

38 Training and Working as a Health Psychologist

CHARLES ABRAHAM, KAREN RODHAM, DARYL O'CONNOR & MARK CONNER



LEARNING OUTCOMES

WHEN YOU HAVE COMPLETED THIS CHAPTER, YOU SHOULD BE ABLE TO:

1. Provide a brief description of the work that health psychologists do in different settings and give some examples.
2. List and explain the key areas of expertise that a UK trainee health psychologist is expected to have attained once they have passed their Stage 1 Qualification in Health Psychology.
3. Assess what areas of health psychology you have been introduced to in this book and identify which areas specified by stage 1 that you have not yet studied.
4. List and explain the five groups of competencies that a UK trainee health psychologist is expected to have attained once they have passed their Stage 2 Qualification in Health Psychology. In addition, explain how Stage 2 trainees are expected to demonstrate these competencies.
5. List generic competences that a fully qualified health psychologist offer to private-sector companies planning to sell health-promoting products.

KEY TERMS

Assess • British Psychological Society • Competencies • Conduct Research • Consult • Coping Strategies • European Federation of Professional Psychologists Associations • Generic Professional Competencies • Graduate Basis for Chartered Membership of the British Psychological Society • Health and Care Professions Council • Health Behaviours • Health Trainers • Job Redesign • Multidisciplinary Settings • Physical Health • Psychological Well-Being • Stage 1 Qualification in Health Psychology • Stage 2 Qualification in Health Psychology • Supervise and Manage

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ROUTE MAP OF THE CHAPTER

In this chapter, we discuss what health psychologists do, the different settings in which they work, and the various roles they play in these settings. We describe and illustrate the steps that a UK undergraduate psychology student might take to become a qualified health psychologist, eligible for recognition by the Health and Care Professions Council. We focus on the UK training route but also show how this relates to training in Europe. Finally, one of the authors of this chapter shares her previous experience of working as a qualified health psychologist across two settings: a university and a hospital.

38.1 WHAT DO PROFESSIONAL HEALTH PSYCHOLOGISTS DO?

We noted in Chapter 6 that the primary aim of health psychology is to promote health and prevent illness. Practicing health psychologists' work is both theoretically informed and evidence-based and often involves a focus on

health behaviours behaviours engaged in to protect or risk health outcomes.

coping strategies the behaviour and cognitive actions and techniques that help create awareness of and manage the impact of distressing emotions, stressors or negative events.

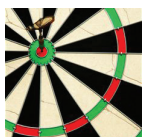
behaviour change. For example, practicing health psychologists may design and implement and evaluate interventions for promoting **health behaviours** and/or **coping strategies** that promote health, reduce stress, and offer protection against disease and illness. Health psychologists work with individuals, families, and organisations (e.g., **job redesign**) as well as advising local and

national governments on health promoting policy options (see the social ecological model described in Chapter 6). Health psychologists also work for commercial organisations that, for example, design health-promotion interventions for sale. Focus Point 38.1 illustrates questions that health psychologists may address in their everyday practice including questions that have been addressed by the authors of this chapter. In short, those who choose to work as health psychologists have a strong interest in promoting health and in how we can better understand and so positively influence the relationship between psychology and health. Unlike clinical psychologists, health psychologists do not focus on psychological problems or mental illness/health but rather on **physical health** and **psychological well-being**.

job redesign the process of making changes, revisions, or shifting the focus of tasks and responsibilities of a job often as a result of external pressures or a changing business environment.

physical health the condition of your body, including fitness, well-being, diet, exercise, and behaviour.

psychological well-being a critical component of mental health that relates to our overall functioning in regard to our affective states such as happiness.



FOCUS POINT 38.1 WHAT SORT OF QUESTIONS DO HEALTH PSYCHOLOGISTS ADDRESS IN THEIR EVERYDAY PRACTICE?

