS Aboriginal and Torres Strait Islander Peoples and Psychology Interest Group)
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Despite *Closing the Gap* targets, there remain many barriers to educational participation and outcomes for Indigenous children, including poor nutrition, hearing loss, behavioural difficulties and high teacher turnover in Indigenous schools. However research shows that quality school leadership and teaching, along with school, community and educational partnerships, are key influences on Indigenous student outcomes. Moreover, two of the four key principles underpinning the *Closing the Gap* Education Strategy are data-driven planning and action, as well as preventative, place-based solutions within a whole-school approach to learning. The intent clearly expresses the need for evidence-based, proactive strategies that enhance effective teaching and learning to improve student outcomes. Classroom Profiling addresses this need. Classroom Profiling is a performance development device highlighting strengths and areas to work on to support effective learning and teaching. It measures the relationship between teacher and students, and offers a confidential and non-judgmental process that enables teachers to reflect upon the approaches they employ to manage the behaviour of students in their care. Utilising the *Essential Skills for Classroom Management* approach, positive, effective and proactive strategies for maintaining a supportive school environment are adopted. Practices range on a planned continuum from positive or preventive actions for all students to responsive actions for specific students or groups. The process allows for both individual and whole school reflection, goal setting and review. The method is grounded in data driven decision making, evidence based practice and most importantly, development of the teacher-student relationship. This forum explores the Classroom Profiling approach developed by educators as part of the Indigenous Schooling Support Unit in North Queensland, to address Indigenous disadvantage in schools. Having been used with success since 1996, the approach is now implemented across Queensland and has national and world-wide recognition. Moreover, the practice of Classroom Profiling has shown benefits in Indigenous and mainstream classrooms alike. Pre and post classroom profiling footage and data are utilised to demonstrate its effectiveness. The forum will invite responses from representatives of the Australian Indigenous Psychologists Association, the APS College of Educational and Developmental Psychologists and APS Aboriginal and Torres Strait Islander Peoples and Psychology Interest Group.

Poster Presentation (Paper #41)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
An investigation into the effect of imagined contact on explicit and implicit attitudes toward male homosexuals
DERMODY, N. (University of Sydney), JONES, M.K. (University of Sydney), & CUMMING, S.R. (University of Sydney)
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The negative consequences of prejudice and discrimination are well recognised. While direct contact theories suggest that prejudice can be reduced through "optimal" contact with an out-group member, implementation limitations are evident. However, indirect contact paradigms, such as extended contact, have established that contact need not be direct for prejudice to be reduced. In a recent extension of this research, Turner, Crisp and Lambert (2007) demonstrated that imagined contact, that is *imagining* interacting with an out-group member, can result in more favourable out-group attitudes. This

study investigated whether indirect contact is able to reduce prejudice toward male homosexuals. While previous studies have typically utilised only explicit measures, this study incorporated a measure of implicit attitudes, since implicit attitudes are thought to be less vulnerable to demand and desirability effects. Eighty-five heterosexual undergraduate students (*52* female) were randomly allocated to one of three conditions; imagined interaction, prime control or unrelated imagery control. Explicit attitudes were measured using Herek's (1988) Attitudes Toward Gay Men sub-scale (ATG), implicit attitudes were measured using Jellison, McConnell and Gabriel's (2004) male homosexual Implicit Association Test (Greenwald, McGhee & Schwartz, 1998). There were no significant differences between the conditions for either explicit or implicit attitude measures, even when controlling for prior contact. As such, no support was found for the efficacy of imagined intergroup contact in improving attitudes towards male homosexuals. In particular, our findings demonstrated that imagined contact alone had no beneficial effect on attitudes toward male homosexuals and indeed, participants in the unrelated imagery control group exhibited the least prejudice on the explicit measure, the ATG. The present findings, unlike those Turner, Crisp and Lambert (2007), do not offer support for the effectiveness of indirect contact in reducing prejudice toward male homosexuals. Some explanations for the inconsistency of findings are discussed.

Symposium (Paper #328)
Wednesday 9 October 2013 – 1:15pm (Meeting Room 7)
Australian Indigenous Realities: Emerging Aboriginal and Torres Strait Islander Paradigms in Psychology
Convenor: DUDGEON P. (School of Indigenous Studies, University of Western Australia, and Australian Indigenous Psychologists Association)
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This symposium explores current understandings of Aboriginal and Torres Strait Islander social and emotional wellbeing (SEWB) and compares and contrasts its theoretical development with that of mainstream 'western' psychology. The first paper focuses on how the imposition of western psychology has impacted on Indigenous peoples, and explores the relationship between social and emotional wellbeing, mental health and mental health disorders from an Aboriginal and Torres Strait Islander perspective, and shows how the social determinants of this wellbeing are multiple, interconnected, and develop and act across the life course from conception to late life. The second paper focuses on the Australian Indigenous Psychologists Association's (AIPA) engagement with the political determinants to achieve a series of milestones which have culminated in a historic first: universally available mental health services for Aboriginal and Torres Strait Islander people. The contribution of cultural competence training in achieving this historic outcome is discussed in this paper. The next paper presents a model for an interdisciplinary team approach to the provision of health and wellbeing care, in keeping with the interconnectedness of social and emotional wellbeing as it is understood within a framework that places Aboriginal and Torres Strait Islander world-views and culture as central.

Presentation 1
Understanding Social and Emotional Wellbeing and mental health from an Aboriginal and Torres Strait Islander perspective
DUDGEON, P. (School of Indigenous Studies, University of Western Australia, and Australian Indigenous Psychologists Association), **SCHULTZ, C.** (Australian Indigenous Psychologists Association), **HART, A.** (Australian Indigenous Psychologists Association), **KELLY, K.** (Australian Indigenous Psychologists Association Cultural Competence Project)
pat_dudgeon@optusnet.com.au

This presentation examines understandings of social and emotional wellbeing with the aim of clarifying the relationship between social and emotional wellbeing, mental health

and mental health disorders from an Aboriginal and Torres Strait Islander perspective. It begins with a brief historical overview of how the term 'social and emotional wellbeing' (SEWB) emerged as a signifier of Aboriginal and Torres Strait Islander concepts of health. We define SEWB as a multidimensional concept of health that includes mental health, but which also encompasses domains of health and wellbeing such as connection to land, culture, spirituality, ancestry, family, and community (Social Health Reference Group, 2004). The domains and guiding principles that typically characterise SEWB are outlined and situated within a framework that places Aboriginal and Torres Strait Islander world-views and culture as central. The importance of recognising social, cultural, historical and political determinants in shaping Aboriginal and Torres Strait Islander SEWB is also discussed. The social determinants and processes that pose a risk to the development of poor outcomes among Aboriginal and Torres Strait Islander people are overviewed. We highlight that there are a unique set of protective factors contained within Indigenous cultures and communities that serve as sources of strength and resilience. We suggest that working within a SEWB framework involves developing an understanding of how these principles, domains and determinants manifest and operate at a local level, and we explore how to apply these in practical settings.

Presentation 2
From Little Things Big Things Grow: the role of the Australian Indigenous Psychologists Association and its cultural competence training in addressing long-standing inequities
SCHULTZ, C. (Australian Indigenous Psychologists Association and Griffiths University) and **KELLY, K.** (Australian Indigenous Psychologists Association Cultural Competence Project)
c.schultz@griffith.edu.au

The Australian mental heath system has been undergoing a prolonged period of reform, which saw additional investment between the years 2006-2011. Despite mental health issues being identified as one of the leading causes of the Indigenous health gap, billions were invested in primary mental health services that were widely acknowledged as being unable to meet the needs of Indigenous Australians. The Australian Indigenous Psychologists Association (AIPA) has had a key role in addressing long standing inequities within the mental health system by lobbying for an Indigenous-specific suicide prevention strategy (achieved 2011), the formation of a national Aboriginal and Torres Strait Islander mental health reference group (achieved 2011), an Indigenous member of the national Mental Health Commission (achieved 2012), the delivery of cultural competence training for the non-Indigenous mental health workforce (underway since 2010), the renewal of the Aboriginal and Torres Strait Islander SEWB Framework (underway), and the need for mental health strategies to be targeted to meet the needs of Indigenous Australians. In 2012, for the first time, Aboriginal and Torres Strait Islander people were identified as a special needs group within a national strategy, the Access To Allied Psychological Services (ATAPS) program. The Australian Indigenous Psychologists Association was contracted to deliver its cultural competence workshop (created using the combined input of 18 Aboriginal and Torres Strait Islander psychologists), to those involved in the ATAPS program. AIPA has now delivered its cultural competence training to more than 900 mental health practitioners. This paper will describe how cultural competence training delivered to ATAPS providers has contributed to a historic first - universally available mental health services for Aboriginal and Torres Strait Islander people. The journey, the models AIPA developed to support ATAPS mental health services, and the evidence to support gains against key learning outcomes will be presented and discussed.

Presentation 3
Interdisciplinary care to enhance Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing.
SCHULTZ, C. (Australian Indigenous Psychologists Association and Griffith University) and **WALKER, R.** (Telethon Institute for Child Health Research, UWA).
c.schultz@griffith.edu.au

This presentation discusses and defines the difference between multidisciplinary and interdisciplinary/interprofessional care with a focus on interdisciplinary care as a model of practice which supports equality and interconnectedness of responsibility amongst team members when working in Aboriginal and Torres Strait Islander contexts. It discusses the various professional and paraprofessional practitioners that comprise interdisciplinary team work and their roles in mental health and wellbeing contexts. This paper examines the concept of an interdisciplinary team approach to the provision of health and wellbeing care, based on the understanding that its ethos of equal relationships and interdependent collaboration is more encompassing of social and emotional wellbeing values than are standard models of care. The issues and limitations of interdisciplinary practice and the means to addressing them are identified and explored within the context of mental health best practice and human rights.

Poster Presentation (Paper #183)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The relationship between sign-tracking, impulsivity and alcohol use
FITZPATRICK, R.E. (Deakin University), STAIGER, P.K. (Deakin University), KAMBOUROPOULOS, N. (Deakin University), & RICHARDSON, B. (Deakin University)
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Despite extensive research and large sums of government funds allocated to prevention and treatment programs, drug addiction, including alcohol misuse remains a significant global health problem. While the aetiology of alcohol addiction has not, as yet, been fully elucidated, there is emerging scientific evidence that indicates that the way an individual responds to reward-predictive cues may be an important individual difference variable that is crucial in mediating susceptibility to addiction. In particular, sign-tracking behaviour, the propensity to approach and engage with reward-predictive cues, has been found to be associated with an increased vulnerability to addiction in animal models of addiction. However, to date, sign-tracking has not been reliably demonstrated in humans. Moreover, the relationship between sign-tracking and other important predictors of vulnerability to addiction, such as the personality dimension impulsivity, have not been investigated in humans. Therefore, this study aimed to address these gaps in the literature and develop theory about how individual variability in sign-tracking relates to alcohol use in the context of other important risk factors. Fifty one undergraduate university students and members of the general public, including 16 males and 35 females aged between 18 and 64 years old were asked to complete a collection of paper and pencil questionnaires that requested demographic information (gender and age) and contained measures of impulsivity and alcohol use. After completing the questionnaires, the participants completed a dot probe task. The results of this study did not provided support for the stated hypotheses. No significant relationship was found between sign-tracking and sensitivity to reward and rash impulsivity, respectively (hypothesis one). Moreover, sensitivity to reward, rash impulsivity and sign-tracking did not make a significant contribution to the prediction of alcohol use (hypothesis two). Ultimately, the findings of this study did not provide evidence that sign-tracking was an important individual difference variable important in alcohol use. However, other factors may have impacted the results, including the characteristics of the sample used in the current study and measurement issues. Therefore, future research is necessary to demonstrate a reliable association between sign-tracking, impulsivity and alcohol use in humans. Nevertheless, future research that clarifies these relationships may help to more reliably identify individuals at-risk for

alcohol-related problems and may have implications for treatment of individuals with alcohol-related problems.

Individual Research Paper (Paper #285)
Thursday 10 October 2013 – 11:40am (Meeting Room 5 and 6)
Factors supporting program implementation in schools: A qualitative study of teacher perspectives
FREEMAN, E. (The University of Melbourne); WERTHEIM, E. (La Trobe University), & TRINDER, M. (The University of Melbourne)
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The challenge of implementing new programs in organisational settings is well recognised. With evidence supporting the benefits of schools developing student social and emotional competence, and the inclusion of related objectives in the new Australian National Curriculum, it is timely to investigate what factors support schools in implementing and sustaining social and emotional programs. The collection of qualitative data can provide a means to obtain a nuanced picture of program outcomes and process factors that may be contributing to those outcomes. This paper reports a qualitative study of teachers' perspectives on the process of planning and implementing a whole-school social-emotional learning program with a conflict resolution focus, called *Enhancing Relationships in School Communities* (ERIS). Ten primary schools participated in an 18-month professional development programme offered by the researchers to assist schools to develop a whole-school approach to handling interpersonal issues using a cooperative problem-solving approach. Implementation teams of 3-5 members attended workshops and managed the change process. In individual interviews, 29 implementation team members described the most significant changes that had taken place, what factors facilitated those changes and what assisted in overcoming barriers. Thematic analysis was undertaken on interview transcripts to identify significant outcomes, and key factors impacting on uptake of the program. In a range of schools, teachers perceived substantive changes in students, and teacher-student relationships, including an increase in the use of cooperative language and methods by both teacher and students, a shift in teacher roles in handling conflict and empowerment of students to solve their own problems. A synthesised model of facilitators of implementation was developed on the basis of these interviews. The major components of the model included ensuring a whole-school vision and process; pre-program engagement; facilitative program structure and processes; support for staff in the change process, the nature of the program content; and monitoring and feedback processes. The perspective of school leaders and teachers involved in managing the change provided an important basis for developing a model of facilitative factors with the potential to contribute to further theory development and research efforts to refine processes for implementation of social-emotional learning programs in schools.

Professional Practice Forum (Paper #141)
Thursday 10 October 2013 – 1:00pm (Meeting Room 3 and 4)
Volunteering from diverse perspectives: An opportunity to contribute and flourish
FRYDENBERG, E. (University of Melbourne), **BURKE, S.** (Australian Psychological Society), **MEREDITH, S.** (Ngartunna Patpangga (Children in the South) Southern CAMHS), & **REDDY, P.** (Centre for Rural and Remote Mental Health, Bloomfield Campus)
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This forum will explore the role of psychologists as volunteers in diverse settings. The focus will be on diversity and capacity within the professional body to assist and benefit from such ventures. There will be four presentations. The first two will present exemplars of recent projects in which psychologists have been engaged. The first presentation by Susie Burke will describe the APS Disaster Response Network (DRN) where over 170 psychologists provided volunteer psychosocial support for Red Cross

workers who were deployed in Tasmania, Queensland and New South Wales over the summer period of floods and bushfires. The expanding role of APS DRN as the Red Cross continue to fine tune the ways we work together on disaster response and recovery will be presented. The second presentation by Stephen Meredith describes a partnership developed between the Aboriginal and Torres Strait Islander Peoples and Psychology (ATSIPP) Interest Group of the Australian Psychological Society and an Indigenous organisation, Yalari. Student Support Officers who offer monthly supervision were matched with a volunteer psychologist. In this presentation, we discuss and reflect on the development and implementation of this project from the points of view of the volunteer psychologist supervisors and the Yalari staff. The third presentation by Prasuna Reddy, describes the development of a voluntary workforce tackling prevention of non-communicable diseases such as diabetes, cardiovascular disease and depression, through health behaviour interventions. The Prevent NCD Foundation in India is focused on prevention activities in workplaces, schools, and rural communities. The final presentation by Erica Frydenberg focuses on literature relating to personal and psychological benefits of volunteering for both the recipient and the volunteer. It will consider what like organisations do and how they go about volunteering with a view to opening up the forum for discussion on what could be done and how best to go about it.

Poster Presentation (Paper #44)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Perceived benefits and adjustment to caring for older adults: The moderating role of stress appraisal
GLINDEMANN, A. (Bond University), & SAMIOS, C. (Bond University)
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Informal caring for older adults is an increasingly common chronic stressor. Having made meaning (such as perceived benefits) from caring may lead to better adjustment to this challenging role, but empirical findings have been inconsistent. This may have been due to undetected moderating variables. Therefore, the current study aimed to ascertain whether stress appraisal moderated the relationship between perceived benefits and adjustment indicators (depression, anxiety, life satisfaction, and positive affect). Questionnaires were administered online or via mail to $N = 92$ informal carers for an older adult. Stress appraisal significantly predicted poorer adjustment on all indicators and perceived benefits was a significant positive predictor of positive affect scores. There were also significant perceived benefits by stress appraisal interaction for depression: The combination of higher stress appraisal and greater perceived benefits predicted the highest depression scores. It appeared that, in some circumstances, perceived benefits is associated with better adjustment to caring. However, before the current results can be applied practically, further research is required to ascertain when perceived benefits is adaptive, as in some situations, it may indeed be detrimental.

Individual Research Paper (Paper #79)
Thursday 10 October 2013 — 11:10am (Hall C)
Stigmatising beliefs about bulimia in adolescents
GOLD, R. (La Trobe University), & PAXTON, S. (La Trobe University)
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Bulimia Nervosa (bulimia) is a debilitating eating disorder accompanied by a constellation of distressing psychological and physical symptoms. Unfortunately, many individuals with bulimia do not seek appropriate treatment due to a variety of factors including: fear of stigma, lack of knowledge about the condition and treatment options, shame and cost of treatment. Bulimic disorder onset typically occurs in late adolescence or early adulthood and beliefs formed in adolescence typically persist into adulthood. Therefore, adolescence is when the individual is most vulnerable to the developing the disorder and a crucial time to intervene by promoting early support seeking that is not inhibited by stigma or lack of knowledge. The aim of this investigation was to elucidate

the types and prevalence of stigmatising beliefs as well as the level of knowledge about bulimia in adolescents aged 15-18 years. Four-hundred and sixty male and female Victorian High School students completed a questionnaire designed to evaluate their levels of knowledge and stigmatising beliefs. It was found that adolescents endorsed a number of stigmatising beliefs such as blame, lack of trust and social distancing, under-estimation of the severity of bulimia, that the disorder may be desirable and that the disorder is primarily due to vanity. Furthermore, 45% of participants endorsed 'alternative therapies' as helpful in the treatment of bulimia. Participants downplayed the biological basis of the disorder which has been previously linked to individuals holding more stigmatising beliefs, such as the controllability of other mental illnesses. Several beliefs such as blame, vanity and lack of severity of eating disorders may be potent contributors to inadequate help seeking for individuals with bulimia. Furthermore, inaccurate knowledge, particularly in regards to appropriate treatment, may interfere with individuals affected by this disorder receiving appropriate intervention in a timely manner. Consequently, the identification of these stigmatising beliefs and knowledge deficits in adolescents highlights important areas to target in future prevention and intervention activities designed to ameliorate these knowledge deficits, and reduce stigmatising beliefs in adolescents.

Individual Research Paper (Paper #139)
Wednesday 9 October 2013 – 1:35pm (Hall D)
Using vignettes as milestones to track the development of clinical psychology practicum competencies: A multisite study

GONSALVEZ, C.J. (University of Wollongong), BLACKMAN, R. (University of Wollongong), CALVERT, F. (University of Wollongong), NASSTASIA, Y. (University of Newcastle), ALLAN, C. (University of Wollongong), SHIRES, A. (University of New South Wales), KNIGHT, R. (Macquarie University), & NICHOLSON PERRY, K. (University of Western Sydney)
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Supervised field placements occurring concurrently or after academic coursework, constitutes a paradigm that has been the hallmark of psychology training since the discipline's infancy. This training paradigm is also adopted by a range of other disciplines. However, recent research indicates that Likert rating scales, frequently preferred by supervisors, are particularly vulnerable to rater biases. Specifically, supervisor ratings are systematically affected by leniency and halo biases that obscure true differences within and among individuals and lead to poor rate reliability. Further, these biases have persisted despite several attempts to improve assessment outcomes by revising these Likert scales. The current paper describes the outcomes from a multi-site project, funded by the Australian Learning and Teaching Council. The aim of the project was to design, test and validate a new instrument to evaluate clinical psychology competencies. Vignettes (brief summaries describing what a trainee could and could not do) across nine different domains (e.g., clinical assessment, ethical practice) were crafted and compiled into a catalogue. For each domain, independent vignettes were designed to represent each of four milestones (Beginner-Stage 1, Stage 2, Stage 3, Competent-Stage 4) along the developmental trajectory towards competence. Supervisors were required to judge whether their trainee's competence matched, fell short of, or surpassed the profile of competencies captured by each of the vignettes within each domain. University and field supervisors, recruited from five different universities, rated the competencies attained by their trainees using a conventional Likert scale and the new vignette instrument. The results indicated improved outcomes for the vignette method. Moreover, supervisors evaluated the vignette approach as being time efficient and having better ecologically validity. The project makes two valuable contributions: the design and standardisation of a new instrument to assess competencies in field placements, and the demonstration of a methodology that could underpin the development of vignettes for allied disciplines. The findings of the project have attracted wide attention at national and international forums. Theoretical principles

and pedagogic applications of the vignette approach to assessment will be described and discussed.

Poster Presentation (Paper #194)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Electrodermal changes to wins and losses as club patrons gamble on electronic gaming (poker) machines
GONSALVEZ, C.J. (University of Wollongong), REEVES, K. (University of Wollongong), BLACKMAN, R. (University of Wollongong), LIM, M. (University of Wollongong), CRAWFORD, C. (University of Wollongong), & BARRY, R.J. (University of Wollongong)
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Psychological theories suggest that autonomic arousal highs rather than monetary gains may serve as the primary incentive mechanisms underlying problem gambling. Previous psychophysiological research has been mostly confined to laboratory contexts where participants (usually psychology students) gamble for "credits" they win or lose. The total credits won at the end of the session often determine whether the participant receives a token reward (e.g., a movie voucher). Because research has to comply with ethics codes, no real money is really wagered or lost during these simulated gambling activities. Therefore, although laboratory based data are valuable in understanding underlying mechanisms and in generating useful hypotheses, results from actual gambling venues are essential to confirm and complement data derived from laboratories. The aim of the study was to capture changes in electrodermal activity to win and loss events as patrons of licensed clubs engaged in real gambling on electronic gaming machines (EGMs or poker machines). Twenty patrons who agreed to have their gambling activity recorded were recruited from a licensed club in Sydney. Participants were fitted with ambulatory equipment that recorded ongoing electrodermal activity by means of two electrodes positioned on the index and middle fingers of their non-dominant hand. As the patron gambled, a recording of changes displayed by the EGM monitor was obtained by means of a high-speed camera (60 frames per second) and used to accurately synchronise physiological changes to events of interest (e.g., wins/losses). The results comparing skin conductance responses to the different types of events will be presented and discussed. A major contribution of the study is the demonstration that sophisticated ambulatory equipment combined with rigorous analytic procedures has the potential to capture physiological changes as they occur in real time during actual gambling activities. Theoretical and clinical applications of these results will be discussed.

Poster Presentation (Paper #195)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Heart rate changes to wins and losses as club patrons gamble on electronic gaming (poker) machines
GONSALVEZ, C.J. (University of Wollongong), LIM, M. (University of Wollongong), BLACKMAN, R. (University of Wollongong), REEVES, K. (University of Wollongong), ALTOMARE, D. (University of Wollongong), & BARRY, R.J. (University of Wollongong)
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The notion that autonomic arousal highs rather than monetary gains may contribute to the onset and maintenance of problem gambling is central to most current theories. Past psychophysiological research on heart rate (HR) in gambling has largely focussed on changes associated with specific gambling episodes (e.g., during a horse race) rather than on changes associated with specific win versus loss events. Further, when specific events were analysed, research was typically confined to laboratory contexts where

participants (usually psychology students) gambled for "credits" they won or lost. The total credits won at the end of the session often determined whether participants received a token reward (e.g., a movie voucher). Because research had to comply with ethics guidelines, no real money was really wagered or lost during these simulated gambling activities. Therefore, although laboratory based data are valuable in understanding underlying mechanisms and in generating useful hypotheses, results from actual gambling venues are required to confirm and complement data derived from laboratories. The aim of the study was to capture heart rate (HR) changes to win and loss events as patrons of licensed clubs gambled real money on electronic gaming machines (EGMs or poker machines). Twenty patrons who agreed to have their gambling activity recorded were recruited from a licensed club in Sydney. They were fitted with ambulatory equipment that recorded HR in terms of inter-beat-intervals by means of two electrodes positioned on their chest. As the patron gambled, a recording of changes displayed by the EGM monitor was obtained by means of a high-speed camera (60 frames per second) and used to accurately synchronise cardiovascular changes to events of interest (e.g., wins/losses). HR changes to the different types of events will be presented. A major contribution of the study is the demonstration that sophisticated ambulatory equipment combined with rigorous analytic procedures has the potential to capture physiological changes as they occur in real time during actual gambling activities. Theoretical and clinical applications of these results will be discussed.

Professional Practice Forum (Paper #228)
Thursday 10 October 2013 — 10:30am (Meeting Room 3 and 4)
Attachment and trauma informed practice: A Practice forum
GONZALEZ, R. (Lighthouse Institute), **HUSSEIN, T.** (Lighthouse Foundation)
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The Attachment and Trauma Informed Practice Forum aims to provide practitioners, policy makers and researchers with an opportunity to come together, to share innovations, discuss challenges and reflect on research and practice into recovery-oriented approaches. This practice forum comes at a pivotal time for Psychologists, when Attachment and Trauma Informed Practice is increasingly seen as best practice. This is a chance to reflect on what has been, what is possible, and what is next.

The interactive forum will explore Attachment and Trauma Informed Practice in work with children and young people in care, homeless young mothers and babies, children and young people with disabilities and indigenous communities. The presenters, who are pioneering the application of this approach in Australia, will talk openly about their experiences of implementing attachment and trauma informed systems across a diverse range of settings.

In recent years, through research into the brain, psycho-social development of humans and trauma recovery, we have gained a greater understanding of the importance of Attachment and Trauma Informed Practice in supporting the recovery of people with trauma histories. These findings are supported by over 100 years of research and practice in the fields of psychology, psychiatry and trauma neurobiology from around the world.

Young people in care, homeless young mothers and babies, children and young people with disabilities and indigenous communities who have been traumatised need a therapeutic environment where they can heal and which meets their emotional and developmental needs. Presenters will explain the impact of complex trauma on child

development, drawing on psychodynamic, attachment, psychological wellness and trauma neurobiology theories. Safety, security and stability are the basis on which attachment and trauma informed practice is based, with a holistic and flexible service delivery that addresses: child development needs; parenting skill development; independent living skills; community connectedness; emotional and physical wellbeing.

The practical aspects of undertaking therapeutic care are then outlined, covering topics such as the forming of therapeutic relationships, the importance of the physical environment and daily routines. The presentation considers the totality of vulnerable peoples' experience at the individual, group, organisation and community levels and argues that attention to all of these is essential if the young people, homeless young mothers and babies, children and young people with disabilities and indigenous communities are to achieve wellness. This presentation will provide practitioners working in residential settings with both the understanding and the practical knowledge to help those in care recover.

Presenters will share the findings of a number of pilot projects that have an attachment and trauma informed approach, the challenges of applying this framework, and outcomes for participants. The presentation will also emphasise the role that psychologists play in the recovery process of participants, the emotional and physical development of vulnerable young people, infants, people with a disability, and indigenous communities, the support of practitioner and the broader role within the therapeutic community.

Professional Practice Forum (Paper #303)
Thursday 10 October 2013 — 10:30am (Plenary Hall A and B)
What's the APS doing about asylum seekers?
GORDON, A. (University of Canberra), **MILLER, S.** (Sarah Miller Consulting), &
GRIDLEY, H. (Australian Psychological Society)
h.gridley@psychology.org.au

The health and human rights of refugees and asylum seekers are a matter of concern to many psychologists. Refugees often have high levels of trauma prior to (and during) migration, with negative impacts on their mental health and wellbeing. What happens to asylum seekers while waiting for their refugee claims to be processed is also crucial. There is well-documented evidence about the deleterious health impacts of immigration detention on asylum seekers, particularly those who are already vulnerable, such as children, or those with pre-existing trauma or mental illness. Yet despite promising changes to immigration detention policy in recent years, public discourse on asylum-seekers continues to be dominated by fear and xenophobia, and political responses seem to represent a 'race to the bottom' that goes against all our claims to be a compassionate nation that upholds human rights. Psychologists have involved themselves in a range of support and advocacy activities in relation to refugees over the past 15 years. The APS has contributed to 10 public inquiries into aspects of immigration detention, and is represented on the Australian Government's Immigration Health Advisory Group. In 2011 the APS Refugee issues and Psychology Interest Group (RIPIG) was formed, to provide a forum for discussion, peer contact, support and information sharing for psychologists, and to facilitate multidisciplinary collaboration around approaches to research, public policy and professional practice around the mental health and wellbeing of refugees and asylum seekers in Australia. This forum, hosted by RIPIG, will open up discussion on what we can do as psychologists to address both public policy and psychological practice on asylum-seeker issues in the current context. Three short papers will be presented: by a psychologist who has worked in the frontline with staff and clients in immigration detention settings, and is now the secretary of the Interest Group; by the APS representative to the Immigration Health Advisory Group, also the convener of the Interest Group; and by the APS Public Interest team responsible for position statements, submissions and media comment on refugee wellbeing. The forum

will include attention to practical questions such as how best to assess refugee mental health, and what kind of support psychologists need to act ethically in challenging circumstances.

Psychology Central (Paper #337)
Friday 11 October 2013 – 3pm (Meeting Room 7)
National Psychology Week
GORDON, A. (University of Canberra)

National Psychology Week is celebrating its 10th birthday in 2013. It has become - as intended - a time for psychologists to celebrate their profession, to join with colleagues to embrace networks, and to inform their fellow workers of what they do and how they contribute in the workplace. In addition, it is an opportunity for psychologists to promote their efforts through the media, with personal stories of their lives as psychologists living in the community.

In addition, the APS has developed a survey of the wellbeing of Australians, and the results are released each year, and the media follow that story with interest.

The NPW infosession will assist members to get value out of their own event and promotion during National Psychology Week.

Poster Presentation (Paper #40)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Psychotherapeutic treatment for people diagnosed with schizophrenia: Narrative processes and recovery
GREBEN, M., SCHWEITZER, R., & BARGENQUAST, R. (Queensland University of Technology)
melissagreben@gmail.com

Recent evidence suggests that Metacognitive Narrative Psychotherapy can facilitate recovery in people diagnosed with schizophrenia; however, we have little understanding of the mechanisms of therapeutic change. This study was situated within a larger research project involving an innovative 12-18 month trial of Metacognitive Narrative Psychotherapy for people diagnosed with schizophrenia. This approach encourages the development of narrative reflexivity. Recovery and narrative reflexivity were measured at three time points. Recovery was measured using the Recovery Assessment Scale (RAS). Narrative reflexivity was measured using the Narrative Processes Coding System (NPCS). Results were reported descriptively, in a series of brief case studies, due to a limited sample size (n = 9). The majority of clients (n = 7) reported an increase in recovery over the course of treatment. For six clients, an overall increase in recovery was associated with an increase in narrative reflexivity. This study provides support for an association between narrative reflexivity and recovery as a potential mechanism of therapeutic change in the psychotherapy of people diagnosed with schizophrenia.

