

Introducing Health Psychology

Definition of Health Psychology

- Health Psychology is devoted to understanding psychological influences on
 - How people stay healthy
 - Why people become ill
 - How people respond when they do become ill

Changing Field of Health

- Three major trends in the field of healthcare in the past century or so
 1. Changing definition of health and changes in healthcare industry
 2. Causes of death in society
 3. Acceptance of a more biopsychosocial model to address these changes

1. Changing Definition of Health and Healthcare

What is Health?

- Ancient Views
 - Prehistoric Medicine
 - Illness caused by evil spirits
 - Trephination
 - Demons and punishment by the gods cause illness
 - Mind and body are same – fix the mind (soul) and you fix the body

What is Health?

- The Renaissance
 - Reemergence of scientific inquiry and medical study
 - **Mind-body dualism** — philosophical viewpoint that mind and body are separate entities that do not interact

Theologians, priests, philosophers
treat the mind

Physicians
heal the body



Healthcare System

- By 19th Century
 - Society rural and agrarian
 - Medicine not regulated
 - Naturalists
 - Homeopaths
 - Midwives
 - Physicians considered quacks, hospitals were dirty homeless shelters

Healthcare System

- Industrial Revolution
 - Urbanized
 - Work away from home
 - Away from family to take care of them
 - Specialization
 - No longer able to do many different things
 - More accidents at work
- Rugged individualists became dependent on a system of people

Healthcare System

- Early 19th century
 - William Halstead had a crush on his chief surgical nurse who had sensitive hands
 - This crush revolutionized the healthcare industry
 - Lower rates of infection
 - Medical profession became legitimate, licensed, regulated
 - Public fear and suspicion of physicians reduced
 - 1900: few hundred hospitals in US
 - 1930: 7,000

What is Health?

- The Twentieth Century and the Dawn of a New Era
 - *Biomedical model* — the idea that illness always has a physical cause
 - Dominant view of twentieth-century medicine
 - Embraces *reductionism* (complex phenomena derive ultimately from a single primary factor)
 - Based on the Cartesian doctrine of *mind-body dualism*
 - Health viewed as simply the absence of disease

Healthcare System

- In 20th Century, 3 Factors greatly increased cost of healthcare in the U.S.
 1. Development of Blue Cross
 1. Hospital debt
 2. Teachers in TX
 2. Discovery of antibiotics
 3. Tax change that made health benefits tax deductible/extension of worker's comp

Healthcare System

- Healthcare system has continued to grow at an alarming rate
 - Since 1970, healthcare has grown at 2 ½ times rate of other goods and services
 - Partial universal healthcare
 - Medicare for elderly
 - Medicaid for poor

What is Health?

- Now health is defined as “a state of complete physical, mental, and social well-being”
 - Physical health
 - Psychological health
 - Social health
- Note that this is *not* the absence of disease

What is Health?

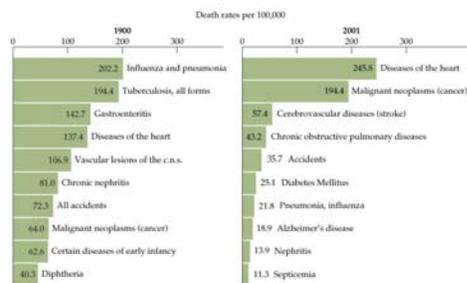
- The Twentieth Century and the Dawn of a New Era
 - *Behavioral medicine* — interdisciplinary field that integrates behavioral and biomedical science in promoting health and treating disease

What is Health?