1. Why is patient X not taking the medication recommended?
2. How can stress at work be reduced for client X?
3. What kind of rehabilitation programme will work best to help patient X get back to work after an illness (e.g., a heart attack)?
4. How can we reduce stress at work for a group of professionals, for example, nurses in a particular hospital?
5. How can we help patients with chronic pain, visiting a pain clinic?
6. How can we promote physical activity within a senior school?
7. How can we best train frontline professionals to change health-related behaviours among the clients who **consult** them.
8. How can a company reduce stress amongst its employees without reducing productivity?
9. How can a city reduce the prevalence of teenage pregnancies?
10. What health promotion policies should government adopt to reduce the prevalence of health risk behaviours such as overeating and excessive alcohol consumption?

consult seeking the advice or opinion from someone, particularly an expert or professional.

However, both health and clinical psychologists may help patients' experiencing stress and/or depression and seek to change their perceptions, attitudes, and behaviours. It is important to recognise that health rarely falls neatly into the category of mental health or physical health. Indeed, we know that our physical and mental health are intertwined (Ohrnberger *et al.*, 2017). This is why multidisciplinary teams in which different health professions work together are important. For example, in managing pain field, health psychologists may work closely with physiotherapists to help the patient identify and work towards behaviour change(s) that will help them learn to live well, in spite of their pain. At the same time, clinical psychologists may work with patients to help them cope with severe anxiety or depression linked to their condition.

Health psychologists conduct and draw upon a range of health psychology research, in their everyday practice. For example, health psychologists may be involved in developing or applying research into:

1. individual differences (e.g., personality characteristics such as the five factor model described in Chapter 9),
2. cognitions (e.g., beliefs, attitudes, perceived norms, and self-efficacy; see Chapters 6 and 9),
3. stress reduction (see Chapters 7 and 8),
4. how these factors shape health-related behaviours (see Chapter 6),
5. how effective theory- and evidence-based interventions are at changing health-related behaviour patterns and health outcomes (see Chapter 6).

In summary, health psychologists aim to understand the processes that explain psychological characteristics and behaviours (see Chapter 6) in order to develop effective interventions that can make a positive difference to the issue being focused upon. See the ten-step guide

multidisciplinary settings a group of individuals with different sets of skills, knowledge, and professional training who work together to coordinate healthcare and other services for users.

described in Chapter 6 (Abraham & Denford, 2020).

Health psychologists work in a variety of **multidisciplinary settings** including primary, secondary, and tertiary care within statutory, third sector, and private healthcare. Primary care refers to services that citizens can access directly (e.g., a General Practitioner). Secondary care refers to services to primary care practitioners refer patients, for example, an eye specialist or a dermatologist. Tertiary care refers to even more specialist services; usually, a person would be referred there by a secondary care health professional. With respect to different health sectors, statutory sectors are those that are paid for and provided by the government (e.g., in the UK,

the National Health Service [NHS]). Third sector refers to not-for-profit non-governmental services, often also known as charities. The private sector delivers services that are run as businesses to make a profit (e.g., private hospitals and residential homes). Health psychologists have roles across all of these services. For example, health psychologists may develop and evaluate behaviour-change interventions that can be sold to organisations to improve the health of their employees to increase their well-being and productivity.

The **British Psychological Society (BPS)** (<https://careers.bps.org.uk/area/health>) defines the work of health psychologists as:

British Psychological Society (BPS) the professional society for psychologists in the UK.

1. Using knowledge of psychology and health to promote general well-being and understand physical illness.
2. Dealing with the psychological and emotional aspects of health and illness as well as supporting people who are chronically ill.
3. Promoting healthier lifestyles and trying to find ways to encourage people to improve their health. For example, they may help people to lose weight or stop smoking.
4. Improving the operation of the healthcare system. For example, they may advise doctors about better ways to communicate with their patients.

In Chapter 7, we discuss the scientific role of health psychologists. Health psychologists work in universities, teaching psychology, nursing, and medical students among others. Health psychologists are also researchers working at many levels of theory development, theory testing, intervention co-design, and intervention evaluation (Abraham & Denford, 2020). Health psychologists are involved in direct patient care, assessing and enhancing individuals' psychological adjustment to illness and treatment, minimising distress associated with medical procedures, delivering health education, facilitating patient decision-making, and implementing psychological interventions (Hallas, 2004). In addition, health psychologists are involved in designing and improving screening programmes, training healthcare professionals, running stress management courses, and advising on job redesign. Health psychologists may also pursue careers within health promotion businesses, using their skills to help develop engaging and effective behaviour-change interventions designed to improve people's lifestyles. Case History Box 38.1 includes two brief case studies based on the BPS illustrations.