Professional Practice Forum (Paper #178)
Thursday 10 October 2013 – 1:00pm (Plenary Hall A and B)
Psychology Board of Australia Updates on professional practice issues
GRENYER, B.F.S., **MULLER, J., GEFFEN, G., & ALLAN, A**. (Psychology Board of Australia)
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This professional practice forum provides an opportunity to hear from members of the Psychology Board of Australia on developments in 2013. (1) Brin Grenyer: National issues in workforce trends and regulatory developments: The ongoing release of accurate registration statistics reveals important fluctuations in numbers throughout the

course of a year, and the end of transition periods for area of practice endorsement and supervisor training have shown above expected increases in numbers. These data will be presented in the context of the rural distribution of the workforce of psychologists and international comparisons. (2) Joanne Muller: Psychologist's misconduct: overview of some recent cases from tribunals and panels: The second practice theme will present new findings from panel and tribunals across Australia, which are now being regularly published across all 14 health professions. The issues for psychology will be highlighted. (3) Gina Geffen: Update on Board intern and supervisor programs: The third practice theme involves the recent release of supervisor training guidelines and will comment on the relationship between the additional supports for supervisors with the proposed changes to the intern programs. (4) Alfred Allan: The development of international competencies - update from the Stockholm 2013 5th international licensing working meeting: The fourth practice theme shows links between the Board's work on competency development with international standards recently being developed through the 5th International workshop on licensing of psychologists in Stockholm.

Professional Practice Forum (Paper #260)
Friday 11 October 2013 – 3:30pm (Meeting Room 5 and 6)
'Una never let me get away with anything': Honouring Una Gault's legacy.
GRIDLEY, H. (Victoria University), **RICKWOOD, D.** (University of Canberra)
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In November 2012, Dr Una Gault died in Sydney, three weeks short of her 87th birthday. Dr Gault was a founding member of the APS Women and Psychology Interest Group, and edited the Blue Newsletter that was members' main link to the group in the days prior to the internet. A Life Member of APS, she received the Elaine Dignan Award in 1993, but refused other honours such as Fellowship. Generations of psychology graduates have stories to tell about Dr Gault. The Interest Group dedicates this forum to Una Gault's fierce commitment to psychological science as a means of promoting social justice and combatting misogyny. The forum takes a light and not-so-light look at some media reports of psychological research that most feminists would describe as misogynist and most psychologists would consider guilty at least of the ethical breach of 'bringing the profession into disrepute'.

Media item 1: A study of newlywed couples found that husbands were more satisfied initially and wives more satisfied over time when the women were thinner. Explanation offered by a couples therapist: men and women tend to be happiest in a relationship when the men are "more powerful in a benign way"

Media item 2: Research carried out by anthropologists and psychologists that focused on the sex lives of 110 heterosexual couples concluded that women orgasm more quickly and more often with handsome partners and/or with partners rated as masculine and dominant.

Media item 3: *Psychology Today* published an article by an evolutionary psychologist who made claims such as "black women are objectively less physically attractive than other women" yet "subjectively consider themselves to be far more physically attractive than others."

Possible questions for discussion include:
· What are some of the logical conclusions to be drawn from such research claims?
· What is psychology's collective responsibility for the kinds of research done in its name?
· What is it about 'psychological science' that lends itself to abuses of this kind – that is, are they just aberrations, or are they really how psychology (still) constructs the female?
· And how did they get past an ethics committee?

These kinds of questions are what Una Gault would have advocated in the name of psychological science as well as her feminist principles.

Poster Presentation (Paper #23)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Have you read the Academic Misconduct Policy? Examining students' comprehension of a University's policy
GULLIFER, J., & TYSON, G.A. (Charles Sturt University)
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Research has established that the term *plagiarism* is open to a wide range of interpretations, resulting in confusion among students and staff alike. A university's academic integrity/misconduct policy defines the ethical behaviours that that all stakeholders must abide by, and the parameters for reporting, investigating and penalising infringements. These definitions are the benchmark for assessing how well students understand plagiarism. An online questionnaire was developed to examine students' perceptions of plagiarism. An invitation to complete the survey was sent to all 30 092 domestic students at an Australian University and 3405 students completed it. The research reported in this paper looks only at the students' understanding of the institutions policy on academic integrity. The data obtained were examined in terms of year of study, Faculty, e.g. Arts, Science etc, and whether the students were studying on-campus or by distance education. The data confirmed findings from previous literature indicating that confusion regarding what behaviours constitute plagiarism was evident. The implications of these findings suggest that a university-wide systematic approach with an educative focus may have a greater impact on improving students' understanding of academic misconduct, as opposed to an emphasis and expectation that students access and read the policy

Poster Presentation (Paper #236)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Leadership perspectives in culturally diverse schools
GURR, M. (La Trobe University), WERTHEIM, E. (La Trobe University), FREEMAN, E. (The University of Melbourne), TRINDER, M. (The University of Melbourne), & SMITH, K. (The University of Melbourne)
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Australia is becoming increasingly culturally diverse and Australian primary schools represent a microcosm of this process, with schools encountering both the benefits and challenges associated with greater diversity. Despite increases in cultural diversity in schools, little is known about how diversity affects the perspectives and practices of schools. The current study was part of a broader project, *Talking Culture* that investigated the perspectives and practices of principals, teachers, students and parents in six highly culturally diverse schools with significant populations of new arrivals and refugees. The current paper focuses on the findings of the interviews with the principals of these schools. Principals have a key role in shaping the experience of students, families and staff who come together within the schools. The aim was to explore the perspectives of principals in highly culturally diverse schools, focusing on how they see their school supporting diversity, the challenges faced, areas for improvement, and the role of a school leader in a culturally diverse school community. Six principals from four government schools and two Catholic schools, from the Cities of Hume and Moreland, Victoria, took part in interviews addressing these topics. Interviews were recorded, transcribed and analysed using a qualitative thematic approach. Principals described cultural diversity as a fundamental characteristic of their schools that influenced every aspect of their operation. Finding creative approaches to addressing language challenges, supporting families in transition, identifying children and families with adjustment challenges, and utilising support services in the broad community were

described as central to the work of these schools. Principals depicted their schools as engaging with diversity within the whole school community rather than just in the classrooms. They were concerned about their school's ability to engage and support all groups within the school community and saw their role as helping to create a school staffed with people with necessary skills and values to achieve this. This research revealed the complexity of leadership in culturally diverse Australian schools, identified the need for further context specific research, and raised implications for government policy on cultural diversity in schools.

Individual Research Paper (Paper #336)
Thursday 10 October 2013 – 10:50am (Meeting Room 7)
APS Journal Program – Journal Publishers – Wiley, Blackwell and Cambridge
HAMMOND, S. (Australian Psychological Society), **CROWE, S.** (La Trobe University)
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APS Journals program: This session provides an overview of the APS Journals program. Journals provide a key member benefit for remaining up-to-date on current topics in psychology, both nationally and internationally. Three APS Journals are published in paper and online format by Wiley: Australian Psychologist (AP), Australian Journal of Psychology (AJP) and the Clinical Psychologist (CP). Two journals are published by Cambridge University Press: Australian Educational and Developmental Psychologist (AEDP) and Australian and New Zealand Journal of Organisational Psychology (ANZJOP). The Australian Community Psychologist (ACP) is the free online journal by the College of Community Psychologists.

Individual Research Paper (Paper #25)
Thursday 10 October 2013 – 11:30am (Meeting Room 2)
The psychological cost of caring: Wellbeing and illbeing among informal carers in Australia
HAMMOND, T. (Deakin University), WEINBERG, M. (Deakin University), & CUMMINS, R.A. (Deakin University)
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There are approximately 2.6 million unpaid informal carers in Australia who provide essential support for friends and family members with various disabling conditions. Despite the considerable benefits of informal caring for those who require care, and the social and economic benefits for the wider community, there is a substantial cost. More often than not it is the carers who pay the price. Thus, the present study was developed to explore the factors contributing to the wellbeing and illbeing of carers in the Australian population. Utilising cross-sectional data collected in 2007 as part of the Australian Unity Wellbeing Index, approximately 4096 Australian carers with a mean age of 60.1 (SD = 13.15) completed the Personal Wellbeing Index, which measures subjective wellbeing, and the Depression, Anxiety and Stress Scales. Participants provided additional information about the amount of time spent in a caring role, who is cared for, and the type of medical condition that is being managed. In comparison to general population norms, carers reported significantly lower subjective wellbeing across all life domains [$t_{(6367)} = 42.42$, $p < .001$]. Approximately 37% of carers reported experiencing severe to extremely severe symptoms of depression and stress. Caring for long periods of time led to significantly lower subjective wellbeing and significantly increased the odds of experiencing elevated symptoms of depression and stress by 2.5 to 4.2 times. Supporting multiple family members or children was associated with the lowest wellbeing scores [$F_{(7, 3769)} = 13.63$, $p < .001$] and increased severity of depression and stress. This trend was also observed for carers assisting someone with multiple medical conditions or a mental illness. These findings suggest that assuming a caring role places informal carers at high risk of psychopathology. These findings highlight the importance of ongoing monitoring for carer groups and the development of adequate support

systems. As such, the inclusion of carers is a crucial component of the Australian National Disability Insurance Scheme.

Poster Presentation (Paper #217)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
Health risk behaviours and preventive health care delivery: A comparison of general health and specialist mental health services
HAMPTON, R., BOWMAN, J. (Hunter Medical Research Institute; The University of Newcastle), FREUND, M. (Population Health Hunter New England Local Health District; The University of Newcastle; Hunter Medical Research Institute), & BARTLEM, K. (Population Health Hunter New England Local Health District; Hunter Medical Research Institute; The University of Newcastle)
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Compared to the general population, people with a mental illness are more likely to engage in health risk behaviours including smoking, inadequate fruit and vegetable consumption, risky alcohol consumption and physical inactivity. This, consequently, leads to higher levels of preventable morbidity and mortality amongst this group. Evidence-based guidelines recommend that preventive care be provided routinely across all types of health services to address such risk behaviours. Preventive care should minimally involve asking the client about all health risk behaviours, providing brief advice and referring on to a telephone service, such as Quitline, or another health service. The aim of the present research was to compare general and mentally ill populations regarding their health risk behaviours, their willingness to change these behaviours, the preventive care that was delivered to each group and the acceptability of such care. A cross-sectional survey of 1437 clients attending community general and mental health services in one Local Health District was undertaken. Mental health clients were more likely to engage in each of the health risk behaviours compared to general health clients. This was particularly evident for smoking and risky alcohol consumption. However, mental health clients were comparably interested in quitting smoking, increasing fruit and vegetable consumption and decreasing alcohol consumption, and more likely than general health clients to be interested in increasing physical activity. The majority of both general and mental health clients found preventive care to be acceptable. Overall, provision of preventive care was low with only 15.9% of mental health clients being asked, 10.5% being advised and 8.7% being referred for all health risk behaviours. However, preventive care levels did not significantly differ between general and mental health clients. These findings challenge misconceptions about people with a mental illness regarding their willingness to change health risk behaviours and opinions about preventive care. It was concluded that there is a large gap between evidence-based guidelines and preventive care provision in general and mental health community services and, thus, a missed opportunity for intervention to reduce morbidity and mortality, particularly amongst mental health populations who have a higher prevalence of risk.

Individual Research Paper (Paper #171)
Thursday 10 October 2013 — 11:30am (Meeting Room 1)
Change processes in therapy: Case studies in Process-Experiential/Emotion-Focused Therapy
HARTE, M. (La Trobe University)
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The research presented in this presentation investigated in-therapy experiences and treatment effects for four depressed young women counselled with Process-Experiential/Emotion-Focused Therapy (PE-EFT). PE-EFT, an evidenced-based, manualised, therapy developed by Greenberg, Elliott and Rice in the mid 80s, emphasises the quality of the client-therapist relationship and offers efficient techniques to assist clients to deal with emotional experience in the present moment. This study

was designed to investigate change processes and help reduce the research-practice gap. It used multiple sources of qualitative and quantitative evidence including established quantitative instruments, assessment of the client's perspective, using Change Interviews, and careful observation of work with the four young women in twelve-counselling sessions in a naturalistic setting. The expanded single case design took an interpretive approach to examining client change and its causes, seeking client and therapist viewpoints. The participatory and collaborative approach to the collection of data and the documentation of the young women's experiences was in line with the person-centred values underpinning PE-EFT. A thematic analysis of the qualitative data elicited propositions about the changes that occurred as a result of therapy from the four young women's perspectives. The clinical significance of these changes was also examined. In general, the young women reported in their Change Interviews that there was a decrease in their presenting symptoms. They also described improvement in their interpersonal relationships, increased inner awareness, improved emotion regulation, decrease in confusion and more compassion and acceptance for self and other. Analyses of these data suggested these changes resulted from the combination of an emphatically attuned working alliance *and* the PE-EFT therapeutic tasks. A key to the task success was the facilitation of the *felt-shifts* in experience when the emotion scheme was successfully activated and reprocessed. This research adds to the growing understanding of what happens in therapy.

Psychology Central (Paper #335)
Thursday 10 October 2013 – 11:30am (Meeting Room 7) & Friday 11 October 2013 – 9am (Meeting Room 7)
Psychology & Behavioral Sciences Collection – stay current with the latest research!
HARSIC, A. (EBSCO Information Services)
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Stay current with the latest research! In this session you will learn how to conduct effective literature searches in the Psychology & Behavioral Sciences Collection (PBSC) journals database, and create alerts to monitor topics. Learn power searching techniques to retrieve highly relevant content, utilising keywords and subject headings. Also covered will be how to use tools to work with search results, including: saving to your personal folder, printing, citing and emailing results. Browse key journals, and create alerts for the latest issues. Get the most from your APS membership access to the world's largest full-text psychology database.

Poster Presentation (Paper #172)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Sequence model of change: Processing painful or traumatic experienced in Process-Experiential/Emotion-Focused Therapy
HARTE, M. (La Trobe University)
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This study was designed to investigate change processes by developing an understanding of how change occurs in therapy. The four expanded single cases employed took an interpretive approach to examining client change and its causes by seeking client and therapist viewpoints. Multiple sources of qualitative and quantitative evidence were used. These included established quantitative instruments, assessment of the client's perspective, using Change Interviews, and careful observation of the therapeutic work with the four young women in twelve-counselling sessions in a naturalistic setting. This study was conducted within a participatory and collaborative approach. A thematic analysis of the qualitative data elicited propositions about the changes that occurred as a result of therapy from the four young women's perspectives. The marker for the task of focusing, typically used for processing an unclear felt sense

was expanded to include the reprocessing of painful or traumatic events. Once a traumatic memory was accessed within a focusing task via bodily felt-sense in conjunction with emotional arousal and activation of other schematic elements, it was possible to reprocess the event in such a way that the person was no longer plagued by the painful aspects of it and is not retraumatised by the re-remembering that often occurs when asked to retell her story. Once she was able to express the appropriate primary emotion and articulate her needs within the remembered experience, the associated painful emotional charge was lessened. The event is remembered as having occurred but the emotional intensity was greatly reduced. This reprocessing of the traumatic event is more than a desensitising of that traumatic experience. The results from this study propose an alternative safe method of processing painful or traumatic events by expanding the focusing task within the PE-EFT framework.

Poster Presentation (Paper #31)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
Comparing the effectiveness of social skills training and stress management on self-esteem and aggression
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Having a good self-esteem is a basic human need and that is what we are working steadily to achieve it. However, some people never reach a notion that they feel comfortable with their lives and live with distress and torment forever because they feel failure. Stress management training is a treatment program that has been created for people with stress caused by chronic and severe physical diseases; it is a combined program of relaxation techniques and cognitive behavioral techniques. The aim of this study is to compare the effectiveness of social skills training and stress management training on self -esteem and aggression in first grade high school students. 45 people were selected from research community and were put randomly in three groups of social Skills training, stress management training and control ones. The tools of collecting data in this study were Cooper smith`s self- esteem and AGQ aggression questionnaire. Self-esteem and aggression questionnaires have been conducted as the pre-test and post-test. Social skills training and stress management groups participated in eight 1.5 hour sessions in a week but control group didn`t receive any therapy. For descriptive analysis of data, statistical indicators like mean and standard deviation were used, and in inferential statistics level multi variable covariance analysis has been used. The reason of success of stress management than social skills training on aggression is the comprehensiveness and breadth of this training. Awareness of the pattern of response, awareness of the dynamics of power in the position, knowledge of internal and external factors of anger, like self-learning process and strategies to reduce automated anger, such as exercise, expression, to cool down or relaxation (e .g, wait for a better time), information searching, neutralization (such as advice) all can be effective in reducing children's anger.

Individual Research Paper (Paper #191)
Thursday 10 October 2013 — 11:40am (Meeting Room 3 and 4)
Adoption — past; impacts — current: Meeting the psychological needs of those affected by forced adoption and the practices from the period of closed adoption in Australia
HIGGINS, D. (Australian Institute of Family Studies), & KENNY, P. (Australian Institute of Family Studies)
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On 21 March 2013, the Prime Minister of Australia delivered the National Apology for Forced Adoption. The government announced funds to improve access to specialist support and records tracing for those affected by forced adoptions (working with the states and territories to improve these services) and to help mental health professionals

better assist in caring for those affected by forced adoption. To effectively respond requires an intimate understanding of past practices, and the current needs of individuals affected. The Australian Institute of Family Studies conducted a national research study on the service response to past adoption practices. We examined the extent and effects of closed adoptions in Australia, to strengthen the evidence available to governments and service providers to address the current needs of those affected. Over 1500 participants (representing mothers and fathers separated from children by adoption, adopted individuals, adoptive parents and wider family members, as well as professionals working in post adoption support roles and broader health and welfare sectors) responded to online surveys, and more than 300 participated in face-to-face focus groups and interviews. The study results provide insight into the grief, loss and ongoing trauma associated with past practices, as well as information to assist in framing appropriate best practice models to meet the needs of those affected. Practice models recommended by study participants to effectively respond to affected individuals are outlined. The key needs identified by the study included: acknowledgement, recognition and increased community awareness of and education; specialised workforce training and development for health and welfare professionals; development of improved service models specific to past adoption experiences; improved access to information; improved access to and assistance with costs for mental, behavioural and physical health services; and ensuring that lessons from past practices are learned from and translated where appropriate into current child welfare policies. The findings suggest significant workforce development implications, including the need for more informed and collaborative responses across and within health and welfare sectors. The study, and the National Apology, highlight the trauma that many individuals and family experience, and the opportunities for the psychology profession to respond proactively.

Symposium (Paper #212)
Friday 11 October 2013 – 8:30am (Hall D)
APS Conference Symposium: What's new in KidsMatter?

Convenor: Dr Lyn O'Grady

KidsMatter is a mental health prevention, promotion and early intervention initiative for early childhood education and care services and primary schools.   KidsMatter aims to improve the mental health of children, decrease mental health difficulties in early childhood and achieve greater support for children experiencing mental health difficulties. KidsMatter is developed and delivered in collaboration with the education sector - the role of the APS is in researching and developing a range of resources that can support the mental health and wellbeing of children. This symposium looks at three recent developments in the KidsMatter initiative: the formal evaluation of KidsMatter Early Childhood, Starting School and engaging through e-learning.

Presentation 2
KidsMatter Early Childhood: Evaluation
VASILEVSKI, V. (Australian Psychological Society), TRANTER, D. (Australian Psychological Society);
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KidsMatter Early Childhood was specifically adapted for Australian early childhood education and care (ECEC) services and evaluated by a team of researchers from Flinders University, examining its impact on ECEC services, children, educators and families. Over 110 ECEC services across Australia participated in the two year pilot phase of the initiative. Services were provided with a comprehensive framework of evidence based strategies to support their role in mental health promotion, prevention and early intervention. This was delivered through a structured and supported process for implementing KidsMatter, involving professional learning and guidance for educators. Educators and families of 11,224 children were surveyed over the pilot period.

Standardised measures examined children's mental health strengths and difficulties, temperament, and educator- child relationship quality. Data was also collected using surveys and feedback forms and qualitative data was obtained using a photo voice. Associations between implementation quality and ECEC services' capacity to achieve positive outcomes for children's mental health were also examined.

The evaluation showed that approximately one in six children with mental health difficulties at the beginning of the initiative were no longer experiencing difficulties at the end of the pilot. Families reported a greater capacity to support their children's mental health and become involved at their children's ECEC service. There were significant increases in educators' knowledge about children's mental health, confidence and competence in supporting children's social and emotional development and responding to children with difficulties. Many of these outcomes however were influenced by implementation quality. This paper will discuss the evaluation findings of significant outcomes for children's mental health, particularly for those most at risk; the capacity of families and educators to support children's mental health and the utility of the KidsMatter framework in delivering a mental health initiative.

Presentation 3
Starting School – Supporting children, families and educators with the transition
HIRST, M. (Australian Psychological Society)
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Starting school is an important developmental milestone for a young child. Research and literature has shown that a successful transition to school can be highly beneficial to children's social, emotional, and academic success. A positive experience to starting primary school has long term benefits for future learning, relationships and navigating other transitions. Regardless of experiences prior to commencing school, children often need support with the transition process. Early Childhood and Care (ECEC) services, schools, and families are in a key position to provide support to children. KidsMatter previously developed several evidence based resources for school staff to use with families to support the transition: This consisted of interactive presentations delivered within a four session format, both prior to and after school commenced. This material is currently being redeveloped into a series of engaging films, free to download from the KidsMatter website. This format will enable early childhood educators and school staff and to use materials in a flexible manner with families alongside their existing transition activities and programs. As the films will be available on the KidsMatter website, families can access whenever needed. Literature highlights the central importance of positive relationships in making the transition to school. The KidsMatter resources are designed to support families, ECEC services and schools to build these positive relationships and work together. The resources and their applicability to families, ECEC services and schools will be discussed.

Presentation 4
Engaging through e-learning
TRANTER, D. (Australian Psychological Society); HIRST, M. (Australian Psychological Society); VASILEVSKI, V. (Australian Psychological Society)
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KidsMatter is investing in e-learning to increase the accessibility and sustainability of the initiative. There are two main projects underway: redeveloping a section of KidsMatter Early Childhood concerned with developing children's social and emotional skills and new resources to support ECEC services and school to work with families. Both of these developments depend on e-learning for their delivery and implementation. The use of e-learning for professional development is a growing field; it offers additional options for people to gain information, learn skills and increase their knowledge. The format of e-learning provides flexibility is terms of access, timing and pacing – this is ideal for ECEC

services and schools in addressing issues such as access, release time and cost. As with all learning, this is most likely to be successful when built upon a foundation of an established relationship.   This relationship enables enquiry, shared thinking and reflective discussion.   KidsMatter is incorporating these key aspects into an online learning experience that supports children's mental health and wellbeing. To support ECEC services and schools to work with families, the emphasis of the e-learning is to enhance skills that underpin families, early childhood educators and school staff working in partnership. Research suggests that some early childhood educators and school staff lack confidence in engaging with family members; yet children whose parents are involved in their education possess greater skills in social and emotional domains. With this in mind, KidsMatter is developing resources for educators to support effective engagement with families. KidsMatter Early Childhood is currently developing a self-directed, group learning experience completed over a series of modules. This aims to develop educators understanding of children's social and emotional skills, the importance of relationships in supporting children's mental health and assist educators to make connections with practice.   An outline of the e-learning projects, resources and preliminary learnings will be presented and some of the challenges will be discussed.

Individual Research Paper (Paper #234)
Thursday 10 October 2013 – 1:00pm (Meeting Room 1)
Mental health impact of military service – working to meeting the needs of contemporary veterans
HODSON, S. (Department of Veterans' Affairs)
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Posttraumatic Stress Disorder is perceived by the public as the signature illness of combat or war related traumatic incidents, however there are a range of other disorders that psychologists need to be aware of when dealing with veteran clients. This presentation will summarise the growing body of knowledge about the mental health impacts of military service on military personnel. Importantly, it will propose the need to understand the occupational exposures of military service to ensure that mental health treatment and services are tailored to meet the needs of veterans. Mental health conditions resulting from military service, especially for individuals exposed to combat conditions, are rarely single traumatic events but can be the result of exposure to a range of stressors over the service career. It is important that the resulting mental health conditions are understood in relation to the military occupational environment. With the imminent drawdown of troops from Afghanistan, DVA faces some unique challenges to respond to the mental health needs of contemporary veterans. DVA is currently developing a strategic policy and suite of responses to meet this emerging need so that it can continue to both provide and purchase quality mental health care. This continuum of support needs to meet the unique aspects and challenges of dealing with military mental health issues and ranges from self help resources accessible from the 'At Ease' website, individual counselling with providers, through to access to tertiary level PTSD treatment programs.

Poster Presentation (Paper #238)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Responding to identified knowledge gaps in secondary mental health workers
HODSON, S. (Department of Veterans' Affairs), CONNOLLY, K. (Department of Veterans' Affairs), ADAMS, T. (Department of Veterans' Affairs) & COUINEAU, A. (Australian Centre for Posttraumatic Mental Health)
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This presentation outlines the approach taken by the Department of Veterans' Affairs (DVA) in response to research indicating a lack of access to veteran-specific resources and information impeding changes in clinical practice by secondary mental health workers. DVA is committed to ensuring that veterans and their families have access to

timely, effective, high quality treatment for mental health problems. Encouraging the development of appropriate competencies among secondary care providers is an important strategy to improve access to evidence-based best practice for veterans in the community. The *Training for Secondary Mental Health Workers Initiative* was initiated in partnership with the Australian Centre for Posttraumatic Mental Health. In 2009, the need to enhance the competency of community based mental health practitioners in providing veterans with evidence-based interventions for common mental health problems, was identified through research associated with this initiative. This initiative sought to increase the competency of secondary care providers delivering community based treatment for veterans through a two-phase project. Firstly, a scoping phase defined core competencies required to deliver evidence-based treatments for mental health problems common for veterans, and identified competency gaps among providers who deliver those treatments. The second phase involved the design and delivery of training to address those gaps using a case formulation approach through a 9-month learning collaborative training and implementation model. The initiative not only increased the competencies of those who participated in the training, but provided DVA with an indication of the knowledge gaps in the sector. This presentation will outline DVA's approach to supporting providers treating our clients, seeking to increase the confidence and ability particularly of new providers to manage complex veteran cases. This approach has involved the development of online training modules, a clearing house for evidence-based resources and research relevant to the treatment of veterans, and other clinical resources.

Individual Research Paper (Paper #240)
Thursday 10 October 2013 – 1:20pm (Meeting Room 1)
Development of an alcohol management mobile application to respond to binge drinking amongst young serving ADF personnel

HODSON, S. (Department of Veterans' Affairs), **CONNOLLY, K.** (Department of Veterans' Affairs), RIGNEY, C. (Department of Veterans' Affairs), & O'SULLIVAN, R. (Department of Veterans' Affairs)
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ON TRACK with The Right Mix is a mobile application (app) developed in response to findings of the *2010 Australian Defence Force Mental Health Prevalence and Wellbeing Study* relating to alcohol misuse among serving ADF personnel. It is designed to assist current and former serving members manage their alcohol consumption. This presentation offers an insight to using new technology to respond to alcohol misuse behaviour in a serving military environment. In 2001, the Department of Veterans' Affairs (DVA) released *The Right Mix – Your Health and Alcohol*: a suite of resources to reduce alcohol-related harm in the veteran community. *The Right Mix* was developed in response to the *1998 Vietnam Veteran Morbidity Study* which indicated a high level of alcohol disorder amongst this cohort and since then has proven to be a successful vehicle through which to educate Vietnam veterans about healthy drinking behaviours. Self-report data from the *2010 Australian Defence Force Prevalence and Wellbeing Study* showed high levels of harmful alcohol use, indicating binge drinking amongst serving members. Alcohol use in this setting was not as readily translated to disorder, however where there was disorder, it was in males in the 18-27 age group. DVA partnered with the Department of Defence to respond to this research and use new technology to deliver *The Right Mix* messages of healthy drinking to a new generation of veterans and serving members. The presentation outlines DVA's approach to identifying the motivations for young serving members to actively manage their alcohol consumption, the development of a technological response to these motivations and a demonstration the *On TRACK* app. The app is designed for self-management and as a tool to be used in a clinical setting. Following the app's release to market on 18 March 2013, DVA is monitoring uptake to inform future improvements.

Wednesday 9 October 2013 – 5:30pm (Hall 2)
Youths' motivation for higher education in the context of Macao

HOI, K. & VAN SCHALKWYK, G.J. (University of Macao)
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Macao has positioned itself clearly as a city of tourism and its economy largely relies on the gaming industry. Since the abandonment of the monopoly on gaming licenses in 2004, there has been a vast development of casinos opening up a large number of job opportunities with comparatively high wages while not requiring high education levels. The statistics show that a bachelor-degree holder may only earn marginally more per month than a senior-secondary graduate. It seems that Macao youths do not value education as much as other alternatives (e.g., fast money). The current study explored the motivation and decisions of first-year students to go to university and the possible role that the socioeconomic and cultural context of Macao could play in their career vision. Particularly, the study aimed to describe the meanings and value of education from the youths' perspective in this Special Administration Region of China. Given the phenomenological nature of the study, eight focus groups were conducted with first-year students. Interpretive phenomenological analysis was employed for identifying the themes, which we explain within the explanatory framework of Super and Harkness' Developmental Niche Model. In this regard, themes emerged pertaining to the informants' decision-making process and the role of personal values attached to education, involvement of peers and family, socioeconomic circumstances, and the social beliefs or culture. The findings implicate that in the Macao culture youths may resemble the Western culture in terms of the degree of autonomy in making career decisions. Their beliefs about the value of education are strong reference points for future promotion in their jobs, while the ascribed meanings of going to university and experiences at university may serve as references for high-school seniors considering further education and career planning. Despite regarding education as a foundation for future career life, participants also highlighted the importance of connectivity and social networking (e.g., Guan Xi) as well as luck, which accentuate the sustainability of the Chinese culture in the decision-making process. The implications of the findings, providing support for the Macao culture as being a mixture of Western and Chinese cultures, will be discussed in view of educational planning and policy making.

Friday 11 October 2013 – 9:10am (Meeting Room 3 and 4)
Poor sleep worsens pessimism but it takes an optimist to sleep well

HUI, C.H. (University of Hong Kong), LAU, Y.Y. (University of Hong Kong), LAM, J. (University of Hong Kong), CHEUNG, S.F. (University of Macau), & MOK, S.Y. (University of Macau)
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Does people's quality of sleep affect their optimistic/pessimistic way of looking at the world, or is quality of sleep actually the result of belief in optimism/pessimism? Although research shows a correlation between pessimism and depressive symptoms, and also between depressive symptoms and poor sleep quality, causality cannot be inferred. This is mainly due to their cross-sectional design. In fact, most previous studies treated sleep as an outcome variable instead of a precursor. The present longitudinal study aimed to determine the direction of causality among sleep quality, optimism, and pessimism. A total of 944 individuals (mean age = 25, 35% male, 89% single) completed the Pittsburgh Sleep Quality Index and an attributional style questionnaire that measures optimism and pessimism, at two time points separated by a year. Full information maximum likelihood was applied to handle missing data. Results showed that sleep quality, optimism, and pessimism were relatively stable across T1 and T2. The two more important, substantive findings from our cross-lagged structural equation modeling are: (1) poor sleep quality was a precursor of pessimism, not the other way round; and (2)

optimism led to good sleep quality, and not the other way round. The first causal relationship can be explained in terms of several pathways. First, poor sleep impairs cognitive functions (such as problem-solving), which leads to constant frustration and an eventual pessimistic outlook in life. Second, poor sleep results in daytime sleepiness and listlessness, which in turn lower a person's motivation to overcome difficulties, hence leading to a pessimistic style. Third, sleep itself could become a chronic problem of its own that causes one to give up hope. The second causal relationship could be traced to the optimistic people having better mood and less worry about sleep itself as well as other things in life, all factors contributing to good sleep. These mechanisms are to be ascertained in future studies.

