

**The 11th Biennial Conference of the  
International Society of Critical Health Psychology (ISCHP)**

**15-17 July 2019**

**Bratislava**

# **Book of Abstracts**

**International Society for Critical Health Psychology**

**Slovak Association for Critical Psychology**

**Comenius University in Bratislava, Faculty of Social and Economic Sciences**

**Slovak Academy of Sciences, Institute for Research in Social Communication**

Edited by Radomír Masaryk and Lenka Valuš

*On behalf of the ISCHP Executive Committee and Conference Organising Committee I am delighted to welcome you to the 2019 conference in Bratislava, Slovakia, our 11th biennial conference. This year marks the 20th anniversary of the 1st conference of what became known as the International Society of Critical Health Psychology. The 1999 conference was led by Michael Murray in Newfoundland and ISCHP was formally founded in 2001 at the 2nd conference in Birmingham in 2001. Several of the founding members of ISCHP are attending again this year and we welcome many familiar faces and newcomers. The 2019 conference comes at a time of political change both locally and globally with the new President, Zuzana Čaputová, taking office in Slovakia in June of this year whilst increasing neoliberal pressures continue to impact on healthcare and academia around the world. The range of topics and presentation formats at this year's conference promise lots of food for thought and we have an amazing series of keynotes throughout the conference. We also have a packed social programme around our programme of presentations, which will allow lots of time for stimulating discussions and new connections. A huge thanks to Rado Masaryk, who has chaired the Conference Organising Committee, and the local and international organisers.*

***Gareth Treharne, Chair, ISCHP Executive Committee***

*Organizing a conference is always an adventure. First of all I would like to thank Wendy Stainton Rogers who came up with the suggestion to do this event in Bratislava. The idea of bringing all these unique researchers into my home town got me very excited! Then I would like to thank the entire Conference Organizing Committee - Gabriel Bianchi, Kerry Chamberlain, Lenka Kostovičová, Barbara Lášticová, Abigail Locke, Lucia Mokrá, Martina Mášiková, Elizabeth Peel, Wendy Stainton Rogers, Poul Rohleder, Chris Stephens, Radosław Stupak, Dominika Vajdová, Irmgard Tischner and Gareth Treharne. Finally I would like to thank our local team that made all this possible: Martina Mášiková (management and contracts), Simona Šintalová (administration), Dominika Vajdová and Nikoleta Kuglerová (the check-in team), Juraj Petrik, Nika Vorelová and Nika Boldišová (room managers and information for participants), Tomáš Madeja (photo and video), and Terka Želiarová (medical supervisor). And I would like to thank the Rector of the Comenius University in Bratislava, Professor Marek Števček, for his support and endorsement of our enterprise.*

***Radomír Masaryk, ISCHP 2019 Conference Chair***

## **Everyday dilemmas of happiness**

Part of the symposium: Octavia Calder -Dawe - *Self-help, health and happiness? Critical psychological perspectives on positivity and happiness imperatives in everyday life*

**Anderson, Emma**

*University of Brighton, UK*

Positive psychology and its directives to be grateful, live in the moment, think positively and strategically cultivate relationships has come to exert a strong influence in contemporary Western social and political life. This idea of happiness as an augmentable resource that can be consciously ‘worked on’ has been criticised for its individualising narrative that obscures structural contributions to distress (e.g. Binkley, 2014; Davies, 2015). However, little research has examined how such narratives and practices around happiness may be adopted, resisted or negotiated by everyday citizens. This paper presents a critical discursive psychological analysis of interviews with 30 UK residents, looking at how they make sense of happiness, and construct identities around it. There was a notable take-up of the idea of happiness as a cognitive undertaking – of managing moods, lowering expectations, practising mindfulness and making informed choices. Most participants also spoke of happiness as being socially produced, through close relationships and a sense of belonging. This led to tensions and dilemmas, especially for female participants, when attempting to translate ‘expert’ ideas about happiness into narratives of their own lives. These dilemmas, and the self-responsibilising practices that they engendered, will be discussed.

## **Sexual health or healthy sex?**

Oral presentation

**Bianchi, Gabriel**

*Slovak Academy of Sciences, Institute for Research in Social Communication*

This is a theoretical paper discussing possibilities to improve discourse on health around sexuality searching for subjectivity and interactivity in order to make it more effective. A discourse on sexual health was started when sexuality was (in the Western world) included into the „care“ of medicine during the second half of 19th century. In contrast to it Dennis Fortenberry (2014) recently formulated the concept of healthy sex. While sexual health takes an scientific, expert and normative position, it, paradoxically, excludes the main subjects - adolescents - from discussion. Healthy sex approach focuses on „how adolescents come to recognize sex as a complex set of social interactions reinforced through the repetitive sexual experiences of emerging sexual bodies and sexual brains“. The pathway to healthy sex is an experiential learning process in the context of formal and informal collecting of knowledge on body, pleasure, risk, and health. Sexual health can be measured and expressed by multiple parameters either in an individual, in a cohort or a population. The paper illustrates and discusses steps in healthy sex development that are the „outcome“ of interaction between sexual acts and their respective ranking on sexual-health parameters.

Grant support: VEGA 2/0027/17

## **#Diabetes on a plate: Contesting representations of diabetes on Instagram**

Oral presentation

**Blackwood, Leda; Gavin, Jeff; Johansen, Jessica; Arnott, Emma**

*University of Bath*

People with diabetes report feeling stigmatised by health messaging that represents diabetes as a consequence of unhealthy relationships with food. We have conducted research looking at how diabetes is popularly represented in mainstream social media through the hashtag ‘#DiabetesOnAPlate’. Across more than 6,000 Instagram posts captioned as #DiabetesOnAPlate our research found that the majority depict high-calorie food and were posted by people without diabetes; but there were also counter-posts by people with diabetes 1 depicting health foods and diabetes management devices. Follow-up research used an on-line survey tool, Vizata, to examine how people with diabetes 1, diabetes 2, and without diabetes understand these Instagram posts. Across both studies we found people with diabetes 2 both passively and actively disengaging from the #DiabetesOnAPlate message. People with diabetes 1 however, displayed various forms of resistance, the most common being a disassociation from people with diabetes 2. This talk will provide further details about the studies and also reflect on the atomising effects of stigmatic representations of diabetes and its consequences.

## **“I need a chance to survive”: Improving health and wellbeing following a disaster**

Oral presentation

**Blake, Denise**

*Massey University*

With the effects of climate change, disasters both natural and ‘human-induced’ are increasing and continue to have substantial effects on the health and wellbeing of communities.

Everyday approaches to disaster management are historically founded in militaristic perspectives that safeguard and educate civil communities as part of a national defence plan. However, such approaches can ignore cultural and social specificity while privileging particular communities, especially those with economic and social capital. A plethora of research demonstrates that in a disaster setting, much like in the everyday ‘business as usual’ non-disaster setting, communities who have little social power due to health or economic constraints have worst outcomes, enduring more harm. This presentation takes a critical qualitative approach to examine the role of such structural inequalities on disaster preparedness and recovery. I draw on the voices of marginalised communities – people receiving opioid substitution treatment, live in rented accommodation and work in the sex industry in Aotearoa New Zealand – to demonstrate the ways in which social, cultural and economic relations have implications for health and wellbeing in times of extreme events. I conclude by arguing for more inclusive practices in disaster management that can enable a ‘build back better’ strategy for all communities.

## **Self-help, health and happiness? Critical psychological perspectives on positivity and happiness imperatives in everyday life (SYMPOSIUM)**

**Calder-Dawe, Octavia**

*SHORE and Whāriki Research Centre, Massey University*

This symposium brings together four empirical papers exploring how mindfulness, self-help, positivity and happiness discourses ‘touch down’ in everyday lives. The presentations focus on how happiness and positivity imperatives entangle with everyday practice, tracing their broader implications for health, wellbeing, sexuality and social justice. Contributors are critical health psychologists based in Canada, Germany, the UK and Aotearoa New Zealand. Calder-Dawe’s paper investigates how gendered positivity imperatives interact with and contour young women’s everyday emotional practices. Setchell and colleagues explore clinicians’ positivity work in healthcare environments, analysing what comes to matter through practices of cheer\* in an outpatient neuromuscular clinic. Payam investigates how participants draw on happiness discourses to account for extra-relational sexual involvement as a step towards happy monogamy with “the one”. Anderson explores how UK residents draw from self-help texts and ‘expert’ happiness discourses to understand and position themselves in relation to happiness. Taken together, these contributions crystallise the depoliticising and/or normative force of happiness and positivity imperatives in everyday contexts. The symposium concludes with reflections from Sarah Riley, a Reader in Critical Psychology whose scholarship has traced the psychological impact of neoliberalism with particular attention to gender, embodiment, health and self-help.

# **Narratives of survival and resilience in a group of Palestinian women resisting ongoing political violence and structural oppression: a qualitative study through live events calendars**

Poster Presentation

**Cavazzoni Federica; Veronese, Guido; Sousa, Cindy**

*University of Milano-Bicocca, Italy*

Responding to the need for more information concerning the mental health and psychological wellbeing of women living amidst political oppression and war, this study aimed to explore specific factors that contribute to women's individual and collective perceptions about war and the associated traumatic life events that occurred during their lives. Moving from a socio-ecological and culture-informed perspective, we used narrative timelines elicited from 21 Palestinian women in Gaza, both individually and collectively, as a tool for both data collection and intervention. A deductive, top-down, thematic content analysis procedure was used to categorize data. The main events outlined by the women in their historical accounts, both individual and collective, were linked to political events in and surrounding Palestine. The Palestinian women's individual life

events' calendar reflects a constant attempt in balancing and compensating traumatic events with sources of well-being related to social support and family. Individual and collective narrative activities contributed to generate a significant reframing in the attribution of meaning and emotional perceptions of the participants. Women articulated how they build resilience through transgenerational and daily practices of resistance that encompass indigenous strategies of coping and skills of survival.

## **Relentlessly positive? Exploring the imprint of positivity imperatives on the affective lives of young women**

Part of the symposium: Octavia Calder-Dawe - *Self-help, health and happiness? Critical psychological perspectives on positivity and happiness imperatives in everyday life*

**Calder-Dawe, Octavia**

*SHORE and Whāriki Research Centre, Massey University, Aotearoa/New Zealand*

Directives to smile, be happy and to “look on the bright side” are everywhere one turns. Women, in particular, are encouraged to overcome obstacles through upbeat emotional management and “relentless positivity”. This emphasis on positive emotion sits uncomfortably alongside rising socioeconomic precarity and high levels of stress and distress reported by young women in Aotearoa and elsewhere. This paper reports on an empirical qualitative research project exploring how positivity imperatives mesh with young New Zealand women’s everyday emotional practices. Interviewees are 24 women aged 18-35, recruited from three groups whose regular activities demand considerable emotional labour: i) service industry workers, ii) mothers of small children, and iii) aspiring and established social media influencers. Individual interviews include discussion of participants’ posting to Instagram – a platform where happy self-portraiture is the expected norm. Combining discursive and visual data, I discuss how participants understand and enact positivity, exploring the interplay of participants’ positivity practices with other forms of affective experience and expression. To conclude I consider the implications of this gendered push for positivity for personal and social life.

## **Nocuous narratives: Reconsidering heteronormative value sets within men's pornography addiction research**

Oral presentation

**Cosma, Stephanie; Gurevich, Maria**

*Ryerson University*

Adopting a feminist post-structural lens (Gavey, 1989), this critique examines how concern around men's pornography (over)use in contemporary psychological research reflects longstanding cultural anxiety around the deviation of male sexuality from heteronormative imperatives (Butler, 1993; Foucault, 1978; Hook, 2007; Rubin, 1984). Problematic pornography use is largely framed as a gender-specific issue in the literature, and is often framed as a risky, harmful, addictive substance that can cause personal and relational damage for men. The analysis follows threads of historically-anchored, heteronormative-preserving values and restrictions embedded within this body of research. Parameters of acceptable, sanctioned sexual desire for men are uniquely constrained to penetrative, in-person heterosexual. Pleasure derived from any other source is considered a secondary replacement (or immoral/deviant) (Jackson, 1984; Potts, 2002; Rubin, 1984), and should not threaten the top-ranking position of penetrative sex in a "healthy/normal" male (Plummer, 2005). Such predominant expectations and imperatives promote and legitimize only certain types of (hetero)sexual activity (Giddens, 1991; Holloway, 1984; McPhillips, Braun, & Gavey, 2001; Rubin, 1984) and work to produce a sociocultural (and interpersonal) climate that gives way to a "distressed/disordered" individual when these imperatives are violated (Butler, 1993; Foucault, 1978). Alternative perspectives on how men (over)use pornography use are discussed.

Grant support: *Social Sciences and Humanities Research Council of Canada, Joseph-Armand Bombardier Canada Graduate Doctoral Scholarship; CAMH Hewton Archival Research Award*

## **Prickle pennies and the new normal – Interpretative repertoires in parents' talk on internet forums about children with Type 1 diabetes**

Oral presentation

**Cottier, Paul**

*University of Helsinki*

Parents of children with type 1 diabetes are commonly caught up within the problematic dialectic of being responsible for the child's specific illness needs, while simultaneously fostering a sense of independence associated with the growing child. This tension is exacerbated when looked at from within the dominant neoliberalist social order in medicine which places emphasis on control and individual responsibility for care, which can lead to children becoming the sole bearer of their illness at an early age. Within this paper, parents are seen as identity agents for their children, who, when they take a position outside of these dominant neoliberalist and rationalist discourses on the self, can be seen as offering troubled identities for their children and themselves. Taking a social constructionist perspective on knowledge, and utilising the dialogical nature of age-related categories, this paper explores how parents of children with type 1 diabetes negotiate identity positions for themselves and their children, while trying to resist dominant medical discourses on health and illness. By utilising a critical discursive psychology perspective to look at internet self-help groups, it was possible to identify two interpretative repertoires - diabetes as normal and diabetes as learning.

Grant support: *Ella ja Georg Ehrnrooth Foundation*

## **Understandings of psychological distress among queer and gender diverse young people**

Oral presentation

**Cowie, Lucy**

*University of Auckland*

The psychological wellbeing of queer and gender diverse young people has received increased attention of late, as more and more research evidences higher rates of psychological distress experienced by queer and gender diverse young people (e.g. Borgogna, McDermott, Aita, & Kridel, 2018). For example, one large representative survey of New Zealand teenagers found that queer and gender diverse young people were over 3 and 5 times more likely, respectively, to report significant depressive symptoms than their straight, cisgender counterparts (Clark et al., 2014). Significantly less research has explored young people's own perspectives around their wellbeing. Such perspectives are necessary to help us understand why such statistics exist, and indeed how queer and gender diverse young people's psychological wellbeing might be supported in ways that could contribute to beneficial change. In this talk, I will report on an interview study with 20 queer and gender diverse 16 to 18-year-olds, which aimed to explore understandings of their psychological distress and wellbeing. I will present a thematic analysis in progress, which aims to situate participants' talk within wider societal understandings of psychological distress, and explore young people's own suggestions for how to support the psychological wellbeing of queer and gender diverse young people.

## **Aue! A critical reflection on implementing biculturalism in the clinical programme**

5 Minute Challenge

**Cowie, Sue**

*The University of Auckland*

New Zealand's founding document, the Treaty of Waitangi (1840), agreed on principles of partnership, participation and protection between the two partners: Government (representatives of new immigrants or Pākehā) and Māori.