Health psychologists play an important role in health promotion through their research and their practice.

CASE HISTORY 38.1

WHAT DO HEALTH PSYCHOLOGISTS DO? TWO EXAMPLES

Sam is both Chartered and a Health Psychologist who is head of a 'Stop Smoking' service funded by the National Health Service. Sam's role is wide ranging and involves:

1. deciding how many smoking cessation groups are needed to respond to local demand
2. managing a multidisciplinary team of stop smoking advisors
3. ensures that there is appropriate training available for health professionals and others regarding smoking cessation
4. evaluating services and making changes where necessary
5. liaising with other services to provide co-ordinated local and national service provision.

Kiran is a Consultant Health Psychologist responsible for developing, leading, managing and providing a psychology service to Cardiac Medicine and Renal Medicine. This involves:

1. working as part of a multidisciplinary team
2. providing specialist psychological care for patients with renal disease and coronary heart disease.
3. Running individual and group interventions,
4. Providing consultative advice for, and supervision of, colleagues
5. Contributing to budgetary planning for the renal and cardiac rehabilitation services.

They help practitioners to understand and support people with psychological and emotional aspects of health and illness. In particular, as our population ages and more people are living with long-term health conditions, the role of health psychology increases. Many long-term physical conditions develop and accelerate as a consequence of our health behaviours. So, since health psychologists are specialists in health behaviour change, there is much work to be done! See Chapter 6 for a summary of the six key areas of behaviour change that can improve health outcomes. Health psychologists have the expertise to improve our understanding of the barriers to change and, in so doing, can lead design and implementation of more effective evidence-based behaviour-change interventions, targeting individuals, social groups, and communities.

38.2 TRAINING AS A HEALTH PSYCHOLOGIST IN THE UK

Training programmes in the UK have been designed to ensure that graduates have key skills or **competencies**, which will enable them to practice effectively and safely.

competencies areas that a psychologist needs to be competent in.

Training is split into two stages, which we explore in more detail below. In short, Stage 1 equates to an MSc in Health Psychology and Stage 2 is a doctoral level qualification. So, health psychologists will usually have completed a BPS-accredited

undergraduate degree in psychology, a Master's degree in health psychology approved by the **Health and Care Professions Council (HCPC)** and then a doctoral-level qualification in health psychology. Once a trainee has completed an approved Stage 2 programme, which is usually a doctoral-level qualification, they are eligible to apply to register as a *Practitioner Psychologist* with the HCPC (<https://www.hcpc-uk.org/standards/standards-of-proficiency/practitioner-psychologists/>).

Health and Care Professions Council (HCPC) the professional regulatory body for practitioner psychology in the United Kingdom, which sets and enforces standards for ethics, proficiency, and training of practitioner psychologists, including counselling psychologists

The HCPC:

1. sets standards for professionals' education and training and practice,
2. approves programmes which professionals must complete to register,
3. keeps a register of professionals who meet HCPC standards, and
4. takes action if professionals on the Register fail to meet HCPC standards.

Key competencies of registered health psychologists including being able to practice:

1. safely and effectively within the legal and ethical boundaries of their profession,
2. as an autonomous professional, exercising their own professional judgement,

3. with an awareness of the impact of culture, equality, and diversity on practice and in a non-discriminatory manner,
4. including understanding of the importance of, and being able to maintain confidentiality,
5. using communicate effectively and being able to work appropriately with others
6. being able to maintain records appropriately and to reflect on and review practice,
7. drawing on appropriate knowledge, scientific evidence, and skills to inform their practice.

European Federation of Professional Psychologists

Associations a member association concerned with the promotion and improvement of psychology as a profession.

Similar standards have also been adopted by the **European Federation of Professional Psychologists Associations** (EFPA <https://www.efpa.eu/about-us/missions-values>) which works to develop common standards across European psychology training

courses. At the time of writing (March 2022), EFPA represents 38 European national psychological associations, including all European Union Member States, as well as the UK. The mission of EFPA is to ‘*promote the development, dissemination and application of psychology in all its forms, and to contribute to shaping a humane society, in Europe and beyond, on the basis of psychology’s expertise*’.