Individual Research Paper (Paper #20)
Friday 11 October 2013 – 8:50am (Meeting Room 2)
Utility of a brief selection device into an accredited undergraduate program in the private HEP sector: Evidence of reliability and predictive validity
INNES, J.M. (Australian College of Applied Psychology), & WILKES, F.J. (Murdoch University)
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What can predict performance in the initial years of study in higher education? The issues of student engagement, retention and performance are all matters receiving urgent attention in the competitive climate of contemporary university education. The value of the ATAR score is increasingly being questioned and the role of the means whereby students can be engaged in the discipline as soon as possible in the initial semester is seen as being of higher importance. Within the private sector of the higher education industry there is the added concern that the providers are seen to be adding value to the education of the fee paying students that they recruit and are not seen merely to be attracting students as a revenue stream. At the Australian College of Applied Psychology where an accredited psychology undergraduate program was established three years ago, efforts were made to measure the extent to which the abilities and motivation of incoming students could be used to predict their later performance. Psychology as a discipline can attract fairly large numbers of undergraduates who are unaware of the scientific nature of the discipline and who can become quickly disenchanted with study when exposed to the rigours of an evidence based discipline. This paper reports on the reliability of a system to assess the motivation of applicants to study the discipline of psychology and their understanding of the nature of the science of psychology. Data are reported on the reliability of the rating of written statements provided by intending students and of their later performance in a telephone based interview. Data are also provided to demonstrate the validity of the measures to predict later performance in psychology and also in parallel non-psychology electives in the program. Of most interest, perhaps, the data show that the measures had a filtering effect upon applicants, deterring some students who had poor understanding of the nature of psychology and thereby enhancing the retention rate in the first year of study.

How To Session (Paper #187)
Wednesday 9 October 2013 – 3:15pm (Meeting Room 2)
Conducting comprehensive cognitive assessments: Cattell-Horn-Carroll theory and the cross-battery assessment approach
JACOBS, K. (Monash University), & **WATT, D.** (Monash University)
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Learning difficulties experienced at school that are not dealt with effectively place a child at risk of developing a myriad of mental health problems such as disruptive behaviours at school, social difficulties, low self-esteem and depression. It is therefore vital that the cognitive reasons behind learning difficulties are accurately identified, enabling the provision of individualised interventions that can effectively ameliorate presenting

concerns. Accurate diagnosis is dependent on the integration of multiple sources of data being driven and informed by current theory. The Cross-Battery Assessment approach to cognitive assessment assists practitioners in conducting valid and reliable comprehensive cognitive assessments by providing a series of psychometrically defensible guidelines that enables the effective integration of results from multiple test batteries. The cross-battery approach is based on the extensively validated cognitive theory of Cattell-Horn-Carroll (CHC) which has greatly expanded understanding regarding the full range of specific cognitive abilities important for academic achievement. Key learning outcomes for participants will include the ability to: (1) define CHC theory and recognise the multiple abilities contained within the model, (2) classify a range of different intelligence test batteries according to the CHC abilities they measure, (3) identify the CHC abilities important for literacy and numeracy acquisition, (4) define cross-battery assessment, and (5) apply a cross-battery assessment as per the guidelines. These outcomes will thus provide practitioners with the level of competency required for incorporating cross-battery assessment into their own practice. Participants will be provided with practical case studies and expected to analyse the information using the cross-battery technique. Participants are expected to possess prior knowledge regarding major intelligence test batteries, such as the Wechsler scales. A copy of the presentation slides will be provided to all participants along with additional handouts containing greater explication regarding key aspects of the cross-battery approach. Further, a list of resources useful for incorporating cross-battery assessment into one's own practice will be provided.

Professional Practice Forum (Paper #330)
Friday 11 October 2013 - 10.30am (Plenary Hall A and B)
The Psychological Workforce: Impending major changes impacting on all of us
LITTLEFIELD, L. (Australian Psychological Society)

This Forum will deliver important information on impending health workforce changes which will affect all practising psychologists. It will cover reforms led by Health Workforce Australia, including a focus on generalist practice, increased scopes of practice, and the introduction of new mental health workforces. The various movements to promote changes to psychological practice, including Better Access and ATAPS, as well as changes to provision of psychological services in primary care, including Partners In Recovery, and the role of Medicare Locals will be outlined. The implications for future funding of psychological services and predictions of challenges that need to be faced will be discussed.

The part that psychologists will play in the mental health workforce of the future will be outlined along with recent data on the psychology workforce that will possibly be used to recommend changes to psychology education. We are facing extremely important changes to the way we will need to work with other professions to serve the community in the future and it is important that we are all aware of the coming reforms which will apply to the profession and practice of psychology.

The challenges and opportunities for psychologists and the delivery of psychological services within the context of these health reforms will be explored, with the opportunity for questions and more detailed discussion of specific areas of interest.

Individual Research Paper (Paper #38)
Wednesday 9 October 2013 — 3:15pm (Hall D)
The effects of repeated checking and repeated stimulus use on memory and meta-memory in obsessive-compulsive checking
MEDWAY, M. (The University of Sydney), & JONES, M.K. (The University of Sydney)
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Researchers have suggested that distrust in one's memory is both a cause and a consequence of repeated checking (van den Hout & Kindt, 2003a, 2003b). This may be due to a shift from bottom-up to top-down processing of visual information as checking progresses, resulting in reduced memory clarity and confidence (Van den Hout & Kindt, 2003b). As such, reduced clarity and confidence may also occur with any increased object familiarity. Additionally, while previous research suggests repeated checking rituals are self-perpetuating, it is unclear what effect repeated checking has on memory confidence when an object is reencountered after a delay. It was investigated whether reduced clarity and confidence occurs to an equal degree with repeated object use and repeated checking. In addition, we examined whether decreased memory confidence persists after a delay. The sample consisted of 113 (32 male) first year undergraduate students. Participants completed self-report instruments and the computerised stovetop task (van den Hout & Kindt, 2003b) during which they either repeatedly checked (n = 57) or repeatedly used (n = 56) the virtual stove (the experimental stimulus), or virtual light bulb stimulus (the control stimulus). Memory accuracy, confidence, vividness and detail were measured at two time points. A subset of participants (n = 59) completed a follow-up trial and assessment after a delay in which they engaged in a reading-comprehension filler task. Significant declines in memory accuracy, confidence, vividness and detail were observed, and were significantly greater for the experimental than the control stimulus. No significant differences in these effects between the checking and use conditions were found. Memory confidence at follow-up was found to be significantly higher than at pre-test but not significantly different to at post-test. These findings provide further support that repeated checking can be self-perpetuating due to its impact on memory processes, and suggest that checking is not necessary for these effects to occur, since repeated use also results in significant declines in memory accuracy, confidence, vividness and detail. Further, results suggest reduced memory confidence persists after a delay, while accuracy is restored. Theoretical and clinical implications are discussed.

Professional Practice Forum (Paper #258)
Friday 11 October 2013 — 2:00pm (Hall D)
Revisiting psychological disorders: The implications of DSM-5
KAVANAGH, D. (Queensland University of Technology), **KYRIOS, M.** (Swinburne University of Technology), & **BLYTHE, J.** (University Of Western Sydney)
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The long awaited DSM-5 has caused considerable controversy with significant changes from DSM-IV in some areas. This latest review of DSM has had unprecedented public input and discussion. Some of the changes have challenged long standing beliefs about specific diagnostic categories and have led to heated public debate leaving many psychologists concerned about what the changes will mean for their practice. This forum will provide a summary of the major changes and a broader discussion of classification systems such as DSM and ICD and their strengths and weaknesses, as well as touching on alternative models to diagnostic categories. For a number of diagnostic categories the changes are considerable and are likely to have widespread implications. This forum will focus on diagnostic categories for which there is considerable change, providing an overview of these changes and the implications of these for practitioners, researchers and individuals with particular disorders and their carers.

Psychology Central (Paper #334)
Thursday 10 October 2013 – 2:00pm (Meeting Room 7)
Insurance 101
KEEGAN, E. (AON Risk Services Australia)

Professional Indemnity insurance is most relevant when a claim arises. We'll walk through claims experiences and touch on how and where you can use the free legal advice service – and when you should be advising your insurance broker. Emma Keegan, Aon Client Manager servicing APS will lead this discussion.

Individual Research Paper (Paper #230)
Friday 11 October 2013 – 10:50am (Meeting Room 1)
Memories of good and bad across development
KIM, J.H. (Florey Department of Neuroscience and Mental Health, University of Melbourne)

Reward-seeking and fear-avoidance are necessary emotions that serve to protect one from danger. However, mental disorders can emerge when these feelings become pervasive and interfere with normal functioning. In fact, the latest figures from the Australian Bureau of Statistics (2007) indicate that ~1 in 4 Australians suffer from a clinically diagnosed anxiety disorder or substance abuse at least once in their lifetime. Although the cause(s) of these disorders still debated, it is widely agreed that childhood and adolescence are particular periods of vulnerability. Both anxiety disorders and substance abuse are at least partly characterized by persistence in related memories formed throughout development. However, in empirical studies the neurobiology and neurochemistry underlying reward-seeking and fear across development has largely been neglected. In the past few years, we have collected and published a substantial body of work that report striking differences in how good (i.e., drug experience) and bad (i.e., fearful experience) memories are inhibited differently using rodent models. Specifically, we have used the concept of extinction, which forms the basis of the most effective treatments for these disorders in humans. Extinction is a new inhibitory learning rather than erasure, at least in adults, and many studies have shown that extinguished responses can spontaneously recover (e.g., relapse post-treatment). However, juvenile rats show fundamental differences in the extinction processes across development. Specifically, postnatal day (P) 17 rats (infant/juvenile), in contrast to P24 rats (pre-adolescent), fail to show either renewal or reinstatement following extinction of learned fear, suggesting that extinction is effectively erasure in P17 rats. These findings are accompanied by an array of neurochemical differences. Most recently, we have extended research to the adolescent age. It was observed that adolescent and adult rats express identical fear conditioning or cocaine self-administration and extinction of those behaviours. When tested the next day, however, adolescent rats showed almost complete failure to show long-term extinction compared to adult rats. Extinction appears more effective early in life, and then there is a 'developmental lull' in proficient extinction during adolescence, as opposed to a more linear progressive emergence as a function of age.

Individual Research Paper (Paper #63)
Thursday 10 October 2013 – 11:30am (Hall C)
Skill building workshops for carers of eating disordered individuals: Replication and extension
KING, R.M. (Deakin University), & PEPIN, G. (Deakin University)
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Eating disorders such as anorexia and bulimia are serious chronic illnesses with significant physical, psychological, and social impacts. Given their typical onset in adolescence, sufferers rely heavily upon parents for assistance with their recovery and treatment. Consequently, caring for an individual an eating disorder has been

consistently shown to be associated with significant burden. Given this, interventions that assist carers to develop skills to effectively support their loved one's recovery and alleviate their distress are needed. Based on a comprehensive model of carer coping, Treasure et al. (2007) developed a six session skill-building workshop designed to improve carers' coping skills, reduce distress, alter maladaptive expressed emotion communication patterns and teach basic motivational interviewing skills to bolster readiness to change in the sufferer. Investigations in the UK by Sepulveda and associates (2008; 2010) showed the workshops significantly reduced carer distress, levels of expressed emotion, perceived negative impact of caring, and the perceived impact of the eating disorder symptoms on themselves. The current study aimed to replicate these findings in an Australian setting and to extend this examination to the workshops' impact on carer adaptive and maladaptive coping strategies, perceived family conflict, and accommodation and enabling of their loved one's eating disorder behaviour. Sixty-two carers attended the workshops in Victoria, Australia and completed questionnaires at pre-and post-intervention and eight weeks follow-up. Significant reductions occurred in carers' reported distress, eating disorder specific burden, expressed emotion, maladaptive coping, and accommodation and enabling of eating disorder behaviour, as well as increased carer confidence that their loved one could change. These observed changes were maintained at follow-up. Therefore, the intervention is effective in not only in addressing carer distress and burden but also in reducing factors associated with maintenance of eating disorders.

Poster Presentation (Paper #96)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Suicidality in Macao: Predictive and protective themes in the collage life-story elicitation technique
KONYVES-KOLONICS, E., & VAN SCHALKWYK, G.J. (University of Macau)
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Suicide rates in China are amongst the highest in the world and the leading cause of death for people between the ages of 15-34. It is currently estimated as the 5th cause of death in general in the country. Although suicide has been extensively studied globally there has not been much research conducted in Macao pertaining this social issue. Macao is one of the Special Administrative Regions (SAR) of China with the population of approximately 568,000. The purpose of this qualitative study was to explore potential life stressors leading to suicidal behaviour and potential protective strategies for suicidality among youths in Macao. Utilising the Collage Life-story Elicitation Technique (CLET), we interviewed youths between the age of 18 and 22 and of Chinese ethnicity. As an innovative and auto-ethnographic technique the CLET aims to elicit autobiographical remembering and narrative performance through collage-making, storytelling, positioning of the self and juxtaposing of dynamic conflicts. The study focused on the central question: *What are the life stressors among youths in Macao that could endanger them for suicidal behaviour?* Additionally we prompted participants concerning protective strategies that could help prevent suicidality. Although the findings cannot be generalised and taken only as potential indicators of life stressors and protective strategies in the context of Macao, themes related to adjustment issues for Mainland youths studying in Macao and thwarted belongingness emerged from the interpretive phenomenological analysis. Separation from friends and family, relationship issues and academic stressors also emerged as possible life stressors leading to suicidality. Social support from friends and family, and a need for accessible counselling services emerged as potential protective strategies. The benefits of the findings for developing an indigenous prevention programme for Chinese youths will be discussed.

How To Session (Paper #278)
Thursday 10 October 2013 – 10:30am (Hall D)
Case formulation in chronic pain: Managing clinical complexity to maximise treatment outcomes
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Chronic pain is a highly prevalent health condition, affecting one in five Australians. Treatment guidelines recommend targeting psychosocial factors with a view to reducing disability. However, in more complex cases, this task is overwhelming. How do you work with a patient who is distressed and disengaged? What do you do when treatment is going nowhere? In addition to exploring these and other practical concerns, this session offers a framework for conceptualising and managing psychosocial barriers to maximise treatment outcomes for clinically complex pain patients. Delegates will acquire practical skills in treatment planning and confidence in advocating to medical practitioners, funding bodies and other stakeholders regarding patient needs. Some experience and/or interest in the treatment of chronic pain is recommended. Learning materials include printed material, assessment tools, case studies and reference to current treatment literature.

Individual Research Paper (Paper #121)
Thursday 10 October 2013 – 10:50am (Meeting Room 2)
Depression and falls in older adults: Mediating factors
KVELDE, T. (Prince of Wales Hospital; Neuroscience Research Australia; Macquarie University), CLOSE, J. (Neuroscience Research Australia; Prince of Wales Clinical School, UNSW), LORD, S. (Neuroscience Research Australia), HOMEWOOD, J. (Macquarie University), & DELBAERE, K. (Neuroscience Research Australia)
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Depression and falls are both common in older people and are a major cause of death and morbidity. A systematic literature review and meta-analysis was undertaken to confirm the relationship between depressive symptoms and falls in older people. Two empirical studies were then undertaken using logistic regression to test a model proposing that the relationship between self-reported depressed mood and prospective falls would be mediated by physiological performance and cognitive ability. The findings confirmed that executive functioning and physiological performance including balance and strength, mediate the relationship between falls and depressive symptoms. Depressive symptoms are a potentially reversible risk factor for falls in older people and it is recommended that this be considered when designing and implementing falls reduction programs.

Individual Research Paper (Paper #292)
Friday 11 October 2013 – 2:40pm (Meeting Room 3 and 4)
Trajectories of psychological distress among formerly homeless men: The contribution of alcohol dependence and relationship satisfaction
CONROY, E. (University of Western Sydney), LACEY, D. (University of Western Sydney), BURNS, L. (University of New South Wales), & FLATAU, P. (University of Western Australia)
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Introduction: The high levels of psychological distress found among homeless persons are often linked to the high prevalence of mental disorder in this population. Psychological distress may also be a result of the circumstance of being homeless; it follows therefore that levels of psychological distress could be expected to decrease with the provision of housing. Previous research however suggests the positive effect of housing on psychological distress is less pronounced for individuals with a substance use disorder compared to individuals with no disorder. This has implications for the type and

intensity of support provided to homeless persons housed through supported housing models.

Aims: 1. To measure change in psychological distress among chronically homeless men during their first year of being housed; 2. To test whether differences in psychological distress are associated with alcohol dependence and relationship satisfaction.

Method: Participants were n=75 chronically homeless men who accepted permanent housing and case management support as part of a 'housing first' model in Sydney. Participants were surveyed upon entry to the service and at 6, 12, 18 and 24 months follow-up. Psychological distress was measured with the Kessler 10; alcohol dependence with the Severity of Dependence Scale; relationship satisfaction was measured using a single dichotomous item.

Results: Psychological distress was highly prevalent with 40% of participants scoring in the high/very high range at baseline. Preliminary analysis was conducted on the first 12 months of data. Data were analysed using individual growth curve modeling with maximum likelihood estimation. Although the initial individual starting points were significantly different, there was a non-significant gradual decrease in linear growth ($\beta=-.03$, SE=.02, *p*=.18). Psychological distress at baseline was significantly associated with alcohol dependence and low satisfaction with personal relationships.

Conclusion: The finding that trajectories of psychological distress did not significantly decline despite being housed suggests there are other factors maintaining distress in this sample; analysis of the role of alcohol dependence and relationship satisfaction was limited due to the availability of only 3 waves of data. Additionally, 12 months may not be of sufficient duration to observe positive changes in psychological distress given the men's extensive homelessness histories.

Poster Presentation (Paper #140)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Parent and teacher ratings of adaptive and challenging behaviours in young children with autism spectrum disorders

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Although it might be expected that parents and teachers would establish similar assessments of a child's behaviour, this is often not the case. This study's aim was to examine the correspondence of parent and teacher ratings of adaptive and challenging behaviours for children with autism spectrum disorders (ASDs) enrolled in an early intervention program. Ratings were compared for the Behavior Assessment System for Children, second edition (BASC-2; *n* = 22), and Vineland Adaptive Behavior Scales, second edition (VABS-II; *n* = 28), which are common assessment tools for measuring progress over time that thus require accuracy. Results showed that adaptive behaviour ratings generally demonstrated high parent-teacher correlations, but challenging behaviour ratings demonstrated relatively low correlations. Only adaptive skills on the BASC-2 showed significant mean parent-teacher differences, with parent ratings suggesting greater impairment. Although statistical power limits the conclusions, results suggest that adaptive behaviours are elicited across situations and interpreted by parents and teachers relatively consistently. In contrast, challenging behaviours, particularly attention problems and hyperactivity, may be more situation-driven or susceptible to different interpretations. This suggests that clinicians should consider gaining both parent and teacher perspectives on a child with ASD's challenging behaviour, but that a single informant measure of adaptive behaviour, either parent or teacher, may be sufficient.

How To Session (Paper #124)
Wednesday 9 October 2013 – 1:15pm (Meeting Room 2)
Bringing positive psychology to life in your practice
LANGLEY, S. (Emotional Intelligence Worldwide)
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Positive psychology arose to redress psychology's traditional focus on deficit and pathology by turning attention to the science and application of strengths and wellbeing (Seligman & Csikszentmihalyi 2000). With over a decade of research linking theory and practice, positive interventions are increasingly attractive to psychologists and practitioners. This interactive session is designed to give psychologists, coaches and facilitators practical strategies and tools that bring positive psychology to life. Sue Langley synthesises theory and research into simple applications and real world examples that make learning fun, energising, motivating and relevant. Exploring key elements of positive psychology, this session engages participants in interactive exercises to enhance positive emotion and engage strengths. Sue draws on the research, neuroscience and practical application of Broaden and Build Theory (Fredrickson 2001), her own studies into positive emotion and learning, and extensive experience building positive, strengths-based cultures using leading strengths tools, VIA (Peterson & Seligman 2004) and Realise2 (Linley 2008). By experiencing mood exercises using Sue's Inspire Action Cards, participants will learn quick, simple ways to engage individuals and groups around emotions and strengths to increase energy, awareness and positivity. They will also learn ten strategies for strengths spotting that can be adopted easily by clients with friends, family and colleagues for a positive multiplier effect. Participants will take away practical strategies and a handout packed with tips and resources they can immediately integrate into their practice.

Individual Research Paper (Paper #129)
Thursday 10 October 2013 – 1:20pm (Hall D)
Post-trauma growth in Middle Eastern refugees in Australia
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Processing of distress due to traumatic events can result either in psychopathology or personal growth or both, depending on socio-cultural and cognitive-emotional factors; however trauma research has given little emphasis to protective factors against mental disorders and the more commonly reported cases of psychological development in the aftermath of trauma. It was only recently that positive psychological and personal transformation following trauma - better known as posttraumatic growth (PTG) - has received much attention. The current study reports on the development of Arabic versions of scales used to assess both Posttraumatic Stress and Posttraumatic Growth. The study contrasts case worker and refugee self-assessments of growth, trauma symptoms and case management needs. The study provides Australian validations of both the Posttraumatic Growth Inventory and the Arabic version of the K-10, and as far as we know the first Arabic version of the Impact of Events Scale-Revised for adults.

Individual Research Paper (Paper #71)
Thursday 10 October 2013 – 1:00pm (Hall D)
Community attitudes toward refugee: A Northern Australian case
LI, W. (James Cook University), MILLER, D. (James Cook University), JOHNSON, H. (James Cook University), JACKSON, K. (James Cook University), ROOS, S. (James Cook University), & WAUGH, C. (James Cook University)
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Despite there being a marked increase in the number of refugees settling in northern Australia, there is little research into the attitudes held by the community toward

refugees. Past studies have suggested that prejudice reflects negative affect which is associated with out-groups. As individuals entering a different society, refugees are able to be conceptualised as an out-group, and so prejudicial attitudes towards them may be influenced by this status. Past research has also suggested that prejudice occurs both overtly and covertly. Overt or direct prejudice is known as classical prejudice, while covert or subtle prejudice is known as modern prejudice. While the two types of prejudice are highly correlated, they are distinguishable. Research has also consistently illustrated that symbolic and realistic threats can serve to predict prejudicial attitudes toward outgroups. By surveying the attitudes held by the communities in northern Australia, this paper investigates the relationship between symbolic and realistic threat and racial prejudice. A total of 200 participants took part in the survey which was comprised of the following scales: The 46-item questionnaire includes the following standardised scales: the Classical and Modern Racial Prejudice Scale, the Realistic and Symbolic Threat Scale and the Prejudicial Attitude Survey. Realistic and symbolic threats were highly correlated with each other and both were good predictors of general prejudicial attitudes. The perceptions of both realistic and symbolic threats predict prejudicial attitudes within the sample. Realistic threat, compared to symbolic threat, is a stronger predictor.

Professional Practice Forum (Paper #244)
Wednesday 9 October 2013 – 3:15pm (Plenary Hall A and B)
Ethical decision making: A framework to manage ethical dilemmas
LOVE, A. (Victoria University), **SYMONS, M.** (Australian Psychological Society), **METZER, J.** (University of South Australia), SHAW, E. (Private Practice), **HAMMOND, S.** (Australian Psychological Society) & **BEHNKE, S.** (American Psychological Association Ethics Office)
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There will be many situations throughout psychologists' professional lives that will require them to manage the uncertainty of not knowing what course of action to take while they think through the circumstances they are experiencing and plan for the most appropriate course of action. Some of these situations will involve ethical dilemmas. To assist APS members to navigate this difficult terrain by providing a tool that guides members' thinking, reflection, and consultation before decisions are made and implemented, the APS Ethics Committee has developed an Ethical Decision Making model which involves five key steps, each with several sub-criteria. Through using common practice dilemmas this presentation will illustrate how to identify when there is an ethical issue or dilemma present, and will explore how the model works in order to reach a satisfactory outcome. Engaging in group discussion participants will be encouraged to apply the model using examples from their own professional practice.

Poster Presentation (Paper #134)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Physical activity behaviour and role overload in mothers
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The experience of motherhood is commonly characterised by role overload and inability to find time and energy for adequate levels of physical activity (PA). Unfortunately, despite clear evidence that regular PA is linked to physical and psychological health, exercise and PA levels of women and mothers are low. In response to the limitations of previous research in this area, this current investigation aimed to explore PA behaviour, stage of PA behaviour change, and role overload in adult women with children in early childhood and middle childhood (early motherhood: Mother of a child less than six years, or as middle motherhood: Mother of a child aged 6 to 9 years and with no children under 6 years of age). Following ethical approval and informed consent 331 mothers (M_{age} = 35.5 years, SD = 6.8) over the age of 18 years with one or more children less than 14

years-of-age completed an on-line survey (85% completion rate). Results indicated that neither PA behaviour, $t(329) = .227$, $p = .820$, stages of physical activity change, $c^2(4) = 5.52$, $p = .340$, nor role overload, $t(329) = .635$, $p = .526$, significantly differed across motherhood groups. Role overload was significantly higher for mothers in the contemplation, planning, and action stages of PA than in the maintenance stage of change, $F(4, 326) = 5.06$, $p = .001$. However, role overload was only weakly, although significantly negatively correlated with PA, $r = -.184$, $p < .001$. While these findings do confirm that role overload is a factor associated with activity levels in mothers, the correlation analysis demonstrated that only less than 4% of a mother's PA is explained by her reported role overload. In conclusion, strategies focused upon reducing role overload or changing perceptions of role overload, have only limited potential to meaningfully increase PA in mothers.

Individual Research Paper (Paper #135)
Friday 11 October 2013 – 8:50am (Meeting Room 3 and 4)
Mental health practitioners' reported challenges to the prescription of exercise for mental Health in Australia and New Zealand

LOVELL, G.P., & KANNIS, L. (University of the Sunshine Coast)
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Exercise has been shown to lead to clinically significant improvements in a range of mental health difficulties including depression and anxiety. Evidence also suggests that physical activity may be helpful for more severe mental health conditions such as schizophrenia and psychosis. Despite mental health practitioners (MHPs) being ideally situated to prescribe exercise as a treatment or at least as an adjunct to other treatments for mental health challenges, little research has examined MHPs' perceived road-blocks to prescribing exercise. Without such information it is difficult to effectively target resources and training methods to better equip MHPs with the means to more frequently and effectively prescribe or reinforce exercise as a treatment for mental health issues. The aim of this investigation was therefore to examine what MHPs consider as the challenges that limit their prescription of exercise for the treatment of mental health concerns. Following ethical approval and informed consent, 301 MHPs (counsellors = 5.5 %, GPs = 6.4%, mental health nurses = 5.5%, occupational therapists = 3.1%, psychiatrists = 2.5%, psychologists = 40.5%, social workers = 21.2%, others = 15.3%) from Australia (58%) and New Zealand (42%) completed an online survey. Participants were asked to provide qualitative statements of what reasons they considered prevented them from prescribing exercise to manage mental health concerns. Using a content analysis approach, the 402 statements were grouped into 21 themes, which in turn were combined into 6 higher order themes consisting of: MHPs' knowledge base and perspectives; organisational barriers; client barriers; inadequate access to appropriate exercise programs and providers; exercise is contra-indicated or crisis intervention required; and client reports exercising already. While some of the reported reasons for not prescribing exercise were legitimate, other reasons such as: MHPs' knowledge base and perspectives; organisational barriers; and inadequate access to appropriate exercise programs and providers, are barriers that could and should be surmountable. Given that exercise has been shown to be an effect treatment for various mental health challenges, findings from the current study should assist the promotion and development of more appropriate initiatives to support MHPs to utilise exercise to help treat and manage mental health issues.

Individual Research Paper (Paper #136)
Wednesday 9 October 2013 – 3:15pm (Meeting Room 1)
A pre-post evaluation of a non-competitive physical activity program in primary school children

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Children who regularly engage in physically activity (PA) are generally healthier and show trends towards continuing PA and improved health into adulthood. The majority of child PA inventions have been school-based, with focus on the curriculum and physical education (PE) which traditionally emphasised team-based competitive sports. The trends of diminishing PA in many children and adolescents suggest that other PA programs (i.e., individual, non-competitive) may have a role in the promotion of healthy exercise behaviours in those children who are not attracted by traditional PE programs. The aim of this research was to evaluate such a PA promotion intervention conducted over 6 weeks in a school context. Following ethical approval and informed consent 270 children (M_{age} = 11.4 years, 53% female) from a Brisbane (QLD) state school participated in a pre-post analysis of the ZOVA program. ZOVA is a new PA program, neither team-based nor competitive, that instructs sports skills using rhythm with audio and visual supporting resources. Children completed a number of pre-post intervention measures including: Time spent exercising; enjoyment of PE program; body image; and depression symptoms. Results were as follows: 1) After participation in ZOVA, children reported small but statistically significant ($p < .05$) improvements in several measures of body image/physical self-efficacy, as well as depression symptoms. 2) On average, students reported a small but statistically significant ($p < .05$) increase in amount of time exercising, as well as a small statistically significant increase in enjoyment of PE with ZOVA as the PE program. 3) When the group of children who originally nominated themselves as 'low exercisers' were analysed separately to 'high exercisers', a statistically significant and substantial increase in exercise behaviour was reported by the 'low exercisers' ($p < .001$, effect size r = .48). In conclusion this non-traditional approach to PE particularly engaged the students who don't typically do a lot of exercise. Our results appear to support the hypothesis, that for students who are not engaging in traditional PE programs (i.e., competitive, team-based), alternative PA programs can be successful in motivating them to engage in higher levels of PA.

Professional Practice Forum (Paper #308)
Friday 11 October 2013 – 9:15am (Plenary Hall A and B)
Behaviour change in collaborative practice of professionals

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The purpose of this evaluation was to identify change in professionals' behaviour in the areas of referral, consultation and networking in order to identify MHPN's contribution in building collaborative care practice in mental health. MHPN seeks to build sustainable networks and impact on the collaborative care of people with mental health problems. This project taps the highest level objective of MHPN and offers insight into the elements that may assist professionals in building collaborative care models. This evaluation compared the practice of registered MHPN professionals in 2009 (N = 1696) with the practice of registered MHPN professionals in 2012 (N = 1312), both assessed via self reported online surveys. This evaluation identifies changes in collaborative practice through a change in knowledge, attitudes and behaviour.