The University of Auckland is “committed to the rights and obligations articulated in the Treaty... and places particular emphasis on promoting Māori presence and participation in all aspects of University life and encouraging teaching, learning and research in a range of fields important to Māori.”

The Doctorate in Clinical Psychology Programme also has responsibilities to the wider community and has committed to training more Māori Clinical Psychologists. The selection process is key in any training programme. With only 12 places, over 120 applicants and an increasing number of capable Māori applicants, change and challenge was in the air. Questions about how to balance equity and equality, which criteria count and a push for transparency had all been discussed in the lead up to selection. This talk will describe the key cultural (mis)understandings/assumptions that I, as a Pākehā, identified as playing a role in our selection process. These broad assumptions likely play a role for any training programme that has responsibilities to select indigenous or other identified groups requiring special consideration.

## **The pseudoscience of positive psychology**

Oral presentation

**Coyne, James**

*University of Pennsylvania*

There is no reason that there cannot be a science of positive psychology, pointing to what we could do to increase our happiness and well-being, but we must recognize the limitations of quick fixes and our overall ability to raise and sustain our level of happiness.

Method. Narrow review. This presentation takes a skeptical, evidence based approach, applying basic standards for grading the evidence available for some key concepts promoted in positive psychology such as post-traumatic growth, benefit finding, grit, and positive mindset.

Results. There is a lack of quality evidence for claims that recur in the positive psychology literature. Although these claims concern psychological interventions improving health and well-being, there is an utter lack of quality randomized trials with low risk of bias. Widely cited systematic reviews and meta analyses are of low quality by widely accepted standards. The bulk of research is best described as causal interpretations of correlational data and poorly controlled laboratory analogue studies mostly conducted with subjects from WEIRD (Western, educated, industrialized, rich and democratic (WEIRD) societies.

Conclusion. There is much exaggeration and outright pseudoscience in what is accepted as the science of positive psychology. Skepticism is warranted.

## **Health and the experienced body**

Part of the symposium: Wendy Stainton Rogers - *Embodiment- Critical health psychology to take embodiment more seriously*

**Cromby, John**

*ULSB, University of Leicester*

The body we occupy – the body that supplies the frequently un-noticed bedrock of being - is already an experienced body. In other words, the body is already both social (responsive to current circumstances) and socialised (configured by past events). This applies even where past circumstances and events are relatively mundane, not just when they have been more dramatic. Neural pathways are shaped from birth by experiences, included those of being parented. Feelings and emotions, often exquisitely attuned to those of others, are consistently responsive to circumstances. Physiques, postures and modes of movement are culturally moulded and socially stratified. So we don't need to add social influence to studies of the body. Instead, we need to more fully consider how social influence already helps make the experienced bodies we study. This paper will discuss strategies that are both more and less helpful in this regard.

## **Arts-based methods, feelings and distress**

Part of the symposium: Kerry Chamberlain - Snapshots

**Cromby, John; Melvin, Katie; Crossley, Jon**

*United Kingdom*

Feelings are by definition ineffable: not reducible to words. The forms of distress that psychiatry calls mental illness are frequently characterised by complex mixtures of feelings, held in place by combinations of adverse influences and circumstances. Since art can frequently represent and communicate feelings more effectively than language can, arts-based methods can further our understanding of feelings on distress: in this presentation we briefly illustrate this.

## **Attitudes toward lesbian and gay parenting in Turkey**

Poster presentation

**Dilbirligi, Aysegul; Peel, Elizabeth; Holloway, Sarah; Leguina, Adrian**

*Loughborough University*

Although there are a few studies on LGBT issues in Turkey, social attitudes toward lesbian and gay parenting have not been documented. The main objective of this study was to assess the social perceptions and attitudes and to examine the underlying parameters of perceptions about same-sex parenting. A Turkish sample (N= 566) ranging in age from 18-77 (Mean = 29.6) a survey measuring homophobia level, beliefs about equal parenting rights, beliefs about the welfare of children with lesbian and gay parents, and attitudes toward lesbian and gay parenting, in addition to demographic information. Results revealed that the majority of the sample was in the 'neutral' position toward lesbian and gay men whilst the minority appeared in the 'negative' position. A considerable number of participants disagreed with granting equal parenting rights to same-sex couples. The vast majority (78.4%) expressed their concern about society as not ready for children growing up by lesbian and gay couples. Although the great majority of the sample thought that gay and lesbian parents would care about the children best interests, to a large extent, it was agreed that the children would be victimised in society. Finally, it was examined that attitudes toward same-sex parenting are strongly affected by the following parameters; age, religion, religiosity level, political ideology, education level, marital status and geographical area. These indicate that the sample is not strongly against same-sex parenting; however, they ultimately think that society is not ready for it. Therefore, this research provides an understanding of, and guidance for, lesbians' and gay men's rights in Turkey.

## **Dealing with physical activity apps: How to keep in control**

Oral presentation

**Fasseur, Fabienne**

*Institut of Psychology, Faculty of Social Sciences and Politics, University of Lausanne*

The use of mobile health applications (apps) pervades everyday life of young adults. To explore young adults' experiences of apps for physical activity, we conducted a focus group with psychology and sports Master students (4 women and 4 men, from 19 to 26 years old).

After transcription of discourses, thematic content analysis reveals that physical activity apps instruments have strong and complex influence on health behaviours.

They fulfil the curiosity about new technologies and help people to know their body reactions. They are relatively efficient for the objectivation of physical feelings and measures. At least at the beginning of use, they support physical personal development and success in sport activities. But rapidly, limits of the instrument lead to contradictory health events.

Most of the time, results of measures drive people to act in contradiction with their body feelings, to exceed physical limits and lead to increased risk of injuries if the notifications are fully followed. Challenges proposed by the instrument don't take into account the individuals' specificities, contexts and emotions.

In conclusion, even though instruments seem to be pertinent to develop sport activities, participants advocate in favour of a need for coaching to adapt performance progression to real physical abilities.

## **Risk and responsibility within the South African antenatal healthcare nexus**

Oral presentation

**Feltham-King, Tracey; Macleod, Catriona**

*Rhodes University*

The National Committee for Confidential Enquiry into Maternal Deaths (NCCEMD) was established to monitor South African public antenatal clinics. The standardization and professionalization of services was intended to reduce avoidable factors leading to maternal and infant mortality. This process utilizes surveillance and management systems which are implemented to formally monitor; report and assess antenatal healthcare services. This paper reports on an ethnographic study conducted in two public antenatal clinics located on the east coast of South Africa. Observations and interviews were conducted in order to understand how teenaged pregnant women and health service providers are positioned within the antenatal healthcare nexus. A Foucauldian Discourse Analysis revealed how the supposedly neutral discourses of risk are conflated with consumerist discourses in a process of responsabilisation intended to ensure accountability. It was found that by using the notion of empowerment and health, service providers and young pregnant women construct responsible antenatal care as including a range of entrepreneurial activities and the consumption of health services, practices and products. These reorientations of the health service provider (as an instrument of the market) and the pregnant teenager (as a client) have implications for the ways in which we understand improvements within the antenatal healthcare nexus.

## **The need to consume: Confronting settler hunger in research with indigenous peoples**

Part of the symposium: Carla Rice - *The work of stories in the world*

**Fowlie, Hannah; Rice, Carla**

*Re•Vision: The Centre for Art and Social Justice, University of Guelph*

Xwelitem, based on the Sto:lo word for settler, translates as starving person. In this paper, we develop a concept of settler hunger and engage with theories of colonial epistemic ignorance within settler-colonial nations (in this case, Canada). Analyzing two films made by Indigenous artists and three autoethnographic digital stories, we confront ignorance, hunger and shame in the settler self, rooted in a colonial, capitalist/neoliberal, consumerist mindset. Our aim is to heed the call for non-Indigenous scholars to examine and reckon with their own subjectivities and privileged positionalities in research with Indigenous peoples in the hopes of contributing to different relations with the settler self, the Indigenous other and the colonial state.

Grant support: *MOP-137019; 435-2014-2124; 950-231091; PROJ#35254*

**Gay and lesbian parenting in the 2019 presidential campaign in Slovakia: penetrations of Public - Politics - Academic**

Poster presentation

**Fúsková, Jana; Ivan, Lukšík**

*Ústav výskumu sociálnej komunikácie, Slovenská akadémia vied*

This poster focuses on media analysis of the same-sex couple adoptions in the discussions of candidates for the President of the Slovak Republic in 2019. We analyzed the penetration of public discourse, politics and academic knowledge in arguments and the values presented in these discussions. Where do the resources of academic knowledge and policy come from and what argumentative strategies do individual presidential candidates use?

Grant support: *This work was supported by the Slovak research agency VEGA, project No 2/0027/17.*

## **Lived understandings of self-management of complex regional pain syndrome: A Twitter analysis**

Oral presentation

**Gavin, Jeff; Rodham, Karen; Blackwood, Leda**

*University of Bath*

Up to half of the UK population are directly affected by chronic pain, thus putting a strain on the UK health system. Consequently, people with chronic pain conditions are being encouraged to play a more active role in the self-management of their pain by maintaining their treatment regimen, pacing their activities and learning to control the physical, emotional and social consequences of their condition. Complex regional pain syndrome (CRPS) is one such pain condition. Although self-management is increasingly offered, the underlying assumptions of self-management programmes fail to consider whether or how patients engage with self-management in the context of their everyday lives. The aim of this study is to explore constructions of self-management in Twitter discussions of CRPS. 84771 tweets that included the hashtags #CRPS, #RSD, #ComplexRegionalPainSyndrome, or #ReflexSympathicDystrophy were collected over a three-month period. A subset of tweets containing reference to self-management were identified, and 300 of these tweets and their replies were subject to thematic analysis. Themes related to the mismatch between health professionals' definitions and understandings of self-management and the lived understandings of those living with CRPS will be discussed.

## **Older adults' intimacy and sexuality in nursing homes: Rationale about staff disclosure and family involvement**

Oral presentation

**Gavin, Amaelle**

*University of Lausanne, Switzerland*

Intimacy and sexuality amongst older adults in nursing homes remain important but are often considered as problematic and are not addressed adequately. Though a majority of research and guidelines suggest that the family should be informed in situations involving the residents' intimacy and sexuality, this approach is rarely justified, questioned or studied.

This research aimed to better understand the staffs' motivations for informing the families of intimate situations, more specifically the residents' children, but also the expectations of the latter and their (un)willingness to be involved. We interviewed ten professionals and seven "children" from three nursing homes in Switzerland. Interviews were transcribed and analysed through thematic analysis.

Our results show that the staffs' main motivation is to prevent the families from being shocked if they were to encounter an intimate situation. "Children", on the other hand, feel that they would not be shocked, but they would rather not want to know. Descriptions of reactions to actual situations are more hesitant and ambivalent, especially in the presence of dementia.

Staffs and families can have a significant impact on the residents' intimate experience. This needs to be examined within its specific context and by understanding the complexity of the situations at hand.

## **Impact of tinnitus treatment on anxiety and depression: Implications for audiologists and psychologists**

Poster presentation

**Goodworth, Marie-Christine; Johnson, Annika; Drake, Garret; Rodriguez, Daniel; Zaugg, Tara; Griest, Susan; Henry, James**

*George Fox University*

Tinnitus is a common audiological condition that affects 10-15 percent of the general population worldwide and up to 30 percent of veterans, yet its etiology and pathway are still not fully understood. Tinnitus is often associated with other issues, such as anxiety and depression. Results of a treatment study for tinnitus showed positive outcomes not only for bothersome tinnitus but also for depression. All 90 participants in the study in both treatment conditions, Tinnitus Retraining Therapy and Tinnitus Masking Therapy, had a significant decrease in scores on the Beck Depression Inventory – II from baseline to 18 month follow up,  $t(89) = 2.73, p = .008$ . The effect size was small,  $d = 0.22$ . However, since the study was specifically designed to reduce the impact of tinnitus and not depression, this finding is significant. Implications for audiologists and psychologists will be discussed, as well as the necessity for interdisciplinary collaboration. Additionally, since traditional research methodology was used, a reflection on its limitations from a critical health psychology perspective will be discussed.

## **What is a crisis house?**

Oral presentation

**Hird, Alexandra**

*Aberystwyth University*

Crisis Houses are a residential alternative to both at home and institutional mental health service provision. Answering calls for a 'robust' evaluation of Crisis Houses, this paper reports the first phase of my PhD on Crisis House care. It uses a case study of a Crisis House based in Wales, which provides 24-hour staffed, short-term residential accommodation for up to four individuals experiencing an acute mental health crisis.

To better understand and evaluate this form of mental health care provision, this paper considers the history of mental health policies in England and Wales, and their underpinning discourses, organisational frameworks and the associated activism that facilitated the Crisis House model's development and integration within mental health services delivery.

Grant support: *Knowledge Economy Skills Scholarship (KESS2)*

## **Medical personnel in the face of miscarriage and stillbirth**

Oral presentation

**Hornowska-Stoch, Maria**

*Jagiellonian University in Cracow, Institute of Psychology*

Most of the research in the field of prenatal child loss focuses on the mothers' perspective. Men's point of view, the fathers', have been looked at much more seldom. A family that experiences the loss usually faces a hospital visit and medical personnel. In this regard the topic of child loss also involves the obstetricians and midwives. These groups, however, receive very little attention in the research.

The goal of this study was to show the topic: both miscarriage and stillbirth from the perspective of OBGYN specialists

The paper presents an outcome of 6 semi-structured expert interviews with doctors (OBGYN.) The interviews due to the specific area of interest and the delicacy of this topic have been analysed using the Interpretative Phenomenological Analysis (IPA).

The experience of miscarriage is an utterly different thing for the mother and the medical staff. On the one hand it is something with which one deals on regular basis, on the other a very unique, intimate and utterly devastating event.

The interviews give a chance to point to certain attitudes and beliefs crucial to the patient-doctor dynamics. Better understanding of these relation may help develop institutional solutions to alleviate the problem.

## **Practices of silencing: Birth and epistemic violence**

Oral presentation

**Chadwick, Rachelle**

*University of Pretoria*

This paper explores mistreatment during pregnancy/birth through the conceptual lens of 'epistemic violence'. The chapter draws on feminist philosopher Kristie Dotson's work on practices of silencing (testimonial quieting and testimonial smothering) to explore the systemic devaluation and muting of (marginalized) girls' embodied knowledge and voices during birth as a form of obstetric violence. The pregnancy, birth and early mothering narratives of five young, impoverished mothers (collected via three interviews with each participant) are analyzed in/through the theoretical lenses of epistemic silencing and hermeneutical violence. The analysis explores the ways in which different 'practices of silencing' work to colonize and appropriate marginalized girls' labor/birth experiences. Three key forms of silencing are explored, namely: (1) systematic erasure, (2) smothering and (4) acts of quieting. In the analysis, failed communicative exchanges in which laboring/birthing girls' status as knowers is unrecognized, repudiated, and denied by biomedical epistemic frameworks and everyday practices, is argued to underpin 'practices of silencing' which function as forms of obstetric violence.