- The Emergence of Health Psychology
 - 1978: APA establishes the division of health psychology (Division 38) and lays down four goals for the new field
 - To scientifically investigate the psychological, behavioral, and social *etiology* of disease
 - To promote health
 - To prevent and treat illness
 - To promote public health policy and the improvement of the health care system

2. Causes of Death

Top Causes of Death



Causes of Death

- Longer life expectancy
 - 1900: 47.3 years
 - 2005: 77 years
- Lifestyle disorders
- Coping
- Health behaviors
- Self-care

2. BioPsychoSocial Perspective

Models of Health Care: Biomedical Model

- Focus on illness
- Dominant model for the past 300 years
- All illness can be explained on the basis of aberrant somatic processes.
- Psychological/Social processes
 - Independent of disease

Models of Health Care: Biomedical Model

- Single-factor model
 - Illness due to one factor, biological malfunction.
- Mind-body dualism
- Emphasis on illness over health
- Reductionism
 - Illness reduced to microlevel (low-level) processes, such as chemical imbalances.

Biopsychosocial Model

- Macrolevel processes
 - psychological and social factors (social support, depression) are determinants of health, just as microlevel processes are.
- Multiple factors
 - involved in health and illness.
- Mind and body cannot be distinguished in matters of health and illness.
- Emphasis on both health *and* illness

Biopsychosocial Perspective

- The Biological Context
 - Every thought, mood, and urge is a biological event
 - *Evolutionary Perspective*
 - Adaptation and reproductive success
 - E.g. selection of tendency to feel hungry in response to good smells
 - *Life-Course Perspective*
 - Age-related aspects of health and illness
 - Are young people more likely to die in an accident?

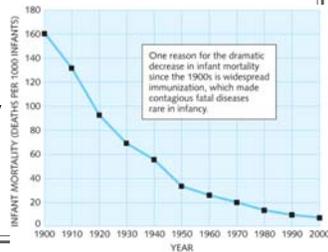
Biopsychosocial Perspective

- The Psychological Context
 - Coping with stressful experiences
 - Attitude and treatment effectiveness
 - Psychological interventions

Biopsychosocial Perspective

The Social Context

- The ways we think about, influence, and relate to one another and the environment
- Birth cohort** — group of people who, because they were born at about the same time, experience similar historical and social conditions

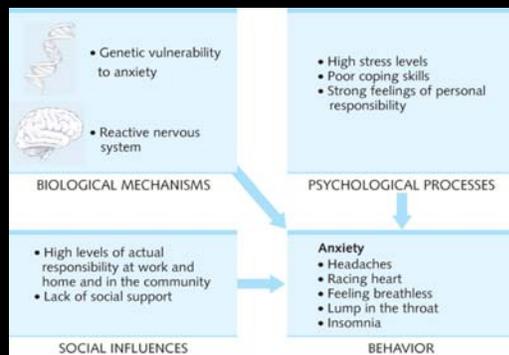


Biopsychosocial Perspective

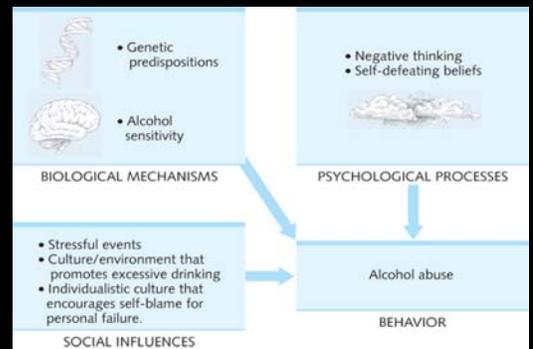
Sociocultural Perspective

- Theoretical perspective that focuses on how social and cultural factors contribute to health and disease
- Culture** — the enduring behaviors, values, and customs that a group of people transmit from one generation to the next
- Ethnic group** — large group of people who tend to have similar values and experiences because they share certain characteristics
- Socioeconomic status (SES)** — a measure of several variables, including income, education, and occupation

The Biopsychosocial Model



Biopsychosocial “Systems”



Theories of Health Psychology

Changing Health Habits: Attitude Change and Health Behavior

- Health Belief Model** – Whether a person practices a health behavior depends on
 - The degree to which the person perceives a personal health threat
 - The perception that a particular behavior will effectively reduce the threat
- Self-Efficacy** – The belief that one is able to control one’s practice of a particular behavior