Professional Practice Forum (Paper #313)
Friday 11 October 2013 – 8:30am (Plenary Hall A and B)
The APS Psychologically Healthy Workplace Program
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The APS Psychologically Healthy Workplace Program was launched in June 2013 at the IOP conference in Perth. The Program provides an evidence-based assessment of the psychological health of workplace and access to advice and resources designed to improve staff wellbeing, engagement and performance. Considerable research in the fields of vocational and organisational psychology has demonstrated "that working can promote connection to the broader social and economic world, enhance wellbeing, and provide a means for individual satisfaction and accomplishment" (Blustein, 2008, pg. 230). Alternatively it can also be a major source of stress (APS, 2011), and has the potential to impact negatively on physical, emotional, social and psychological health (Quick & Tetrick, 2002). In Australia, stress is the second most common cause of workplace compensation claims after manual handling (Worksafe Victoria, 2010), creating a significant cost to employers, employees and the community. This presentation will provide participants with an overview of the initiative, the evidence that underpins it, the methodology and data collected by the survey tool and progress in its implementation across Australian workplaces.

Poster Presentation (Paper #186)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Decision making-conflict as coping with stress: A qualitative exploration
LUCAS, J.J. (Charles Darwin University), CACIOLI, J-P. (Charles Darwin University), & MOORE, K.A. (Charles Darwin University)
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An emerging trend in the decision making literature has involved a move away from process-centered models (i.e., dual- and tri-process models) to an integration of decisional conflict theories with general stress and coping models. This integration provides an alternative and, perhaps, a more comprehensive picture of the internal (e.g., cognitive and affective) and external (e.g., decision context) factors involved in decision making and any associated conflict. Current empirical support for integrated models of decisional conflict, stress, and coping remains in its infancy and requires further exploration. Therefore, it is the aim in this paper to report the findings of a qualitative study on stress- and coping-related factors involved in decision making. A sample of 12 people, 6 females (M = 34.50 years; SD = 12.88) and 6 males (M = 32.17 years; SD = 6.14), from the general community participated in semi-structured interviews related to a work, family, or health decision made over the previous four weeks. Results from the interviews support the conceptualisation of decision making-conflict as a continual process of coping with stress. Theoretical and practical implications of the results (e.g., making the 'right' choice versus the least-stressful choice) are discussed.

Individual Research Paper (Paper #83)
Wednesday 9 October 2013 – 1:35pm (Meeting Room 5 and 6)
The impact of workplace incivility on the satisfaction of basic needs: The role of past experience
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Workplace incivility (WI) has a damaging effect on employees in spite of the triggers consisting of relatively minor words, gestures, or practices (Spreitzer, Porath & Gibson, 2012). It was proposed that the perceived civility climate would explain considerable variance in workplace incivility which would also contribute significantly to the prediction

of three dimensions of basic need satisfaction (autonomy, competence, and relatedness). In order to test whether past experience (i.e. whether the employee reported having previously left a job as a result of incivility) influenced how workplace incivility predicted the measures of basic need satisfaction, a multi-group structural equation model was specified. Using data from 302 respondents to an online survey, the initial model focused on the mediated effects of WI where the antecedents of WI (dimensions of perceived civility climate) directly predicted WI, while WI directly predicted Autonomy, Competence, and Relatedness. A revised model was specified that included direct links from both Management Commitment to Civility and Tolerance of Incivility to Autonomy, as well as direct links from Coworker Support and Organisational Risk Management to Relatedness. This model was a good fit with χ^2 = 16.733 (df = 16), p = .403, $AGFI$ = .939, TLI = .997 and $RMSEA$ = .012 (90%CI .000 to .056 with pclose = .911). When further constraints were imposed to test whether the path coefficients (structural weights) were identical across the two subgroups, the χ^2 change was significant indicating that imposing this set of constraints was not justified ($\Delta\chi^2$ = 28.562 (df = 11), p = .003). Therefore, the impact of WI on basic need satisfaction is somewhat different for those who have left a job due to incivility. While WI has a negative relationship with Autonomy across both groups and no relationship with Competence across both groups, WI has a negative relationship with Relatedness only for those who have previously left a job due to incivility. Where experience of workplace incivility leads to someone leaving their job, it appears that their need for relatedness becomes closely tied to future experiences of incivility with a diminished contribution from the support of their coworkers.

Individual Research Paper (Paper #31)
Wednesday 9 October 2013 – 1:15pm (Meeting Room 5 and 6)
Threat and opportunity: The impact of social inclusion and feedback recipient likeability on feedback, self-esteem and belonging
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The need to belong is a basic psychological need and an important motivator of behaviour (Gere & MacDonald, 2010). When individuals are looking for opportunities to connect to others, they are most attracted to likeable people to satisfy their belonging and increase their self-worth (Brown, 1993; Leary, 2005). Social exclusion studies show that individuals are reluctant to perform behaviours that may cause rejection from others (Leary & Baumeister, 2000). A large volume of work has demonstrated that individuals are reluctant to communicate negative feedback and will modify feedback to make it appear less negative (e.g. Jeffries & Hornsey, 2012).The aim of this study was to investigate how feedback recipient likeability impacts on the belonging needs and self-esteem of an individual providing negative feedback. Participants were asked to either recall and record a previous experience of social inclusion, social exclusion, or the food they had eaten in the last 48 hours. They were then asked to evaluate a book review supposedly written by a fellow student and give negative feedback anonymously. This research used a 3 x 2 between group design to investigate social exclusion (inclusion vs exclusion vs control) and feedback recipient likeability (high vs low). Results showed that feedback was not positively modified regardless of feedback likeability .Results also showed that individuals who recalled social exclusion experienced decreased levels of belonging and self-esteem after delivery of negative feedback to a highly likeable individual but had increased levels of belonging and self-esteem after delivery of negative feedback to a less likeable individual. Further analyses showed a three-way interaction between social inclusion and feedback recipient likeability on changes in both belonging and self-esteem after delivery of feedback. These research findings were able to provide a sharper focus on the impact of belonging and self-esteem as a function of likeability, as well as supporting previous research on how anonymity helps alleviate social acceptance concerns thus avoiding modified feedback.

Wednesday 9 October 2013 – 5:30pm (Hall 2)
Risk management – guarding against and dealing with AHPRA complaints
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Clients and their relatives, as well as health/government agencies, commonly make notifications or complaints to the Australian Health Practitioner Regulation Agency (AHPRA), about the conduct, performance or health of psychologist practitioners. The functions of the AHPRA and the Psychology Board of Australia include the handling and investigation of complaints and the convening of disciplinary hearings in relation to those complaints. Complaints in relation to a psychologist can relate to allegations of: (i) breaches of professional conduct, categorised as professional misconduct, unprofessional conduct or notifiable conduct; (ii) unsatisfactory professional performance, assessed against the standard reasonably expected of a practitioner of an equivalent level of training or experience; or (iii) health impairment, if the practitioner has a physical or mental impairment, disability, condition or disorder that detrimentally affects, or is likely to detrimentally affect their capacity to practise as a psychologist. In the time since their inception, AHPRA and the Psychology Board of Australia have dealt with a number of complaints against psychologists, by way of performance and professional standards panel hearings and tribunal hearings. This paper will review: (1) the implications of the different forms of hearings in terms of procedure, evidence and potential sanctions; (2)(a) the categorization of conduct as unprofessional conduct or professional misconduct; (b) standards of professional performance and how they are assessed; (3) trends in the types of allegations being made in relation to conduct and performance in recent hearings; and (4) some recent outcomes and what can be learned by practitioners as part of risk management. This paper will also review the responsibility of practitioners, as mandated by law, to report 'notifiable' conduct relating to other practitioners.

Individual Research Paper (Paper #250)
Wednesday 9 October 2013 – 4:15pm (Meeting Room 1)
Medico-legal issues confronting psychologists in the field of sports concussion
MADDOCKS, D. (Barrister & Solicitor / Private Practice), CLAUSEN, H. (The University of Melbourne), & McCRORY, P. (Florey Institute of Neuroscience & Mental Health)
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There has been a great deal of recent media interest in claims of serious long-term health effects in former United States National Football League (NFL) footballers, resulting from concussion/s in their playing careers. Some commentators have described the incidence of post-concussive conditions as a "silent epidemic". At the present time, there is a significant amount of litigation before USA Courts related to the previous treatment and management (in particular the assessment of recovery and advice given to participants) of former NFL footballers. There are understandably concerns in Australia for participants in the football codes (which are played widely at junior, suburban, regional and elite levels), and other contact sports. For many years, neuropsychologists have had a significant role in the assessment of sport concussive injuries. This presentation will canvass medico-legal issues for psychologists, relevant to past and future assessment and management of concussed sports-people. Psychologists clearly owe a 'Duty of Care' in such circumstances. The legal and medical concepts of: (i) 'causation' (i.e. the potential contribution of previous concussive and sub-concussive blows to long-term medical and psychological presentation); and (ii) 'state of knowledge' (i.e. what was known or ought to have been known about diagnosis, recovery and prognosis) in previous decades and at the present time will be addressed, as well as the legal implications of voluntary assumption of risk, players withholding information on clinical interview and standards of proof. Neuropsychologists are likely to become more involved in concussion management in sport. Definitions (i.e. of concussion), theories of

causation and evidence as to 'state of knowledge' are all subject to close medical and legal scrutiny and constant review. Psychologists must understand the potential medico-legal ramifications of their involvement.

Individual Research Paper (Paper #91)
Thursday 10 October 2013 – 1:40pm (Meeting Room 1)
Working with amphetamine users: Evaluating the effectiveness of a specially-designed treatment intervention
MAGOR-BLATCH, L. (University of Canberra; National Drug and Alcohol Research Centre, University of NSW; Psychology and Substance Use Interest Group)
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An estimated 14.3–52.5 million people worldwide use amphetamine-type stimulants (ATS), increasing to between 38 and 100.1 million when cocaine and Ecstasy are included. ATS use is associated with a range of negative physical and mental health consequences, resulting in substantial costs to the community in health care, criminal justice and other psychosocial factors, including child protection and family support. Although there are few evidence-based treatments for this population group, ATS were the fourth most common principal drug of concern for which treatment was sought in 2009–10 in Australia. This study describes the development and evaluation of a Group Intervention for ATS users (GIATS), which combines Cognitive Behavioural Therapy with Acceptance Commitment Therapy and Mindfulness approaches. Using a quasi-experimental study approach, outcomes for participants undertaking the GIATS (n=125; 83 males) in one of five Australian therapeutic communities were compared with participants receiving Treatment as Usual (TAU) (n=122; 75 males) in matched treatment settings. Participants were interviewed and completed self-report questionnaires of psychosocial measures at baseline (T1) entry to the study and at two follow-up points over 18 months. Results for both groups at T3 (second follow-up) showed statistically significant and clinical improvement over baseline on a number of measures. Differences between the groups did not show significance, however, results at indicated better outcomes for those receiving the GIATS. At T3, results showed reduced substance use and criminal offending, as well as improvement on a range of psychosocial measures, including mental and physical health, psychopathology and executive function. These findings provide evidence supporting the effectiveness of the GIATS. Aspects considered to be most beneficial include activities based on Acceptance Commitment Therapy (ACT) and Mindfulness. These are notable, given the severe deficits in cognitive functioning and level of comorbid presentations that were evident within this treatment population at baseline, and continuing post-treatment.

Poster Presentation (Paper #221)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Therapeutic Communities – are they effective for substance use treatment? What the evidence tells us
THOMPSON, B. (University of Canberra; ACT Health), **MAGOR-BLATCH, L.** (University of Canberra; National Drug and Alcohol Research Centre, University of NSW; Psychology and Substance Use Interest Group), BHULLAR, N. (University of New England)
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Therapeutic Communities (TCs) have been established in Australia since the early 1970s, and overseas since the 1950s. Traditionally, TCs work with people with substance use disorders who are considered to be at the severe end of dependency and with a range of co-occurring mental health and psychosocial issues. The aim of this study was to systematically review quantitative research since 2000 on the effectiveness of residential therapeutic communities (TCs) for the treatment of substance-use disorders with reference to substance-use, crime, mental health and social engagement outcomes. A systematic search with broad inclusion criteria resulted in the review of 11 studies. The studies investigated community-based TCs, as well as TCs modified for prisoners,

prisoners transitioning to community living, and TCs for individuals with co-occurring substance-use and mental health issues. Results were analysed by the comparison method used in the study; three investigated within-subjects outcomes, four compared TC treatment with a no-treatment control condition and four compared TC treatment with another treatment condition. Consistent with previous systematic reviews of TCs, outcomes varied across studies but indicated TCs are generally effective in reducing substance-use and criminal activity and increasing mental health and social engagement.

How To Session (Paper #155)
Thursday 10 October 2013 – 1:00pm (Hall C)
Brave new world: Online training and therapy for the eating disorders, its uses, its limitations and the future of the e-space for psychology
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The aim of this session is to give a thorough overview of programs currently available on the web for training staff in identification and treatment of mental health conditions with a specific focus on eating symptoms and syndromes. The research literature in support of e-learning and e-therapy will be overviewed both as stand alone methods or as an adjunct to treatment within the therapeutic milieu. The possibilities afforded by the e-space, the increasing use of social media, apps, and internet based communication and the opportunities these pose for enhancing service delivery and learning will be examined. Several e-therapy and e-training programs for the eating disorders will be looked at in depth and their outcomes to date analysed. Successful apps and the data to support their use in clinical practice will also be presented. Discussions around future directions in e-therapy will be explored: the use of avatar therapists replacing the private clinician, and limitations of the platform will be discussed in group format. The session will be presented by senior staff from the Centre for Eating and Dieting Disorders at the University of Sydney, a provider of e-training and e-therapy programs. The presentation like the programs overviewed will be highly interactive encouraging participants to use iphones and ipads to explore online programs, therapies and apps. Participants in the audience will emerge with a thorough understanding of the programs currently available online, the evidence base for such programs, how they can use those programs to assist them in their clinical work and the future possibilities for advancements in both health force training and service delivery for mental health via the online space. No prior knowledge required, most beneficial to those in clinical practice.

Poster Presentation (Paper #210)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Taking a systemic approach to working with children using the KidsMatter Primary conceptual framework
SIER, M. (Project Officer, KidsMatter Primary) & MARTIN, L. (National Coordinator, KidsMatter Primary and Aboriginal and Torres Strait Islander KidsMatter)
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KidsMatter Primary is a mental health and wellbeing initiative for Australian primary schools. It's underpinned by a socio-ecological model that emphasises the influence families, schools, and communities have on children's mental health. As such, it also provides a conceptual framework that can assist psychologists involved in schools take a systemic approach when working with children. Such an approach ensures psychologists consider the development of the whole child, and facilitate connections between the important people in children's lives. This presentation will outline how the KidsMatter Primary conceptual framework, and its implementation process, can support and enhance the work of psychologists involved in schools. By implementing KidsMatter, primary schools place mental health onto the school's agenda, and commit to

undertaking a range of strategies for mental health promotion, prevention and early intervention. This action primes psychologists to form partnerships with school communities, and also provides an established approach for time-poor health professionals to work at a universal level. Psychologists in KidsMatter schools also have the opportunity to be part of the KidsMatter School Action Team. This supports the integration of the psychologist into the school community, meaning they are less likely to feel isolated and more likely to feel they are supporting children as part of a coordinated system of care. For psychologists not working with KidsMatter schools, the conceptual framework provides a useful lens for thinking about how to work with schools using an evidence-based, systemic approach. To further support this work, KidsMatter also has a range of print and multimedia mental health resources available to psychologists to use with families and school staff.

Poster Presentation (Paper #151)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Science of psychology – science of the breath
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This n = 1 study considers human health and wellbeing through the application of the simple root science of psychology. Psychology, by its Ancient Greek definition, "psuke" meaning *breath or soul* and, "logos" meaning *logic or reason* (Carlson, Buskist & Martin, 1997), is the science of the soul. Consideration of breath in psychological therapy is already common practice, such as in "relaxation techniques". Gentle breath, is indicated as part of a best practice model of intervention, due to its powerful and immediate mediation on the central nervous system and a connection to "feeling amazing". This study compares the difference between ordinary breath techniques and the gentle breath technique. The patient is asked about prior breathing, meditation or relaxation techniques and asked to report how they feel, physically and emotionally immediately prior to the exercise. The patient is then given instruction, either sitting or lying down comfortably, with eyes closed, to breathe gently, bringing a focus on the gentle physical quality of inhalation. The patient is supported to allow the body to feel the quality of gentleness and to allow the mind to "be with the body". Physical tension or "mind" resistance is addressed. Patient is observed during the exercise. A focus on the body's natural rhythm is highlighted. Qualitative pre and post measures as well as observations are recorded in the patient's chart. The patient reports on two axes: 1) comparison of the gentle breath technique in comparison to other forms of meditation or relaxation and 2) pre treatment and post treatment physical, emotional and mental state, as qualitative subjective report. Practitioner observation is also recorded. Gentle breath delivers results different from those achieved through other forms of breath meditation or relaxation. Introducing the quality of gentleness in breath is indicated for use in all therapeutic settings. Further development of pre and post measures is suggested.

How To Session (Paper #152)
Friday 11 October 2013 – 3:30pm (Hall C)
Chronic disease management: Beyond behaviour change
MASIORSKI, M. (Private Practice)
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Medicine is looking to psychology to assist in the management of ever increasing chronic illness and disease. Psychology holds a key place in the healing of chronic illness at the individual and the social level. This how to session presents a practical way of addressing psychological "root causes", namely deeply held hurt, self abuse, self loathing and self harm that obstruct the road to good health. How to assist clients in identifying and addressing these concerns in the counselling setting, using a "Glory Chart" allows patients to work through psychological hurts and obstacles to good health. Introducing discussions about true self care, self nurturing and self love as live-able, tangible and

practical behaviours create a positive view forward, and moves focus from past behaviours. The chart is useful for many issues including health, relationships, parenting, self reflection and finance and supports patients to "plot" their current situation and plan or create a new foundation moving forward. The model supports patients to take more ownership and responsibility of their health conditions in a very practical, achievable way, and has been readily accepted by patients of the authors practice. Overarching beliefs and social "norms", which perpetuate negative health behaviour, are also discussed and challenged as part of this model.

Learning Outcomes: Practical understanding and ways identifying self harming behaviours related to chronic illness. Use of a model/foundation for health related change.

Prior knowledge: Behaviour management, CBT, psycho-education and motivational interviewing techniques and their effectiveness or lack of effectiveness in clients as well as general knowledge of chronic illness in Australia.

Practical: Participants will have the opportunity for discussion in dyads and in the larger group. Individuals may plot their own lifestyle related behaviours.

Materials Supplied: Hand outs with notes will be supplied.

Poster Presentation (Paper #153)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Psychology: Science of the soul. An experiential study
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This presentation draws on scientific knowledge in order to explore the science of psychology. The origins of psychology, Einstein's theory of relativity and other energetic factors are considered as they relate to human thoughts, emotions and behaviours. The original meaning of psychology was the "science of the breath or soul". Einstein proved that "everything is energy". Today it is known that emotions can be "measured", and even graphed and that thought patterns affect water molecules. With this understanding, a true application of scientific knowledge can be made towards the understanding of how the quality of breath can affect not only the physical body, but through the physical body, the quality of thoughts and feelings experienced. The presentation introduces a consideration of energetic factors to the science of psychology. Two components are considered. Firstly, a range of scientific data are drawn together. Secondly, experientially, gentle breath creates a significant link to the soul and to mental health and wellbeing. $E=mc^2$ indicates a way to understand the precious science of psychology. In basic words, Einstein said m*atter is/has energy* or that, *"everything is energy"*. By virtue of the fact we have a human body, which has MASS, we are made of energy. What if the quality of our breath (mass of an oxygen molecule), affected the quality of our physical bodies, (mass of lungs and other physical organs), which in turn affected the quality of our thoughts, feelings and emotions, which are in themselves forms of energy? Significant results in the healing of mental and other illnesses are indicated via the application of the "science of the breath or soul". Many treatment models exclude consideration of the soul, negating much scientific knowledge which may be applied to treatment models. If you affect the mass (energy) of a single atom of oxygen, by (for example the quality of your breath), then you have created an energetic shift. If we can understand ourselves and our thoughts and feelings as forms of energy, inroads can be made in the true understanding of human psychology.

Professional Practice Forum (Paper #257)
Friday 11 October 2013 – 3:30pm (Plenary Hall A and B)
DisabilityCare Australia (NDIS): What does it mean for psychology?
SCOTT, D. (Australian Psychological Society), **& MATHEWS, R.** (Australian Psychological Society)
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The National Disability Insurance Scheme, now known as DisabilityCare Australia, is predicted to revolutionise disability services in Australia. DisabilityCare Australia aims to better meet the needs of people with disability and to put them in control of the decisions that impact on their life, particularly in the care and support that they receive. This forum aims to provide current information on the implementation of the scheme across the launch sites and how it will roll out more broadly, outline how the scheme will affect the way that psychological services are offered to people with disability and how psychologists can engage with the scheme. An overview will be provided of the 'NDIS rules' which detail how the scheme will operate including identifying the different facets of service delivery, the eligibility criteria and the approved assessment and treatment services. The strengths and weaknesses of this approach for delivering services to people with disability and their carers will be highlighted and discussed in the context of the international experience of applying a similar model of service provision. Whilst still in the early stages of implementation the experience of health professionals, consumers and carers in navigating the system will be presented. The forum will allow opportunity for questions.

Psychology Central (Paper #333)
Thursday 10 October 2013 –1:30pm (Meeting Room 7) & Friday 11 October 2013 – 11:30am (Meeting Room 7)
Q&A session: Professional and ethical issues
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The APS, through its Professional Advisory Service, responds to a range of member queries on professional and ethical issues. These queries are often the bases for developing resources to support members in their psychological work, such as Ethical Guidelines, website resources and InPsych articles. Common queries to the APS include issues related to confidentiality, professional boundaries, record management, employment and contracting arrangements, the provision of services through third party providers (e.g. Medicare, Work Cover) and legal requests. This session provides an opportunity for members to direct their practice related questions to APS staff who provide information on key practice issues.

Poster Presentation (Paper #148)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
The reciprocal relationships between negative problem orientation, mindfulness and depression: A path analysis
McDONALD, N.J. (University of Southern Qld), & BECCARIA, G. (University of Southern Qld)
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University students experiencing high levels of stress are vulnerable to experiencing symptoms of depression. Previous research has found a negative problem orientation is a particularly strong predictor of depressive symptoms and that mindfulness partially mediates the relationship between self-appraised social problem-solving and depression (Haugh, 2006; Argus & Thompson, 2008). The present study sought to extrapolate the reciprocal relationships between negative problem orientation, mindfulness and depression in a University student population. A sample of 124 students (108 females,

16 males; mean age 35.06 years) completed the Problem Solving Inventory – 12 item (PSI-12), the Five Facet Mindfulness Questionnaire (FFMQ) and the Depression Anxiety Stress Scale – 21 item (DASS-21) at two time points, six weeks apart. The data collected was analysed using path analysis. In contrast to prior findings, no feedback loop was observed between negative problem orientation and depression. Consistent with theoretical predictions, a feedback loop was observed between negative problem orientation and mindfulness. The final model was able to predict 49% of the variance for DASS-21 depression scores at time two. The findings support that the efficacy of problem-solving interventions to reduce depressive symptoms in students may be improved by incorporating a mindfulness component.

Poster Presentation (Paper #126)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Psychological stress, work-life balance and employer support for Australian academics
McGUIRE, M. (Victoria University), & CHAPIN, L. (Victoria University)
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Stress is a significant issue for University academics, and work-life balance and employer support are contributing factors. The aim of the current study is to understand individual differences in stress and work-life balance among Australian academics and to determine the key predictors of stress, particularly employer support. A total of 607 academic staff responded from 18 Australian universities. Stress levels were comparatively high, with over 50% of staff being at-risk for psychological illness. Though stress did not differ by gender, job type, contract type, or academic rank, some differences in employer support and work-life balance were found. Academics with a poor work-life balance are more stressed; academics with higher emotional support from their employer are less stressed; and academics with higher employer support have a better work-life balance. Work-life balance and employer support were found to predict stress and emotional support was shown to be a key variable that could potentially reduce stress as it moderated the relationship between work-life balance and stress. These results have implications for workplace interventions to improve work-life balance and employer support in order to reduce the stress of academic staff.

Poster Presentation (Paper #104)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Career optimism as a mediator of conscientiousness and satisfaction with academic major
McILVEEN, P., BURTON, L.J., & BECCARIA, G. (University of Southern Queensland)
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This research addresses university students' satisfaction with their chosen academic major. In the current era, satisfaction with studies is important not only to students; it is vitally important to their lecturers and institutions, and government and commercial agencies that scrutinise universities. Quite significant importance is ascribed to the impact of institutional rankings that are synthesised from global indicators of students' satisfaction with their studies and graduate outcomes, such as the Australian Graduate Survey (AGS) and the Course Experience Questionnaire (CEQ). Previous research has found a moderate effect size between conscientiousness and academic performance and satisfaction. Similarly, academic self-efficacy has a strong association with conscientiousness. The role of career-related optimism has recently emerged as an important influence on students' satisfaction. Career optimism is a willingness to engage in activities and expectations that lead toward a positive work-related future. The current study investigated whether career optimism would mediate the relationship between conscientiousness and satisfaction with academic major, and self-efficacy and satisfaction with academic major. As part of a larger assessment battery, 529 students at a regional Australian university were administered questions regarding

conscientiousness, general self-efficacy, career optimism, and satisfaction with academic major. Path analysis was employed to assess these relationships. A very good fitting model was determined. Career optimism fully mediated the relationships between conscientiousness and academic major satisfaction, and self-efficacy and academic major satisfaction. These findings have important implications for teaching, learning, and campus services, and broader notions such as graduate attributes and employability. Career optimism can be learned and therefore integrated into curricular and extra-curricular programs as a learning objective to enhance students' engagement and satisfaction with their chosen academic major.

Individual Research Paper (Paper #167)
Friday 11 October 2013 — 11:10am (Meeting Room 1)
Long term developmental implications of childhood traumatic brain injury
McKINLAY, A. (Monash University), MCLELLAN, T. (University of Canterbury), & GRACE, R. (University of Canterbury)
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Mild traumatic brain injury (mTBI), also referred to as concussion, is a common injury event during childhood. Until relatively recently it was expected that the outcomes of these injuries would be transitory in nature and resolve without intervention. However, there is increasing information regarding the ongoing nature of deficits for some individuals. Previously we have found that compared to uninjured controls, mTBI can result in behavioural problems during childhood, as rated by parents and teachers over years 7-14, psychiatric problems over years 14-16 (ADHD, Conduct Disorder and substance abuse) and antisocial behaviour during adulthood rated over years 16-25. Further, we have found evidence that childhood TBI is also associated with increased rates of offending behaviour. As part of our ongoing investigation, we sought to identify predictors of antisocial behaviour. A longitudinal design was used in which individuals in the Canterbury region who had experienced an injury event as a child aged 0-17 years, were now 18 years or older and more than 5 years post injury, were invited to take part in the study. This recruitment process resulted in the following three groups: 1) moderate/severe TBI (n=62), 2), mild TBI (n=58) and, 3) a fracture control group (n=38). A semi-structured interview was used to assess the participant's lifetime involvement in offending behaviour. Participants were also assessed using the Emotional Behaviour Scale, which measures internalizing and externalizing behavior, including subscales for malevolent aggression, social anxiety and social self-esteem. Compared to controls, TBI was significantly associated with an increased risk of offending behavior (odds ratio= 8.7 for mild TBI, and 20.4 for moderate/severe TBI). A Binary Logistic Regression analysis revealed that for moderate/severe TBI, the strongest predictors of offending behaviour were TBI status, higher levels of malevolent aggression and lower levels of social anxiety. For those in the mild TBI group, offending behavior was not associated with TBI status. We found evidence of increased offending behavior during adulthood for individuals who had experienced a TBI during childhood. Measures of emotional behavior were useful predictors of offending behavior and offer an opportunity for early intervention.

Poster Presentation (Paper #24)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
Treatment programs for students with attention deficit hyperactivity disorder in Iran: A meta-analysis study
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Attention deficit hyperactivity disorder (ADHD) is an area of psychological disorders in which the deficit of attention is the main symptom. The important characteristics of ADHD are included; lack of attention, impulsiveness, and hyperactivity. The purpose of this study evaluated the impact of treatment programs on ADHD students. This study is

a meta-analysis study. The researcher employed Persian published articles on the topic of effectiveness treatment programs on ADHD from SID and Irandoc website in 2000 - 2012. All findings were screened for inclusion based on the title and abstract using the following limitations: The study must have focused on an intervention intended to improve ADHD, the study must have been conducted and published in Iran, and the sample must has included ADHD and ADHD at risk students. After reviewing the preliminary articles employing the aria explains above, total copies of 11 articles were recognized for possible inclusion. These articles had to meet each of the subsequent aria: The article must have been an original investigate report, included treatment of at least one independent variable; the students must have been recognized as having ADHD. The overall meta-analysis of this study illustrated a statistically significant, overall standardized differences in means are: -.343, 95% confidence interval [CI]: -.555, -.131, and Z-Value = -3.170, was statistically significant (p< .000). As well as the Q statistic for heterogeneity of 230.246 is statistically significant (p < .000), in addition, I2 = 95.667, T2 = 3.038, SE = 1.725, s2 = 2.977 and Tau = 1.743. Discussion: These studies show that treatment programs were statistically significant, large mean effect sizes were found for self-control treatment (d=.73), positive parenting program (d=.75), self-regulation treatment (d= 1.13), cognitive-behavioral treatment (d= .70), group parenting program (d= .45), play treatment (d=.52), motor-perceptual rehearsal program (d= 1.48), parental constructive program (d=.49), executive functions (d= 1.62), combination treatment (d= 1.46) and verbal self-training program (d= -.46). The findings of this study suggests that employing treatment programs for ADHD students, because students who received treatment programs performed well by having social abilities and reducing academic skills problems.

Individual Research Paper (Paper #206)
Wednesday 9 October 2013 — 4:15pm (Hall D)
An interactive internet treatment for postnatal depression
MILGROM, J. (University of Melbourne; Parent-Infant Research Institute, Austin Health), DANAHER, B. (Oregon Research Institute), SCHEMBRI, C. (Parent-Infant Research Institute, Austin Health), SEELEY, J. (Oregon Research Institute), ERICKSEN, J. (Parent-Infant Research Institute, Austin Health), GEMMILL, A. (Parent-Infant Research Institute, Austin Health), LEWINSOHN, P. (Oregon Research Institute), & STUART, S. (University of Iowa)
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Although symptoms of depression have been shown to be reduced through internet interventions, no research has examined the efficacy of internet-based treatment of postnatal depression (PND). This is despite the potential for treatment uptake and accessibility, and the necessity of addressing the unique needs of depressed perinatal women, including infant and partner difficulties. We aimed to develop and test an internet intervention for PND. Development was an iterative process (culminating in systematic usability testing). We began by surveying women on the acceptability/desirability of internet intervention for PND, preferred content, and perceived benefits and barriers to use. Next, we conducted formative research using focus groups with postpartum women to adapt the content, structure, and design of the successful *Getting Ahead of Postnatal Depression* intervention. The final phase of development was systematic usability testing. Once functioning program components were created, 22 participants in Australia and the USA were recruited to a "think-aloud" procedure to test user-system interactions. Measures included the System Usability Scale (SUS). The resulting *MumMoodBooster* intervention was then evaluated in a feasibility trial with n = 25 women, and included low level telephone support. The final *MumMoodBooster* intervention is highly interactive and embodies the key Cognitive Behavioural Therapy elements that have been found to be effective in our PND face-to-face intervention as well telephone support, a library of partner and infant modules and a web forum. Focus group participant comments were overwhelmingly positive: e.g., "really hopeful, like you can do something about it," and "wonderful because you can do

it at home." SUS results showed *MumMoodBooster* to have excellent usability. Preliminary results from the feasibility trial (n = 25) show good program engagement and treatment effectiveness in alleviating depression. An internet program for PND has proven highly acceptable to women and has been shown to have excellent usability. We are now conducting an RCT of this fully functional and fully pilot tested internet intervention. Comparability to face-to-face treatment and self-guided delivery are topical issues.