38.2.1 Graduate Basis for Chartered Membership BPS

The BPS has developed a competency-based training course for UK health psychologists. To follow this route, a student must first gain a qualification that provides eligibility for the Graduate Basis for Chartered Membership of the BPS. This is usually a three-year Bachelor’s degree in psychology but may also be a one-year conversion course in psychology following an undergraduate degree in another discipline.

38.2.2 Stage 1 Qualification in Health Psychology

Having acquired ‘**Graduate Basis for Chartered Membership of the British Psychological Society**’, students proceed to study for a Stage 1 professional qualification. Normally, students do this by taking a one-year, accredited Masters course in health psychology which covers a specified, essential knowledge base, and postgraduate research skills.

Focus Point 38.2 lists the nine areas of knowledge and skills that a stage 1 qualified health psychologist must acquire. This may seem to be a long list, but most candidates will have been studying psychology for at least four years before they reach a stage 1 standard. The nine areas can be categorised into four themes:

1. physiological and psychological processes in health and illness,
2. interventions and applications of health psychology,
3. research and research methods, and
4. professional and practice-related issues.

The first of these areas (*physiological and psychological processes in health and illness*) requires that stage 1 trainees have a good knowledge of theoretical models of health-related cognitions and behaviour, the evidence supporting current models, and an ability to apply

stage 1 qualification in health psychology

the first stage of a professional qualification that focuses on the knowledge, skills, and competencies required to become a health psychologist.

Graduate Basis for Chartered Membership of the British Psychological Society

a standard set by the British Psychological Society (BPS) that ensures that students have completed a BPS accredited degree and are now eligible for graduate membership of the BPS. It is a recognition that the holder of this status has studied a psychology course with sufficient breadth and depth and now have a solid basis to undertake any postgraduate training to become a Chartered Psychologist.



FOCUS POINT 38.2

Areas of Expertise (with examples) Required to Attain a Stage 1 Qualification in Health Psychology (full details are in the BPS (2019) Standards for the accreditation of Masters & Doctoral programmes in health psychology)

Research and research methods (e.g., qualitative and quantitative research, at least one empirical study, and a mini systematic review).

Contexts and perspectives in health psychology (e.g., critical understanding of historical and current theories/approaches in health psychology).

Physiological and psychosomatic disease processes (e.g., appraise and evaluate evidence relating to the epidemiology of health and illness, including acute and long-term conditions, stress, and psychoneuroimmunology).

Client groups and other stakeholders (e.g., knowledge and skills to enable them to progress to working with a range of client groups and other health professionals across the lifespan).

Health-related behaviour and cognitions (e.g., critical evaluation of theoretical models of health-related behaviour and cognitions).

Interventions: Applications of health psychology (e.g., compare and contrast a range of interventions applicable to health psychology settings and health and well-being outcomes, understand issues relevant to the design and evaluation of a range of interventions).

Healthcare and professional settings (e.g., knowledge and skills to enable them to progress to working

within a range of settings and contexts relevant to health psychology).

Measurement issues (e.g., critical understanding of psychometric issues relating to the development of outcome measures for acute and long-term conditions, stress and coping, health-related quality of life, and other psychological outcome measures).

Professional issues (e.g., recognise the need to take responsibility for their own professional development and should, therefore, understand the principles and utility of critical self-reflection for their development as trainee health psychologists. Students should be aware of the legal and statutory obligations and restrictions on health psychology practice).

these to practical problems. These models describe health beliefs and attitudes, social and individual representation of health and illness, and an awareness of how factors such as life context, health literacy, personality, and emotional intelligence might impact on health behaviour and cognitions. We have introduced some of these models in Chapter 9 and considered the research agenda needed to test them and their application in Chapter 6.

In addition, stage 1 trainees need to be able to appraise and evaluate evidence relating to the epidemiology of health and illness. This will include acute and long-term conditions as well as stress and psychoneuroimmunology. We have introduced some of these ideas in relation to the immune and cardiovascular systems and an explanation of pain in Chapter 7.