## **From voice to voicing: multivocality, diffractive methods and intersectional praxis**

Oral presentation

**Chadwick, Rachelle**

*University of Pretoria*

In this paper I reflect on the salience of ‘voice’ in relation to my work as a critical qualitative and feminist researcher/theorist. I trace the pathways to voice that have intersected with both my personal biography and my experiences of working with the voices of others. In particular, I am interested in tracing the methodological, conceptual and ethical challenges, opportunities and dilemmas of working with voice/s. In this paper I trouble conceptions of ‘voice’ based on frames that assume autonomous, stable and singular selves. Instead I theorize ‘voicing’ as an trans-individual process which exceeds the boundaries of individual bodies and subjects. Voicing is conceptualized as a sociomaterial process in which fleshy bodies, ideologies, affective and psychosocial relations all speak or become vitalized/muted in shifting and unpredictable ways. Working with sociomaterial voices and multivocal iterations is also outlined as a form of intersectional praxis in which the diffractive entanglements between sociomaterial and linguistic power relations can be traced and engaged.

**Snapshots symposium, In the ward (SYMPOSIUM)**

**Chamberlain, Kerry; Lamarre, Andrea; McGuigan, Kathryn; Stainton Rogers, Wendy; Urry, Kristi; Tuval-Mashiach, Rivka; Todorova, Irina; Treharne, Gareth; Melvin, Katie; Cromby, John; Crossley, Jon**

*Massey University, New Zealand*

This symposium offers an art-based approach to issues of health and illness, offering a variety of short and sharp commentaries on some aspect of health or illness with relevance for critical health psychology. Each speaker will present in an art-based form, offering a brief initial comment to contextualise the piece, before presenting the contribution. Presentations will be brief, lasting no more than 10 minutes, with most much less. The symposium will close with an open forum for questions and discussion about the value of arts-based formats, presentations and disseminations for research in critical health psychology.

This creative fiction piece documents experiences from a period spent in a hospital ward, offering insights into medical practices and patient interactions.

## **One photograph**

Pecha Kucha

**Chamberlain, Kerry**

*Massey University*

This pecha kucha presentation offers some thoughts on visual research and the meanings and interpretation of images, alongside some insights into death, dying and memento mori.

## **Could cancer bring benefits to patients lives?**

Poster presentation

**Chlebcová, Veronika**

*Faculty of Psychology, Pan-European University*

Cancer is usually associated with loss, stigma, fatigue, fear, anxiety and other negative phenomena. Despite the many problems that come into the lives of patients, we can find and work with positive side effects of cancer – benefits. The aim of the research was to map the benefits in breast cancer survivors' lives. We present the results of secondary qualitative exploratory analysis. After establishing the relationships with 6 patients we proceeded to the data collection through semi-structured interview with two main topics, problems and support in the lives of breast cancer survivors. We have used literal transcription and content analysis. We interpreted the results with respect to the unique and specific characteristics of the participants. The results of the analyses show a wide range of benefits in life after oncology treatment. The most powerful for our participants were personal development, community of patients, changes in interpersonal relationships, a new perspective and direction in life, renewed spirituality, sensitivity to own physical and psychological experiences and needs, healthy lifestyle, and greater appreciation for life. The limits of our study are research environment and sample size. This view of cancer gives us the incentive for a deeper qualitative examination of the topic in Slovak cancer survivors. Cancer takes a lot, but it can also bring benefits to patients.

Grant support: *VEGA no. 1/0305/18, The cognitive-existential profile and specifics of post-traumatic growth in cancer survivors*

## **Psychological development support needs in remote island area**

Poster presentation

**Imamura, Chikako; Takahashi, Kayo; Ozawa, Eiji**

*Kagoshima University*

The purpose of this study is to propose a future psychological working model by understanding support needs in remote areas. In remote islands and remote areas, there are many cases where there are no specialized counseling agencies, and in many cases consultation-type psychoclinical styles cannot be adapted. There are many remote islands and remote areas in the area where the authors live. Therefore, the purpose of this study is to examine the need for regional support there. A questionnaire survey about asking support needs and dispatch requests was conducted on 25 nursery schools, handicapped children's welfare facilities and special needs schools in 2017. As a result, 174 support requests were indicated. The most frequent need was the dispatch of speech therapists, followed by a clinical psychologist. There was a high need for clinical psychology support from nursery schools and handicapped children's welfare facilities. After organizing the needs for psychological support, there were many interpersonal tasks and behavioral problems such as "the child is isolated from the group" and "the child has behavioral problems ". It was assumed that the need for psychological support rises when the child takes actions that childcare staff or guardians cannot understand well.

## **How is Masculinity practised on a lads' night out? A poststructuralist informed ethnographic analysis of gendered drinking in British towns and cities.**

Part of the symposium: Sarah Riley - *Affirmative – Critical research: How the CC-Psy team at Aberystwyth are addressing our mission*

**Jacques, Emily**

*Aberystwyth University*

Research on 'lad culture' highlights concerning levels of sexism and misogyny structuring young British men's practices of masculinity. Yet, inclusive masculinity research points to normative practices of masculinity that are defined in terms of rejecting homophobia and sexism. These different literatures highlight the importance of all-male activities in producing masculinities, but have very different conclusions about the kind of masculinities being produced. To better understand this issue, an ethnography was conducted with four different groups of young men who enjoy nights out together. A Foucauldian discourse analysis of field notes and interviews suggest that these men made sense of gender through contradictory but equally culturally-valued understandings. These understandings included that men and women are no different and that there are essential gender and sex differences; and that it is important to distance oneself from being 'lad' because of its association with problematised levels of drinking, sexism and aggression while also being able to understand oneself in terms of practices associated with being a lad (that include drinking, sex and fighting). These findings highlight the importance of inclusive masculinity research considering men's relationships with women as well as men and the way lad's nights out police as well as reproduce sexist practices.

## **Social and psychological causes of excessive mortality of Russian men**

Oral presentation

**Khodyreva, Natalia**

*St.Petersburg State University*

The average life expectancy of Russian men (2017) was 67.5 years, which is 10 years less than both in Russian women and men in the other countries. Gender differences in the level of men's mortality from the suicide are 5-6 times higher than in women. At the same time, women are more likely than men assess their health no higher than the average, and more often than men experience limitations in their daily activities. Despite the privileged position of Russian men in the economic and political spheres, access to resources and decision-making processes, they die from external causes, cardiovascular disease, HIV, alcoholism previously their peers in European countries. The paradox is that the power of men is not conducive to better health and longer life expectancy. The presentation will critically examine theories and hypotheses that explain the gender gap in the life expectancy of Russian men: the reduction of investment in health capital (Grossman), hegemonic masculinity (Connell), the crisis of traditional masculinity (Kimmel), the impact of masculine ideology (Harrison, Pleck), the features of Russian masculinity (Kon, Mesherkina), as well as hypotheses of different exposure and hypotheses of differentiated vulnerability.

## **In-between spaces of interdependence: Social representations of Alzheimer's disease in the interviews with dementia patients and their caregivers**

Part of the symposium: Jana Plichtová - *Seeing the person behind the diagnosis: Social representations of Alzheimer's disease in Slovakia*

**Krakovská, Simona; Gergely, Sabine; Sedláková, Táňa**

*Centrum MEMORY, n.o.*

Purpose: Drawing on interviews conducted with dementia patients and their informal caregivers, the study aims to explore the representations of Alzheimer's disease and their relations to the social imaginary of Fourth Age. As this neurodegenerative disease is marked by progressive decline in instrumental activities and increase of support seeking, we approach data with the concept of dialogical self. Data: Data consists of 64 interviews covering eight Slovak regions. Conversational partners are diagnosed with mild dementia (n=32) or give care to family members (n=32). Until now, 16 interviews in Bratislava and Košice regions were conducted. Methods: A Constructionist Grounded Theory framework is applied to uncover preliminary findings. Results: People living with dementia are often viewed as dysfunctional, socially excluded and with diminished quality of life. The analysis revealed that the categories often narrated in terms of quality of life such as independence, autonomy or agency were thematised in relational rather than individualistic framework. Implications: The findings challenge the one-sidedly definitions of autonomy and agency and draws attention to its risks in the context of long-term care for people with dementia. The conclusions call us to reconsider our thinking about dignity and highlight the challenges of long-term care on the institutional level. Key words: dementia, Alzheimer's disease, representations, interdependence

Grant support: *APVV-17-0536 „Sociálne reprezentácie demencie a ich implikácia pre podporu kognitívneho zdravia na Slovensku“*

## **Compassion and prejudice reduction towards the members of LGBT groups in Slovakia**

Poster presentation

**Kuglerová, Nikoleta**

*Institute of Applied Psychology, Faculty of Social and Economic Sciences, Comenius  
University in Bratislava*

Can we already talk about reducing stereotypes with higher compassion and self-compassion? How can compassion be more effective than empathy and where is the border between them? In this paper I will underline some of my recent findings regarding the areas mentioned above, which we have collected using a questionnaire examining the potential relationship between compassion, self-compassion and prejudice, as previous studies had claimed. The main objective of this study was to examine the level of compassion and self-compassion of individuals and their level of prejudice towards stigmatized the LGBT community in Slovakia. Our sample (N = 321) was mostly heterosexual (N = 244) women (N = 244) ranging in age from 18 – 70 (Mean = 25.6) with Slovak nationality (N = 290). Because of what the previous researches and surveys had shown, we expected that there would be evident negative attitudes towards this minority group and an evident relationship to compassion. But our findings were really surprising - our sample was highly compassionate (Mean = 77.42) and accepting towards the LGBT community (Thermometer; Mean = 69.31). The only significant correlations exist only within 2 dimensions of compassion - “tolerating uncomfortable feelings” – in relationship to prejudice against transgender people; and “acting or being motivated to act to alleviate suffering” dimension regarding lesbian, gay and bisexual people. These two dimensions are the main components when we want to slightly distinguish compassion from empathy – the motivation to help to reduce negative feelings. Lower stigmatization and prejudice reduction are both important parts of physical and mental health of minority groups and it positively effects their well-being. Being compassionate and self-compassionate helps to equal measure. Therefore, this research provides an interesting finding about attitudes towards the LGBT community in Slovakia, mostly among young adults.

Grant support: *VEGA 1/075/19 2019-2022*

## **Managing driving safety in the context of dementia: Ideological dilemmas faced by informal caregivers**

Oral presentation

**Lafrance, Michelle; Dreise, Elizabeth**

*St. Thomas University*

Managing fitness to drive among individuals with dementia is a public health concern that has attracted significant research attention, and the literature is replete with competing assessment tools and programs for health professionals and carers. While useful, this body of work ignores the lived realities of those supporting individuals with dementia, and the interpersonal, social, and organizational context in which decisions about fitness to drive are made. In this study, we explore the accounts of 14 informal caregivers of older adults who were aging in place in Atlantic Canada. Using a discourse analytic approach, our analysis unfolds layers of complications, strategies for coping, and subsequent complications that arose in participants' accounts of trying to manage driving safety. Participants' accounts challenge dominant assumptions in the literature that caregivers 'fail' to revoke driver's licences because they are 'unaware' or 'uneducated' about the risks. In contrast, it highlights the challenging work they do to maintain safety within a constraining organizational landscape, where the duty to intervene falls to either the caregiver or the family doctor – often the two most important allies the care recipient has. Appreciating the ideological dilemma faced by participants is discussed as essential to the development of effective policies and practices.

Grant support: *Social Sciences and Humanities Research Council; New Brunswick Health Research Foundation; St Thomas University Major Research Grant*

## **Public policies and private pains: Caregiver stress and organizational context of care**

Oral presentation

**Lafrance, Michelle; Kinney, Moira**

*St. Thomas University*

Informal caregivers of older adults are the family and friends who provide unpaid assistance that enable their loved-one to age in place in the home. While often invisible in the health care system, informal caregivers provide the vast majority of the care work performed and our health system could not operate without them. At the same time, informal caregivers often face tremendous challenges in occupying this important role, including reduced physical and mental health, as well as increased pressures on personal finances. The goal of this research was to better understand the needs and challenges faced by informal caregivers of older adults in Eastern Canada. Twenty-nine participants were interviewed about their lives as caregivers. A central challenge they described revolved around their struggles to navigate the health care system to secure appropriate supports. Drawing on an innovative interdisciplinary methodology (Psycho-Social Ethnography of the Commonplace (P-SEC; Gouliquer & Poulin, 2005), our analysis directly explores the links between policies and practices and people's individual experiences of distress, with a view to informing tangible change.

Grant support: *Social Sciences and Humanities Research Council; St Thomas University Major Research Grant*

## **Flexing methods, uncovering “recovery”: Digital storytelling eating distress and support**

Part of the symposium: Carla Rice - *The work of stories in the world*

**Lamarre, Andrea; Rice, Carla**

*Re•Vision: The Centre for Art and Social Justice, University of Guelph*

There is a richness in collaborating with research participants; in sitting alongside participants as they think, talk, and explore. Richness and connection underlie many arts-based approaches to research, which invite co-creation into research relationships. This richness and connection co-exist, however, with participants’ generosity: offering us their time and their creativity as they contribute to our projects, and with mainstream perspectives about expertise and the researcher/participant divide. In this presentation, we explore how we have “flexed” an arts-based research methodology, digital storytelling, to work toward meeting the needs of participants. We use the example of a study on experiences of working through eating distress as our backdrop, describing how we collaborated with participants to make a time-intensive and emotion-laden approach work for them. Collaboration was particularly important in an exploration of eating disorders, as “patient” voices are often occluded in the treatment of eating distress. We share a story that challenges normative representations of “eating disorder recovery” as an example of an embodied and collaborative approach to research on experiences of eating distress, foregrounding how the story and its creation challenge dominant, top-down approaches to understanding and treating eating distress

Grant support: *MOP-137019; 435-2014-2124; 950-231091; PROJ#35254*

## **Gripping time: Temporality, pain, and embodiment in academia**

Part of the symposium: Kerry Chamberlain - *Snapshots symposium*

**Lamarre, Andrea**

*University of Guelph, Canada*

This short digital film depicts experiences of pain during grad school and early career, through auto-ethnography and theoretical analysis, knitting together created words, still and moving images.

## **Allying as an outsider: Stay-at-home-dads, breadwinning mums and gendered binaries of care**

Part of the symposium: Brett Scholz - *How critical health psychologist might work toward allyship: redressing power imbalances in research, practice, and policy*

**Locke, Abigail**

*Department of Psychology, University of Bradford, UK*

Using a reflective lens, this paper considers the idea of being an ally in the research process to reflect on work conducted by the author on stay-at-home dads (SAHDs) in the UK. In recent years, it has been documented that fathers are playing a more active role in childcare with increasing numbers taking on the primary caregiving role. Despite this increase, clearly delineated gendered discourses around caring practices exist and SAHDs are still the exception, rather than the norm. This presentation focuses on a research project involving twenty open-ended interviews with fathers who had become the primary caregiver for their children, most of who were in heterosexual partnerships where the mothers were working in full time 'paid' employment. The researcher occupied a liminal identity as a research but also a partner to a SAHD. This identity was something that was invoked and reflected on during the interviews when the fathers were describing their everyday experiences, and sometimes, frustrations in their familial relationships. The paper finishes with a consideration of the complexities of identities, power, and allying in research.