Poster Presentation (Paper #75)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Relationships between health promoting behaviours that facilitate venous disease management
MILLER, C. (RDNS Research Institute; La Trobe University; Alfred Health Clinical School), & KAPP, S. (RDNS Research Institute; La Trobe University)
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Introduction: Behaviour changes in multiple domains have been described as either 'complementary' or 'compensatory'. Health services frequently provide chronic disease management education to clients that promote the implementation of multiple treatments and healthy behaviours. Aim: Examine the strength and direction of relationships between behavior change advocated for people with venous disease. Method: Data were gathered for 185 clients in 2009/2010 in a pre-and-post evaluation study of an e-learning education program delivered to people receiving community nursing care for venous leg ulceration. Complete data were available for 156 clients (84% follow-up). Measures explored in this analysis were categorical self-report of a variety of behaviour such as compression therapy use, use of soap substitute and other skin care strategies, physical activity and the conduct of calf muscle strengthening exercises, and nutrition. Results: Significant correlations were few, small and typically clustered in related domains such as the use of a multi-vitamin and nutritional supplement (Phi=0.445, p=0.000), use of a soap substitute and skin moisturising (Phi=0.298, p=0.000), and leg elevation and the conduct of heel raises and squats (Phi=0.266, p=0.001). Participants demonstrated a capacity to achieve commensurate greater behaviour change if at baseline they had low levels of recommended treatments and behaviours implementation [F(2,154)=16.038, p=0.000]. Conclusion: This study identified that although behaviour changes in relation to the treatments and activities facilitating venous disease management were not 'compensatory', few were 'complementary'. Some conceptually linked behaviours were identified where client motivation to change in one activity should prompt health professionals to explore and encourage the client to make change in another activity. Finally, capacity to adopt more behaviours when few recommendations were implemented at baseline was observed; a finding that should encourage health educators to support clients to enact change in as many areas as is individually appropriate and feasible.

Individual Research Paper (Paper #55)
Friday 11 October 2013 – 11:10am (Meeting Room 3 and 4)
Self-help for depression symptoms via email: Two studies evaluating the Mood Memos intervention
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Sub-threshold depression is common, impairs functioning, and increases the risk of developing major depression. Improving sub-threshold depression and preventing major depression could help to reduce the population disease burden of depression. An email-based intervention that promoted greater use of effective self-help strategies for depression was developed and evaluated in two RCTs. The aim was to test its effectiveness in changing self-help behaviour, improving symptoms and preventing

depression. The 'Mood Memos' intervention was completely automated and was delivered via a website and email messages. In the first study, 1326 adults with sub-threshold depression were recruited and received automated emails twice weekly for six weeks. The active group's emails contained advice about self-help strategies judged to be effective by experts. The control group received emails with general information about depression. The primary outcome was depression symptom level measured with the PHQ-9. Results showed a small, significant difference in depression symptoms post-intervention, favouring the active group (Cohen's d = 0.17, 95% CI: 0.01 to 0.34). There was also a higher, though non-significant, risk of onset of major depression in the control group. A mediation analysis indicated that the effect of the emails on depression symptoms was completely mediated by the use of the self-help strategies promoted in the emails. Due to the promising results found in study 1, a second evaluation of Mood Memos was conducted, but with participants with any level of depressive symptoms. Study 2 recruited 1736 participants who were moderately severely depressed on average. Both active and control groups showed large improvements in depression symptoms overall, with no significant difference in improvement at the end of the study (d = 0.11, 95% CI: -0.06 to 0.27). However, as in study 1, the active group showed small to moderate improvements in self-help behaviour compared to the control group (d = 0.40, 95% CI: 0.23 to 0.56). In conclusion, the Mood Memos intervention led to significant improvements in self-help behaviour. These improvements were associated with reductions in depressive symptoms in participants with sub-threshold depression in study 1, but study 2 failed to find an effect in participants with more severe depression.

Symposium (Paper #143)
Wednesday 9 October 2013 – 1:15pm (Meeting Room 1)
Psychological perspectives on the decision to commit anti-doping violations
MOSTON, S. (Griffith University; University of Canberra)
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Overarching abstract
In the last few years there has been a significant increase in social science research into performance enhancing drug (PED) use. This corresponds with a recognition that prevention, rather than detection, may be the best strategy for eliminating PED use in sport. This surge in research has produced some interesting insights into the processes shaping athletes' attitudes towards PED use. Broadly speaking, there are internal factors (characteristics of the athlete) such as personality, goal orientation, and morality; and external factors (characteristics of the athlete's sport, and social environment), such as type of sport (e.g., individual vs. team sport) and the attitudes/norms of peers, teammates, coaches, parents etc. This symposium brings together some of the latest Australian research on understanding the motives for PED use. The symposium begins with a review of theoretical models of substance use, highlighting the different challenges faced by athletes and non-athletes. The second paper reports on an empirical study comparing both athletes and non-athletes, showing how morality (specifically, Bandura's process of moral disengagement) influences attitudes towards PEDs. The third paper, also drawing on empirical data, offers a psychological profile of athletes who intend to use PEDs.

Presentation 1
Sports people behaving badly: The use of licit and illicit drugs
MAGOR-BLATCH, L. (University of Canberra)
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Athletes use drugs for a variety of reasons – some intentionally for medical or recreational purposes, and some inadvertently. Some athletes will use drugs deliberately - either on their own initiative or at the behest of others - to cheat, to gain an advantage over others by artificially improving their advantage in order to win. Some sports people use drugs, including both legal drugs, such as alcohol, as well as illegal drugs,

recreationally. Alcohol enjoys a strong association with sport in Australia at all levels. Athletes, coaches and officials are often captured in the media celebrating a win with alcohol. Major brewing companies sponsor sporting events and numerous high-profile sporting teams are affiliated with brewing companies via sponsorship agreements. This relationship is particularly cemented in many high-profile, male team sports that receive wide media exposure. Drug use in sport continues to change. The drugs favoured by coaches and athletes are subject to fashion and to efforts by the unscrupulous and sophisticated to avoid detection. Recreationally, there is another question, do athletes disproportionately misuse alcohol and other social drugs compared with their non-athlete counterparts? This presentation reviews the literature surrounding substance use and sport with reference to the models which underpin alcohol and other drug use and the expectations of competitors, sponsors, the media and spectators.

Presentation 2
The relationship between moral disengagement, participation in sport, and attitudes towards performance enhancing drugs in young people
ENGELBERG, T. (Griffith University), MOSTON, S. (University of Canberra), & SKINNER, J. (Griffith University)
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One of the factors that is emerging as central to understanding why some athletes use performance enhancing drugs (PEDs) is that of moral development. Morality can be conceptualised in a number of different ways, largely reflecting differing theoretical orientations and/or contexts. One of the most promising conceptualisations of morality for an understanding of PED use is that of moral disengagement (Bandura, 1991). Bandura proposes that those engaging in immoral action create 'excuses' for their behaviours. In this study we assessed the relationship between endorsement of moral disengagement mechanisms and attitudes towards performance enhancing drugs amongst junior athletes and non-athletes. 876 participants from three age groups (12-13; 14-15; and 16-17 years) stated the extent of their endorsement to six moral disengagement items in the context of doping (e.g., *In comparison to the damaging effects of alcohol and tobacco, the use of performance enhancing drugs is not so bad).* Participants also completed the Performance Enhancement Attitude Scale and were asked whether they intended to use PEDs in the next 12 months (athletes only). There were clear links between moral disengagement and attitudes to PEDs, with athletes who displayed the strongest levels of moral disengagement expressing the strongest pro-PED use attitudes (although still below the mid-point on the scale). Overall, the respondents (both athletes and non-athletes) showed high levels of moral disengagement, with PED use being justified most strongly because they 'don't hurt anyone' and they help 'to overcome one's limits'. The findings of the present research show that there is a clear link between moral disengagement and attitudes towards PEDs. Findings are discussed in relation to the development of athlete education programs that aim to deter future drug use.

Presentation 3
Psychological profiling of elite athletes intending to use performance enhancing drugs
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The aim of this research was to profile the psychological characteristics of junior and adult athletes who were planning to use performance enhancing drugs. Two studies were conducted, the first with 436 elite development athletes (12-17 years of age), the second with 78 adult elite athletes. In the first study athletes completed a questionnaire which included sport specific measures of: attitudes to performance enhancing drugs; moral functioning; perceptions of drugs use; socio-moral atmosphere and perceived

motivational climate; intention to use performance enhancing drugs; and demographic information. In the second study, athletes also completed measures of the personality traits of conscientiousness, Machiavellianism and risk-taking. In the first study athletes were divided into groups based on their intentions to use performance enhancing drugs. There were 34 (7.8%) intending to use, 38 (8.7%) undecided, and 364 (83.5%) not intending to use. Statistically significant differences were found on measures of attitudes to drugs, perceived incidence of dugs use in sport, moral functioning, socio-moral atmosphere, and perceived motivational climate (performance sub-scale only). All differences were in the predicted directions. For example, athletes who were undecided and those intending to use drugs saw much higher rates of prevalence of drug use in sport than those not intending to use (a possible false consensus effect). They also see their teammates and coaches as endorsing such practices. In the second study conscientiousness was found to be significantly negatively related to athletes' attitudes towards doping: athletes who presented higher on conscientiousness were less likely to have pro-doping attitudes. Machiavellianism and risk-taking were not significantly linked to attitudes towards drugs. Taken together, the studies show that there are psychological differences between athletes who intend/don't intend to use performance enhancing drugs. It may thus be possible to identify athletes with a psychological propensity to use performance enhancing drugs.

Poster Presentation (Paper #192)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Qualities of effective mental health interventions for parent carers of children with Autism Spectrum Disorders (ASDs): A systematic review

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This systematic review sought to identify and describe the key qualities of mental health interventions for parents of children with autism spectrum disorders (ASDs). We identified existing empirical evidence based on the following data bases: *Medline*, *PsycINFO*, and *CINAHL*, and with no restriction on period of search. Studies included for the final review were selected using the Standardized Critical Appraisal Tool (SCAT) system. Eleven studies that met the SCAT criteria that included intervention for improving the mental health of parents of children with ASDs were included. For the information analysis, we utilized critical narrative synthesis (Popay et al.,(2006) to characterize the key qualities of effective mental health interventions for parent of children with ASDs. Three major themes were identified as being crucial to mental health interventions for parents of children with ASDs: skills training, support groups, and education group. Overall, 63.6% (7 of the 11 studies) showed an improvement in the overall parental mental health, as measured by the reduction of parental stress and psychological symptoms, as well as the improvement of parental quality of life and parent-child interaction. Effective mental health support interventions for parents with ASD address both person and context level aspects important for effective parenting of children with ASDs.

Poster Presentation (Paper #282)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Adult attachment to transitional objects: A sign of health or psychopathology?

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Winnicott (1979) observed that attachment to transitional objects in childhood is a natural developmental phenomenon. The presence of transitional object indicates a healthy capacity to symbolize maternal care. This paper is a review of the current research literature on the phenomena of adult attachment to transitional objects. Research findings seem to suggest that attachment to transitional objects is a feature of

psychopathology in adulthood (Cardasis, Hochmoan & Kenneth, 1997; Hooley & Wilson-Murphy, 2012; Markt & Johnson, 1992) and yet theoretically, the adoption of transitional object should be an indication of a healthy developmental phenomenon. If development of the ego is a continuum regardless of age, it is baffling why the presence of transitional object is considered to be a healthy symbolic phenomenon in childhood and an unhealthy manifestation in adulthood. In the review, I shall compare the definitions of transitional objects to determine if differences in outcome are a result of differing interpretation of the concept of *transitional object* as proposed by Winnicott. The aim is to clarify the definitional differences in the literature in order to further the understanding of adult attachment to inanimate objects. This review has the potential to contribute to research on hoarding, where adults become pathologically attach to objects.

Individual Research Paper (Paper #132)
Wednesday 9 October 2013 – 3:35pm (Hall C)
Links between sense of community and "Levee Bank Syndrome" in rural and regional NSW
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Understanding lifestyle and psychological factors related to living in isolated rural communities has significant relevance at a time when risk for serious psychological disorders and suicide is reportedly increasing in these areas (Hirsch, 2006). Although rural residents often face the burden of inadequate resources, medical care and other services (Chambers, 1983), as well as economic pressures (Martin, 2009) and isolation (Baume & Clinton, 1997), many choose to stay loyal to their rural fixtures, and quite often, feel they never want to leave (Halfacree, 1995). A proposed, theoretical reason for this longing to stay is that rural dwellers report a higher 'Sense of Community' (SOC) than regional residents (Puddifoot, 1995). The purpose of this study was to investigate the relationship between SOC and a folk-wisdom derived phenomenon, anecdotally named "Levee Bank Syndrome" (LBS) by the residents of a rural NSW community, in which the term is used universally. LBS is based on an intense urge to return to the confines of the 'Levee Bank', which surrounds the town, after being away for any given time. In this study, LBS was measured using a newly developed scale, the Levee Bank Syndrome Scale (LBSS) (Nicolopoulos & Donnelly, 2012), while SOC was measured using a pre-established scale, namely, the Sense of Community Index – II (SCI-II) (Chavis, Lee & Acosta, 2008). A sample of rural ($n = 137$), and regional ($n = 112$), Australian participants were compared, and the effects of age, ethnicity and location investigated. A relationship between SOC and LBS was found, but only for the Indigenous sub-sample. The rural sample reported higher SOC and LBS than the regional sample, and those in the youngest age group (18-25), as well as those who were (self-described) Indigenous, reported highest LBSS scores. The possible relationship between LBS and dysphoric mood and suicide risk was discussed. Conclusively, this study demonstrated that the LBSS may be a useful tool in understanding the experience of those in rural Australian communities, in particular, younger adults and Indigenous Australians. Consideration of the links between LBS and dysphoric mood and suicide risk, which is ominously high among these groups, is warranted.

Individual Research Paper (Paper #130)
Thursday 10 October 2013 – 10:30am (Hall C)
The influence of online social networking on adolescent girls' body surveillance, internalisation & body dissatisfaction
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Body image is a pressing concern for adolescent girls. The development of girls' body dissatisfaction has been explained by objectification theory (body surveillance) and

internalisation of the media ideal (internalisation). While the relationships between traditional forms of media and body surveillance and internalisation have been established, little research exists on the potential effects the Internet, and in particular online social networking, has on girls' body shame, appearance anxiety, and body dissatisfaction. This study aimed to explore the relationships between social networking, body surveillance, internalisation, body shame, appearance anxiety, and body dissatisfaction, in adolescent girls. It also aimed to explore the mediating effects of body surveillance and internalisation on the relationships between social networking and body shame, appearance anxiety, and body dissatisfaction, respectively. A sample of 65 Australian high school girls (mean age = 12.5 years) completed a self-report questionnaire assessing social networking use, body surveillance, internalisation, body shame, appearance anxiety, and body dissatisfaction. The results indicated that social networking was related to the body image variables; however, statistical significance reduced when analyses using only those that reported using social networking were conducted. Nevertheless, body surveillance and internalisation effectively mediated the relationships between social networking and the body image variables. This research indicates the clear need for future investigation into modern forms of media, and for prevention and intervention programs to address the impacts that online social networking and the Internet have on girls' body image.

Individual Research Paper (Paper #246)
Friday 11 October 2013 – 9:10am (Meeting Room 2)
Creating links in psychology: The effectiveness of a support program (PsychoLinks) in developing research management skills and career preparedness in 4th year psychology students
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PsychoLinks is a research and career support program embedded in the 4th year psychology programs at Queensland University of Technology (QUT). The year-long program consists of seminars and workshops that are independent of course work. Attendance is voluntary. The program is designed to enhance research and project management skills and increase decision making efficacies around future career and study choices. Importantly, it is structured such that key additional skills (such as knowledge of the ethics application process) are introduced proactively, well before they are required. Here we present an evaluation of the PsychoLinks program, aimed at establishing how well it supports the development of research and project management skills (beyond those required for the thesis) and enhances students' career development skills (beyond those embedded in their normal course work). Across 2 years, 41 students enrolled in 4th year Honours and Postgraduate Diploma programs in psychology completed a pre- and post- PsychoLinks program evaluation questionnaire each semester of their enrolment. Students' confidence in the core skills in which they received additional training through the PsychoLinks program (i.e., research skills, data collection and analysis, project management skills, working with others and career development) and in their ability to fulfil thesis tasks (i.e., thesis expectations, thesis planning and thesis enactment) increased significantly across the semester in which the training was presented in the PsychoLinks program. Our findings suggest that a well designed support program, such as PsychoLinks, can play an important role in enhancing the career and research readiness of 4th year psychology students.

Individual Research Paper (Paper #184)
Friday 11 October 2013 – 9:30am (Meeting Room 2)
Plays well with others: Student responses to multidisciplinary placements as undergraduate service-learning
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There has been an increase of work placement units in Australian psychology undergraduate programs. Many of these units are single discipline placements, providing an excellent opportunity for students continuing to further training to consolidate a highly theoretical degree with short term application of psychological knowledge in focused settings. However, graduates who seek employment at the end of undergraduate training will enter much broader multidisciplinary environments. To support these students, the Queensland University of Technology has implemented the Community Engaged Learning Lab (CELL) as a curriculum space to support multidisciplinary placements using a service-learning framework. Students from five different Faculties work in teams to explore innovative solutions to complex and ongoing problems nominated by community organisations. The goal of this lab is to increase student awareness of service-learning values and to develop multidisciplinary awareness and collaboration. This paper aims to explore the student responses to service-learning and multidisciplinary learning within the CELL. Written reflections from students were analysed through an adjusted thematic analysis to determine student uptake of the CELL values and the impact of the lab on their approach to multidisciplinary teams. The reflections indicated a positive appreciation for multidisciplinary work and an increase in student appreciation of their own transferable skills. However, students identified some challenges balancing the requirements of assessment and their desire to serve the community. The staff perspective of implementing this type of program will also be briefly discussed. While service-learning and multidisciplinary frameworks have been adopted by relatively few psychology programs, there are points of alignment between these approaches and our goals for psychology graduates' capabilities. The potential learning from multidisciplinary placements may be particularly beneficial for all students, including those ambassadors of undergraduate psychology entering the workforce after three years.

Individual Research Paper (Paper #211)
Thursday 10 October 2013 – 10:50am (Hall C)
Eating disorders online learning course: Development and evaluation of the online course for health professionals
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The Centre for Eating and Dieting Disorders has developed an online learning course for health professionals to train them in the nature, identification, assessment and management of eating disorders. This course is the result of a collaborative project spanning a variety of care contexts and institutions and draws on the extensive clinical and research experience of a number of internationally renowned specialists in the field. This interactive online course is grounded in evidence-based practice and provides comprehensive training in the medical, psychological and dietetic management of these mental illnesses. There are five course modules, each 3.5 hours in length and utilises a range of learning formats from interactive text, to lectures and role-plays, as well as footage of sufferers and their families. The aim of this pilot study is to evaluate the efficacy of an online training course for improving the course participant's levels of skill, knowledge in treating and managing eating disorder cases. Health professionals completed self-report evaluations pre and post completion of the online course. Significant improvements were shown in multiple domains of both skill and knowledge of

eating disorders treatment. Level of confidence in treating each of the eating disorders also increased significantly among those professionals who completed the training course. This pilot study demonstrates the potential value of using online learning environments for workforce development or for clinics needing to up skill new staff.

Individual Research Paper (Paper #156)
Friday 11 October 2013 – 10:30am (Meeting Room 3 and 4)
Supporting parents of teenagers in a digital world
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Increasingly, parents and carers of teenagers are finding themselves caught in a dynamic digital world which can seem foreign to them. Parenting has always brought its joys and challenges but since the advent of the digital age, particularly during the last decade, with children and teenagers being the "digital natives" and the adults around them struggling to keep up with the technology, parenting has certainly taken on new challenges. With new ways of communicating, such as Facebook and other social networking sites, decisions about allowing access to technology and managing it within the home, as well as new and confronting moral and legal issues to contend with, such as "sexting", parents and carers can find themselves dealing with the unknown. This experience can lead them to feel isolated from their teenagers and uncertain about their role. They can attempt to draw on their own knowledge and experiences which may or may not be useful when dealing with technologies and issues that are contemporary and without compare. This session, from a Community Psychology perspective, will explore these new issues and consider current research about the impact of these technologies on parenting and relationships with teenagers. The session will also consider the most effective ways of supporting parents and carers that assist them to continue to feel empowered in their important parenting role.

Individual Research Paper (Paper #50)
Friday 11 October 2013 – 11:30am (Meeting Room 3 and 4)
iPad technology and testing with the Wechsler scales: Equivalence of digital Q-interactive Administered Cognitive Tasks: WAIS-IV®
O'KEEFE, V. (Pearson Clinical Assessment) [Q-interactive Technical Report 1 authored by Mark H. Daniel, PhD Senior Scientist for Research Innovation on behalf of Pearson Clinical Assessment]
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The purpose of this study was to evaluate the equivalence of scores obtained from the digital administration and scoring of the WAIS IV using Q Interactive iPad technology versus the traditional paper-pencil administration. In Q-interactive the administration occurs using two tablets that "talk" to each other via Bluetooth connection. The clinician uses one to administer instructions, record and score responses, take notes, and control visual stimuli. The client uses the other to view and respond to stimuli. A goal for the Q-interactive platform was to maintain raw-score equivalence between standard (paper) and digital administration formats, so that raw scores would be interchangeable. If equivalence could be demonstrated between Q-Interactive iPad administration and paper-pencil administration, then the existing norms, reliability, and validity information could be applied to Q-interactive results. Introduction: To administer a test in Q-interactive, the examiner and examinee use wireless tablets that are synched with each other so that the examiner can read administration instructions, time and capture response information (including audio recording), and control the examinee's tablet. The examinee tablet displays visual stimuli and captures touch responses. Aim: The purpose of this study was to evaluate the equivalence of scores obtained from the digital administration and scoring of the WAIS IV using Q Interactive technology versus the traditional paper-pencil administration. Method: The non-randomly equivalent-groups method was used for the first WAIS–IV Q-interactive study. The Q-interactive Study 1

sample consisted of individuals, ages 16 to 77, who were recruited by Pearson's Field Research staff or by a market research firm. Power analysis indicates that with 39 or 40 examinees taking each subtest digitally, and with a .75 multiple correlation of the covariate tests and demographic variables with scores on the focal test, the nonrandomly equivalent groups design has a 0.46–0.47 probability of finding a statistically significant effect (at alpha of .05) if the true effect size is 0.2. Results: All subtests have effect sizes less than 0.2, which was set initially as the criterion for equivalence. Conclusion: Results of this research, as well as similar research using the WISC IV, support the ability of clinicians to interpret test scores obtained using the Q-interactive digital iPad platform in the same way as results from standard (paper-based) administration. It should be kept in mind that the studies have used nonclinical samples and that the potential effects of using the digital interface with individuals with particular clinical conditions are not yet known.

Poster Presentation (Paper #259)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Suicidality as a function of post-traumatic stress disorder and relationship quality in Australian Vietnam veterans and their partners

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Non-fatal suicidal behaviours are associated with substantial personal and health-care costs. Moreover, suicidal ideation, suicide planning, and attempted suicide (together referred to as suicidality) may be preliminary steps toward completed suicide. A relationship exists between suicidality and post-traumatic stress disorder (PTSD). Intimate relationship difficulty is also a robust risk factor for suicidality. Furthermore, relationship problems may exacerbate PTSD symptoms and, conversely, PTSD may negatively affect intimate relationship quality. Not only is intimate relationship difficulty common between Australian Vietnam veterans and their partners, they also have significantly higher prevalence of PTSD than the general Australian population. This is the first research to date to compare the risk of suicidal behaviour among Australian Vietnam veterans with that of non-veterans, and the prevalence and relative risk of suicidality in their partners. The current study constitutes a secondary data analysis of information derived from large, representative samples of the general Australian population, Australian Vietnam veterans, and their partners. The influence of relationship quality on the association between PTSD and suicidality in cohabiting Australian Vietnam veterans and their partners was investigated. As predicted, Australian Vietnam veterans and their partners have significantly more thoughts of death and thoughts of suicide, and significantly higher rates of suicide planning, and attempting suicide, than the general population. No support was found for the prediction that high relationship quality buffers the association between PTSD and suicidality; however, PTSD was established as a significant risk factor for suicidality in both veterans and their partners. Moreover, particularly high relationship quality was found between Australian Vietnam veterans and their partners; however, it appears that this high relationship quality actually promotes their suicidality. This association may reflect the strong bond these couples share due to the high level of support the partners' provide to their veterans and the veterans' perceived burden on their loved one. If this is the case, direct action to increase the level of external support given to these couples is urgently required to reduce the risk of future suicide in Australian Vietnam veterans and their partners, as well as more recently returned Australian military personnel and their significant others.

Tuesday 8 October 2013 – 6:00pm (Hall 2)
Images and false recall: Evidence for a relational/item-specific trade-off in short-term memory

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False memories are intrusions of associatively related but unpresented items (i.e. lures), such as the incorrect recall of *needle* after studying *thread, haystack* and *thimble.* In immediate recall tasks, these errors demonstrate the influence of long-term associative networks on short-term memory (STM). In long-term memory (LTM), studying pictures instead of words yields fewer lures, as associative words alone promote relational encoding, while pictures encourage item-specific encoding, which in turn can disrupt relational processing. The current study investigated whether those findings could also be observed in STM. To examine this, related and unrelated word lists were studied alone or simultaneously with a matching picture, or a non-matching picture. The non-matching condition has not yet been examined in this domain, and was introduced because of discrepant findings regarding the effect of distracting information on false memory. While dual attention tasks have revealed a decrease in lure production, auditory distraction has found an increase in false errors. Studying different pictures will therefore contribute to an understanding of the effect of distracting images on false memory production. Correct and false recall of 42 adults aged 18-55 was measured through an immediate serial recall task. Contrary to predictions, results indicated that false memories were not inhibited after studying matching pictures. Viewing a different picture hindered false recall, but not to the point of significance. Additionally it was observed that there was an advantage to memory for related word lists. This indicated that perhaps the dual visual study of word and picture associates leads to a trade-off between relational and item-specific processing. In this study, focusing on the relation among list items appeared to be favoured, thus preventing the potential benefit of encoding additional pictorial information. By removing the concurrent presentation of words and pictures, future research may be able to better determine whether a memory benefit can also occur in STM following the study of images.

Friday 11 October 2013 – 10:30am (Meeting Room 1)
Attention Deficit Hyperactivity Disorder, Developmental Coordination Disorder and anxious and depressive symptomatology in identical twins: Piecing together the jigsaw

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Attention Deficit Hyperactivity Disorder (ADHD) and Developmental Coordination Disorder (DCD), two of the most common developmental disorders of childhood and adolescence, have been found to be comorbid in up to 50% of cases. Depression and anxiety have also been associated with each other, and with both ADHD and DCD. Genetic and environmental factors have been associated to a greater or lesser extent with both of these developmental disorders, and with both disorders of affect. The aim of this study was to gain greater understanding as to whether these disorders co-occur because of diffuse damage to the brain - Atypical Brain Development - which as sequelae manifest in multiple developmental and mood disorders, or whether the association is more complex. The methodology used to piece together parts of this puzzle was the co-twin control design. Our study participants were child and adolescent monozygotic (MZ) twins concordant and discordant for ADHD and DCD, MZ twins with DCD+ADHD, and twins with neither ADHD nor DCD. Results suggested different causal pathways for ADHD

and DCD. There were strong aetiological links between DCD and cerebral palsy (CP). This suggested that DCD and CP fall on a continuum of motor deficits, rather than as described in the DSM and ICD classification systems as discrete disorders. It was hypothesised that DCD, like CP, is largely related to environmental factors in utero, and birth complications, whereas ADHD has a stronger link to genetic factors. Anxious and depressive symptomatology was higher in twins with movement and attention disorders than in twins without. There were differences in findings between anxious and depressive symptomatology in twins concordant for movement disorders in comparison to twins who both had attention deficits. We concluded that these findings underscore the importance of identifying anxious and depressive symptomatology as comorbid disorders with developmental disorders, to facilitate understanding and treatment also of these secondary disorders.

Poster Presentation (Paper #312)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
The role of visual imagery and rumination on trauma responses
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At some point in time, it is likely that most people will have experienced an event considered to be unpleasant, or even traumatic, by the individual's own definition. The process of experiencing the trauma, coping with the distress and, finally, recovering from the event is an important area of study. Two factors have been found to be crucial in the processing and the re-experiencing of trauma responses: visual imagery and rumination. Visual imagery is considered to be a core symptom in trauma responses, as it is characteristic of the re-experiencing component (in the form of nightmares and flashbacks) in individual responses following a traumatic event. Rumination, on the other hand, has often been historically conceptualised in a negative way (e.g., intrusive rumination). However, there is also growing recognition in more recent studies that rumination can be adaptive, in that event-specific deliberate rumination may be positively linked to psychological changes and growth. Previous research has only examined either the effect of visual imagery vividness or the effect of rumination styles on posttraumatic responses. To the author's knowledge, this is the first study to investigate both the effects of visual imagery and rumination styles on posttraumatic growth and distress. The current study included 238 participants who completed an online questionnaire which required them to identify and to reflect back on a traumatic event. This research presentation will provide some preliminary key findings from the study. It is hoped that results from this study will further the understanding of the relationship between visual imagery, rumination, and trauma responses, which will have important implications for the therapeutic process and treatment-planning for individuals recovering from trauma.

Individual Research Paper (Paper #248)
Wednesday 9 October 2013 — 3:55pm (Hall C)
Psychological practice in remote settings: Practitioner perspectives
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Despite efforts to develop appropriate mental health services for remote areas of Australia, there is little research on how psychological services are delivered or how they are adapted to match needs. This presentation reports on a qualitative study which explored the experiences and practice of psychologists working in remote Australia and addressed the question: "What does the profession of psychology need to know about remote practice to prepare and support psychologists to work in remote locations?" Semi-structured interviews were conducted with nine psychologists currently working in remote areas. Interpretative Phenomenological Analysis was used to guide the analysis

of the interview transcripts and the development of themes. A single overarching theme of *Fit* was identified, conceptualised as a reciprocal relationship between remote practice and an individual's understanding of professional identity and professional practice. Two elements were extracted which contributed to the experience of fit: profession and place. The participants' accounts highlighted how these elements acted to influence the experience of fit in remote practice and the sustainability of that practice. Factors which are thought to contribute to psychologists' ability to sustain remote practice or to threaten that ability will be discussed. It is suggested that the fit of professional identity and practice to the demands imposed by the remote context is fragile and vulnerable to change.