The second area of expertise in stage 1 training (*Interventions and applications of health psychology*) includes gaining expertise in the assessment, formulation, design, and evaluation of a range of interventions. In addition, trainees will learn about the management of acute and long-term conditions, behavioural change techniques, as well as health education and promotion. We have introduced some of the key ideas in this area in Chapter 6. In addition, stage 1 trained health psychologists need to have a good understanding of communication in

healthcare settings, including the impact of communication on patient adherence (see Chapter 6).

The third area of expertise in stage 1 training (*Research and research methods*) includes developing a high level of expertise in designing and conducting research methods applying both qualitative and quantitative methods. They are also expected to show a critical understanding of psychometric issues relating to the development of outcome measures. These skills will be further developed in stage 2 training but at stage 1, health psychologists are expected to undertake an independent research project and a mini literature review. We have introduced some measures used in health psychology in Chapters 8 and 9 (see, e.g., our discussion of how best to measure levels of stress in an individual's life).

The fourth area of stage 1 expertise in stage 1 training (*Professional and practice-related issues*) includes understanding the context of historical and current perspectives of health psychology. In addition, trainees develop knowledge and skills to enable them to work with a range of client groups across the lifespan, and with other health professionals in a variety of healthcare and professional settings. Trainees also understand the legal, ethical, and statutory obligations on national and international health psychology practice.

Now have a look at Activity Box 38.1.



WHAT HAVE YOU LEARNT ABOUT HEALTH PSYCHOLOGY?

ACTIVITY BOX 38.1

Once you have finished reading Chapters 6–9, have a look at Focus Point 38.2 and tick those topics that you have been introduced to in this book. There are quite a few of these topics that you now know about!

This book provides an introduction but if you are interested to learn more (and tick off more of these topics!) have a look at health psychology specific textbooks (e.g., Abraham *et al.*, 2016; Rodham, 2019).

38.2.3 Stage 2 Professional Qualification in Health Psychology

stage 2 qualification in health psychology the second stage of a professional qualification that focuses on the development of the competencies required to become a health psychologist.

Having completed stage 1 training, students must gain a '**Stage 2 Qualification in Health Psychology**' which may be taken as a stand-alone qualification or as part of a doctoral programme. Below, we outline the content of the UK Stage 2 training and the evidence

that candidates must submit to demonstrate their competence. All these competencies are acquired by practicing under supervision. Focus Point 38.3 provides a summary of what health psychologists do, and Focus Point 38.4 summarises what health psychologists can do once they finish their training. Have a look at these boxes before you read on.

Case History Box 38.2 presents a case study briefly outlining the training experiences of a fictitious student based on the real experiences of some of our own

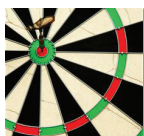
students. Thinking about Chris's stage 2 training will help you understand more about the kinds of things Stage 2 trainees need to do to become a trained health psychologist. So read Chris's story now.

The UK Stage 2 Health Psychology training specifies five groups of competencies. These reflect the jobs that health psychologists are required to do in their everyday work (see above). They are:

1. Generic professional competencies
2. Competencies in psychological interventions
3. Research competence
4. Consultancy competence
5. Teaching and training competence

generic professional competencies describes the fundamental, career-long knowledge, behaviour, and skills that represent system-wide, regulatory responses to concerns about patient safety and fitness to practice within the medical profession.

Generic professional competencies are needed by all psychologists. These ensure that psychologists have sufficient professional experience to practice



FOCUS POINT 38.3 WHERE DO HEALTH PSYCHOLOGISTS WORK?

Health psychologists work in academic healthcare and industrial settings.

supervise and manage

a process of supporting staff by providing them with the tools and training they need to do their job and to watch over, provide direction, and hold them accountable for the work that they perform.

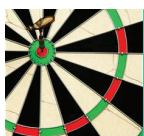
Health psychologists:

1. teach students and health professionals
2. conduct research
3. assess patients
4. manage clinical interventions
5. **supervise and manage** other staff

6. inform health promotion and public policy

Health psychologists are well placed to meet the challenges for the modern NHS, with its commitment to flexibility and the need to improve service delivery, to improve health, and to reduce inequalities.

Source: Adapted from the BPS Division of Health Psychology (2021).