## **The performance of shamelessness in postfeminist drinking cultures**

Part of the symposium: Sarah Riley - *Affirmative – Critical research: How the CC-Psy team at Aberystwyth are addressing our mission*

**Mackiewicz, Alison**

*Aberystwyth University*

Since the early 21st century, a pervasive and heightened public sexuality has become evident in the media in many Western societies, giving rise to new sexual subjectivities which were linked to postfeminist sensibility. New sexual subjectivities research identified the ways in which women had to negotiate multiple and contrasting ideas of women's sexuality; for example, women being empowered through their sexuality versus longstanding moralising discourses of a more passive, 'respectable' female sexuality. These contrasting ideas of female sexuality are particularly potent in the UK's drinking culture, where, for example, working-class women have to negotiate a visible hypersexual postfeminist femininity, culturally valued by their peers, with a more subdued working-class 'respectable' sexuality – in other words, these women are expected to look and act as agentically sexy, and to drink and get drunk, but distance themselves from figure of the 'drunken slut'. Through analysis of interviews and focus groups, this paper explores the performance of a kind of shamelessness as one way that young women manage these contradictory demands when participating in postfeminist drinking cultures.

## **Alcohol use during pregnancy: the stories of women and their partners/family members**

Oral presentation

**Macleod, Catriona; Matebese, Sibongile; Tsetse, Nontozamo**

*Rhodes University*

The fact that alcohol use during pregnancy may lead to Foetal Alcohol Spectrum Disorders (FASD) is well-known. Despite this, little research has explored alcohol use during pregnancy from the perspective of the woman or her partner/family member. We collected stories about drinking during pregnancy from 25 people in a low resource area of Buffalo City, South Africa: twelve women; five partners and eight family members. Narrative discursive analysis revealed two dominant discourses that ‘explained’ drinking during pregnancy. The ‘stress and coping’ discourse enabled a narrative of pregnant women being dependent of alcohol to cope with lack of support from their partners, paternity denial, partner infidelity, rape, losing loved ones, family problems, receiving an HIV-diagnosis in pregnancy, intimate partner violence, and poverty. Pregnancy itself was viewed by some of the women as a stressor, resulting in their drinking heavily in an attempt to induce an abortion. A ‘peer pressure’ discourse positioned women as giving in to the social recognition provided by the drinking culture operative in the area, fueled by the high number of illegal taverns. These discourses point to the systemic drivers of alcohol use; interventions based on individual knowledge of FASD or individual behaviour change will be limited.

Grant support: *National Research Foundation*

## **Exploring the lived experience of transgender transition**

Oral presentation

**Marczak, Magda; Brown, Suzanne; Kucharska, Jo**

*Coventry University*

**Aims:** Transgender transition can be a fraught and life changing experience. Currently, there is scarce information on the subjective experience of the journey involved in recognition of oneself as transgender within a UK population. The present study aims to investigate the in-depth lived experience of embarking on transgender transition, and how this experience was hindered or helped through internal and external influences.

**Method:** Six male to female (MTF) self-identified transgender participants were recruited. Semi-structured interviews were analysed using Interpretative Phenomenological Analysis.

**Results:** Four superordinate themes emerged from the analysis: Rudderless: “Journey of discovery a fraught one,” Intersectional systems of oppression, Disempowerment and “Transitions to an authentic sense of self: learning how to live again.”

**Conclusions:** Experiences of MTF transgender transition is considered within the existing socio-political context. Service implications and areas of future research are discussed.

## **Producing community pharmacy: complex performances in a hybrid space**

Pecha Kucha

**McGuigan, Kathryn; Chamberlain, Kerry**

*Massey University*

The community pharmacy is an unique hybrid space where the retail aspects of the pharmacy disrupt the pharmacy as a healthcare space. This research explored the community pharmacy as an inter-relational, contextual, practiced, and produced site where space and place co-exist through non-participant observation. I argue that the community pharmacy is best understood as a complex social production and I borrow Goffman's ideas of dramaturgy to discuss the community pharmacy as a performance (Goffman, 1959; Brown & Bellaby, 2002). This lens allowed me to capture the interactions between space, people and materiality and uncover the everyday practices and routines in the community pharmacy. Community pharmacies resolve many tensions of being a hybrid space through emotional labour, care and creating a sense of community. This presentation will argue that it is important to understand and research healthcare spaces in place and in practice to expose epistemological tensions, the role of commercialism and gender and to understand how staff and customers use healthcare spaces.

## **Living with ARFID**

Part of the symposium: Kerry Chamberlain - *Snapshots symposium*

**McGuigan, Kathryn**

*Massey University, New Zealand*

This photo essay explores my experience supporting my daughter's eating disorder journey. The aim is to increase understanding of this new category of eating disorder. There is a lack of research and knowledge on this condition, how to treat it, and what it means for the families living with this condition and supporting children who struggle to eat.

## **Feeling bodies, feeling traps and the circumstances of hallucinations: Outcomes from a novel empirical study**

Oral presentation

**Melvin, Katie; Cromby, John; Crossley, Jon**

*University of Leicester*

**Background:** There is limited research on how hallucinations feel as lived experiences within bodies, personal histories or complex lived environments. Contemporary research has pointed to the relevance of many under-researched aspects of hallucinations, including their occurrence in multiple modalities, their co-occurring emotions and somatic feelings, and the circumstances and personal histories within which they arise.

**Aim:** To study the feeling and circumstances of hallucinations in any modality and whether feeling traps theory was useful in understanding the data.

**Methods:** 16 Early Intervention in Psychosis service users, experiencing hallucinations daily, shared their experiences using diaries, interviews, life-timelines, art, and mini-body maps.

**Outcomes:** Participants described experiences of unimodal and multi-modal hallucinations with a vast range of co-occurring feelings. Hallucinations were reported to arise within diverse situated circumstances. Feeling traps theory was a useful approach to bring to hallucination research; it's relevance to the data varied between participants.

**Conclusion:** Shifting the lens of research to study hallucinations as bodily, experienced within complex unfolding circumstances and ongoing lived histories, may help in improving our understanding of these phenomena and develop more effective support.

## **Arts-based methods, feelings and distress**

Part of the symposium: Kerry Chamberlain - *Snapshots*

**Melvin, Katie; Cromby, John; Crossley, Jon**

*United Kingdom*

Feelings are by definition ineffable: not reducible to words. The forms of distress that psychiatry calls mental illness are frequently characterised by complex mixtures of feelings, held in place by combinations of adverse influences and circumstances. Since art can frequently represent and communicate feelings more effectively than language can, arts-based methods can further our understanding of feelings on distress: in this presentation we briefly illustrate this.

## **Perinatal care services accessibility: where are the parents with physical disabilities ?**

Oral presentation

**Mercerat, Coralie; Saïas, Thomas**

*Université du Québec à Montréal*

Despite the fact that more people with disabilities are becoming parents and that parenthood is considered a fundamental right by the United Nations, the literature continues to highlight barriers to access to perinatal services for parents with physical disabilities: lack of knowledge about their situation by professionals ; negative attitudes ; lack of physical access.

This presentation aims to describe the results of a study on the accessibility of perinatal services for parents with physical disabilities in Quebec, Canada. The purpose of the study was to explore the adequacy between the needs of these parents and perinatal services. First, the results of a scoping review on the relationship between parents with physical disabilities and perinatal services are presented. Then, the results of the study (13 parents) are depicted. They point out that while some parents are satisfied with services received, others report a lack of consideration for their needs. In this presentation, we focus on the needs expressed by parents for perinatal services and the lack of appropriate assistance they reported, especially in postnatal period.

Using a life narrative method and a participatory approach, this study aims to create dialog between researchers and practitioners in the public healthcare system.

## **Media representation of Alzheimer disease and dementia: Insights form graph theory approach**

Part of the symposium: Jana Plichtová - *Seeing the person behind the diagnosis: Social representations of Alzheimer's disease in Slovakia*

**Michalko, Drahomír; Plichtová, Jana**

*The Institute of Applied Psychology, Faculty of Social and Economic Sciences UK*

Purpose: We sought to identify how strongly are different themes represented in media discourse and in what proportion do they contribute to central terms of Alzheimer and Dementia in media discourse. Secondary goal was to test whether these dominant themes might have tendency to prevail in this discourse. Data: In total 244 documents (TV, radio, print, and web sources – from 2015 to 2018) provided by the Newton media database served as an input for construing undirected & weighted graph. Methods: Statistical approach of graph theory for identifying modular, global and local properties of the lexical network. Results: Amongst identified thematic communities in the network those which points to concepts of Symptomatology, Epidemiology, and Medicine are most prevalent in terms of connectivity, centrality, and representational strength, while themes of Prevention & Lifestyle and Emotional changes & Aging were located on the opposite side of distribution. Furthermore, we concluded that both connectivity and representational strength distributions follow power-laws in their tails. Implications: Current results suggest that media discourse of Alzheimer and Dementia is disproportionately influenced by the concepts of declined cognitive functioning, diagnostics, and prevalence amongst population and that these concepts have strong tendency to retain their influence over the media discourse. Key words: Alzheimer's disease, media representations, network analysis

Grant support: *APVV-17-0536 „Sociálne reprezentácie demencie a ich implikácia pre podporu kognitívneho zdravia na Slovensku“*

## **Corporeal and intersubjective lived experience of diabetic people using a continuous glucose monitoring (CGM) device and their spouse: A qualitative multi-method exploration**

Poster presentation

**Miserez, Sébastien; Santiago-Delefosse, Marie**

*University of Lausanne*

Diabetes is a chronic condition which is currently a major public health issue. Its burden, in terms of human and financial costs, as well as in disrupting people's daily lived experience, is now well established. The recently developed continuous glucose monitoring (CGM) systems are one of the several digital devices that aims to improve patients' lives. These devices raise high expectations among patients. Our literature review showed that, although many quantitative and biomedical studies highlighted the physiological benefits CGM can bring and/or their accuracy in measuring glycemia, only very few focused, within a qualitative framework, on their influence on patients' daily experience. The aim of our study is therefore to explore the corporeal (subjective level) and conjugal (intersubjective level) lived experience of type 1 diabetic adult people using a CGM and their spouse. To that end, we conduct two types of interviews with couples: photo-elicitation semi-structured interviews and micro-phenomenological interviews. In this poster, preliminary results will be discussed, showing the corporeal appropriation of the device among the couple, and the capacity for the CGM-user to rediscover his/her bodily sensations through the device.

## **Coping with T2DM among Bedouin communities in Israel: social justice approach, indigenous groups and health policy**

Oral presentation

**Mizrahi, Reli; Maor, Maya; Mizrahi, Reli; Lavie-Ajayi, Maya**

*Ben-Gurion University of the Negev, Gender Studies Program*

Type 2 Diabetes Mellitus (T2DM) is disproportionately prevalent among indigenous groups, with especially poor treatment outcomes and higher complication rates. This is also the case with the minority Bedouin population of Israel. The research on indigenous communities' coping with T2DM can be defined as following two

two common approaches: The Bio-medical approach and the Minorities in Transition approach. Both essentializing indigenous groups as "other" to Western health-informed subjects.

This paper focus on a new approach, social justice approach, that explores the ways in which the social, cultural and economic conditions of indigenous groups can shape coping with T2DM. Using examples from our analysis of over 45 in-depth interviews, we will explore how social justice approach can offer a deeper understanding of the

the distinct social conditions that complicate Bedouin communities' coping with T2DM.

We identify two forms of restricting conditions: conditions related to access and quality of health services (e.g. lack of routine medical examinations, communication problems) and environmental conditions (i.e. unsuitable living conditions, collective political trauma).

These findings can guide the development of critical health interventions targeting both obstacles specific indigenous, and utilizing indigenous groups-based knowledge (e.g. religion and extended family as resources for coping).

## **Embodiment and health anxiety in the therapeutic relationship: Grappling with the fragility of life, love and death**

Part of the symposium: Wendy Stainton Rogers - *Critical health psychology to take embodiment more seriously*

**Moore, Tria**

*Sheffield Hallam University, UK*

This paper is a reflective personal musing on life, love and death that has occurred as a result of working psychotherapeutically with people suffering from severe anxiety about their health. I will use anonymised examples from my applied practice to present my experience of the evolving nature of the therapeutic relationship and how I have grappled with sharing the embodiment of trauma. I will explore embodiment in the meaning of relationships, and the centrality of positive human connection in meeting our fundamental needs. This paper is an exploration in earnest and in turmoil; of the love and pain felt for another in the context of therapy, and the strangeness, uniqueness and joy in this experience. Ultimately, it is about our shared awareness of our embodied fears, vulnerabilities and strengths, and about hope and the power of healing.

## **When love and hurt collide: Lessons from young people's talk about sexual violence**

Pecha Kucha

**Morison, Tracy**

*Massey University*

Sexual violence in young people's heterosexual relationships remains a global concern that has wide-ranging health and psycho-social consequences. School-based violence prevention programmes often rely on awareness-raising and didactic information transfer, failing to engage youth in ways that are meaningful to them. Addressing this gap, I present findings from an evaluation study of a sexual violence prevention intervention being implemented in South African schools. Based on a discursive analysis focus group discussions conducted with youth aged 10 to 18 years, I show how young people's narratives of love or romance formed an important discursive resource that can be mobilised within the intervention. I illustrate how 'love talk' can both restrict or enable ethical subject positions - i.e. those premised on care for the self, care for the other and mutual negotiation. I argue that these insights can be drawn on in sexual violence prevention programmes, to more closely align with young people's experiences and understandings of romantic relationships and sexual encounters, and ultimately to promote the development of ethical subjectivities predicated on mutual care and respect.

Grant support: *Comic Relief*

## **Labouring for compassion? A narrative analysis of first time mothers who have experienced traumatic births**

Oral presentation

**Murphy, Helen; Strong, Joanna**

Becoming a mother for the first time demands unique physical and psychological resources from women, and in the developed world, the mother-to-be is immersed in a highly medicalized environment surrounded by health care technologies that dominate the clinical management of labour. Indeed, between 20-48% of women have described childbirth as traumatic, and a difficult birth experience can have long lasting psychological effects on both mother and baby. This study details 4 in-depth accounts of first time mothers who described their birth experience as traumatizing. Medical accounts of the birth experience were collected to provide a baseline overview of the pregnancy as well as birth pathways for each woman. Narrative analysis was used to record discrepancies between the ideal and the real, producing narrative accounts that highlighted how these mothers 'felt invisible' in a medical culture of engineering obstetrics. Women participants described feeling dismissed and were told by clinical teams to 'just get on with it'. Participants also clearly communicated how their birth experience could be improved. Critical health perspectives centred on the individualistic and pathologizing nature of birth and trauma are considered and are set against current maternal care practices in a financially strapped UK healthcare system

## **Drinking - A practise of the globalised elite**

Pecha Kucha

**Murdeswar, Sagar; Riley, Sarah; Mackiewicz, Alison**

*Aberystwyth University*

This pecha kucha is developed from ethnographic work which aimed to understand young people's participation in what appears to be a developing micro drinking culture in urban India that is underpinned by international alcohol companies seeking to expand emerging markets. Demographically, India has seen a rapid rise in the young middle class population, a key group given their potential as future consumers. However, within developing drinking cultures calls for new drinkers positions young people in problematic ways. The ethnography aims to provide an insider perspective into how young people make sense of their participation drinking cultures. Analysing the data through a Foucauldian inspired lens the project highlights how urban middle-class Indian drinkers are formed and transformed through the contradictions and complexities of participating in a globalised drinking culture that is articulated through a discourse of freedom. Furthermore, it highlights the importance of the ethnography as a means to conduct rigorous, ethical and culturally nuanced work which has implications for critical qualitative psychology. Finally, the study makes important contributions to literatures around globalising drinking cultures, gendered and classed drinking identities and the role technology plays in mediating these complex processes.