Individual Research Paper (Paper #310)
Thursday 10 October 2013 – 10:30am (Meeting Room 1)
Therapeutic orientation and the practitioners' use of fundamental cognitive behaviour therapy interventions
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Cognitive Behaviour Therapy (CBT) is considered an effective therapy for depression and a range of anxiety and other disorders (Epp & Dobson, 2010). The extent to which CBT interventions are used in general clinical practice, as well as the manner with which they are incorporated into treatment has important implications for the appropriate dissemination and application of CBT. This is particularly important because existing data suggest that a large percentage of practitioners integrate a range of therapeutic modalities into their clinical practice (Norcross & Karpiak, 2012; Rønnestad & Skovholt, 2003). The CBT model is now taught to therapists from diverse training backgrounds (Department of Health, 2008), and the interventions of CBT have been transported into other therapies (Kazantzis, Lampropoulos, & Deane, 2005), and in some cases, evolved into service models in themselves (Hayes, Strosahl, & Wilson, 1999). The present paper report data from 1,982 mental health practitioners in Australia who were involved in an on-line CBT training program designed by the Australian Psychological Society (APS) including assessment, cognitive case conceptualisation, and a comprehensive coverage of CBT interventions that had been subject to peer review endorsed by Dr. Aaron T. Beck. Practitioners were registered psychologists, occupational therapists, social workers, and psychiatric nurses, and had been asked to comment on which CBT interventions they utilised within their clinical practice as part of the course requirements. Analyses are reported in order to explore the relationship between therapeutic orientation and professional field on (1) commonly used CBT interventions, (2) the context in which interventions are integrated, and (3) how the interventions are reportedly adapted into these contexts. Findings from this work are presented, and implications for professional development and training in CBT are discussed.

Individual Research Paper (Paper #311)
Wednesday 9 October 2013 – 1:15pm (Hall D)
A multi-level analysis of therapist allegiance to cognitive behaviour therapy as a predictor of short and long term outcomes in treatment for depression
PETRIK, A.M., KAZANTZIS, N. (La Trobe University), DOBSON, K.S. (University of Calgary), & FARCHIONE, D. (La Trobe University)
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The field of psychotherapy research has suggested that therapist allegiance, or adherence to the central theoretical tenets of a therapeutic approach accounts for a small proportion of the variance in the reduction of symptoms, as an index of positive therapeutic outcome. However, it is also the case that prior research has adopted static global categorizations of theoretical orientation, and at best, has focused on the categorization of interventions as a means of defining orientation (e.g., Thoma & Cecero, 2009). Thus, there is a missed opportunity to study the extent to which therapists' use

of techniques in-session are consistent with the theoretical underpinnings of their therapeutic approach (David & Montgomery, 2011). Such a fine-grained analysis promises a more sophisticated representation of orientation, or allegiance in the practice of a therapeutic approach. This paper presents an overview of the development and evaluation of a new measure, entitled the Cognitive Therapy Orientation Scale (CT-OS; Petrik, Kazantzis, & Farhall, 2012). The CT-OS provides an evaluation of therapeutic intervention and its link to underlying mechanisms (e.g., cognitive processes) as described by the therapist during sessions. First, this paper will present a summary of the development and psychometric evaluation of the scale. Second, this paper will present data from 191 ratings from trained observers based on recorded sessions for a subgroup depressed patients ($n = 48$) from a NIMH-funded component analysis of CBT (Jacobson et al., 1996) used to test the hypotheses that greater consistency and clarity in the delivery of the rationale for interventions in a manner consistent with its theoretical tenets is predictive of symptom change (i.e., Beck Depression Inventory, BDI; Beck et al., 1979) assessed post-treatment, and at 6 months, 12 months, 18 months, and 24-months follow-up points after taking into account the working alliance, and a broad assessment of therapist competence on the Cognitive Therapy Rating Scale (Young & Beck, 1980). The data showed that the CT-OS were rated with a satisfactory level of inter-rater reliability (i.e., overall ICCs .74 - .79; free$_{multirater}$ kappa = .81). Higher CT-OS scores were found to be a significant predictor of both treatment outcome at post-treatment ($\beta = -.39$, $p = .004$), and at 6 months follow-up ($\beta = -.262$, $p = .007$). Additional findings and implications of this work are presented.

Professional Practice Forum (Paper #255)
Thursday 10 October 2013 — 1:00pm (Meeting Room 5 and 6)
Challenges and opportunities in the world of psychological testing
PRATT, C. (Australian College of Applied Psychology), **HANNAN, T.** (Charles Sturt University), **HOWE, W.** (Psychological Assessments Australia), **MACQUEEN, P.** (Compass Consulting), & **POWER, M.** (ACER)
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The forum is presented on behalf of the APS Test and Testing Reference Group and focuses on the implications of recent developments with regard to psychological testing. A range of topics will be covered by the speakers with a view to stimulating discussion around issues currently facing psychologists involved in testing. Topics that will be covered include the ethical use of tests and respecting the boundaries of our knowledge; the presentation of test results for different clients and third parties, the use of older versions of tests when more recent ones have been released; delivery modes and the appropriateness of some modes for certain client groups; online testing and the new technologies including the use of apps and social media for test delivery. The speakers will provide short presentations on each of these topics and encourage audience participation through questions and discussion.

Professional Practice Forum (Paper #202)
Friday 11 October 2013 — 8:30am (Hall C)
A model of disaster preparedness, response and recovery
PROMNITZ, J. (Queensland APS State Chair), **BURKE, S.** (APS Disaster Response Network), & **RONAN, K.** (APS Disaster Response Network; University of Central Queensland)
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This forum is the outcome of discussions amongst APS branches in Queensland, Northern Territory and north New South Wales, following the experience of a number of natural disasters over the past 3 years. A model of preparedness, response and recovery is presented from the perspective of providing guidance for APS branches and their members. A key aim is to ensure that branches are prepared appropriately for natural disasters and have a clear understanding of how best to respond. A clear lesson from

some recent disasters is that branches do have a core of appropriately trained members, but are not clear on how to co-ordinate and operationalize their response. The presenters will emphasise evidenced based training in the preparedness phase and the importance of having national and branch level registers of appropriately trained psychologists. The model includes content and standards of training, usage of existing resources available through the APS Disaster Response Network, communication and co-ordination with other agencies and authorities, and communication and operational strategies with branch members. It is anticipated that the model will have the impact of raising the profile of APS psychologists in local communities, assist an appropriate response and also provide practical and moral support for branches who find themselves impacted by a disaster.

Symposium (Paper #277)
Wednesday 9 October 2013 – 1:15pm (Meeting Room 3 and 4)
Applying the science of psychology to the teaching of psychology: writing, quantitative analysis and problem solving
PROVOST, S. (Southern Cross University)
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Overarching abstract
Among the graduate attributes expected of our students, strength in written communication, quantitative methods and critical thinking/ problem solving, are most highly valued. These are the key attributes necessary for a graduate to enter a career in research, a higher-degree in psychology, or employment areas outside of the discipline. However the ways in which we seek to establish these skills in our students seems often to be based more on historical accident than on evidence. The papers of this symposium describe efforts to find ways of enhancing students' skills in these critical areas of development through innovative practice founded on disciplinary knowledge. Martin and Carr consider the nature of the writing task, finding that students prefer a more authentic communication medium than the traditional laboratory report. Provost and Martin describe the relation between the quality of student writing, academic performance, and the student's ability to discriminate good from poor writing. Burton and Beccaria investigate how student's problem solving strategies and approaches to learning are interconnected. Finally Baglin, Reece, Bulmer and di Benedetto describe how a simulated environment, cloud-based collaboration and statistical software can be utilised to provide a powerful context for the acquisition of quantitative research skills.

Presentation 1
Reflections on reflective learning for an authentic learning task
MARTIN, F. (University of Newcastle), & CARR, A. (University of Tasmania)
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Sixty-one students enrolled in the second year unit Cognition completed three assessment tasks which were designed to meet, among other graduate attributes, the graduate attribute: *Graduates will be able to communicate effectively across a range of contexts.* The first assignment was to keep a reflective journal, the second, designed to meet the requirements of authentic learning, was to write a report for a politician, and the third a standard psychology report. Fifty of these students participated in the study by completing a questionnaire regarding their views of the three assessment tasks. Participants found the authentic learning assessment task to be a more valuable experience than either the standard assessment or the reflective journal. They also found the authentic learning task to be less difficult, more engaging and more time consuming than the standard assessment task although they found the standard assessment to be more relevant, suggesting that relevance for students is what they see as helping them pass exams.

Presentation 2
Teaching students to discriminate between good and poor writing
PROVOST, S. (Southern Cross University), & MARTIN, F. (University of Newcastle)
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For students to be able to benefit from feedback provided on their writing, it is necessary for them to be able to discriminate between examples of writing that differing in their quality. The ability of students enrolled in an introductory psychology unit at the University of Tasmania (N=156) to discriminate good from poor writing was assessed by giving them a number of pairs of expressions that differed in quality and asking them to identify the better example. A brief vocabulary and numeracy test was also conducted. The students then completed a tutorial exercise in which they either received a traditional presentation regarding writing skills, or were provided with a number of further pairs of examples and asked to discriminate between them with feedback being provided. Following this exercise, students completed a brief piece of written work, which was assessed and also analysed using the Six-subscales Quality Scale (SSQS) (Phadtare et al, 2009). In the following week this procedure was repeated, but with the alternative tutorial exercise to that which had been experienced in Week 1. A factor analysis of the SSQS revealed two factors which could be categorised as "surface" and "deep" writing skills. The students' surface writing skills improved across time, but deep skills did not. There was some evidence that the order in which the two teaching experiences occurred influenced performance. Post-test discrimination scores were significant predictors of future written performance, examination performance, and whether students would drop out or fail the examination. A combination of sex, vocabulary, numeracy and post-test discrimination scores accounted for 43% of the variance in examination performance. Discrimination training, in combination with appropriate information regarding writing skills, may help students understand the comments they receive in feedback on written work and thus improve their performance across a range of assessment tasks.

Presentation 3
Developing social problem solving skills to enhance deep and strategic learning approaches among first-year students
BURTON, L.J. (University of Southern Queensland), & BECCARIA, G. (University of Southern Queensland)
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Most universities in Australia list problem solving skills as a key graduate attribute. Indeed, well-developed social problem solving skills are positively linked to student and employee engagement, more adaptive stress management techniques, and superior job performance. While the importance of problem solving skills in the workplace and in educational settings is unequivocal, these skills are rarely assessed within the higher education setting. The current paper examines the extent to which one's appraisal of problem solving represents a good approximation of actual skills and can influence student learning outcomes. This paper will report on the nature of the relationships between problem solving appraisal and learning approaches among first-year students (N = 128) at a regional Australian university. As expected, high problem solving appraisal was positively associated with Deep and Strategic learning approaches; low problem solving appraisal was positive associated with Surface learning. The current paper will report how a path analysis was used to model the interrelationships of problem solving appraisal and learning approaches over two points in time. The key implications are discussed. In particular, strategies for promoting the development of effective problem solving skills and learning strategies early in a student's tertiary studies are outlined.

Presentation 4

Simulating the data investigative cycle in less than two hours: Using a virtual human population, cloud collaboration and a statistical package to engage undergraduate psychology students in a quantitative research methods course
BAGLIN, J. (RMIT University), **REECE, J.** (RMIT University), BULMER, M. (University of Queensland), & DI BENEDETTO, M. (RMIT University)
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Providing practical and relevant experience with the data investigative process is known to help engage students in quantitative research methods courses; however, limited student experience, time constraints, and ethical concerns present serious challenges to this goal. Recent advances in technology may provide innovative solutions. This paper reports on the development and implementation of a series of two-hour weekly computer laboratories that simulated the data investigative cycle in a research methods course for psychology students. The technologies included an online virtual human world, known as the Island, cloud collaboration technology and a statistical package. Each laboratory session aimed to engage students in all stages of the data investigative cycle, specifically: stating a problem, planning a study, gathering and analysing data and drawing conclusions. Student feedback from the sessions was overwhelming positive, which highlights the potential of combining innovative technologies to actively engage students in learning research methods and statistics.

Individual Research Paper (Paper #266)
Friday 11 October 2013 – 2:20pm (Meeting Room 2)
Creating an online community for sufferers of asbestos-related diseases, their families and carers: Impacts on economic, social and mental well-being
PROVOST, S. (Southern Cross University), VAN DER ZWAN, R. (Southern Cross University), CAIRNCROSS, G. (Southern Cross University), & TUCKER, J. (Southern Cross University)
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The diagnosis of any asbestos-related disease is a devastating event for individuals and their families. The median life expectancy for people with a diagnosis of the asbestos related malignancy mesothelioma is 2 years. The lifestyle of sufferers and their families will be seriously affected, often at a time of life where the sufferer was anticipating spending more time with their family after a lifetime of working. The focus of most research into asbestos-related diseases has been, quite naturally, on the medical and legal aspects of its management. The Comcare-funded project described here, *The Asbestos Narratives: Understanding the Impact of Asbestos Disease on Individuals and Families and the Role of the Online Community*, has three main goals. First, we seek to understand the social and psychological experiences of asbestosis sufferers, families, and carers. Second, we hope to give stakeholders an opportunity to share their experiences with others in the community, both those who have been affected by asbestos exposure and those who have not. Finally we anticipate that the opportunity for information sharing and support through an online community will provide a positive benefit to participants' psychological well-being. With the assistance of the Asbestos Disease Foundation of Australia and Slater and Gordon Solicitors, asbestosis sufferers, family members and carers have been asked to respond to a questionnaire relating to social, health, and psychological impacts of diagnosis. Individuals expressing an interest in participating will complete a further more detailed interview, which includes an examination of the economic consequences of the disease. Finally, those wishing to participate in the online community, a protected social media site delivered by vTeams, will be provided with access to this resource. After 2 months of participation these individuals will complete a second questionnaire which allows any changes in social, health or psychological factors to be tracked, as well as providing an evaluation of their experiences with the online community. The outcome of this on-going project will be considered with respect to the achievement of the three goals described above.

Thursday 10 October 2013 — 1:40pm (Hall D)
Australian psychologists' perspectives on cross-cultural practice with clients of culturally and linguistically diverse (CALD) backgrounds

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The multicultural character of Australian society increasingly requires psychologists to treat clients from culturally and linguistically diverse (CALD) backgrounds. The need for the development of multicultural competence by the psychology profession has been identified in mental health policy and ethical frameworks as essential to ensuring effective cross-cultural psychological practice with CALD clients. However, in the Australian context little empirical research has been undertaken to understand what psychologists themselves do or think about their cross-cultural practice with CALD clients. The present study's aims were: to explore Australian psychologists' experiences of cross-cultural practice with CALD clients; to identify elements of effective cross-cultural practice; to identify barriers to effective cross-cultural practice; and to identify how psychologists learn to work cross-culturally. Thirteen experienced cross-cultural practitioners provided 29 self-selected critical incident narratives of their experiences in cross-cultural practice with CALD clients. They subsequently completed semi-structured interviews. Thematic analysis found that psychologists' experiences of cross-cultural practice when first working with CALD clients left them 'feeling thrown in the deep end' without the necessary skills to effectively treat their clients. Over time their experiences of working cross-culturally shifted to enjoyment and mastery of a range of applied multicultural competencies. However, even as experienced practitioners, participants felt frustrated by systemic barriers to working effectively with their CALD clients. They also felt overwhelmed working with asylum seekers and/or refugee clients. Secondly, data analysis identified 10 elements of multicultural competencies that were applied by participants in their practice with CALD clients. Barriers to effective practice were identified in four domains: systemic practices; the psychologist's stance; client attitude/social status; and the relationship between client and psychologist. The study found evidence that Australian psychologists do not learn to work effectively with CALD clients through their training programs. Instead participating psychologists had a strong interest in cultural issues, sought out cultural immersion experiences, and in the main learned on the job after realizing that they were ill equipped to work cross-culturally by standard Western psychology training programs in Australia.

Wednesday 9 October 2013 — 5:30pm (Hall 2)
Activation of the sensori-motor system in a psychotherapy treatment setting promotes affect regulation

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Affect regulation is the ability to regulate mood and exercise conscious control over both positive and negative emotional arousal states. Difficulties with affect regulation are common to many mental health disorders. Improved affect regulation precedes the second phase of a treatment plan, problem solving and behaviour change. Treatment that targets the sensori-motor, cognitive and emotional systems are increasingly proven by research to benefit affect regulation.Therapeutic sensory stimulation has numerous neural impacts, including increased neurotransmitter release, promoting resilience. Combined therapeutic sensory stimulation and psychotherapy is also beneficial to two neural systems central to affect regulation, namely the amygdala and hippocampus. This study aims to demonstrate the effectiveness of a combination of sensori-motor and psychological treatment interventions for improved affect regulation. Selection included 20 clients and outcomes were measured on the DASS 21 self evaluation questionnaire. The main findings: twenty participants showed 44 percent reduction in symptoms after

five treatment sessions, 86 percent of change achieved within the first three visits. The study is limited in the use of a small sample and self evaluation questionnaires, no control group. However the participants did show a rapid and significant reduction in symptoms of anxiety, stress and depression and a corresponding increase in positive mood states. They reported less emotional reactivity, impulsivity and a novel increased ability to think before responding to situations. These noticeable benefits raised motivation to continue with treatment. It can be concluded that treatment protocols that activate sensori-motor, cognitive and emotional systems can effectively and rapidly improve affect regulation. The potential benefit of this result is increased client motivation to comply with treatment and more rapid progression to the second phase of treatment, namely problem solving.

Individual Research Paper (Paper #197)
Wednesday 9 October 2013 – 2:15pm (Hall D)
Australia's innovation in youth mental health service delivery – impacts for headspace clients
RICKWOOD, D. (University of Canberra)
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headspace youth mental health centres were initiated in 2006 as the Australian Government's response to high levels of need for mental health care and low levels of service use among adolescents and young adults aged 12-25 years. Services are being progressively rolled out across the nation, to achieve a total of 90 headspace centres by 2015. headspace represents an innovative reorientation of youth mental health service delivery, designed as highly accessible, youth-friendly, integrated service hubs and networks providing evidence-based interventions. The core service elements are mental health, alcohol and other drugs, general health and vocational support. Access to allied health services, often provided by psychologists, is a fundamental component of the model. This presentation aims to consider whether headspace is achieving its objectives related to improving young people's service access and mental health and wellbeing. It presents the first data available from a new data system collection that was implemented at the start of 2013. Information on all headspace clients from January to June 2013 is used to describe the characteristics of young people who are presenting to headspace centres and the reasons for their attending. It also examines outcomes in terms of changes in levels of psychological distress, life satisfaction, and wellbeing for headspace clients. Results show that headspace centres are responding to high levels of need and that services are being provided to young people at all stages of mental ill health, although the majority are appropriately targeted as early intervention. Outcomes are being achieved in many relevant domains for most clients, although there are areas where there is need for improvement. Overall, however, Australia's commitment to youth mental health through this substantial government investment is making a significant difference to large numbers of young people.

Poster Presentation (Paper #199)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Data collection processes transforming practice in youth mental health services
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Data collection processes for health service monitoring and reporting are usually considered burdensome by service providers and irksome by clients, and the data provided are invariably found to be poor quality by those who need to use it. headspace centres have also been plagued by these common problems whereby data processes were not effectively meeting organisational, staff or client needs. In response, headspace has developed and implemented an innovative data collection process, which has overcome many problems and had multiple additional benefits at many different levels. This paper describes the headspace Minimum Data Set (MDS) application, its

development and the methods used to support its implementation and uptake in headspace centres. Development of the new data items and web-based system required considerable collaboration as well as an extensive change management process to ensure uptake of the new system. Multiple benefits have been achieved by the new system, beyond those originally planned. These have included benefits for clients and service providers related to clinical care and client participation in health care. Implementation of the MDS application demonstrates how good data processes can become a valuable tool for transforming practice in youth mental health services.

Individual Research Paper (Paper #201)
Friday 11 October 2013 — 10:50am (Meeting Room 3 and 4)
Seeking help online vs. in-person: Service extension or service modification?
RICKWOOD, D. (University of Canberra)
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headspace was set up in 2006 to improve help-seeking options for young people in Australia by providing youth-friendly, in-person mental health service centres across Australia. In 2011, it added an online platform—eheadspace—to increase its reach and make seeking help from headspace even more accessible to young people. This presentation compares the characteristics of young people accessing the different service options in terms of their demographics, presenting problems, risk factors and other variables affecting help-seeking behaviour. The aim is to determine whether the online option is an extension of in-person service access or whether a different type of client is attracted to this form of service delivery. Data were obtained through the revised minimum data set applications used to collect information on all headspace and eheadspace clients between January and June 2013. Results show that there are some quite striking differences between clients accessing the in-person headspace services compared with those going online. In particular, relatively more young women go online, compared with young men who are more likely to attend in person. Levels of psychological distress on presentation are significantly higher for those accessing online services compared with those visiting a centre. The reasons for these differences are considered as well as the implications for increasing young people's help-seeking behaviour through the use of technology.

Symposium (Paper #102)
Friday 11 October 2013 — 10:30am (Hall D)
DSM-5 Neurodevelopmental Disorders: Understanding the spectrum and the child beyond the label
RINEHART, N.J. (Deakin University)

Overarching abstract
In the 5th revision of DSM, autism and Asperger's disorder (AD) will be combined to a new diagnostic category 'autism spectrum disorder' (ASD), and for the first time will allow for the comorbid diagnosis of attention deficit hyperactivity disorder (ADHD). The decision to drop AD from DSM-5 has been met with concern that some children with a current diagnosis of AD will not meet the new ASD criteria.   In the proposed revision, the category of 'Pervasive Developmental Disorders' will be replaced with 'Neurodevelopmental Disorders', more broadly including ASD, ADHD, motor disorders, and learning disorders. The overarching aim of this symposium is to present a series of studies which inform our understanding of neurodevelopmental disorders as they present in 7-12 year old children. Important issues in symptom comorbidity, motor dysfunction, learning, and emotional processing in girls and boys with ASD will be examined. Taken together, the findings support the conceptualisation of these disorders in terms of a 'neurodevelopmental disorder spectrum', but also show important disorder and gender specific differences that have implications for clinical practice. The final paper highlights the importance of thinking of 'the child beyond the diagnostic label' addressing the role of attachment in children with ASD.

Presentation 1
Motor performance in children with Autism Spectrum Disorders and Attention Deficit Hyperactivity Disorder: Further understanding DSM-5 categorical and dimensional approaches
PAPADOPOULOS, N. (Monash University; Deakin University) MCGINLEY, J. (The University of Melbourne), BRADSHAW, J. (Monash University), & RINEHART, N. (Deakin University)
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There are many controversies around current DSM-IV-TR criteria and proposed DSM-5 diagnostic definitions for autism, Asperger's disorder, and Attention Deficit Hyperactivity Disorder (ADHD). These controversies are fuelled by a lack of empirical data that informs the clinical separateness versus spectrum/ comorbidity conceptualizations of these disorders. There is also an increasing recognition in the literature of understanding non-core symptoms such as motor difficulties in children with neurodevelopmental disorders. The aim of this study is to investigate the motor profile of Autism, AD and ADHD in relation to social-emotional symptoms in a bid to better understand the boundaries, similarities, and differences between these disorders. A series of studies that systematically define the motor profile of autism (n= 23), AD (n=22), ADHD (n=14) and typically developing (TD) (n=34) children using measures of motor proficiency (Movement Assessment Battery for Children) and an upper limb (Fitts' aiming) task were conducted. The relationship between motor anomalies and core social-communicative and cognitive/behavioural features of these disorders were explored using parent report clinical measures (Developmental Behavioural Checklist; Social Responsiveness Scale and Conner's Rating Scale). Distinct motor profiles were evident for children with autism, AD and ADHD which support the current categorical approach used to define neurodevelopmental disorders. In addition, the association between motor impairment and social-communicative symptoms in ADHD are in line with proposed DSM-5 revisions to adopt a dimensional approach considering ASD and ADHD on a spectrum. There are two clinical implications stemming from this study, (1) although children with autism and AD will now come under the ASD diagnostic category in DSM-5, careful attention is required to understand the unique motor challenges children with autism v AD experience, and (2) ADHD children who are screened for autism, may not experience the same level of motor difficulties as children with comorbid autistic symptoms. These findings highlight the importance of understanding the unique motor challenges associated with autism, AD and ADHD in both a categorical and dimensional way.

Presentation 2
Key clinical issues across the autism spectrum: ADHD, learning, and gender
MAY, T. (Monash University), CORNISH, K. (Monash University), & RINEHART, N. (Deakin University)
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A high proportion of children with Autism Spectrum Disorder (ASD) meet diagnostic criteria for a co-morbid diagnosis of Attention Deficit Hyperactivity Disorder (ADHD), yet how this manifests according to gender is unclear. Gender differences in the clinical profiles of ASD may provide clues regarding why four males for every one female are diagnosed with this condition, a gender disparity is also present in ADHD. There is presently no general agreement on the cause of this gender disparity in ASD with biological, behavioural and socio-cultural factors all implicated. This study aimed to examine normally intelligent primary school aged boys and girls with ASD to understand any differences in autism symptoms, internalising and externalising symptoms including ADHD, academic performance and executive functioning over two time points. Fifty-six high-functioning children with ASD and 44 controls (TYP), (with an equal number of girls and boys) were recruited. Children were assessed at baseline aged 7 to 12 years and one year later. Parent reported autistic severity, attention and anxiety symptoms were

collected. Tests of switching and sustained attention and reading and mathematics achievement were administered at both time points. Information about school placement and support were also collected. Findings indicated similarity between genders across intellectual, academic and executive functioning and autistic symptoms. Males were more hyperactive and females had more social anxiety, with these differences not specific to ASD and also present in the TYP group. Seventy-six percent of children with ASD met ADHD criteria, specifically inattentive type 26.8% (boys 25%, girls 28.6%), hyperactive-impulsive type 16.1% (boys 17.95%, girls 14.3%) and combined type 30.4% (boys 42.9%, girls 17.9%). Boys with ASD received significantly more integration aide support in mainstream schools than did girls. Overall this well matched group of boys and girls with ASD showed very similar profiles across two time points. The few gender differences found were not specific to children with ASD, being also present in typically developing children. More hyperactive-impulsive symptoms in boys might contribute to more boys being referred for assessment and diagnosed with ASD. Implications will be discussed in regard to a biopsychosocial model of gender difference in ASD.

Presentation 3
Attachment, emotion-recognition and emotion-regulation in children with autism spectrum disorders: Going beyond diagnostic labels
SIVARATNAM, C. (Monash University), NEWMAN, L. (Monash University), MOSELEY, D. (Monash University), & RINEHART, N. (Deakin University)
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The ability to recognise, understand and regulate emotion appropriately has been long identified as core to everyday communication and social interaction in children. In typically-developing (TD) children, a secure parent-child attachment dyad predicts the child's subsequent ability to regulate emotion and respond appropriately to emotional displays. There is currently a gap in our understanding of the role of attachment in influencing the emotion-processing ability of children with ASD. To date, there has been little research exploring the relationship between attachment security and emotion-processing ability in children with ASD. This study aims to explore the contribution of attachment relationships to emotion-recognition and regulation ability in children with ASD. It is hypothesized that emotion-recognition and regulation ability will be positively related to attachment security in both groups. A total of 60 children (male and female) aged between 6 to 12 years participated in the study. The first group (n = 30) had a formal diagnosis of either High-functioning Autism or Asperger's Disorder. The TD group (males and females) (n = 30) comprised children with no diagnosis of ASD or other neurodevelopmental disorders such as Attention Deficit Hyperactivity Disorder. Children completed two measures of attachment security and paradigms assessing emotion-recognition ability and Theory of Mind. Parents were administered several questionnaires about their child's social, emotional and behavioural adjustment, as well as a brief interview to describe their children's' attachment behaviours. Results from the assessment of 60 children will be presented. Group differences between levels of attachment security in ASD and typically developing groups will be compared, and the magnitude of the relationship between attachment security and emotion processing will be explored and compared in both groups. It is anticipated that findings from this study (data completion May 2013) will be one of the first to address the current gap in the literature relating to the role of attachment in influencing emotion-processing ability in ASD. It will also contribute to the growing knowledge on the patterns of attachment security in children with ASD. This study adopts a child-centred approach that takes a holistic perspective on the child's socio-emotional functioning and adjustment beyond diagnostic labels.

Friday 11 October 2013 – 2:00pm (Meeting Room 1)
The use of novel neurobiological approaches to assess and treat autism: How far have we come?
RINEHART, N.J. (Deakin University)

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Overarching abstract

There are significant gaps in our understanding of the aetiology and treatment of autism, Asperger's disorder, and attention deficit hyperactivity disorder (ADHD). These neurodevelopmental disorders are clinically heterogeneous with overlapping symptoms involving emotional-behavioural dysregulation, social-communication impairments, and motor dysfunction. Over the last decade neurodevelopmental disorder research has increasingly focused on the motor rather than core psychiatric symptoms; this approach holds promise for improving current diagnostic methods that rely on subjective clinical assessment. The overarching aim of this symposium is to bring together data from three state-of-the-art neuromotor approaches aimed at improving the neural definition and treatment of autism, AD, and ADHD: Ocular motor, Gait analysis, and Repetitive Transcranial Magnetic Stimulation (rTMS). Together, these papers show a unique neuromotor profile for each disorder that correlates with core clinical symptoms. Findings support the hypothesis that individuals with different neurodevelopmental disorders may be characterized by a unique pattern of fronto-striatal and cerebellar-motor related impairment. The final paper provides preliminary evidence for the use rTMS as a future biomedical treatment for autism. This neuromotor approach to defining psychiatric disorders is in-line with Rutter's (2011) call for future revision of DSM to use 'etiological and neural circuitry' profiles (p. 653) as part of the diagnostic criteria.

Presentation 1
Eye movements in autism and Asperger's disorder: Understanding inaccuracy and refinement of accuracy
JOHNSON, B. (Monash University), RINEHART, N.J. (Deakin University; Monash University), MILLIST, L. (Royal Melbourne Hospital), TONGE, B.J. (Monash University), WHITE, O. (Royal Melbourne Hospital), & **FIELDING, J.** (Monash University)

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Impairments in eye movements are one of the subtle motor impairments common in children with autism and Asperger's disorder (AD). Ocular motor studies have the potential to improve our current neurobiological definition of these disorders, and contribute to our understanding of these disorders as unique versus spectrum disorders. Aim: To comprehensively characterise visually guided eye movements in high functioning autism (HFA) and Asperger's disorder (AD). Methods: Children aged 9-14 years with high-functioning autism (HFA; IQ>80; n=10), AD (n=13) and typically developing (n=12) children participated in the study. Baseline eye movement accuracy was established by examining visually guided eye movements made to 5 and 10-degree targets. Refinement of eye movement accuracy was assessed using a saccade adaptation task, in which targets to 10 degrees are stepped back to 8 degrees as an eye movement is made. Over time, participants learn to make saccades to the 8 degree target. Results: Examination of baseline eye movement accuracy revealed both small and large amplitude eye movements were more inaccurate in HFA, which was not observed in AD. The velocity profile of eye movements was preserved in both HFA and AD, which indicates deficits in refinement of motor accuracy, rather than deficits in generating saccades. The saccade adaptation experiment confirmed slower refinement of accuracy, accompanied with atypical changes in the velocity profile of eye movements, in children with HFA. In AD, adaptation time was comparable to controls, however the velocity profile showed some abnormalities. Conclusion: Eye movement abnormalities were more pronounced in HFA than AD. These findings are consistent with greater disruption of the cerebellum in HFA than AD. The findings from this study indicate that autism and

AD are underpinned by differential developmental brain impairment and support the current DSM-IV-TR approach to recognising these disorders as clinically distinct.