FOCUS POINT 38.4 AT THE END OF TRAINING, A HEALTH PSYCHOLOGIST WILL

1. have a core knowledge base of health psychology theory, research, and methods
2. be able to develop, deliver, and evaluate evidence-based psychological interventions
3. maintain ethical and professional standards throughout their work
4. have consultancy skills for individuals, teams, and organisations
5. be competent in designing and evaluating training programme in health psychology
6. have professional skills, such as teaching patients and staff skills in stress management or preparing patients for surgery.

Source: Adapted from the BPS Division of Health Psychology (2021).

CASE HISTORY 38.2

STAGE 2 HEALTH PSYCHOLOGY TRAINING

Chris's supervisor is both chartered and a health psychologist who teaches and conducts research in a university but also practices as a health psychologist. They provide consultancy and undertake research for government departments, industry and local authorities. This consultancy and research focuses on behaviour change including, for example, improving adherence of young diabetic patients and increasing physical activity amongst teenagers (see Chapter 6).

Chris is a health psychology Stage 2 trainee and is currently managing a team of health trainers. Health trainers are lay people recruited from the community who are given brief training on behaviour change techniques which they then share with others in the community. Whilst the Health trainer services clearly map onto some of the core competencies of Stage 2 training, Chris needs to be able to work towards all the competencies.

Chris's manager is keen to support Chris's Stage 2 training. Working together with Chris and Chris's Stage 2 supervisor, they have identified opportunities within Chris's day-to-day work that will allow Chris to gain relevant experience and expertise for the different Stage 2 competences. In addition, Chris's supervisor is able to offer opportunities in consultancy, teaching, and research that can be tailored towards Health Trainer services. For example, Chris is conducting an evaluation of the local health trainer service as well as a broader review of the literature on training effectiveness of lay facilitators who have themselves received brief training. Chris will use the outcomes of these two pieces of work provide advice on how to improve the health trainer service and the training of health trainers to enhance their effectiveness as facilitators of behaviour change.

autonomously and are able to make informed professional judgements in accordance with current codes of professional legal and ethical conduct (see Chapter 6). Candidates must submit a logbook of professional practice maintained over two years, full-time supervised practice, plus a reflexive report summarising their personal and professional development as a health psychologist. These two pieces of work enable the trainee to showcase their development and growth from trainee to independent practitioner, highlighting key experiences. These might include communicating with patients and colleagues, managing secure information to demonstrating compliance with ethical and legal standards.

assess evaluate the nature, ability, or quality of someone or something.

Competencies in psychological interventions ensure that health psychologists can **assess** behaviour change needs in people, groups, and organisations and design appropriate interventions and evaluate those interventions rigorously. Candidates must have experience of delivering interventions both face-to-face with individuals and in a different setting that does not involve direct contact with an individual, perhaps working with groups or online. Trainees are expected to show they understand how to assess, formulate, design, deliver, and evaluate interventions. Trainees submit two reports, one detailing a face-to-face intervention with an individual client and the other an intervention completed through a medium other than face-to-face work with an individual client. Reflective reports accompany both pieces of work, and the one-to-one intervention must be observed and successfully approved by the supervisor who attests to the trainee's competence.

For example, the character in the case study (Chris) could write up their intervention work with an individual client who wanted to reduce unhealthy snacking and their intervention work with a local group of taxi drivers who wanted to learn how to increase physical activity opportunities in their sedentary job.

Research competencies ensure that the candidate is an independent researcher able to undertake research design, sampling, data collection, data analysis, the evaluation of methods, the discussion of implications of data, and the relationship of data to previously published research. Candidates must submit two pieces of research: first, a systematic review of literature relevant to health psychology; second, a rigorous study of a question relevant to health psychology. Both of these must be written to a standard acceptable for publication in peer-reviewed academic journals relevant to health psychology. For example, Chris was planning to undertake a systematic review of what has been found to work best in enhancing the effectiveness of services in which lay people receive brief training and then facilitate others changing their behaviour. There are many of such services that have been evaluated worldwide. Chris was also planning to evaluate the effectiveness of the local health trainer service. It would be appropriate to design a study that required the collection and analysis of both quantitative and qualitative data.