## **Diageo Dreaming: subjectivity and freedom in emerging drinking cultures in Urban India**

Part of the symposium: Sarah Riley - *Affirmative – Critical research: How the CC-Psy team at Aberystwyth are addressing our mission*

**Murdeswar, Sagar**

*Aberystwyth university*

This paper reports on a study seeking to understand young people's participation in what appears to be a developing micro drinking culture in urban India that is underpinned by international alcohol companies like Diageo seeking to expand emerging markets. The project employed ethnography to gain an insider perspective. Five months of ethnographic field work, combined with interviews with a range of participants (both producers and consumers) were analysed with view to understanding drinking pedagogies, drinking cultural norms and their possibilities for shaping subjectivity. Applying a Foucauldian informed analysis on the data this paper explores how young, urban middle-class Indian drinkers are formed and transformed through the contradictions and complexities of participating in a globalised drinking culture that is articulated through a discourse of freedom. The study makes important contributions to literatures around globalising drinking cultures, gendered and classed drinking identities and the role technology plays in mediating these complex processes.

## **‘Shaking off the baby blues’? A narrative analysis of women who experience post-natal depression**

Poster presentation

**Murphy, Helen; Rita, Ana; Dos Santos Rego, Antunes**

*University of East London*

Access to specialist postnatal mental health services remain inconsistent across England with a reported reluctance of women to seeking help voluntarily and reported delays when women do decide to seek help. The research will collect the lived experiences of women who have suffered some form of postnatal distress, defined as persistent low mood, anxiety and/or inability to enjoy previously enjoyable activities. Women’s ability to make sense of their distress and negative affect will be explored as well as collecting attitudes towards help seeking. The purposive sample (target N=6) comprises women who believe they experienced significant distress within 12 months of the birth of their child. The research data is collected in face-to-face semi-structured interviews and will be analysed using narrative analysis. We expect to find some evidence of factors at play that prevent women from realizing the full extent of their distress and/or reasons behind downplaying the seriousness of their symptoms which can impact on their help-seeking responses. Findings from the study will be translated into a set of recommendations to encourage service uptake as well as raising awareness amongst clinical health professionals about psychological barriers that prevent women from seeking the help they deserve.

## **Disrupted versus normal self-classification following kidney transplantation**

Oral presentation

**Navon, Liora; Bloomenthal, Shlomit**

*Achva Academic College and Tel Aviv University, Israel*

Although kidney transfer violates mine/thine, self/other, and life/death distinctions, recipients are reportedly divided between those whose self-perception as hybrids impairs their well-being and those untouched by that difficulty. The study examined the determinants and psychological manifestations of these opposing self-perceptions through interviews with 21 Israeli kidney recipients and the use of constant comparative analysis. The findings indicate that patients' self-perception as hybrids results from the kidney's structuring as usurped or safeguarded donor's property, influenced by strained actual/fantasized relationships with them. Such perception's manifestations include the conceptualization of body and self as being contaminated by donors' undesired traits, the kidney's non-integration into the body image, and its construction by cadaveric organ recipients as life-endangering. Normal self-classification, in contrast, results from the kidney's structuring as property unproblematically shared with donors or as a spare part taken from their dead bodies, yet these constructions are the product of successful coping with a previously experienced sense of hybridity. Contrary to common views, the study shows that the kidney's conceptualization as a gift is not preferable to its perception in technical terms, that hybridity is not experienced only by cadaveric organ recipients, and that kidney transplants' contemporary routinization does not imply their classificatory transgressions' conventionalization.

## **The psychological costs of white lies that cancer patients and their spouses tell each other**

Oral presentation

**Navon, Liora; Kislev, Livia**

*Achva Academic College and Tel Aviv University, Israel*

White lies are often employed in communication between cancer patients and their spouses but little is known about their contents, the motivation underlying them and their psychological effects. The study examined these issues through in-depth interviews with 30 Israeli advanced-stage cancer patients and their partners. The data were analyzed by the constant comparative method. The findings show that the healthy partners used white lies for concealing personal feelings, rather than medical information, and for putting up a show of optimism, which was aimed at mitigating their own rather than the patients' fear of the approaching death. To maintain this show they coerced the patients into employing similar lies about their feelings, despite the latter's preference for open communication. While the healthy spouses constantly found themselves wavering over their white lies' morality and fearing their exposure, the patients' constrained participation in their show led to inability to discuss their difficulties, loneliness, and severe psychological distress. Rather than mirroring good intentions and promising potential to preserve optimism, the white lies used in such circumstances are thus revealed as being detrimental to both spouses and particularly to the patients, who are silenced when a sympathetic ear is what they need the most.

## **Sistering and sexual socialisation: A discursive study of Xhosa women's 'sex and reproduction talk' with their sisters**

Oral presentation

**Ndabula, Yanela; Macleod, Catriona Ida; Saville Young, Lisa**

*Rhodes University*

While considerable research has been devoted to understanding and promoting parent-child sexual socialisation, scarce attention has been paid to the experiences of sisterly sex talk. Drawing on discursive psychology, this study explores how women report talking about sex and reproduction in their sisterly relationships and the subject positions this talk avails and restricts. The Free Association Narrative Interview (FANI) technique was used to elicit the narratives of five isiXhosa speaking, middle-aged and working class women. Findings suggest that the participants construct their sisterly sex talk drawing on two interpretative repertoires: a repertoire of secrecy, and a repertoire of responsabilisation and risk. The secrecy repertoire was employed to construct sex talk between sisters as vague and non-descriptive. Participants also constructed 'insider' status into sexual secrets as a process that is constantly negotiated. The responsabilisation and risk repertoire was used, in contrast, as a method for managing risk to sexual health, placing emphasis on the individual's responsibility to make informed decisions about engaging in sexual intercourse, contraceptive use and reproduction. These contradictory repertoires have differing implications for women's sexual agency, and sexual health interventions targeted at youth.

## **Insight into psychosis - qualitative perspective**

Poster presentation

**Opaliński, Konrad**

*University of Zielona Góra, Poland*

Research question: According to many scientific research papers patients diagnosed with schizophrenia are not aware of their condition, they refuse treatment and they are not able to recognize psychopathological symptoms. They are manifesting “lack of insight” into psychosis. Statistics show that this issue concern about 80% of patients with schizophrenia. Most of the research studies have been conducted according to quantitative methodology and only from the biomedical perspective. Aim of my research, that I would like to present, was to explore this topic from a qualitative perspective by using methods of Critical Discourse Analysis (CDA). Scientific interests concern on question: how patients diagnosed with schizophrenia are describing their illness? Main results: Analysis of qualitative data illustrate that most of the patients diagnosed with schizophrenia are aware of their condition but they do not describe their condition only in terms of psychopathology but also according to their beliefs, individual history and ideas. Implications: Results of research showed two major issues that may be applied in further studies: 1) insight into psychosis should be considered not only in terms of psychopathology, 2) qualitative methods enrich scientific data on, so called, well-known issues.

## **'Boobs are back': How girls' magazines talk about breasts**

Oral presentation

**Owen, Craig; Brown, N., Campbell, C., Omrani, A.**

*St. Mary's University*

Girls' magazines play a role in female adolescents' constructions of femininity during adolescence. Despite breast development being common to all female adolescents and breasts being a key signifier of femininity, the representation of breasts in girls' magazines has not been investigated. Foucauldian discourse analysis was conducted to understand the ways in which two popular girls' magazines (Teen Vogue and Seventeen) discuss and portray breasts. Articles in Seventeen took a contradictory and potentially confusing postfeminist approach, supporting calls for Body Positivity, whilst at the same time framing breasts as problematic, encouraging girls to aspire to an ideal breast, and assuming breasts are inherently sexual and attract unwanted attention. The purchase and wearing of bras was offered as solutions to all of these problems. In contrast, Teen Vogue articles conveyed a feminist informed Body Positive message which encouraged readers to adopt radical, collective, political responses in order to challenge the potentially damaging messages surrounding breast ideals and sexualisation. Consistent messages are needed to support teenage girls in negotiating their bodies and identities. We suggest that Teen Vogue is a good model for other magazines, and supporting young girl's to improve their critical literacy may help to negotiate these media messages.

## **Could medical innovations change the power dynamics in the field of genetic testing for cancer?**

Oral presentation

**Pannard, Myriam; Préau, Marie**

*Social Psychology Research Group (GRePS, Université Lyon 2)*

Innovations developed in the field of genetic testing for cancer raises new ethical and psychosocial issues, such as direct-to-consumer genetic testing. We aimed to explore how lived experience is mobilized in the process of making sense of these innovations. This presentation will focus mainly on the possible impact of medical innovation on power dynamics between various actors of the health system.

Based on the principles of methodological and data triangulation, we conducted two complementary qualitative studies. First, we led 27 semi-structured interviews with genetic counsellors and clinical geneticists. Then, we led ten focus groups, based mostly on the resolution of ethical dilemmas, with 18 women who attended at least one genetic counselling consultation, and 21 women who did not have a similar experience. We used interpretative phenomenological analysis to analyze the data.

We identified five cross-cutting themes: (1) a social definition of genetic testing for cancer, (2) professional hierarchy, (3) patients-professionals relationships, (4) emotional vulnerability, (5) ambivalence towards medical innovations.

Our findings suggest that medical innovations in the field of genetic testing could impact power dynamics at three levels: (1) between patients and professionals, (2) between genetic counsellors and clinical geneticists, (3) and between counselling professionals and other health professionals.

## **Going into battle: The intersectionality of gender and socioeconomic background on career aspirations**

Part of the symposium: Sarah Riley - *Affirmative – Critical research: How the CC-Psy team at Aberystwyth are addressing our mission*

**Passam, Saffron**

*Aberystwyth University*

Little is known about how young women from lower socioeconomic backgrounds make sense of their aspirations for professional careers. This is despite the likelihood that they will face various challenges summed up in metaphors such as ‘glass ceiling,’ ‘glass cliff,’ and ‘leaky pipes’. To examine this issue, this paper reports analysis from a UK government Home Office Gender Equality Network funded project, in which four focus groups were held with 18 self-identified lower socioeconomic background female undergraduate students and four focus groups with twenty-eight Civil Servants. A Foucauldian informed discourse analysis was performed on this talk from women both aspiring to, and already in professional work. Read through the lens of Bourdieu’s understanding of symbolic violence and cultural habitus. The analysis showed that university study and professional work offered new horizons characterized by contradictory hopes and dreams and transitions that oriented to aspirational identities but which retained the echoes of a stigmatised people, those considered left behind. Constructing their position through the metaphor of ‘battle’, the students positioned their gender and class as markers of devalued cultural capital, a devaluation also evidenced in the Civil Servants accounts which exposed systemic barriers to achievement in workplaces operating through middle-class norms. These findings have implications for equal opportunities employers.

## **The pursuit of happiness: Exploring how romantic ideals shape experiences of extra-relational sexual involvement**

Part of the symposium - Octavia Calder-Dawe - *Self-help, health and happiness? Critical psychological perspectives on positivity and happiness imperatives in everyday life*

**Payam, Shanin**

*Technische Universität München, Munich, Germany*

Western ideals of searching for ‘the one’ as a romantic partner to seek individual happiness have become commonplace in society, often seen in media portrayals that idealise the quest for one’s ‘soulmate’. These notions produce mononormativity within heterosexual relationships as ‘essential’ and ‘morally correct’, while simultaneously assigning a purpose to extra-relational sexual involvement (ERSI) as a ‘tool’ to find ‘a special connection’ (the ultimate life goal). This presentation explores such romantic notions and how they shape heterosexual men and women’s experiences of ERSI in New Zealand. More specifically, the current study was located within the critical sexualities and critical social psychology fields. Open-ended questionnaires were administered to heterosexual men (10 respondents) and women (24 respondents), who had taken part in such practices. The data was analysed using a Foucauldian mode of discourse analysis, as outlined by Willig (2013). The analysis illustrated how participants created a hierarchy of acceptability based on the level of intimacy/‘connection’ they had with their ERSI partner, providing them with a motive. More specifically, these accounts often depicted ERSI as a ‘connection’ unlike any other relationship that needed to be pursued to be happy, thus acknowledging ERSI as part of a normal sexuality.

## **Healthy debate? Surveying divergent perspectives on sex/gender and health/wellbeing**

Oral presentation

**Peel, Elizabeth; Newman, Han; Cooper, Davina; Emerton, Robyn; Renz, Flora;  
Grabham, Emily**

*Loughborough University*

Critical health psychology and feminist psychology share common ground. Contemporary understandings of sex/gender are hotly debated, and there is contestation about fundamental concepts (e.g., the salience or otherwise of 'gender'). This paper focuses on the health implications of divergent perspectives about gender as manifest in an online 'Attitudes to Gender' survey (n=3101). Seventy-five per cent of respondents were from England and Wales, most were legally female (73%) - with 15% not identifying with the sex/gender assigned at birth - and 59% identifying as heterosexual or straight. Data were analysed using SPSS and NIVO for coding responses to questions including negative experiences linked to gender. Alongside the quantitative data, the rhetorical construction of differing stances on health and wellbeing arising from 'gender critical' and 'gender inclusive' positions are explored. In conclusion, we consider the challenges and opportunities for emotion work arising from unlikely feminist methodologies (namely online survey methods); and offer suggestions for researchers working beyond the current gender agenda to engender 'healthy' debate.

Grant support: *ESRC*

## **The micropolitics of violence as mediator of psychiatric patients' and nurses' management of the self**

Oral presentation

**Perron, Amelie; Jacob, JD; Beauvais, L.; Corbeil, D.,; Bérubé, D.**

*University of Ottawa, Ottawa, Canada*

In this paper, we report the findings of a qualitative study that explored nurses' and patients' strategies for identifying and managing violence in the psychiatric unit of a Canadian community hospital. Using the works of Robert Castel and Nikolas Rose, we discuss the ways in which the psychiatric ward can be conceptualized as a place of management of the self – the patient's and the nurse's self. Violence is a defining feature of the way this management occurs and these various selves are defined. While violence is often discussed as unfortunate yet expected 'glitches' in the care of certain individuals, participants' accounts suggest that it in fact precedes all nurse-patient and patient-patient interactions and it spells various strategies aimed at preserving the self. Within the confines of the 'therapeutic space' of the psychiatric ward, patients and nurses alike learn to navigate the care / control interface, the intersection between institutional rules and personal agency, as well as the articulation of private experiences and public events that both instigate and result from violence. In the process, participants construct fluid yet paradoxical narratives about their selves, situating violence and modern psychiatry at the centre of these discursive accounts.

## **What can Foucauldian-informed discourse analysis tell us about the ways that men who have sex with men conceptualise risk for sexually transmitted infections?**

Oral presentation

**Pierce, Naomi**

*Birmingham City University*

Risk behaviours for sexually transmitted infections (STIs) in men who have sex with men (MSM) are largely conceptualised using a biomedical framework that focuses on sexual health outcomes such as STI diagnoses as a method of defining sexual practices as ‘safer’ or ‘risky’. Such definitions do not acknowledge the ways in which MSM conceptualise risk for STIs, or how these conceptualisations are informed by wider and localised socio-cultural contexts.