Presentation 2
Gait analysis and motor proficiency: Improving clinical definition of children with autism, Asperger's disorder, and attention deficit hyperactivity disorder
MCGINLEY, J.L. (University of Melbourne), RINEHART, N. (Deakin University), PAPADOPOULOS, N. (Monash University; Deakin University), MURPHY, A. (Monash Health), TONGE, B. (Monash University), & BRADSHAW, J. (Monash University)
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Autism, Asperger's disorder (AD) and attention deficit hyperactivity disorder (ADHD) are highly prevalent neurodevelopmental disorders. Disordered movement affecting gait or posture have been reported as clinical features of these disorders, yet are inconsistently reported in the literature and require systematic investigation in well-defined clinical samples. The aim of this study was to describe the gait patterns of children aged 7 – 12 years with autism, AD, and ADHD, and investigate the associations between gait patterns, motor proficiency and key clinical symptoms. In a series of studies, instrumented gait analysis systems measured the gait characteristics of age, gender and height matched groups of children with high functioning autism (HFA; n = 24), AD (n = 27), ADHD (n = 14) and typically developing (TD; n = 37), in conjunction with clinical measures of motor proficiency, emotional-behavioural and ADHD symptoms. A 3-dimensional motion analysis system recorded spatio-temporal and kinematic data with a whole body biomechanical model. A Gaitrite electronic walkway system recorded spatio-temporal and footprint data. Motor proficiency was assessed with the Movement Assessment Battery for Children, and clinical symptoms were assessed with the Development Behavioural Checklist (DBC) and Connors parent rating scale. Gait analysis confirmed the presence of a range of subtle and distinct neuromotor differences in children with HFA, AD or ADHD relative to the TD group. Stride width was widest in the AD group, and stride width variability was increased in the HFA and AD groups. Children with HFA or AD walked with altered trunk movement, varying with gait speed. At fast speed, children with ADHD were faster and walked with a higher stepping rate (cadence). Key gait characteristics were significantly associated with clinical features; for example step to step variation was associated with total DBC score in the HFA/AD group, and walking speed was associated with Inattention symptoms in the ADHD group. This study sets the scene for translational motor research to improve diagnostic assessment and clinical decision-making. Understanding the unique motor profile will be important for informing future efforts to tailor multidisciplinary approaches to intervention involving psychology, occupational therapy and physiotherapy.

Presentation 3
Repetitive transcranial magnetic stimulation (rTMS) in autism spectrum disorder
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Introduction: Repetitive transcranial magnetic stimulation (rTMS) is a non-invasive technique for stimulating brain regions and networks. It has been used with success in the treatment of depression, and when applied to relevant cortical regions may be useful for targeting core symptoms and associated features of autism spectrum disorder (ASD). Aim: To investigate whether rTMS can improve motor and social functioning among children and adults with ASD. Method: We have conducted randomised, placebo-controlled clinical trials to investigate whether rTMS can improve motor function in children with ASD (n = 11), and whether a new form of "deep" rTMS can yield social improvements and enhanced mentalising in adults with ASD (n = 30). Results: Results from our first trial demonstrate that rTMS to key motor regions (primary motor cortex, supplementary motor area) yields electrophysiological improvements in ASD that are

associated with movement preparation and execution. In our second trial, a two-week course of deep rTMS to the bilateral medial prefrontal cortex yielded clinical improvements in social relating ability among adults with ASD. Conclusion: These data suggest that rTMS holds promise for the development of a first biomedical intervention in ASD. Concurrent psychological intervention seems necessary, however, for those experiencing neurocognitive benefits from rTMS.

Individual Research Paper (Paper #233)
Wednesday 9 October 2013 — 3:15pm (Hall C)
Understanding of mental health issues and help-seeking in very remote central Australia
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The study focused on a unique cohort of people living in very remote central Australia in order to examine their beliefs and understanding about mental illness and help-seeking. A qualitative approach was adopted using in depth semi-structured interviews and inductive thematic analysis. Participants were beef and sheep farmers (n=10) residing on properties in very remote central Australia. Participants understanding of mental health issues and help-seeking were limited to common mental health conditions, primarily depression, and a basic knowledge of help-seeking. A perceived mismatch between the way professional services operate and the needs of people living on remote properties was identified as preventing help-seeking. Cultural values and attitudes of stoicism and self-reliance were described by participants as contributing to reluctance to seek help for mental illness. Other help-seeking barriers included physical access, limited services to seek help from and stigma. Participant's made continuous references to drought as an acceptable explanation for mental health issues. The findings of this study highlight the need for continued efforts to develop mental health literacy and more culturally appropriate service delivery to remote regions of Australia. In particular, programs which aim to support the wellbeing of farmers during times of drought need to consider how mental illness will be perceived by farmers when the drought "breaks" and there is no longer a "good" reason to be depressed.

Individual Research Paper (Paper #213)
Thursday 10 October 2013 — 10:30am (Meeting Room 2)
Estimating the Prevalence of Dementia in the Torres Strait: Issues and Challenges
RUSSELL, S.G. (Queensland Health; James Cook University), STRIVENS, E. (Queensland Health; James Cook University), BONYTHON-ERICSON, S. (Harvard School of Public Health), & MILLER, G. (Queensland Health; James Cook University)
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Recent research in the Kimberley region of Western Australia found a prevalence rate of dementia in Aboriginal Australians of 12.4%, which is 5.2 times higher than the population rate of 2.4% (Smith et. al., 2008). Torres Strait Islanders experience similar socioeconomic disadvantage and poorer health outcomes as Aboriginal Australians in general, with those living in the Torres Strait having similar levels of disadvantage as remote Aboriginal communities. It is not known if Torres Strait Islander communities share this increased risk of dementia, although conditions such as cardiovascular disease, hypertension and diabetes, which may all contribute to increase the risk of dementia, are found in higher numbers within Torres Strait Islander communities. Until recently, such research has been hampered by the lack of culturally appropriate assessment tools for Indigenous Australians. The Kimberley Indigenous Cognitive Assessment (KICA) was developed to address this gap, with a shortened version of the tool being recently validated in Torres Strait Islander communities (LoGiudice et al., 2011). The aim of this study was to estimate the prevalence of dementia in one Torres Strait Islander community and to test the appropriateness of the research methodology

for a future larger prevalence study. A total of 20 residents aged 45 years and above residing on Hammond Island in the Torres Strait participated in a comprehensive health assessment using the KICA assessment tool and Geriatrician review. The prevalence of dementia was 5%, which was lower than previous research in the Kimberley but still higher than found in the general population. High rates of vascular risk factors were also identified and may be contributing to this increased risk of dementia. Given the small sample and diversity in lifestyle in the Torres Strait, results from this pilot study may not be generalisable. Issues and challenges facing future research projects addressing the prevalence of dementia within the wider Torres Strait region will be discussed.

Poster Presentation (Paper #174)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
Complex career transitions and the role of athletic identity in professional sport
RYAN, **M.J.** (Australian College of Applied Psychology), & CHAMBERS, T.P. (Australian College of Applied Psychology)
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Determining the influence of a strong and exclusive athletic identity on career decision making for professional athletes was the primary aim of the current study. Previous research has shown that when athletes associate strongly with the role of being an athlete, career transitions can become very complex. Off-field support networks that help athletes make decisions about their careers beyond sport are important because a career-ending injury, deselection or retirement can occur at any time. Even though athletes receive extensive vocational support and are involved in career development programs, many professional athletes experience personal trauma as they transition into a post-sporting career. The study therefore investigated the difficulty AFL athletes experience in deciding upon a career beyond professional sport and the importance of the support provided by the player development manager (PDM). Thirty-four male athletes from the Australian Football League (AFL), aged 19 to 34, completed an online survey. The years of playing experience in the AFL level ranged from 1 to 17 years (number of games ranged from 0 to 334). Results were analysed across three different phases of an athletic career: early (0 to 3 years), mid (4 to 7 years) and late (8 or more years). Contrary to previous research, athletes reported high associations with athletic identity and low career decision-making difficulty: no differences exist among career phases and career decision-making difficulty and athletic identity. The perceived importance of career support provided by the PDMs was reported as essential to the athletes' ongoing professional and personal development. Findings from the present study contribute to existing knowledge regarding athlete support staff, which will be discussed in the context of relevant research.

Poster Presentation (Paper #196)
Wednesday 9 October 2013 — 5:30pm (Hall 2)
The psychological effects of paracetamol
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The current study extended the recent research by DeWall et al. (2010) which demonstrated that paracetamol was effective in alleviating hurt feelings, or social pain, experienced in daily life. The current investigation had three aims. First, the specificity of paracetamol action was explored. Second, the possibility of a dose-dependent effect of paracetamol on the magnitude of the decrease in hurt feelings was investigated. Third, the relationship between individual differences in attachment dimensions of anxiety and avoidance and both the initial levels of hurt feelings and the magnitude of the decrease in hurt feelings was explored. Participants (n=98) were instructed to take two 500mg paracetamol capsules a day for 3 weeks as well as provide daily ratings of hurt feelings, positive emotions, negative emotions and physical pain. Participants were also asked to indicate how much paracetamol they ingested each day, which was later used as a

measure of medication compliance. Prior to commencing the paracetamol treatment, participants completed a measure of adult attachment. The results revealed that not only did hurt feelings significantly decrease during the course of the study but also that the magnitude of this decline was positively related to medication compliance. Moreover, while there was also a significant decrease in self-reported negative affect, no changes were observed for positive emotions and physical pain. Furthermore, high levels of attachment anxiety significantly predicted high levels of initial hurt feelings. Attachment anxiety was also negatively related to medication compliance and unrelated to the magnitude of change in hurt feelings. Finally, attachment avoidance was unrelated to hurt feelings, medication compliance and the magnitude of decrease in hurt feelings. In summary, the current study replicated the results of DeWall et al. (2010) by demonstrating that paracetamol not only reduced hurt feelings specifically but also negative affect in general. The study also provided initial evidence that the effect of paracetamol on the reduction in hurt feelings may be dose-dependent. These findings indicate that short-term use of low doses of paracetamol may be a useful adjunct to the psychological treatment of disorders characterised by an increased sensitivity to hurt feelings and other negative emotions.

Poster Presentation (Paper #118)
Tuesday 8 October 2013 — 6:00pm (Hall 2)
Are Australian women embracing the 'Superwoman' ideal? An exploration of women's choices around working and childrearing
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The 'Superwoman' is a woman who aspires to 'do it all' – to be a perfect mother while sustaining a prestigious career. While most women in Australia are no longer the traditional 'stay at home' mothers and are instead combining working with childrearing, it is unclear whether these women are espousing this image of the 'Superwoman'. To explore this and other determinants influencing the choices women make about childrearing and working, women completed a survey measuring their adherence to the 'Superwoman' ideal. Two groups of women were identified: those high in 'Superwoman' ideals ('Superwomen') and those less high ('Non-Superwomen'). 'Superwomen' were younger and characterised by strong adherence to the Superwoman Construct (Murnen, Smolak, & Levine, 1994) and strong work role salience. The two groups were then compared on several variables relating to working and childrearing. 'Superwomen' were found to be more likely to have had mothers who worked and to have completed tertiary education, but less likely to have children. The two groups did not differ in family role saliences, self-efficacy for managing work-family conflict, levels of support, work characteristics or adherence to traditional sex roles. It was concluded that while most women worked while raising a family and that women in Australia are likely to be supported in performing the dual roles of mother and worker, the 'Superwoman' is still a distinctive ideal embraced most often by young educated women with a high drive to excel at their working role but whom are also strongly committed to raising a successful family.

Individual Research Paper (Paper #137)
Wednesday 9 October 2013 — 3:35pm (Meeting Room 1)
The relative influence of sedentary behaviours versus physical activity on Body Mass Index in a sample of Australian children
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Findings from studies investigating physical activity (PA) in Australian children have been mixed in terms of family-influenced motivations to exercise, as well as the subsequent influence of PA on obesity levels. Our objective was two-fold. Firstly to investigate whether a) parental modelling (children observing parents exercise and enjoyment of

sport) or b) parental support (driving to sports, spectating, encouraging children to participate) had the greater influence on the child engaging in PA. Secondly to investigate the relative influence of the child's PA and screen-time sedentary behaviours on Body Mass Index (BMI). Primary caregivers of 144 children (54% male), between the ages of 5 and 13 years, completed a retrospective seven-day questionnaire to report 1) their own physical activity levels and attitudes towards same, and 2) their child's physical activity level, sedentary "screen-time" behaviours, and child's BMI. Participants were primarily recruited from Sunshine Coast sporting clubs, potentially yielding a (biased) relatively active sample. Firstly, parental modelling and attitudes showed no relationship with a child's PA levels. Measures of parental support however, combined to account for 25% of the variance in a child's PA level. Secondly, in contrast to previous research, no significant correlation to a child's PA levels with screen-time was shown. An independent t-test showed children in the normal BMI range ($n = 86$) exhibited significantly lower screen-time usage when compared with overweight children ($n = 46$). No significant difference in the level of PA was reported for children in both the normal and overweight BMI ranges. Parental support influenced the child's PA level, not parental modelling. However, it was not the amount of PA that affected a child's BMI in this sample, but rather the amount sedentary screen-time. Public health/education campaigns should focus on increasing parental awareness of idle-time on children's weight.

Poster Presentation (Paper #237)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Improving psychosocial support for carers of stroke patients via an optimal health program

SKI, C.F. (Australian Catholic University), O'BRIEN, C.L. (The University of Melbourne), MOORE, G. (The University of Melbourne), ROLLEY, J.X. (Deakin University), THOMPSON, D.R. (Australian Catholic University), LAUTENSCHLAGER, N.T. (The University of Melbourne), GONZALES, G. (St. Vincent's Hospital), HSUEH, Y. (The University of Melbourne), & CASTLE, D. (The University of Melbourne)
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Stroke is a chronic illness that imposes a significant psychological and social burden on individuals, families and communities. The primary burden of care often falls to family and significant others, usually with one person coping with the substantial weight of care. As well as administering appropriate medical care of the stroke survivor, healthcare providers also fulfil ongoing psychological support, surveillance and education roles and are perceived as a source of support and information not only for people with stroke, but also for the carer of the stroke survivor throughout the illness. Despite the importance of stroke healthcare providers, there is limited research examining their role in supporting the carer. This study aimed to: i) explore multidisciplinary healthcare providers' perceptions of stroke carers' roles and their psychosocial support needs; and ii) identify strategies for the integration of carer needs across the stroke care trajectory into an optimal health program (OHP). Four dual-moderated focus groups of stroke healthcare providers across acute, subacute, and community rehabilitation services were conducted. Facilitators employed a semi-structured interview to guide discussion. Sessions were recorded, transcribed, and analysed using thematic and content analysis. Three key themes emerged: 'transition', 'information', and 'impact of stroke'. Within these themes a number of sub-themes highlighted the distinct roles of healthcare providers and carers throughout the trajectory of care. Healthcare providers acknowledged their roles in supporting carers and time-limited resources. This study identified how a self-management OHP could assist carers to address psychosocial concerns and to navigate stroke services. The OHP with its focus on flexibility and self-efficacy has the potential to build on existing stroke care services for carers in Australian public hospital and community settings. This research has identified specific strategies to integrate an OHP into existing stroke services to advance psychological and social support for carers across the stroke trajectory.

Professional Practice Forum (Paper #227)
Friday 11 October 2013 – 3:30pm (Hall D)
What can the profession do to help graduates get internships?
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Fifty percent of our profession undertakes the internship pathway. Increasingly this pathway is non-existent or has multiple potential hazards reducing the completion rate. In part, these are due to the heavy regulatory burden and a withdrawal of our major employers of provisional psychologists. This forum will provide a means of discussing the ways in which the profession might address the problems of finding effective internships in the next few years. We all know the problems with the requirements of the Board and its "guidelines". But these are givens. Is there a role for the Australian Psychological Society in helping new graduates who are facing pressures? We have the options of doing nothing and letting the graduate find their own internship. However, this seems unprofessional. Can we create a new pathway to internships?

Poster Presentation (Paper #42)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
Knowledge, skills and attitudes (KSAs) of rural and remote psychologists
SUTHERLAND, C.R. (The University of Adelaide), & CHUR-HANSEN, A. (The University of Adelaide)
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Given the unique features of rural practice and challenges faced by rural health professionals, many professions (including medicine, allied health, nursing and social work) have developed competencies for rural and remote practice. Aside from limited research examining ethical issues in rural practice, there has been comparatively little work investigating the competencies that may be required of the rural and remote psychology workforce. This qualitative study aimed to identify such competencies in terms of the knowledge, skills and attitudes (KSAs) considered by participants as important for working as a psychologist in a rural or remote area. Nine psychologists living and working in rural and remote South Australia were interviewed by telephone. Data were analysed using thematic analysis. Seven competencies were identified, relating to two broad themes: 'Professional Isolation' (competencies arising from being the sole psychologist or one of few in the community); and 'Rural Life' (competencies relating to the need to manage and appreciate features of the rural context). The seven competencies (managing continuing professional development; supervision; the lack of other services; dual relationships; visibility; confidentiality; and appreciation of the rural context) encompassed a number of corresponding and overlapping KSAs. Personality characteristics, including resilience, resourcefulness, confidence, independence, and openness to new experiences were also highlighted as important in working as a psychologist in a rural or remote area. This study provides a significant contribution in the development of a list of competencies and KSAs which may be used as part of competency-based training in rural and remote psychology practice.

How To Session (Paper #283)
Wednesday 9 October 2013 – 3:15pm (Meeting Room 5 and 6)
Enhancing the effects of relaxation and CBT for anxiety using a heart rate variability monitor
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The increase in stress and anxiety is a chronic mental health problem. This "How To" workshop describes the implementation of a simple Heart Rate Variability monitor that

can be used effectively with clients who are suffering from stress and anxiety. The monitor can work from an iPhone or computer and has a sensor that clips onto the earlobe and indicates the level of sympathetic and parasympathetic activity. Used in conjunction with relaxation and CBT, the client and practitioner can see and feel changes in these systems and thus reinforce these cognitive and behavioural interventions. No prior assumed knowledge is required and participants can view a live demonstration. The researcher has used this method in private practice with good results. Relaxation scripts and case studies will also be discussed.

Individual Research Paper (Paper #185)
Thursday 10 October 2013 – 11:10am (Meeting Room 1)
"Girls on the Go!" program to improve self-esteem, self-efficacy and body satisfaction amongst young women: A randomised controlled trial
TIRLEA, L. (Monash Health; Monash University), TRUBY, H. (Monash University), & HAINES, T. (Monash Health; Monash University)
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Low self-esteem and body image dissatisfaction have been found to contribute to the development of eating disorders in young women. The aim of this project was to evaluate the efficacy of the "Girls on the Go!", a program designed for young women at risk of developing adverse health outcomes arising from poor self-esteem. It was hypothesised that participants allocated to the "Girls on the Go!" program will experience improvement in self-esteem, decreased impairment induced by eating disorders (primary outcomes), improvement in self-efficacy, body satisfaction, and dieting behaviour (secondary outcomes) relative to control group participants. This study used a stepped wedge, cluster randomised controlled trial design where the "Girls on the Go!" program waiting list was used to generate the control condition.   Participants were 62 young women (*mean age* 13years, *SD*=1.03) from 6 secondary schools. Of these 62, thirty-one took part in the first wave of the intervention (Group 1), and they received the "Girls on the Go!" intervention immediately (3 school groups), while thirty-one took part in the second wave of the intervention (Group 2) after having been placed on the wait list (3 school groups). The "Girls on the Go!" program was found to significantly increase levels of self-esteem and self-efficacy (mental and physical health self-efficacy subscales) and improved dieting behaviour. These gains were retained over 6 months. There was no significant difference for body satisfaction or impairment induced by eating disorders. The "Girls on the Go!" program offers a potentially viable means for improving health outcomes for young women at risk of developing adverse health outcomes arising from poor self-esteem.

Symposium (Paper #127)
Friday 11 October 2013 – 8:30am (Meeting Room 1)
The false memory effect within a short-term memory paradigm
TOLLEMACHE, J. (Australian Catholic University), RITCHIE, G. (Australian Catholic University), PARHAM, S. (Australian Catholic University), WYNNE, R. (Australian Catholic University), TOLAN, G.A. (Australian Catholic University), WITTEVEEN, K. (Australian Catholic University) & TEHAN, G. (University of Southern Queensland).
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Overarching abstract
Presenting lists of semantic associates in long-term memory tasks can induce the false recall of a related (non-presented) critical lure, referred to as the false memory effect (Roediger & McDermott, 1995). Recent findings have suggested that this effect may also extend to the short-term domain using tasks of immediate serial recall (ISR) (Tehan, 2010). Research now shows that short-term memory (STM), as measured by short-term recall tasks is influenced by permanent long-term memory (LTM) networks (Poirier, Dhir, Saint-Aubin, Tehan, & Hampton, 2011). STM and LTM have often been considered distinct systems (e.g. Baddeley, 1983, 2003). In contrast however, some researchers

propose that STM and LTM may actually be a part of a unitary system (e.g. Narine, 2002). In immediate recall tasks false memory errors demonstrate this influence of long-term associative networks on STM. The following studies were conducted in order to examine whether the false memory effect would extend to a STM paradigm. Results were discussed with reference to current models of short and long-term memory and the notion of a unitary memory system.

Presentation 1
The effect of peripheral visual information on correct and false recall in short-term memory

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In long-term memory (LTM), studying pictures instead of words can enhance veridical memory while reducing lure production (Israel & Schacter, 1997). This pattern has been attributed to the way in which these stimuli are processed. While associative words alone promote relational encoding, pictures encourage item-specific encoding, which in turn can interfere with relational processing. The current study investigated whether those findings could be observed in the short-term domain. Of interest was the effect of word-congruent and word-incongruent images at the time of item encoding. To examine this, related and unrelated word lists were studied alone or simultaneously with a matching picture, or a non-matching picture. The non-matching condition has not yet been examined in this domain, and was introduced because of discrepant findings regarding the effect of distracting information on false memory. Correct and false recall of 42 adults aged 18-55 was measured through an immediate serial recall task. Results indicated that recall was not enhanced after studying matching pictures, nor were false memories inhibited. Viewing a different picture reduced veridical recall and hindered false recall, but not to the point of significance. Additionally it was observed that there was an advantage to memory for related word lists. A follow up study was conducted in which the matching and non-matching pictures were replaced by written words. Twenty new adults aged 18-55 participated in this immediate serial recall task. Similar to the picture study, the matching stimuli did not significantly enhance recall or reduce false memories. However, the non-matching words did inhibit correct recall, and to a greater extent than the non-matching pictures. Also consistent with the picture study, the non-matching words did not significantly inhibit lure production. The differing effects of peripheral visual information on correct and false recall will be discussed in relation to the irrelevant speech effect.

Presentation 2
False memory in immediate backward serial recall for phonological and semantic associations

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The current study intended to investigate the presence of false memory effects, as defined as the recollection of a non-represented critical lure, within immediate backward serial recall. Various literature has indicated the reliability of the DRM paradigm to elicit false memories in forward recall conditions. Based on the findings of Guérard et al., (2012), Guérard and Saint-Aubin (2012), and the Primacy Model (Page & Norris, 1998), it was predicted that false memory effects would be evident for both directions of immediate serial recall and that overall recall performance would be equivalent for the two conditions. False memory effects have been robustly demonstrated in the long-term domain in combined phonological-semantic associate 'hybrid' lists (Watson, Balota & Roediger; 2003), however this has not been extended to the short term domain. Recent research by Tehan (2010), modified the DRM paradigm to suit an immediate serial recall

task, by using list items associatively related to the non-represented critical lure, with the results complementing those of long-term recall tasks. It was therefore expected that the success of 'hybrid' lists in long-term recall would similarly extend into an immediate serial recall test. When compared to unrelated word lists it was predicted that the pattern of semantic and phonological associates within word lists would produce greater false memories and overall recall performance. Forty participants completed a modified DRM test using forward (n = 20) or backward (n = 20) immediate serial recall. Four types of word lists were utilised; alternating semantic and phonological associates, phonological followed by semantic associates, semantic followed by phonological associates and a control condition. False recall was evident for the three experimental list patterns but did not differ across lists. In terms of overall recall performance, forward and backward serial recall did not differ. Overall recall performance varied across the four list arrangements; superior recall occurred in the semantic/phonological lists compared with phonological/semantic, alternating and unrelated lists which did not significantly differ. Results paralleled Tehan's (2010) false memory findings using associatively related lists under immediate serial recall and the primacy model which suggests no difference between forward and backward serial recall.

Presentation 3
The effect of task manipulation on false memory during immediate serial recall
RITCHIE, G. (Australian Catholic University), TOLLEMACHE, J. (Australian Catholic University), WYNNE, R. (Australian Catholic University), PARHAM, S. (Australian Catholic University), TOLAN, G.A. (Australian Catholic University), & TEHAN, G. (University of Southern Queensland)
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The current project aimed to manipulate presentation rate, articulatory suppression, modality, and retention interval during an ISR task to further investigate the influence of false memory in a short-term paradigm. Thirty-six participants gathered from the Brisbane campus of the Australian Catholic University and from the wider community, were presented with six-word lists based on the Deese-Roediger-McDermott (DRM) false memory task (Roediger & McDermott, 1995). Half of the trials contained hybrid lists of semantic associates. In these trials items in serial position one, two and three were semantically related to a critical lure and items in serial position four, five and six were semantically related to a different critical lure. The remaining trials contained items that were all unrelated to each other. The false memory effect was observed under short-term memory conditions. This effect was found to be more prevalent in conditions that interfered with episodic recall when compared to those conditions that were less likely to interfere with episodic recall. Findings are discussed in relation to current understanding of working memory and false memory effects.

Psychology Central (Paper #338)
Thursday 10 October 2013 – 1:00pm (Meeting Room 7) & Friday 11 October 2013 – 11:00am (Meeting Room 7)
Using Member Group committee online tools and resources, Q&A for member group committee members
MEMBER GROUP COMMITTEES – LINDNER, H. & TERRINGTON, A. (The Australian Psychological Society)

This practical session will provide APS Member Group committee members with guidance on how to access valuable online tools and resources to assist in committee roles. It will also be a Q&A opportunity for committee members in attendance.

Tuesday 8 October 2013 – 6:00pm (Hall 2)
The relationship between different facets of impulsivity and alcohol use patterns in emerging adulthood

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Excessive alcohol use, binge drinking and adverse consequences related to alcohol consumption are highly prevalent in the emerging adult years (Arnett, 2000; Karagulle, Donath, Grassel, Bleich, & Hillemacher, 2010; Presley, Meilman & Leichliter, 2002). Research focusing on the aetiology of alcohol use has consistently implicated impulsivity as a significant risk factor (Henges & Marczinski, 2012). However, there has been little consensus on how to define and measure the concept of impulsivity. In order to build on past research that has focused on clarifying the multifaceted nature of impulsivity, this study aimed to investigate whether five distinct facets of impulsivity will predict three different behavioural outcomes: alcohol intake, alcohol related problems and binge drinking behaviour. The study recruited a sample of 273 Australian participants (58.6% women; 41.4% men) aged between 18 and 30 years (M_{age} = 23.71, SD = 2.81). Multiple regression analyses demonstrated that the different facets of impulsivity predicted different alcohol related behaviours; with lack of premeditation and positive urgency predicting alcohol intake, positive and negative urgency predicting alcohol related problems, and lack of premeditation and sensation seeking predicting binge drinking behaviour. These findings highlight the importance of conceptualising impulsivity as multidimensional, rather than a unitary construct. Though the results from the current study must be considered in light of some limitations, the findings contribute to the identification and explanation of predictive factors in problem alcohol use and, with further confirmatory research, provides a reference for designing new and improving current prevention and intervention strategies.

Poster Presentation (Paper #32)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
A review and investigation of the reformulated learned helplessness theory

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The reformulated learned helplessness (RLH) theory and explanatory style have been extensively tested against depression, short term health, and achievement, particularly since a measure of explanatory style, the Attributional Style Questionnaire (ASQ), was developed. Despite being extensively investigated, results can only be described as mixed and inconclusive. It is argued that this is because: (a) the internality dimension of explanatory style is poorly defined and the items within the ASQ written to measure internality are not reliable or valid; (b) the ASQ itself has not been demonstrated to have structural validity, and (c) the definition of explanatory style in the literature is not uniform. Together, these arguments are believed to be indicative that the RLH theory does not satisfy the requirements of a "good theory" as outlined by Epstein (1973) including extensiveness, parsimony, empirical validity, internal consistency, and usefulness. To address this, it is recommended in future research: (a) that the internality dimension be reviewed and new items to measure the internality dimension be developed in order to increase the internal reliability and validity of this dimension, (b) that the ASQ be reformatted in order to minimize any error which confounds structural validity results, and (c) the construct of explanatory style be consistently defined as including the three dimensions of globality, stability, and internality (not just the dimensions that return significant results).

How To Session (Paper #116)
Friday 11 October 2013 – 3:30pm (Meeting Room 1)
Therapeutic creative arts processes and applications with diverse client groups
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Art therapy originates from the theories of Freud and Jung and has become firmly established as an important part of treatment strategies for use in many settings yielding positive results for clients. The use of creative arts processes involves a multimodal individualised approach to meeting the needs of diverse client groups. This activity based experiential approach enables clients to process thoughts by engaging different aspects of the self. Art making, and movement based activities, are designed to enhance communication through non-verbal means. These techniques are useful for many clients including those who are impaired due to trauma or related brain injury. The techniques are equally effective when used with elderly clients and children. In fact art therapy has become an effective and important method of communication, assessment and treatment with many populations. This session will outline the practical use of these approaches with two studies. The first application is a case study outlining an individual approach to a client with diminished capacity due to a stroke. The second is a project based approach to learning through the application of techniques with a group of disengaged young people not able to study in traditional secondary school setting because of learning and or behavioural difficulties. The learning outcomes from this session will provide practitioners with a toolbox of techniques and strategies for application with their own clients. The session will have experiential aspects so that participants can learn through practice based application of these approaches. The session does not require prior knowledge but participants should be prepared to participate in practical demonstrations of the use of these techniques. These learning activities will be supplemented by hand outs with session outlines and outcomes for the case study with techniques used in work with individual client who has had a stroke and project outline and outcomes for students studying in alternative school setting.