Consultancy competencies ensure that health psychologists can use their skills to provide a service to an external client, including private sector clients. These skills mean that health psychologists can understand and apply theories and models, including those regarding communication (see Chapter 6), as well as the management of

change (see Colour Plate 38.1). Candidates must demonstrate that they can assess offers of consultancy, plan what to do, and deliver an evidence-based service to individuals, groups, or organisations. Candidates must also demonstrate their ability to monitor and review consultancy work. Candidates must submit a case study that includes the request for consultancy, the negotiation and planning of consultancy work, and what theoretical



COLOUR PLATE 38.1 Health psychologists conduct consultations with clients and patients.

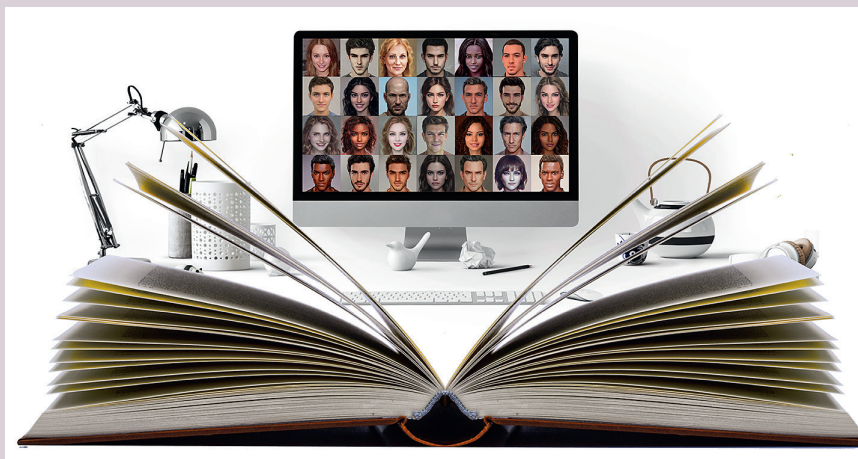
Source: tiyowprasetyo/Pixabay.

frameworks were applied. In addition, trainees submit a *contract and working agreement conditions document* that details the consultancy contract, a timetable of work, budget, minutes, as well as evidence of formal evaluation, feedback, and reports from the client, where appropriate. Using the work completed for the research competency, Chris could be commissioned to offer the local Trust advice on how to improve their Health Trainers Service. This could include specific advice on additional training and practice for **health trainers** on how to use behaviour change techniques that clients found easy to use and which are associated with clients' achieving their goals (Abraham & Michie, 2008; Knittle *et al.*, 2020).

health trainers

Individuals who provide support and motivation through guidance to individual who want to make changes to their lives, such as losing weight or improving their well-being.

Teaching and training competencies ensure that health psychologists can employ a range of teaching approaches and are able to adapt their teaching for different groups. Trainees must have experience of large and small group health psychology teaching/training. They must deliver a series of five or more discrete sessions to two population groups, one of which must be health professionals (see Colour Plate 38.2). Trainees have to be able to show they can select and effectively deliver appropriate teaching techniques tailored to the characteristics of the person or group they are training/teaching and the setting in which this training/teaching will take place. Trainees must submit a case study based on observed and supervised teaching sessions to be submitted together with the observer's report. The case study should include a teaching plan and evaluation and a reflective commentary of the teaching session/s. For example, Chris could develop a series of discrete sessions themed by a focus on



COLOUR PLATE 38.2 Health psychologists teach and train others.

Source: geralt/Pixabay.

understanding and applying health psychology theories to the processes of behaviour change. Sessions could be delivered for example to undergraduate students completing a module in health psychology, health trainers looking for a deeper understanding of the underpinning theories of behaviour change, and members of a local GP practice looking to better understand opportunities to help their patients with behaviour change.

38.3 WORKING AS A PROFESSIONAL HEALTH PSYCHOLOGIST: KAREN'S EXPERIENCE

Many health psychologists work in academic settings such as a university or in a healthcare environment

conduct research an inquiry based process that is organised through stages such as question identification, designing a study to interrogate relationships, data gathering, analysis, evaluation, and drawing conclusions.

such as a hospital or in an industrial setting where they might **conduct research** into patient experiences and adherence to a new drug or work on developing an evidence-based, behaviour-change intervention.