Reflecting on semi-structured interviews with MSM, this paper uses Foucauldian informed discourse analysis to ask how MSM conceptualise risk for STIs, exploring the ways that subjectivity shapes an individual’s sexual practice, e.g. choosing to have sex without a condom. These practices are also considered in relation to dominant discourses of sexual health, in which the binary of ‘safer’ and ‘risky’ behaviours exerts its pathologising abilities.

Four discourses were identified: the natural status of risk; the role of sexuality; risk as ‘unknown’ and responsibility. These discourses provide a respecification of risk for STIs in MSM through interrogation of risk as a socially produced concept, whilst functioning as an alternate way to understand sexual practices and their implications for STIs.

## **Seeing the person behind the diagnosis: Social representations of Alzheimer's disease in Slovakia (SYMPOSIUM)**

**Plichtová, Jana**

*The Institute of Applied Psychology, Faculty of Social and Economic Sciences, Comenius University in Bratislava*

Dementia is linked with many conditions including Alzheimer's disease, as well as vascular dementia, dementia with Lewy bodies, and frontotemporal dementia (WHO & ADI, 2012). The biomedical model of Alzheimer's disease presents dementia as a disease of the brain, as a depletion of neurotransmitters, development of senile plaques and neurofibrillary tangles, resulting in a significant loss of neurons over the course of the disease (Gaines, Whitehouse, 2006). The medications currently available are not effective in terms of interrupting of the underlying progressive neuropathological processes.

Despite the fact that Alzheimer's disease is undeniably an illness with biological correlates, it is not just a medical issue. Psychological, social and cultural aspects are just as important. In 1970s Alzheimer's disease became a powerful label with a variety of cultural meanings (Chaufan et al., 2012). The thesis that cognitive decline is a product of a disease of the brain rather than a set of normal age-related changes became widely accepted. Since then medical and biological research has been preferred and founded at the expense of researching other important issues. Such biomedicine representation has had unintended consequences such as emphasizing the tragic aspects of the disease and stigmatization of its 'victims' (Ballenger, 2006). It is therefore important to explore how dementia, and more specifically Alzheimer's disease, is constructed in the public space and what are the effects of such representations on persons with such diagnosis. It is equally important to reveal social representations shared by physicians, care providing persons, and persons with such diagnosis.

The theory of social representations (TSR) was chosen as the theoretical starting point for the first paper of the symposium as it was considered a solid conceptual basis for empirical research revealing how everyday knowledge ('common sense') is publicly or semipublicly created and shared in a given socio-cultural context (Moscovici, 1984).

The second paper is dealing with the same question, but the analysis of media is made using the statistical approach of the graph theory with the aim to identify modular, global and local properties of the lexical network.

The third paper analyses interviews conducted with dementia patients and their informal caregivers. Preliminary findings prompt us to reconsider the effect of the bio-medical model of dementia on dignity of the diagnosed persons and their impoverished quality of life, independence, restricted autonomy, and agency.

Key words: Alzheimer's disease, media, discourse analysis

Grant support: *APVV-17-0536 „Sociálne reprezentácie demencie a ich implikácia pre podporu kognitívneho zdravia na Slovensku“*

## **The Work of Stories in the World (SYMPOSIUM)**

**Rice, Carla; Friedman, May; Lind, Emma; Fowlie, Hannah; LaMarre, Andrea; Senk, Tanya; Dion, Susan**

*Re•Vision: The Centre for Art and Social Justice, University of Guelph*

In this symposium, we present on four recent arts- and story-based research projects conducted in collaboration with queer, fat, disabled, labeled, Indigenous and settler communities that interrogate the work of stories in the world. Each of these Re•Vision affiliated research projects takes up arts and story-based methodologies in innovative ways, demonstrating how critical methods, like concepts, travel across temporalities and landscapes—uncovering how storywork methodologies can be understood as flexible, processual, and mobile, as both transformed by and transforming of each research project, including of its’ participants and contexts. Our analyses of the projects featured in this panel—ranging from weight stigma in pregnancy care to settler hunger in relations with Indigenous peoples, to Indigenous student wellbeing, to challenging normative representations of “eating disorder recovery”—help to reveal the work of stories in how each intervenes in dominant discourses and offers multiplicitous counter-narratives that hold the potential to impact knowledge, policy, practice, and identity. Storytelling methods flexed in the projects described here offer mutable approaches not only for centring marginalized/misrepresented voices but for scaffolding intersectional and inter-sectorial alliances (across institutions/ communities) and for imagining more just futures.

Grant support: MOP-137019; 435-2014-2124; 950-231091; PROJ#35254

## **A high risk body for whom? On risk, recognition and reclamation in reproductive care**

Part of the symposium: Carla Rice- *The work of stories in the world*

**Rice, Carla; Friedman, May; Lind, Emma**

This presentation seeks to explore issues of weight stigma and fertility, reproduction, pregnancy and parenting. We engage with *Reproducing Stigma*, a Re•Vision-affiliated research project that used interview and video-making methods with women-identified and trans people, as well as interviews with healthcare providers and policymakers. We consider the ways that reproductive risk is typically storied in healthcare and culture, and will screen two micro-documentaries made by project participants which challenge us to story reproductive wellbeing differently. We expose three major themes—on risk, on recognition of weight and other stigma, and on reclamation of bodies—that emerged as critical to these storytellers. We argue that just as clinicians strive to practice evidence-based care we must also put into practice storied care—to believe, respect, and honour people’s stories of their bodies as fundamental to achieving equity in reproductive healthcare.

## **Visualising identity threat and masculinity in men living with M.E./CFS: A photo-phenomenological study**

Oral presentation

**Quincey, Kerry; Wilde, Lucina**

*De Montfort University*

Myalgic Encephalomyelitis (M.E.) or Chronic Fatigue Syndrome (CFS) is a debilitating chronic condition affecting 20+ million people worldwide, yet the illness remains poorly understood; especially from the perspective of affected men. Phenomenological research highlighting men's lived experiences of M.E./CFS is limited; hence, this inquiry asks 'How do men experience and make sense of living with an M.E./CFS diagnosis' and, 'How do men with M.E./CFS visually represent this illness experience?'

Self-authored photographs and interview accounts were gathered from 10 men with M.E./CFS and analysed using Interpretative Phenomenological Analysis. Following exploration of the men's integrated visual-verbal accounts, three themes were identified: 'Loss of Masculine Identity as a Man with M.E./CFS', 'Social and Political Marginalisation Attached to M.E./CFS' and 'Coping with Dual Identity by Adjustments, Assimilation and Acceptance'. The findings illustrate the complexities of living life as a man with M.E./CFS, revealing how these men cope with identity threat across various domains, from personal to social and political contexts, whilst simultaneously making adaptations in how they perceive and perform masculinities.

Participant-authored photography in this context potentially has several benefits, including; facilitating increased understanding of the illness experience by men affected by M.E./CFS, researchers and practitioners, and improving care and support provisions for men.

## **Revisiting my work addiction research through the standardized health critique**

5 Minute Challenge

**Quiñones, Cristina**

*Open University*

Substance and behavioural addictions are often perceived as self-gratifying, or as signs of weakness. Workaholism, however, has a very different status. Thus, working extremely hard and long hours is somehow consistent with cultural expectations of adulthood. Further, Hollywood makes workaholism ‘sexy’ by featuring young and good-looking actors as successful and ambitious workaholics. Notwithstanding, drawing on the standardized health critique (Kugelman, 2003), I argue that the ‘addiction’ label reminds workaholics to continue self-monitoring their behaviour, and adjust it accordingly, so it remains within the socially acceptable levels of health deviance. Also, reflecting upon my own work addiction research, I argue that though well-intended, the rigorous adherence to the toolboxes mainstream psychologist use (e.g., vulnerability-stressor models, measurement instruments, sophisticated statistics), may unwantedly sabotage our mission to help people cope more adaptively. Whilst doing this, mainstream psychologists are not actively challenging the conflicting messages that fuel these addictions, such as encouraging and penalising unrestrained consumption, or in this case, shaming and admiring excessive work. Instead, the evidence that emerges from these studies, validates the standardized health discourse, removing individuals’ agency to define their own healthiness and in turn, becoming more dependent of the standardized health powers.

**“Ribs, puppy fat and sticking your head in the sand”. Discursive resistance and counter-backlash to the UK National Child Measurement Programme in mothers’ online talk**

Oral presentation

**Rickett, Bridgette**

*Leeds Beckett University*

The National Child Measurement Programme (NCMP) monitors the BMI of children in the UK at 4-5 years and 10-11 years. By employing discourse analysis on 2340 units (posts) of data from Mothers talk about the NCMP on online parenting forums (between 2006 – 2016) we unearthed two contrasting discourses; “Just chuck it in the bin” and “Parents are just sticking their heads in the sand”. These discourses draw the ‘good’ child’s body using contemporary westernized, classed, and raced idealisations of the visibly fat-free body where the good parent is one which adheres to this ideal through participation in the NCMP.

**Affirmative - Critical research: How the CC-Psy team at Aberystwyth are addressing our mission (SYMPOSIUM)**

**Riley, Sarah; Passam, Saffron; Jacques, Emil; Mackiewicz, Alison; Murdeshwar, Sagar; Robson, Martine**

*Aberystwyth University*

In this symposium we showcase the work of the Centre for Critical Psychology (CC-Psy) at Aberystwyth, whose mission is to do critical and affirmative research using analytical tools from critical psychology. Researchers at CC-Psy ask: How do people make sense of themselves? What can people say, think or do when they understand themselves this way? And what social, political, economic or material conditions enable such understandings? These questions allow us to understand the person in context, value their sense making, and explore capacities for action with view to identifying more affirmative directions when needed. The first paper describes the theoretical toolbox we draw on. These analytics include Foucauldian ideas of genealogy, power, norms, confession and technologies of self; Deleuzian thinking on desire and flow; and when called for, psychoanalytic or sociological concepts such as melancholia, recognition, symbolic violence and cultural habitus and capital. The first paper (Riley) is then followed by papers offering examples of our practice from five discrete projects; on working class women's experiences of university (Passam), masculinities practiced in British lad cultures (Jacques); the performance of shamelessness in postfeminist drinking cultures (Mackiewicz), negotiating globalised subjectivities in Mumbai (Murdeshwar), and a new theoretical framework for developing lifestyle advice (Robson). These projects intersect around a contemporary preoccupation of transforming the self, itself located within wider assemblages related to neoliberalism, postfeminism, consumerism, gender, subjectivity, citizenship and health.

## **A Deleuzian rethinking of time in health promotion**

Part of the symposium: Sarah Riley - *Affirmative – Critical research: How the CC-Psy team at Aberystwyth are addressing our mission*

**Robson, Martine**

*Aberystwyth University*

Time is a powerful but under-examined element in healthy lifestyle advice, which is often premised on the promise of stable states of future health achievable through that take up of sustained lifestyle change. But such linear, sequential time frames of health sit against common experiences of diet and exercise regimes as non-linear, effortful, and difficult to maintain. An oversimplification of time thus contributes to the logic of blame when people fail to achieve healthy lifestyle goals, producing spoiled health identities and abject bodies as people struggle to sustain the unsustainable. Responding to this problem, the presents an argument for a new form of health promotion based on Deleuze's philosophy of time as multidimensional, embodied and affective. Deleuze's critical theory of time disrupts unitary, linear models of time and enables a mapping of the ways that people embody multiplicity, non-linearity, and fluidity as they negotiate healthy lifestyle advice. As such, his concepts afford a recognition of multiple timeframes, such as histories and imagined futures, which shape lifestyle behaviours and identities. Using these concepts, the paper illuminate ways in which people can be oppressed and limited by discourses of healthy living, but also points to new, more affirmative directions for health promotion and healthy lifestyle advice.

## **Indigenous students telling stories, theorizing and being well**

Part of the symposium: Carla Rice - *The work of stories in the world*

**Senk, Tanya; Dion, Susan; Rice, Carla**

*Re•Vision: The Centre for Art and Social Justice, University of Guelph*

While the alienation and marginalization of Indigenous students from institutions of formal schooling in settler colonial nations such as Canada is well documented (Battiste, 1998; Deyhle, 1998; Leroy, 2001; Schissel & Wotherspoon, 2003) there is a growing body of literature that describes how alternative programs designed specifically for Indigenous youth are achieving success. In this paper, we focus on learning from the voices of Indigenous youth who attend publicly funded schools and who participated in the nInshnabek de'bwe wIn//telling our truths research project. nInshnabek de'bwe wIn' brought together Indigenous and non-Indigenous researchers, teachers and students to create and share digital/multimedia stories (short videos) about Indigenous people's experiences of schooling that could inform settler-educator learning and offer critical insight into what is required to decolonize and indigenize urban schools in Ontario. These youth eloquently articulate their understanding of what they need and want from teachers and school systems. We argue that those of us interested in decolonizing and Indigenizing systems of education ought to be paying much closer attention to students who are not only surviving secondary school but also working from the inside to create change.

Grant support: *MOP-137019; 435-2014-2124; 950-231091; PROJ#35254*

## **Post-qualitative methodologies? Doing theory in research practice**

Oral presentation

**Setchell, Jenny**

*The University of Queensland*

In this presentation I discuss post-qualitative research approaches, which eschew usual qualitative methodological practices to apply theory directly to ‘data’ (broadly conceptualised). As an example, I highlight how I have drawn from Annemarie Mol’s (2003) development of the concept of multiplicity how the doings of healthcare professionals enact patients’ bodies, illnesses, impairments and subjectivities in particular ways. My concern with using this approach was to mobilise ways of doing healthcare that are largely unexamined, marginalised or silenced. Using multiplicity as a theoretical and methodological driver, I argue that healthcare professional’s practices often subvert reductive narrative of biomedicine, creating a plurality of objects that they then work to suppress. Contrary to this discourse, I argue that an examination of practices using Mol’s multiplicity highlights healthcare as a space that can broaden the objects of practice and resist the kinds of closure that have become emblematic of contemporary clinical practice (and perhaps qualitative research). Drawing from a clinical and empirical case studies, I consider how healthcare practices might be different if an approach orientated towards multiplicity were applied instead. Using this example, I highlight some of the contemporary discussions around post-qualitative methodologies and the use of theory in empirical work.

Grant support: *NHMRC ECF (#1157199), UQ ECR Grant*

## **To cheer\* or not to cheer\*: that is not the question!**

Part of the symposium: Octavia Calder-Dawe - *Self-help, health and happiness? Critical psychological perspectives on positivity and happiness imperatives in everyday life*

**Setchell, Jenny; Abrams, Thomas; McAdam, Laura C.; Gibson, Barbara E.**

*Bloorview Research Institute, Toronto, Ontario, Canada; School of Health and Rehabilitation Sciences, University of Queensland, Brisbane, Australia*

Clinicians are taught to be positive and ‘strength-based’. This positivity can include working to create a cheerful atmosphere in healthcare environments, cheering for improvements in assessment outcomes, and cheering up clients in situations of decline. However, there may be pitfalls of such ‘positivity’. Drawing from Barad’s theories of inclusions and exclusions, we investigated what comes to matter, and what is excluded from mattering, when there is cheerfulness, cheering etc (cheer\*) in the day-to-day practices of an outpatient neuromuscular clinic. We worked collaboratively with clinicians, young people with muscular dystrophy and their families to co-examine the clinic processes we noted in ethnographic observations in three iterative exploratory spaces: 1) group ‘dialogues’ with clinicians; 2) consultative interviews with young people, families and clinicians; and 3) transdisciplinary research team analyses. In this presentation, we introduce one example of cheer\* focussing on what is constituted through entanglements of human and non-human bodies, affects, and practices during respiratory testing. Cheer\* made some things matter (‘normal’ physical function, ‘positive’ emotions, test scores, compliance); and excluded others (grief/loss, ‘non-normative’ bodies and lives, alternative practices, embodied knowledge). We discuss important implications of these findings for young people with muscular dystrophy and across healthcare settings.