Changing Health Habits: Theory of Planned Behavior

- Linking health attitudes directly to behavior
- A health behavior is the direct result of a behavioral intention
- Behavioral intentions are made up of
 - Attitude toward the specific action
 - Subjective norms regarding the action
 - Perceived behavioral control

Changing Health Habits: Some Caveats

- Attitudinal approaches don't explain long-term behavior change very well
- Communications can provoke irrational, defensive reactions
- People may distort health-relevant messages
 - May falsely see themselves as less vulnerable than others
- Thinking about disease may produce a negative mood
- Unrealistic optimism may be peculiarly resistant to feedback according to some studies

Cognitive-Behavioral Approaches

Change the focus to the target behavior itself
What are the conditions that elicit and maintain the health habit?

- Self-observation/Self-monitoring
- Classical conditioning
- Operant conditioning
- Modeling
- Stimulus Control

Cognitive-Behavioral Approaches

- The Self-Control of Behavior
 - Self-reinforcement
 - Positive self-reward (adds a desired factor)
 - Negative self-reward (removes an aversive factor)
 - Positive self-punishment (adds an unpleasant stimulus)
 - Negative self-punishment (removes a pleasant stimulus)
- Contingency Contracting
 - Contract regarding rewards and punishments is with another individual

Cognitive-Behavioral Approaches

- Covert Self Control
 - Recognizing internal monologues
 - Cognitive restructuring: modifying internal monologues
 - Self-talk: adaptive ways to talk to oneself in stressful situations
- Behavioral Assignments
- Skills Training
 - Social-Skills
 - Assertiveness

Cognitive-Behavioral Approaches

- Motivational Interviewing
 - Interviewer is non-judgmental and encouraging
 - Client talks as much as counselor
 - Goal: get client to think through reasons for and against change
- Relaxation training
- Broad-spectrum cognitive-behavior therapy

Cognitive-Behavioral Approaches

- Relapse
 - More likely when people are depressed, anxious, under stress
 - Particular problem with addictive disorders of alcoholism, smoking, drug addiction, obesity (rates between 50% and 90%)
 - Abstinence violation effect – feeling loss of control with one lapse in vigilance

Transtheoretical Model of Behavior Change

- Stage of Behavior Change:
Precontemplation
 - In this stage, the person is not aware of a problem
 - Family and friends may be aware and push for treatment
 - The individual often reverts to old behaviors if treatment does occur

Transtheoretical Model of Behavior Change

- Stage of Behavior Change: **Contemplation**
 - Aware that a problem exists
 - No commitment to take action
 - Weighing the pros and cons of action
 - If a decision for change is made, then there are favorable expectations

Transtheoretical Model of Behavior Change

- Stage of Behavior Change:
Preparation
 - Intention to change behavior has been made
 - May not have begun to change behavior or may have modified the target behavior somewhat
 - smoking fewer cigarettes each day

Transtheoretical Model of Behavior Change

- Stages of Behavior Change:
Action
 - Commitment of time and energy
 - Stopping the behavior
 - Modifying lifestyle and environment to get rid of cues associated with the behavior

Transtheoretical Model of Behavior Change

- Stages of Behavior Change:
Maintenance
 - Works toward preventing relapse
 - Consolidating gains that have been made
 - Has been free of the addictive behavior for more than 6 months
 - Relapse may occur, causes the cycle to repeat before the behavior is successfully eliminated
 - Conceptualized as a spiral

Transtheoretical Model: Importance of the Stage Model

- Captures the process that people actually go through
- Illustrates that change
 - Doesn't happen all at once
 - May not occur on the first try
- Explains why many interventions aren't successful
 - People are not in the "action" phase

Transtheoretical Model: Use of the Stage Model of Change

- Particular interventions may be valuable at different stages
 - Precontemplation stage: Information about smoking may help the person move to the contemplation stage
 - Action stage: A smoker in this stage won't be helped by information on the importance of not smoking
- Application of the spiral model shows mixed success