Symposium (Paper #58)
Friday 11 October 2013 – 3:30pm (Meeting Room 2)
Internationalising the psychology curriculum
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Overarching abstract
Many Australian Universities are now emphasising the need to internationalise their curricula in order to prepare their students for global work, and to enhance intercultural understanding and international approaches to global issues. For psychology students such an international approach is particularly important as human behaviour is so influenced by sociocultural factors. In this symposium four papers will examine different aspects of internationalisation in relation to psychology. Papers 1 and 2 report on a study abroad program in which a group of Australian students spent two weeks at the University of Macau. The first paper looks at the experience from the visiting Australian students' perspective while the second paper is from the host institution's perspective. Papers 3 and 4 then examine the approach of internationalising the psychology curriculum "at home" in order to make the internationalisation experience available to all students. The third paper provides a specific example of using this approach in a social psychology unit and the final paper examines the lessons learnt and academics reflections following the implementation of such internationalised units.

Presentation 1
Reflections on an overseas psychology international experience visit
TYSON, G.A. (Charles Sturt University)
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In this paper, a psychology international experience subject developed at Charles Sturt University is described and the initial offering of it reported on. The subject was designed to provide students with an opportunity to become more aware of the impact of the socio-cultural context on behaviour and to develop cultural awareness. It also aims to provide the opportunity to discover new strengths and abilities, conquer new challenges and solve new problems thus enhancing generic skills. The major component of the subject is a two week visit to Macau, a Special Administrative Region (SAR) of the People's Republic of China. The first visit occurred in November 2012, and involved nine CSU psychology students. During the visit the students attended classes with the Chinese students in the Department of Psychology at the University of Macau, visited two gambling treatment centres, a psychiatric hospital and a juvenile detention centre. They also engaged in general tourist activities. The students were required to keep an experiential journal and this formed the basis of a report that was compiled after returning from the visit. An analysis of the students' response to the visit will be presented.

Presentation 2
Connectedness and socio-cultural exchange in experiential learning
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The 21st century is characterised by an exposure to multiple cultural values through globalisation, increased mobility and access to the electronic media. This exposure challenges educators of psychology students to enhance intercultural understanding through socio-cultural learning experiences and connectedness across cultures. As a step towards internationalising psychology and develop cultural sensitivity in psychology a group of students from the Charles Sturt University in Australia visited the University of Macau in November 2012. As the host institution, the experience elicited a range of connections and socio-cultural exchange that not only benefited the visitors but expanded the experiential learning opportunities for local students. In this paper, I reflect on hosting this overseas psychology international experience visit, and explore the relational patterns and connectedness that Chinese students developed with their Australian counterparts during the visit. Adopting an interpretive phenomenological stance, I review the self-reflections and narrative performances of Chinese students and local faculty members who acted as hosts for the Australian visitors focusing on the relational patterns that emerged in various educational and social settings. Although greater mobility and the digital revolution helped us explore the psychology of different socio-cultural contexts, being socially and relationally connected with the international community provides a sense of belonging and helps educators maintain local relevance while exposing students to learning experiences in psychology that also generates intercultural understanding. I also discuss the areas for future collaboration and justification for expanding experiential learning opportunities and internationalising psychology.

Presentation 3
Teaching intercultural competencies within the social psychology curriculum: An example of internationalising domestic students' experience
BROWN, P.M. (University of Canberra), MAK, A.S. (University of Canberra), & NEILL, J.T. (University of Canberra)
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This paper describes innovations introduced into a final year social psychology unit which aimed to enhance students' intercultural awareness and competencies, while also highlighting the importance of cultural factors to an understanding of key topics in social psychology such as self-concept formation, group identity and helping behaviour. Two tutorial activities are described which drew upon the first two stages of teaching cultural competency described in the EXCELL program (Excellence in Cultural Experiential Learning and Leadership; Mak, Westwood, Ishiyama, & Barker, 1999); namely Alliance Building (activity 1) and Cultural Mapping (activity 2). The first activity involved students sharing the 'story' of their names within their introductory tutorial groups, with an emphasis on any cultural significance attached to their names. Students also created 'maps' which represented their self-schemas and discussed the cultural influences on the development of their self-concept and identity. In the second activity, conducted in tutorials four weeks later, students engaged in cultural mapping of requesting help. Two scenarios were mapped; one involved adopting the perspective of an international student asking for help, and one where students mapped themselves requesting help in an unfamiliar culture. This was followed by a discussion of situations where help could be offered and perceived cultural barriers to offering help. Students recorded their reflections on these activities via three reflective learning journal entries. In addition 51 students completed a measure of cultural learning at the end of semester, with over 80% of respondents agreeing that they had developed a greater understanding of cultural diversity and of cross-cultural interpersonal skills. A sub-sample ($n = 37$) indicated significantly higher levels of cultural learning in this unit compared to another final year psychology unit without cultural learning activities ($p<.001$). The potential benefits of these curriculum changes are discussed along with the challenges faced in teaching intercultural competencies to domestic students.

Presentation 4
Internationalising psychology education at home
MAK, A.S. (University of Canberra), BROWN, P.M. (University of Canberra), KNOTT, V.E. (University of Canberra), & NEILL, J.T. (University of Canberra)
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In response to economic globalisation and the high costs of student mobility programs, an educational movement called "Internationalisation at Home" (IaH) emerged in European higher education in the late 1990s. IaH action plans are directed towards developing curricula (in the home university) designed to cultivate international and intercultural perspectives in ALL students without requiring study-related travel (Crowther et al., 2001). At the University of Canberra, a successful trial of embedding intercultural competence development in the teaching of health psychology (Mak, 2012) has prompted the design of an Australian Government Office for Learning and Teaching Project titled "Internationalisation at Home: Enhancing the Intercultural Capability of Teachers, Students, and Curricula" (PP10-1810). The multi-disciplinary project aims to internationalise the learning and teaching practices in several fields of study - business, nursing, psychology, and pharmacy. The IaH innovations undertaken in an introductory psychology unit and a social psychology unit have been reported in Knott, Mak, and Neill (2013) and Brown, Mak, and Neill (2013), respectively. In this paper, we will reflect on the lessons learned from designing and implementing IaH in diverse units. Our discussion will draw on the opportunities and challenges presented by the University of Canberra's Strategic Plan 2013-18, the demographics of the Australian psychology

student population, and the Government's white paper on Australians in the Asian Century.

Symposium (Paper #131)
Wednesday 9 October 2013 – 1:15pm (Hall C)
Barriers and facilitators to practicing as a psychologist: Australian and Canadian perspectives
TYSON, G.A. (Charles Sturt University)
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Overarching abstract
In this symposium, we will be examining barriers to and facilitators of practicing as a psychologist in both Australia and Canada, using data obtained from nationwide surveys in both countries. Four papers will be presented followed by time for general discussion. The first two papers will focus on practicing in rural and remote areas with specific reference to the recruitment and retention of psychologists to these areas in each country. The second two papers will then focus on continuing professional development issues for psychologists, with particular reference to location of practice in the two countries.

Presentation 1
Practicing psychology in Australia: Comparing the rural and remote experience with the regional and urban experience
GULLIFER, J. (Charles Sturt University), TYSON, G.A. (Charles Sturt University), ROUFEIL, L. (James Cook University), & VINES, R. (Monash University)
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Although Australians are overwhelmingly drawn to urban localities, a surprisingly large percentage of the population resides in regional, rural and remote regions of our country. In general, people living in rural and remote areas of Australia have poorer general health and mental health status than those residing in metropolitan areas, and that status declines with increasing levels of rurality and remoteness. This presents unique challenges for professionals working in these areas. In this paper we present the results of an online questionnaire that examined a number of issues related to practicing psychology in Australia. An invitation to complete the survey was advertised widely in Australia and over 800 registered psychologists completed it. The research reported in this paper examines the advantages and disadvantages of practicing in rural and remote areas compared with practicing in regional or urban settings. The implications of these findings are discussed in relation to the recruitment and retention of psychologists in rural and remote areas.

Presentation 2
Practicing psychology in Canada: Comparing rural, northern, and urban practice variables and professional satisfaction
MALONE, J. (Athabasca University, Canada; Charles Sturt University), DYCK, K.G. (University of Manitoba, Canada), & HARDY, C. (University of Northern British Colombia, Canada)
judim@athabascau.ca

The Canadian rural population is around 20% of the national total, yet the empirical literature and service considerations for rural psychological practice have not been adequately developed nor explored to the same extent as they are in Australia. A Canadian team of researchers has been replicating the Tyson, Gullifer, Roufeil and Vines Australian study modified for the Canadian context. The Canadian online survey was co-sponsored by the Canadian Psychological Association and was widely distributed through provincial and national list serves intended for currently registered or certified psychologists. This questionnaire targeted practice variables and professional satisfaction

of psychologists in urban, rural, northern, and remote Canada and was designed to increase an understanding of Canadian psychologists' practice variables in relation to their professional satisfaction. The primary goal of this national Canadian study was to identify the barriers to and facilitators of recruitment and retention of Canadian psychologists. International replication and study development will be reviewed in addition to initial results of the Canadian study.

Presentation 3
Managing continuing professional development requirements: The experience of Australian psychologists
ROUFEIL, L. (Mount Isa Centre for Rural and Remote Health; James Cook University), TYSON, G.A. (Charles Sturt University), GULLIFER, J. (Charles Sturt University), & VINES, R. (Monash University)
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Since the advent of national registration in July, 2010, Australian psychologists have been required to undertake mandatory continuing professional development (CPD) in order to maintain their registration status. CPD is self-directed practice-based learning that aims to maintain, improve and broaden psychologists' knowledge, expertise, competence and personal qualities required to carry out their professional role. The aim of this study was to explore how psychologists have negotiated the transition to mandatory CPD including identifying the strategies employed to meet the requirements and the enablers and barriers to accessing quality professional development. A national sample of over 800 psychologists completed an online survey exploring a range of contemporary practice issues. This paper focuses on how Australian psychologists in urban, regional, rural and remote settings report that they manage their CPD requirements. The findings are discussed in relation to identifying strategies to support psychologists to meet their requirements for ongoing education and training throughout their professional working life.

Presentation 4
Canadian continuing professional development requirements: How practice variables are influencing access for rural, northern, and urban psychologists
MALONE, J. (Athabasca University, Canada; Charles Sturt University), DYCK, K.G. (University of Manitoba, Canada), & HARDY, C. (University of Northern British Colombia, Canada)
judim@athabascau.ca

This paper will provide an overview of the Canadian system of psychology regulation using a provincial exemplar for continuing professional development. In Canada, psychology is provincially regulated and CPD requirements are often mandated under a provincial health professions act, but managed by provincial colleges or associations. Following a brief overview of the mandatory continuing competence requirement program developed by the College of Alberta Psychologists, this paper will review two data sets aimed at exploring CPD within practice context. The first is in response to a qualitative poll of northern and rural psychologists exploring that specific context in Canada. The second will represent an overview of the results of the Canadian survey, "Practice Variables and Professional Satisfaction of Psychologists in Urban, Rural, Northern, and Remote Canada". Specifically, CPD results will be explored from this national practice survey in relation to geography of practice highlighting implications for Canadian professional practice.

Psychology Central (Paper #332)
Thursday 10 October 2013 – 11:30am (Meeting Room 7)
Writing journal articles: Tips and tricks from an editor
TYSON, G.A. (Charles Sturt University)
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There is increasing pressure on academics and research students to publish their research. In this 'how to' session, I will provide some suggestions on ways in which authors can increase the probabilities of having their manuscript accepted. The suggestions will be based on my experience as a reviewer of manuscripts and as Editor-in-Chief of the Australian Journal of Psychology.

Poster Presentation (Paper #33)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
An investigation of the quality of life in 50 obsessive-compulsive checkers
VACCARO, L.D. (University of Sydney), & **JONES, M.K.** (University of Sydney)
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While people with Obsessive Compulsive Disorder (OCD) may present with a range of obsessions and compulsions, excessive, ritualised, time-consuming checking behaviours and related obsessions are dominant expressions of the condition (e.g. Fullana et al., 2009). Subtyping by predominant symptom presentation when conducting research into the nature and treatment of OCD, has been suggested to be important since qualitative differences mean that findings may not be generalisable across the different subtypes (McKay et al., 2004). This is the first study examining the impact of OCD on quality of life in a clinically homogenous group of obsessive-compulsive checkers. This study investigated the health related quality of life (QoL) of a sample of people with clinically significant obsessive-compulsive checking (OC-Ch) symptoms and compared these findings to published QoL data for the wider Australian population. The sample consisted of 50 people (28 male) with OC-Ch (Age range = 19-86, Mean age = 38.24, SD = 14.95). Mean age of onset of OCD symptoms was 17.44 years (SD = 10.606; range 3-50), and mean duration of OCD symptoms was 21 years at the time of assessment. The impact of OCD on role impairment and QoL was assessed using the most recent Australian version of the widely used SF-36 (V2-AR), the Sheehan Disability Scale (SDS), and the Global Assessment of Functioning (GAF) scale. Participants experienced a negative impact across many areas of their lives, including home, work, and relationships. Compared to the Australian population, participants displayed significantly lower levels of QoL on all dimensions measured by the SF-36 V2-AR, with the exception of the Physical Functioning and Bodily Pain scales. This is consistent with previous research comparing community and OCD clinical populations, conducted in countries around the world. Our findings will also be discussed in regard to comparisons with studies assessing QoL in patients with various chronic physical and mental disorders. These findings highlight the importance of ensuring access to efficacious treatments for OC-Ch to reduce the detrimental impact on the lives of people with this condition.

Individual Research Paper (Paper #34)
Wednesday 9 October 2013 – 3:35pm (Hall D)
Dysfunctional beliefs in obsessive-compulsive checking and cognitive change after treatment
VACCARO, L.D. (University of Sydney), **JONES, M.K.** (University of Sydney), MENZIES, R.G. (University of Sydney), & WOOTTON, B.M. (Macquarie University)
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Cognitive accounts of obsessive-compulsive disorder (OCD) assert that core beliefs including overestimation of the probability and consequences of danger (danger expectancy), a sense of overinflated personal responsibility for harm to oneself or others, a belief in the over-importance of thoughts, an intolerance of uncertainty,

perfectionism and a need to control thoughts are crucial to the development, maintenance, and treatment of the disorder. However, research on the relevance of these to the different OCD subtypes and their treatment outcome is inconclusive. It is possible that the discrepancies in the literature are due, in part, to sample heterogeneity and the involvement of non-clinical samples in some of these studies. The current investigation assessed a variety of OCD-related maladaptive beliefs, including checking-related danger expectancy (CH-ES), at pre-treatment, post-treatment and follow-up, in a homogenous sample of clinically significant obsessive-compulsive checkers. Changes in these beliefs after treatment and their association with symptom change were analysed. Forty people with OCD checking concerns completed a 14-session treatment program of either cognitive therapy (Danger Ideation Reduction Therapy for OCD Checkers; n = 23) or Exposure Response Prevention (ERP: n = 17). Before, after treatment, and at six-month follow-up participants completed the Y-BOCS, BDI-II, DASS-21, subscales of obsessive-compulsive checking (OC-Ch) symptoms, and measures assessing the cognitive belief domains. CH-ES was prominent in participants at pre-treatment and significantly positively associated with several measures of checking symptom change post-treatment (r=.592 - .787, all p's < .0001). Only one other belief – perfectionism - significantly correlated with checking symptom change (r = .516, p = .001). Additionally, post-treatment analyses of within-group changes found a moderate association between CH-ES and the Y-BOCS Obsession subscale (r = .461; p = .027), in the DIRT-C group only ($c.f.$ ERP: r = .011; p = .965). Importantly, after controlling for changes in CH-ES, the other core beliefs were no longer associated with symptom change. The results of this study provide support for the important role of dysfunctional beliefs about threat in determining the response of people with OC-Ch to treatment.

Individual Research Paper (Paper #305)
Friday 11 October 2013 – 2:00pm (Meeting Room 3 and 4)
Self-stigma and stigma consciousness as influences on the quality of intergroup relationships for people with mental illnesses

VALENTINE, R. (La Trobe University), STUKAS, A. (La Trobe University), & FARHALL, J. (La Trobe University)
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The aim of our program of research is to examine interpersonal relationships between consumers of mental health services and non-consumers in order to investigate how consumers' beliefs about themselves (potentially self-stigmatising) and expectations of stigmatising treatment from others (stigma consciousness) may influence their perceptions of the quality and solidarity of shared social relationships. We present the results of our first study of 49 consumers, recruited through a local mental health agency, who were surveyed about their relationships with two non-consumers. Specifically, we asked participants to think of a person who they believed stigmatises them and a person who they believed does not. We asked them to report on how much empathy and anxiety they felt that each person demonstrated during social interactions and how much they felt they were able to self-disclose to each person. We hypothesised that self-stigma (as assessed by The Internalized Stigma of Mental Illness scale (Ritsher et al., 2003)) and stigma consciousness (as assessed by Pinel's 1999 scale, revised for this group) would influence perceptions of these well-known influences (see Pettigrew, 1998) on the quality and solidarity of intergroup relationships. In particular, we predicted relationships would be more problematic for those high in self-stigma or stigma-consciousness. As expected, we found that perceptions of empathy, anxiety, and self-disclosure were associated with relationship solidarity with both the stigmatiser and the non-stigmatiser (although empathy and self-disclosure were higher and anxiety was lower in perceptions of non-stigmatisers). However, these results were moderated by self-stigma. Those consumers who reported greater self-stigma did not feel that their

relationships benefited as much from higher levels of empathy and lower levels of anxiety perceived in their relationship partners as compared to those low in self-stigma. Stigma consciousness demonstrated fewer effects. We discuss the implications of these results for people with serious mental illness and their social connections. We also foreshadow two further studies in progress that extend these findings.

Symposium (Paper #214)
Friday 11 October 2013 – 2:00pm (Hall D)
Primary Care Psychology: Pathways to effective care in the general practice setting
VINES, R.F. (Russell St. Medical Centre, Bathurst NSW; Monash University)
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Overarching abstract

Primary Care Psychology is a growing area of service delivery in Australia and elsewhere. It is based on a collaborative model of mental and general health care involving appropriately trained psychologists working with GPs in the primary care setting. Providing early intervention for common mental health disorders (previously under-treated), chronic disease and its mental health sequellae, the model minimizes the stigma of help-seeking, facilitates more equitable access to care, and requires alternative ways of working to those traditionally used in hospital settings, community health and private practice. Despite recent improvements, mental health care remains a key issue in Australian health service delivery in metropolitan, regional and particularly rural and remote settings. Whilst the introduction of Medicare rebates in Australia for psychological services has increased access for consumers, true team-based care is not yet widely implemented and access to quality care remains sub-optimal. In this Symposium, mental health service delivery in three regional, rural and remote locations will be discussed: two exemplifying successful application of this team-based approach (Bathurst and Alice Springs), the third (Mount Isa) highlighting the frequent challenges and barriers to its implementation.

Presentation 1
Primary care psychology in the bush: Opportunities and challenges
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Over one third of Australia's population resides away from the populated coastlines in rural and remote Australia. Providing mental health services to more isolated regions of the country has proved challenging although some of the most promising strategies for service delivery include primary care service models and telehealth. This paper will critically examine the national and international literature on the utility of primary care psychology in rural regions to explore its potential for use in the Australian context. There are a number of barriers to the delivery of effective primary psychological care in Australia including policy limitations, workforce shortages, inadequate training programs and cultural barriers within the health system itself. These will be illustrated by case studies drawn from practice in rural and remote Australia. The paper will conclude by describing recommendations for addressing these barriers.

Presentation 2
Patient-led primary care mental health treatment: Efficient and effective
CAREY, T. (Flinders University; Charles Darwin University; Central Australian Mental Health Service)
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The treatment of mental health problems is a critical aspect of effective, coordinated, and sustainable primary health care. Given that mental health problems are increasing

and health services are a finite resource, it is becoming increasingly important to provide psychological treatments efficiently as well as effectively. Based on the development of a patient-led model of psychological treatment in primary care a similar model was introduced to the public mental health system of a remote Australian town. The psychological treatment was provided within the context of a multidisciplinary team and, in particular, close collaboration with psychiatrists who referred to the service. The aim of this study was to evaluate this system and to benchmark the results against other practice-based studies. A 2 year practice-based study was conducted in which continuous outcome data were collected. Pre-post effect sizes and clinical significance statistics were calculated and compared with findings from published practice-based research. A total of 93 patients were referred and 51 patients attended more than one appointment. Although there was no limit placed on the number of appointments available, the average number of appointments was 3.6 (median of 3) and the range was between 2 and 11 appointments. An efficiency ratio was calculated as Effect Size/Average Number of Appointments. When compared with other practice-based studies the ratio obtained for this study indicated that this approach to treatment scheduling was both effective and efficient. In the current climate where limits are placed on the number of appointments patients can access under Medicare, this study has important implications for service reform in primary care in terms of the way mental health treatments are delivered. Particularly in rural and remote locations where private practice psychologists are not always readily available, a cost-effective alternative would be to provide a primary care psychology service within the auspices of the public mental health system. Treatment providers could even be co-located within GP practices to provide greater continuity of care and timely access to services.

Presentation
Primary Care Psychology in a Regional Setting: Analysis of a year in a Regional NSW Practice
VINES, R. (Russell St. Medical Centre, Bathurst NSW; School of Primary Health Care, Monash University)
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More than 50% of patients presenting with mental health conditions in primary care have co-morbid physiological and A&OD (alcohol and other drug) conditions. This sets unique challenges for the specialist psychologist who needs to have competencies both as a specialist and as a true "generalist" – as with our medical colleagues in primary care. This paper will present an analysis of one year's primary care work of a clinical and health psychologist in a typical regional practice, and will highlight key issues pertinent to this model of service delivery – and how it differs from private/independent psychological practice.

Poster Presentation (Paper #73)
Tuesday 8 October 2013 – 6:00pm (Hall 2)
Selection by semantic category: Performance in iconic memory tasks using word stimuli
VRANKOVIC, J. (Macquarie University)
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Iconic memory has been described as a very brief but high capacity memory store capable of retaining visual information for several hundred milliseconds. It has been largely investigated through the brief presentation of alphanumeric characters and both pre-categorical models (selection from memory based on visual or physical attributes of items) and post-categorical models (selection from memory based on properties of items that are permanently stored in semantic memory) have been used to explain performance on such tasks. In two experiments, this research investigated the claim that selection in iconic memory tasks can occur from a post-categorical store. In Experiment 1A, the effects of backward masking, word length, word frequency, and position of the

word in the array on full-report performance were examined. Participants were briefly presented with four-word arrays and were asked to report as many words as possible. Word report was a function of word frequency, length, position, and masking. Experiment 1B investigated whether semantic pre-cueing (instruction to report the animal name first) could be used to select words for report, an extension of Allport's (1977) findings. Participants who received the semantic pre-cue reported significantly more animal names than non-animal names and their report of animal names was greater than for those who were asked to report all array words. Experiment 2 investigated whether post-categorical selection is possible using a semantic category post-cue (instruction to report the word from the animal, nature, house, or body part semantic categories after display offset). A partial-report superiority was found for high-frequency words but not for low- and medium-frequency words. Contrary to previous findings with single alphanumeric characters, these results suggest that post-categorical selection from iconic memory is possible when stimuli with greater semantic content are used.

Individual Research Paper (Paper #164)
Friday 11 October 2013 – 8:30am (Meeting Room 3 and 4)
Yoga therapy as treatment of choice for depressed elderly females in old age homes

WADHAWAN, R. (University of Delhi, India), & CHADHA, N.K. (University of Delhi, India)
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Depression in the elderly is very common and more so common in elderly females. The problem gets further intensified by the presence of other physical and psychological co – morbid conditions. Depression adversely affects the quality of life of the elderly and often increases suicidal risk among them. The researches have supported the role of various psychological and alternative treatments in reducing elderly depression and enhancing quality of life. The present research was carried out with the aim to study the effects of yoga therapy in reducing depressive symptoms and enhancing quality of life of elderly females residing in old age homes. The research was a longitudinal case control study and the sample constituted of 30 elderly depressed females from old age homes. The elderly females were in the age range of 60 – 80 years. The data collection involved three phases where in the first phase was concerned with the screening and evaluation of the sample with Mini Mental Status Examination (MMSE), SCAN based screening Performa, Beck's Depression Inventory (BDI), Geriatric Depression Scale (GDS) Inventory of Depressive Symptomatology (IDS – C) and WHO Quality of Life (WHO – QOL). The second phase constituted the intervention where 30 females were assigned to two of the treatment conditions involving yoga therapy and control condition (no therapy). The standardized yoga therapy module was prepared with the help of the experts in the field. The third phase involved the post intervention assessment with the help of BDI, GDS and WHO-QOL. The results of the present research showed that yoga therapy was effective in reducing depression on BDI and GDS in elderly females residing in old age home. The 'no therapy' group did not show any significant change in the depressive scores. The yoga therapy was also found to be very effective in enhancing quality of life of elderly females. The results of the present research were found to have strong implications for the individual, society and the government. The results strongly suggest that a regular routine of some physical exercise or yoga can be very beneficial for elderly to keep their body and mind healthy.

Wednesday 9 October 2013 – 1:55pm (Meeting Room 5 and 6)
Evaluation of a return to work program: Determining predictors of successful return to work for injured workers
WATT, B.D. (Bond University), DOLEY, R. (Bond University), HICKS, R. (Bond University), FRITZON, K. (Bond University), ONG, S. (Bond University), & FORD L. (Bond University)
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Work-related injury can result in significant negative consequences in multiple aspects of an individual's life. Work-related injury results in lost productivity and considerable expenditure on compensation claims. Consequently, the need to focus on return to work after injury and occupational rehabilitation has been highlighted. In 2012 Q-Comp commissioned Bond University to conduct an independent evaluation of its Return to Work Assist (RTWA) program, which aims to assist individuals to return to work after sustaining work-related injuries. The program focuses on preparing clients for re-employment and places emphasis on career development. Utilising the rehabilitation framework outlined by Fadyl et al. (2010), the evaluation appraised key determinants of return to work (RTW) including physical functioning, psychological functioning, social and behavioural factors, workplace factors, factors outside the workplace, and RTW interventions.   A multimethod, multimodal approach was utilised to evaluate the effectiveness of RTWA and identification of predictors for successful RTW; including RTWA client interviews and surveys, client focus groups, observations of RTWA Advisors interactions with clients, client file reviews and interviews with RTWA personnel. Key factors contributing to the successful RTW included RTWA Advisors providing intensive services with frequent contacts, a client centred approach that focuses on career development, and addressing psychological as well as physical needs. Principles for facilitating RTW among individuals with long-term and severe injuries were identified based on the vocational rehabilitation literature and findings from the evaluation. Future developments for RTW services include the need for increasing collaboration across key stakeholders, developing initiatives for injured workers who decline assistance in returning to work, and enhancing the sustainability of work placements for injured individuals.

Poster Presentation (Paper #144)

Wednesday 9 October 2013 – 5:30pm (Hall 2)
Liking on Facebook: The relationships between attachment styles and Facebook behaviour
WESSELS, M. (James Cook University), & MCBAIN, K.A. (James Cook University)
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With the establishment of Facebook in 2004 the way people interact, and how this interaction is studied, has changed dramatically. Facebook is commonly used for communication between friends, but is also used for anonymous interpersonal surveillance. Of particular interest in the current study is the use of Facebook for interpersonal electronic surveillance within romantic relationships. This study extends research conducted by Marshall, Bejanyan, Di Castro, and Lee (2012) by investigating the personal and relational factors that lead to Facebook jealousy and surveillance in partners and ex-partners. The sample was predominantly Australian (62%), and comprised 91 males and 214 females, with a mean age of 23 (SD=7). Participants completed an electronic survey including the ECR-R questionnaire and the Facebook Jealousy Scale, as well as questions assessing Facebook surveillance behaviours. Correlation and regression analyses found support for the hypothesis that anxious attachment would be positively related to Facebook jealousy and surveillance in partners. In ex-partners, anxious attachment was positively related to experiences of Facebook jealousy, but was not linked to the Facebook surveillance of ex-partners. Avoidant attachment did not correlate with other dimensions as hypothesised. The

findings have implications for the use of social networking sites within romantic relationships. Overall, the study broadens our knowledge about how Facebook is used, and how Facebook behaviours differ between people and attachment styles.

Individual Research Paper (Paper #76)
Friday 11 October 2013 – 11:30am (Meeting Room 1)
Repetitive negative thinking and post-event processing: A comparison of their ability to predict maladaptive social-evaluative beliefs over time
WONG, Q.J.J. (Macquarie University), McEVOY, P.M. (Centre for Clinical Interventions, Perth; University of Western Australia), & RAPEE, R.M. (Macquarie University)
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Repetitive negative thinking (RNT) is a transdiagnostic construct proposed to subsume disorder-specific repetitive thinking processes. However, there is a lack of research comparing the operation of RNT with more specific types of repetitive thinking. The current longitudinal study aimed to compare RNT and post-event processing (PEP), a repetitive thinking process related to social phobia, in their ability to predict maladaptive social-evaluative beliefs over time. Based on previous research, we also examined level of social anxiety and frequency of experienced negative social events as moderators of the longitudinal relationships between the repetitive thinking processes and maladaptive beliefs. An undergraduate sample (N = 313) was recruited and administered the relevant measures of interest at two time points on average 9.44 days apart. At high social anxiety levels, with an increasing number of experienced negative social events: (a) baseline RNT became a stronger positive predictor of later maladaptive conditional and unconditional beliefs, and (b) baseline PEP became a stronger positive predictor of later maladaptive conditional beliefs. These findings indicate that RNT and PEP differ in their predictive ability, and highlight the importance of research comparing different types of repetitive thinking to better understand these processes.

Poster Presentation (Paper #175)
Wednesday 9 October 2013 – 5:30pm (Hall 2)
The initial transposed-letter effect: A comparison between English and Thai visual word recognition
YOUNG, A. (Southern Cross University), & WINSKEL, H. (Southern Cross University)
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There has been much debate about the relative importance of letter identity and letter position in the visual-word recognition literature. Research investigating the transposed-letter effect in English is well-documented (e.g., using the masked priming paradigm there is faster responding to *jugde-JUDGE* than to *jupte-JUDGE*; e.g., Perea & Lupker, 2004; Schoonbaert & Grainger, 2004). However, much less research has been conducted on other languages such as Thai. Recently, Perea, Winskel and Ratitamkul (2012) found a significant masked transposed-letter priming effect in Thai when the initial letter was transposed (e.g., บนท-บาท faster than พะท-บาท [transposed-letter condition versus replacement-letter condition]). This suggests that the role of the initial letter position may be less critical in Thai than in English. In order to investigate this further, forty university students participated in a masked priming lexical decision task using five-letter English words. Words either began with a consonant then a vowel (e.g., *TULIP)* or began with a vowel then a consonant (e.g., *IMAGE*). In addition, both initial letters and internal letters were transposed. In contrast to Thai, no significant transposed-letter effects were observed when initial letters were transposed (e.g., *utlip* for *TULIP*) compared to the replacement-letter control condition (e.g., *oflip* for *TULIP*). Furthermore, for consonant-vowel words, transposed-letter effects were observed when internal letters were transposed (e.g., *tuilp* for *TULIP*) compared to the replacement-letter condition (e.g., *tuetp* for *TULIP*). However, transposed-letter effects did not occur for internal letters for the vowel-consonant words. These results lead to the

interpretation that: (a) processing of initial letters is language-dependent, and (b) dependent upon the identity and position of the consonant/vowel letters.

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