## **Waiora through waka ama: An exemplar of indigenous health promotion**

Poster presentation

**Severinsen, Christina; Reweti, Angelique**

*Massey University, NZ*

Indigenous health promotion focuses on indigenous worldviews and especially the close relationship that people have with the environment, with culture and tradition (Durie, 2001). These values are inherent in the practice of waka ama, which, as one of the fastest growing sports in Aotearoa New Zealand, is increasingly used as a vehicle for health promotion. This research explores the social, cultural, and health benefits of being involved in waka ama and how it aligns with values inherent to indigenous health promotion. Using a kaupapa Māori framework, face to face interviews with paddlers and video footage provided the data for this research. Results highlighted that as well as the physical benefits for paddlers, waka ama also has a strong tikanga which encourages language revitalisation with the use of te reo Māori through karakia and waiata. An awakening of understanding around te ao Māori had also sparked the desire for participants to extend their knowledge by engaging in te reo Māori courses and learning about kaitiakitanga and traditional navigation techniques centred on the stars and landscape. The knowledge gained from participants provides evidence of effective ways to improve health and wellbeing within communities with a particular focus on waiora, the spiritual connection between hauora and the environment.

## **Breastfeeding journeys: Young mothers' stories of success**

Oral presentation

**Severinsen, Christina; Neely, Eva**

*Massey University*

Exclusive breastfeeding for the first six months of an infant's life is a universally acknowledged public health goal (WHO, 2016). Despite this, New Zealand's breastfeeding rates drop steeply to around 25% at six months (MoH, 2015). Young mothers are often represented in a negative light in terms of their mothering capabilities (Breheny & Stephens, 2008). Likewise for breastfeeding, young mothers are seen to be 'at risk' and unsuccessful. We were interested in the continuation of breastfeeding against normative trends. We adopted a strength-based approach to explore the experiences and resilience of young mothers that have breastfed exclusively to six months and beyond. In-depth interviews were carried out with 44 young mothers who had breastfed their babies for more than six months. Through narrative analysis, the stories of participants are used to explore determinants of successful breastfeeding. Participants reflected on their breastfeeding intentions, initiation and support of breastfeeding, social and environmental influences, overcoming challenges and changes over time. Mothers identified their key reasons for success and offered suggestions for supporting young mothers in their breastfeeding journeys. The research will identify the services, strategies and support systems across multiple levels that act as enablers of breastfeeding survival in young mothers. This information is critical for informing the development of breastfeeding promotion strategies.

## **Food assessment: A discursive analysis of diet talk in interviews with older men who are obese**

Oral presentation

**Seymour-Smith, Sarah; Gough, Brendan; Matthews, Christopher**

*Nottingham Trent University*

Rationale: Obesity rates are increasing faster in men than in women, with particular concerns raised regarding older men. Researchers have typically linked men's reluctance to engage in weight-loss activities such as dieting through the lens of male conformity to hegemonic masculinity. For example, it has been argued that men's food consumption is notably different and unhealthier than women's as a consequence of issues related to masculine identity.

Research question: How do older men (mostly) undergoing weight management programmes account for and construct changes in their nutritional intake?

Design: Semi-structured interviews were conducted with 30 men who were obese, 27 of whom were engaged in weight loss programmes. Discursive psychology was employed to analyse the data.

Results: In contrast to other research, participants constructed nutritional advice as enlightening. Participants worked up 'ownership' and pleasure assessments to unhealthy food choices which they contrasted with new, healthier, eating practices. Moreover, healthy food was constructed as acceptable.

Implications: Men's eating practices are routinely problematised and linked to men's adherence to hegemonic masculinity. Our study presents a critique of this dominant framing of men based on in-depth discussions with men about nutritional changes. Indeed, during the interviews, men positioned themselves as educators. Health promoters might usefully develop nutritional advice in collaboration with men who have successfully changed their diets for optimum effect.

**How critical health psychologists might work towards allyship: Redressing power imbalances in research, practice, and policy (SYMPOSIUM)**

**Scholz, Brett; Locke, Abigail; Treharne, Gareth; Bourne, Adam; Stewart, Stephanie**

*ANU Medical School, The Australian National University, Australia*

The aim of this symposium is to explore the role of critical health psychology in providing space for allyship between researchers and those who have traditionally been the subject of research. To meet this aim, the specific objectives are to present a model of allyship, to explore allyship in a range of contexts, and finally to critique the concept of allyship.

Psychology broadly continues to position lived experience of marginalised identities as less important than ‘objective’ scientific knowledge. Research about the involvement of members of such groups (herein referred to as ‘users’) has shown that such engagement improves the relevance, reputation, and quality of research outcomes. Indeed, in health service settings, user involvement is required by policy. When done to redress power imbalances, partnerships between researchers and marginalised group members might be considered a form of allyship.

Critical health psychologists are uniquely positioned to engage in allyship with marginalised communities and individuals. Meaningful (and not tokenistic) co-production of research with users is one way to redress power imbalances that have long been reproduced by traditional psychology research. Engaging with users and being driven by their agendas will allow research to be meaningfully consumer produced.

## **What is the psychosexual experience of patients diagnosed with HPV related lesions?**

Oral presentation

**Schweizer, Angélick; Fornage, Sandra; Jacot-Guillarmod, Martine**

*University of Lausanne*

Human Papillomavirus (HPV) is the most frequent sexually transmitted infection with 80% of adults infected once in their life. However, little research has focused on the psychosexual experience of such a diagnosis in women.

The aim of our study is to examine the psychosexual experience of patients who have been recently diagnosed with HPV related lesions. Two focus groups (N=10) and four semi-structured interviews with patients were conducted. A content analysis highlighted many impacts on women's psychosexual experiences, depending on their relationship status. Lack of knowledge about HPV and fear of cancer were common after being diagnosed with HPV. Moreover, sense of shame and guilt leading single women to social isolation were identified. Finally, the avoidance of certain sexual practices and difficulties to disclose their diagnosis to a new partner were reported.

Unanswered questions and confusion about HPV and its impacts on sexuality were still salient in patient's narratives, even years after their diagnosis. Our study reveals not only the need to inform and reassure patients and their partner about potential impacts on sexuality, but also the urge for health professionals to consistently address these issues within consultation.

## **Critical Health Psychology needs to take embodiment more seriously (SYMPOSIUM)**

**Stainton Rogers, Wendy**

*Professor Emerita, The Open University, UK*

Critical Health Psychology has become very adventurous in its explorations of the discursive aspects of health, illness and recovery, but has made less progress in its engagement with the lived experience of human embodiment. In this seminar we will make a case for undertaking critical work on the ways in which illness, health, recovery, treatment and so on are embodied, and for finding new ways to theorise about the implications of this.

## **Alternative approaches to human embodiment**

Part of the symposium: Wendy Stainton Rogers - *Critical Health Psychology needs to take embodiment more seriously*

### **Stainton Rogers, Wendy**

*Professor Emerita, The Open University, UK*

This initial paper will set out four main approaches to the study of human embodiment:

- embodiment as lived experience, pre-verbal and fundamental
- embodied meaning-making, which examines the discursive construction of lived experience
- psychosocial analyses, where feelings, for example, are constituted psychically
- socio-political analyses, examining how power can be exercised in an embodied manner

Brief examples of each will be given, and reviewed in relation to Foucault's concept of the 'docile body' and its role in governmentality.

## **Poem for the NHS**

Part of the symposium: Kerry Chamberlain - *Snapshots*

**Stainton Rogers, Wendy**

*Professor Emerita, The Open University, UK*

This poetic presentation comments on the state of play of the National Health Service in the United Kingdom today.

## **Exaggerating but not faking: What does authentic sexual pleasure ‘really’ mean?**

Oral presentation

**Stelzl, Monika; Lafrance, Michelle**

*St. Thomas University*

The faking of orgasm has been identified as a practice both common and fraught with meanings. In our research, we continue to expand on the existing scholarship in this area of female sexuality. We interviewed 15 women to explore accounts of navigating, negotiating, and resisting the practice of faking. In this presentation, we attend to the dilemma of faking as deceptive yet necessary to protect partner’s ego and feelings. In particular, we focus on the distinction participants made between exaggerating sexual pleasure and faking orgasm. In some instances, exaggeration was positioned as less of a lie whereas in other instances it was accounted for as a form of agency. Drawing on Jagose’s (2010) and Frith’s (2015) probes of the prevailing tendency to contrast fake orgasm to authentic orgasm, we consider women’s navigation of the intersecting as well as contradicting understandings of authentic-fake-exaggerated pleasure. We discuss the implications of our findings in relation to current dominant constructions of the orgasmic imperative and healthy female sexuality.

Grant support: *St. Thomas University General Research Grant*

## **Authority, Power, Influence and Leadership: A Qualitative Exploration of Mental Health Consumer Perspectives**

Oral presentation

**Stewart, Stephanie; Warner, Terri; Kennedy, Hamilton; Makuvachuma, Dominic; Edan, Vrinda**

*University of Melbourne*

Engagement by mental health consumers in leadership throughout the mental health system has been championed as a means to overcome barriers to consumer involvement more generally, shift the sector onto recovery, and improve consumers' status within society. However, little is known about how consumers conceptualize leadership; consumers have argued that their approach to leadership is dissimilar to traditional approaches due in part to the experiences many consumers have had as the subjects of leadership, control and exclusion. This research explored how consumer leaders conceptualised leadership and related concepts such as authority, power and influence. Qualitative interviews were conducted with 27 consumers identified as leaders by others in their network. Interviewees identified many ideals previously associated with consumer leadership, including collaborative approaches, principles-driven leadership, and radical transparency and accountability. However, interviewees were almost unanimously uncomfortable with self-identifying as consumer leaders, which begs the question: if consumer leadership is the embodiment of such ideals, why would one seek not to identify as a consumer leader? This question will be considered in the light of findings derived from a critical discourse analysis of the this study's interview data and in the context of existing theoretical perspectives on leadership within social justice movements.

## **Beyond the black and white: Allyship, action research and intersecting identities**

Part of the symposium: Brett Scholz - *How critical health psychologist might work toward allyship: redressing power imbalances in research, practice, and policy*

**Stewart, Stephanie; Edan, Vrinda; Makuvachuma, Dominc; Kennedy, Hamilton; Warner, Terri**

*Melbourne School of Psychological Sciences, University of Melbourne, Australia*

This final presentation in the symposium will present a critique of the concept of allyship, and will challenge critical health psychologists to consider how to improve upon their allyship and indeed whether allyship is appropriate at all. The critique will draw on the experience of conducting research on mental health consumer leadership as a team comprised of consumer leaders and a PhD candidate with lived experience of mental distress, which has necessitated ongoing critical reflection on the concept of allyship. This presentation will explore key learnings and critiques of allyship in relation to identity and practice developed by the team throughout their experiences of collaboration with one another in the context of conducting action research on consumer leadership.

## **LGBTQ and antipsychiatry movements. Relationship status: it's complicated**

5 Minute Challenge

**Stupak, Radosław; Mijas, Magdalena**

*Jagiellonian University, Cracow, Poland; Jagiellonian University Medical College*

From the very beginnings of modern LGBTQ movements much of the public and scientific discourse surrounding minority genders and sexualities has been shaped by the dominating medicalized model of homosexuality and the attempts to challenge it. It could be argued that even though LGTBQ movement and antipsychiatry shared much of their philosophical inspirations and even empirical background, the process of depathologization of homosexuality relied on stressing the differences between homosexuality and other psychiatric disorders/diagnoses. In our opinion, this led to the strengthening of the medical discourse and a gradual shift of LGBTQ movement away from antipsychiatry or even active efforts to distance itself from it. In a way, the medical discourse was also invoked (or recaptured) to fight opponents of the LGBTQ movement, as "homophobia" ("biphobia" or "transphobia") were constructed in a way similar to psychiatric diagnostic labels implicating that these are the actual disorders that should be treated. We would like to discuss and analyze from a historical perspective the factors that led to these developments, and ask if it was possible for the antipsychiatry and LGBTQ movement to "join forces" in deconstructing the category of "mental illness" instead of merely proving that homosexuality does not fit the definition. Could the LGBTQ movement benefit from such a shift in perspective, what could critical psychiatry learn from LGBTQ experiences, and is the alliance between LGBTQ and antipsychiatry movements still possible today?

## **Seeing the person behind the diagnosis: Social representations of Alzheimer's disease and their implications in Slovakia**

Part of the symposium: Jana Plichtová - *Seeing the person behind the diagnosis: Social representations of Alzheimer's disease in Slovakia*

**Šestáková, Anna; Plichtová, Jana**

*The Institute of Applied Psychology, Faculty of Social and Economic Sciences UK*

**Purpose:** The aim of our research is to explore how Alzheimer's disease and dementia are represented in the Slovak media and identify such representations which contribute to stigmatization and dehumanization of people with Alzheimer's disease. **Data:** Data consisted of text documents provided by the Newton media database. Search criteria included TV, radio, print and web sources which mentioned the words "Alzheimer" and "dementia" in the time frame between 2015 and 2018. **Methods:** A Critical Discourse Analysis' framework was applied to uncover latent meanings in the text. The analysis was focused primarily on the headlines (n = 285). **Results:** People with Alzheimer's disease are represented in terms of dementia, loss of self or as victims whose identities were stolen by a cruel illness. Unintended effects of these representations might include dehumanization, stigmatization, loss of agency and disempowerment of those affected. The biomedical perspective currently dominates at the expense of a socio-psychological one. **Implications:** Our findings suggest that a new perspective is needed. Such approach should promote relational aspects of one's identity, recognize the dignity and humanity of the people with Alzheimer's disease despite their cognitive deficits and respect their preferences and socio-psychological needs. **Key words:** Alzheimer's disease, media, discourse analysis

Grant support: *APVV-17-0536 „Sociálne reprezentácie demencie a ich implikácia pre podporu kognitívneho zdravia na Slovensku“*

## **How psychologists work in remote island areas**

Poster presentation

**Takahashi, Kayo; Imamura, Chikako; Ozawa, Eiji**

*Kagoshima University*

Psycho-clinicians are shifting from the traditional interview style at counseling institutions to the clinical activities of reaching out to where the target people live. In addition, in remote islands and remote areas, there are many cases in which there is no specialized counseling agency, and in many cases the consultation-type psychoclinical style cannot be adapted. Therefore, it is necessary to provide support in the form of professionals going to the area where the target lives, and for this purpose it is also necessary to consider a more sophisticated delivery-type psycho-clinical style. There are many remote islands in the area where the authors live. Therefore, a delivery type development support pilot project was developed in this area. An interview survey asking the benefits and difficulties in delivery-type support was conducted with 6 psychotherapists engaged in it. The data was analyzed using text mining technique. As a result, as an advantage the delivery-type support, it was found that it is possible to observe the environment where the problem actually occurs and to easily understand the difficulty of the client. Furthermore, it was shown that it is important to match the difficulty of the target person and the expertise of the support person.

## **Men, health, masculinity – and pelvic floor exercises**

Oral presentation

**Tischner, Irmgard; Ritthaler, Monika**

*TH Deggendorf, Germany*

The pelvic floor is the compound structure which closes the pelvic outlet. The consequences of a weakness in the pelvic floor muscles (PFM), or pelvic floor dysfunction, can be very distressing, for men and women; however, there is a dearth of psychological and sociological research in the area. Pelvic floor exercise classes for women are readily available, while they rarely exist for men, despite the known benefits of exercising the PFMs for both sexes. Given the general association of the pelvic floor with women, the question arises how aware and knowledgeable men are of their pelvic floor, and said benefits of PF exercises. Thus, this study set out to explore men's knowledge, experience of and attitude towards exercising their pelvic floor for health reasons. Nine men, aged 28 – 42, took part in semi-structured interviews, including questions about their (physical) care for themselves and questions around the pelvic floor and pelvic floor exercises. The data was analysed using social constructionist thematic analysis (Braun & Clarke, 2006). We will discuss the results of this analysis, which include themes around the issues of normative masculinity, the significance of sexuality, as well as the perceived need for men to develop their body awareness.

## **“My little popsicles”: Metaphors of assisted reproduction in women’s narratives**

Part of the symposium: Kerry Chamberlain - *Snapshots symposium*

**Todorova, Irina**

*Sofia University, Bulgaria & Northeastern University, USA*

Infertility clinics are sites where would-be mothers negotiate their selfhood, embodied experiences and relations to others. Assisted Reproductive Technologies have been seen as empowering of women’s rights, and on the other hand as strengthening conventional gender roles in society. This presentation is a poetic and visual arts presentation inspired by the metaphoric language and the images it evokes, of women sharing stories on-line discussion forms related to infertility treatments with ARTs.

## **Maternal-infant mental health: Challenging a disconnected approach in healthcare**

Oral presentation

**Traverso-Yepe, Martha; Porr, Caroline; Stevens, Anna**

*Memorial University of Newfoundland*

Maternal-infant mental health may be the most significant determinant of health and well-being. The interconnected nature of maternal and infant mental health is well documented through the literature, as attachment with one's primary caregiver establishes the foundation and trajectory for healthy development. Unfortunately, this mother-infant relationship may be jeopardized by maternal depression and other mental health issues. Despite this, programs continue to adopt a fragmented approach to tackling maternal or infant health issues, as opposed to a multi-layered system approach reflective of ecological models that recognize complex influences and circumstances. In this presentation, we argue for this broader approach as we share findings from our study examining ways to enhance supports and services in Newfoundland and Labrador (Canada) for mothers suffering mental distress during the perinatal period – from pregnancy through the child's first birthday. In particular, we discuss troubling trends in perinatal care including 1) the exclusive focus on the physical health of mother or infant, and 2) the lack of assessment of life circumstances, including social, economic and cultural factors. We also put forward best practice recommendations including an eco-bio-developmental care model that accommodates both the interconnectedness of mother and infant health and the complexity of human development.

## **A focus group study of patient perspectives on tapering biologic therapy for rheumatoid arthritis**

Poster presentation

**Treharne, Gareth; Chan, Jack; Stamp, Lisa; Liebergreen, Nicola; Ndukwe, Henry; Marra, Carlo**

*Department of Psychology, University of Otago*

Rheumatoid arthritis (RA) is a common autoimmune condition that can lead to joint erosions and considerable disability. A range of biological therapies have been approved that are effective but costly and have potential adverse effects. Medical trials have recently demonstrated that it is feasible to ‘taper’ the dose of biologic therapy for people with RA who achieve remission, but little is known about patient perspectives on potential benefits and risks of tapering their biologic. People with RA who currently or recently receiving biologics participated in one of six focus groups (n=43) or an individual interview (n=2). Transcripts were analysed using inductive thematic analysis, which resulted in five themes. Firstly, participants prioritised quality of life provided by biologics over risk of adverse effects. Secondly, tapering biologics was seen as relief from the inconvenience of taking biologics regularly. Thirdly, participants had differing preferences for involvement in decision-making about tapering. Fourthly, fear of the uncertainty of tapering and disease flare was common. Fifthly, participants wanted prompt access to healthcare if their disease were to flare when tapering. This study provides novel insight into patient perspectives about tapering biologics. Further research is required to ensure tapering protocols consider the patient perspective.

Grant support: *This research was funded by the Health Research Council of New Zealand (18/776).*

## **Allyship in teaching about healthcare for transgender people**

Part of the symposium: Brett Scholz - *How critical health psychologist might work toward allyship: redressing power imbalances in research, practice, and policy*

**Treharne, Gareth**

*Department of Psychology, University of Otago, Aotearoa/New Zealand*

The provision of healthcare for transgender people has become an increasingly pressing but divisive issue. There is no debate that transgender people exist and experience considerable health inequities, but little is known about how cisgender people understand their role in overcoming these inequities. The notion of transgender allyship is particularly pertinent among cisgender teaching staff who train health professionals. To explore these issues I conducted a focus group study with cisgender teaching staff from health professional programmes at one university in Aotearoa/New Zealand with input from the local transgender community. Two themes captured reasons for the apparent lack of transgender allyship and a keenness to apply teaching skills to develop allyship. The teaching staff drew on a dominant discourse that local teaching staff lack the expertise and confidence to teach about transgender healthcare and they described feeling like novices when attempting to teach on this issue. At the same time, teaching staff felt they could apply their expertise on teaching about values and reflection, and drew on parallels with teaching about other health inequities. Addressing these discourses will be important to enhance transgender allyship among teaching staff and future health professionals.

## **Why don't we teach about transgender healthcare?**

Part of the symposium: Kerry Chamberlain - *Snapshots symposium*

**Treharne, Gareth**

*University of Otago, New Zealand*

Transgender people experience vast health inequities. Health professional training commonly overlooks transgender identities and transgender healthcare, but little is known about how this gap in teaching is sustained and how it can be challenged. In this poetic abstraction I draw directly on perspectives shared in five focus groups with 19 university staff who teach trainee doctors, clinical psychologists, pharmacists, dentists and oral health therapists in Aotearoa/New Zealand. Two or three transgender people from the community were also present in each focus group to provide a reality check and share relevant aspects of their personal stories. "I don't feel educated enough," argued the teaching staff, "and what are we doing as health professionals to support those people in accessing healthcare?" they asked rhetorically. "Quite often the trans person has read far more than the medical professional," the transgender community members asserted; "I think you need to ask as many different trans people as possible to tell their stories." But how to tell those stories in a way that transforms education and transforms healthcare?

## **Veterans share their coping stories through film**

Part of the symposium: Kerry Chamberlain - *Snapshots symposium*

**Tuval-Mashiach, Rivka**

*Bar-Ilan University, Israel*

This film is one of 200 short films created collaboratively by US veterans coping with traumatic experiences and reintegration issues. The films are created during a for day joint program, the "I was there" workshop, where veterans are given the tools from professional filmmakers, to express themselves artistically, and share a piece of their military related experiences. In the US, more than 50% of veterans refrain from seeking care, and for many it is the first time they choose to open up and share their story. The films deal with their fears, loneliness and recovery, and serve as creative and engaging testimonies which enable connecting to their families and to society.

## **The experience of pregnancy, childbirth and early motherhood in mothers with a history of home birth: A narrative-phenomenological study**

Poster presentation

**Uhrecký, Branislav; Rajnohová, Radomíra**

*Institute of Experimental Psychology, Centre of Social and Psychological Sciences SAS*

Home births are a marginal topic in Slovak public discourse, though they've been a matter of controversy in Czech Republic in recent years. Legislation in both countries is not quite clear on their legitimacy. Therefore, home births are not strictly forbidden, but they are often met with a disapproval from medical community. In this study, we've aimed to shed some light on the subjective experiences of Slovak mothers who'd decided to deliver their child outside the hospital environment. Data collection and analysis is currently in the process and will be finished in following weeks or months. Four to six in-depth interviews will be realized and analyzed once the study is complete. Up to now, women have spoken about the act of home birth in terms of naturalism and spontaneity as the more intimate environment allows them to loosen up and be unconstrained in expressing themselves, even comparing this experience to orgasm. They highlight the same qualities - spontaneity and intimacy - when talking about the early bond with their offspring and describe their transition to motherhood as more fluid rather than abrupt.

## **“It’s one of those societal taboo type things”: A qualitative analysis of Australian mental health clinicians’ accounts of (not) addressing sexuality in their work**

Oral presentation

**Urry, Kristi; Chur-Hansen, A., Khaw, C.**

*The University of Adelaide*

There is a well-established and ongoing need to improve the way that sexuality is addressed in mental health settings. This requires an understanding of how clinicians perceive sexuality in the context of mental distress and illness, which is the aim of this project. We conducted in-depth interviews with 22 psychologists, psychiatrists and mental health nurses working with people across a range of settings in four Australian cities. Sexuality was often not addressed in mental health settings and this was common across participants’ accounts. Using a form of critical thematic analysis to explore how participants made sense of or explained this silence in relation to sexuality, we generated three overarching themes: ‘sex is hard to talk about’, ‘I don’t think that sexuality belongs here’, and ‘I’m told that sexuality doesn’t belong here’. That sexuality was perceived as taboo and often constructed as irrelevant in mental health settings is not a new finding in itself; but the institutional (and workplace) silence that facilitated and maintained – even encouraged – silence at the level of individual clinicians has been less explored. Effective change in relation to sexuality in the mental health setting will not be sustained if the institutional context of clinicians’ practice is ignored.

Grant support: *This research was supported by a University of Adelaide research scholarship awarded to Kristi Urry by the Faculty of health and Medical Sciences*

**‘More ceremony than dialogue’: Family carer voicelessness in an acute psychiatric setting**

Part of the symposium: Kerry Chamberlain - *Snapshots*

**Urry, Kristi**

*University of Adelaide, Australia*

This poem is one of many that I wrote as a tool to process the experiences of my family during my brother’s experience of acute mental distress and admission to a psychiatric facility. This experience was deeply distressing for the entire family as we worked hard to support my brother, fighting first to access formal care and then to protect him from it. The specific moment depicted in the poem explores the height of my own distress, acting as family advocate, in the face of a diagnosis and associated treatment plan which I perceived as violent but which did not eventuate.

# **Chronic back pain and information seeking on the Internet: a critical qualitative study**

Poster presentation

**Véron, Claudia; Santiago-Delefosse, Marie**

*Institute of Psychology, Research Center for Psychology: Health, Aging and Sport (PHASE),  
University of Lausanne, Switzerland*

## Background

Causing a large socio-economic burden, chronic back pain is a major public health concern. The importance of patient information in chronic back pain is well-known and has taken a new dimension in the digital era. On one hand, online health information could promote patient empowerment, on the other hand it could reinforce health inequalities because of the digital divide. Within a critical health psychology framework, we aim to explore the experiences and needs of people suffering from chronic back pain regarding health information seeking on the Internet.

## Methods

30 semi-structured interviews are conducted with adults suffering from chronic back pain using an interview guide. The Functional Communicative and Critical Health Literacy scale (FCCHL) is administered to participants. Interviews are transcribed and analysed using thematic analysis and lexicometric analysis.

## Results

Interviews are currently being conducted and will be analysed in the first half of 2019.

## Discussion

The results of this study are expected to provide a better understanding of people's perceptions and use of the Internet for chronic back pain information. The findings could provide guidelines for the development of websites or other information resources dedicated to chronic back pain that take into account disparities in health literacy.

## **Lay perspectives on genetic secondary findings**

Oral presentation

**Vornanen, Marleena**

*University of Helsinki*

Genome sequencing may reveal various secondary findings: health risks that were not the initial target of the investigation. Experts suggest that people should be offered categories upon which to choose, which types of findings they wish to receive. Current categorizations emphasize level of risk and efficiency of preventive treatment. This study examined how illness representations shape lay perspectives on various secondary findings.

The study participants imagined themselves receiving hypothetical secondary findings via letter, indicating high risk for cancer or cardiovascular conditions. They wrote down their first reactions (N=29) and attended focus groups (N=23). People made sense of potential secondary findings through general illness categories, such as ‘cancer’, ‘heart disease’, and ‘mental illness’. Lived experience of the illness and access to treatment were important perspectives when elaborating on severity of findings.

Lay people seem to approach the topic of genetic risks using their knowledge from familiar illnesses. While experts clearly distinguish heritable and multifactorial diseases, their differences may be less obvious to lay people. This needs to be kept in mind when formulating categories for reporting different types of findings, to achieve categories that are meaningful to people and aid informed decision making on what types of results to consent to.

## **Body talk: The role of masculinity in young men's body image and appearance related matters**

Oral presentation

**Whitaker, Candice; Gough, Brendan; Fawcner, Helen; Deighton-Smith, Nova**

*Leeds Beckett University*

Government agendas have highlighted the requirement for rapid investigation into the body image related experiences of young men, yet a suggested feminisation of body and appearance related topics, and a tendency for non-disclosure, continue to present obstacles to achieving this. However, previous research has indicated that online, anonymous contexts may present useful environments for circumnavigating these barriers. Thus, the aim of this study was to explore young men's accounts in relation to body image and appearance related issues, using an anonymous online survey. Young men (N=114) ages 16-39 (M=26) took part in a qualitative survey comprising of eight open ended questions, and data were analysed using discursively-informed thematic analysis. Results indicated that the young men welcomed the opportunity to critically engage with the topic and disclose personal body 'worries'; also revealing that in everyday contexts, discussion is habitually inhibited by social ideals of masculinity. In addition, whilst dominant body ideals were identified as largely unobtainable, they remained significant for physical self-appraisals, and a goal to aspire to. Results are discussed in relation to the potential health implications of negotiating competing discourses, as well as the requirement for increased male specific educational resources which challenge prevailing masculine discourses.

## **Investigating British gay and bisexual men's experiences of healthcare and psychosocial support for prostate cancer**

Oral presentation

**Williamson, Iain; Stephens, C.; Fish, J.; Bell, K.**

*De Montfort University, Leicester*

Research has shown that British LGBT people's experiences of cancer treatment and support are typically significantly poorer than those of heterosexuals. Subsequently, changes are currently being made to policy and practice to try and improve the quality of cancer care for sexual and gender identity minorities. All forms of cancer present unique challenges to those affected, yet research in relation to specific cancers and LGBT sub-communities remains limited. Thus this study employed semi-structured interviews and interpretative phenomenological analysis to consider accounts of gay (N=12) and bisexual (N=3) men who have had prostate cancer within the last five years. Participants were recruited at hospital clinics, community support groups and through media campaigns. Men reported incidents of homophobic/heterosexist micro-aggressions from staff, challenges in disclosing their sexual identities, and accessing relevant psychosexual support in the context of same-sex relationships. Many felt unsafe and/or uncomfortable in the hospital, but several discussed benefits of accessing GB cancer peer support groups where available. Our findings reinforce the need for improved and expanded coverage of LGBT dimensions of cancer care in training curricular, and lobbying for more widespread LGBT-affirmative/specialist community-based services. Finally, we consider what a salutogenic care environment for LGBT individuals experiencing cancer might look like.