Karen Rodham, one of the authors of this chapter, is a UK health psychologist who held a dual role as academic at a university and practicing health psychologist in an NHS hospital. She worked one day a week as a member of a multidisciplinary team supporting people who were living with complex regional pain syndrome (CRPS) and four days a week as an academic member of a psychology department. Below, Karen provides a brief overview of her practice experience. For examples of other health psychologists' practice experiences, the Division of Health Psychology (BPS, 2021) and the Division of Health Psychology Scotland (BPS, 2018) have put together a series of case studies offering a brief insight into the array of roles. In addition, in his edited book, Mark Forshaw (2021) provides examples of the work and workplaces in which health psychology and health psychologists can be found.

38.3.1 Academic Work

As with most academics, my work at the university can be categorised in three ways: teaching at undergraduate and postgraduate levels, administration, and research. Elizabeth Haswell writes eloquently about the range of roles undertaken by academics: '*we are teachers, mentors, managers, writers, editors, peer reviewers, statisticians,*

fundraisers, accountants, travel agents, recruiters, conference organizers, small business owners, science communicators [...]' and the list continues at some length. So, the information shared here is enough to give a brief insight into, and overview of, the role.

The teaching element is more than simply delivering lectures or seminars; it is also about giving clear and supportive feedback to ensure that trainees learn and grow and become the best that they can be. Administration can take up a lot of time and involves all the behind-the-scenes things like marking, writing lectures, reviewing papers, quality audits, and so on. It is through research where I am able to explore the questions that intrigue me—answers to which I hope will make a difference not just to my academic and practice colleagues but also to the people who are generous enough to take part in my studies. My focus is on better understanding how to help people cope when they are living with complex and chronic health conditions. I have developed a special interest in persistent pain that was sparked by my experience of working in the NHS (see, e.g., Rodham, 2020).

38.3.2 Work as a Practicing Psychologist

When I was in practice, I was based in a Rheumatology Department that offered a specialist service for adults who live with CRPS.

This is a condition where severe pain affects a limb, often (but not always) following an injury. Diagnosing CRPS can be tricky because there are no specific tests. In addition to pain, there may be other symptoms such as colour changes to the affected area, temperature differences compared to the opposite side, swelling, and limitations of movement. Although there is currently no cure for it, for some it can resolve or improve considerably. Treatment focuses on four main areas:

1. education and self-management
2. physical rehabilitation
3. pain relief
4. psychological support

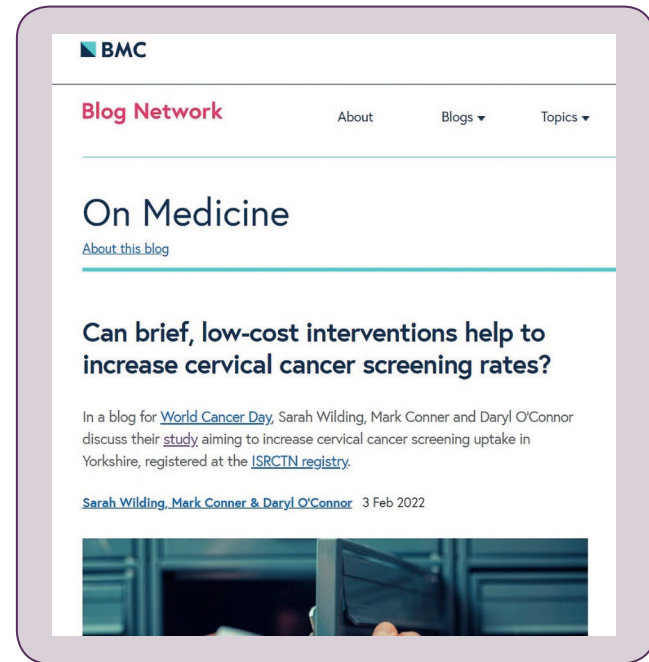
My role was to focus on education and self-management and psychological support. I worked as part of a multidisciplinary team that included physiotherapists, occupational therapists, a consultant nurse, an anaesthetist, a research fellow, and a clinical research practitioner. Working together we shared our different perspectives, experiences, expertise, and concerns about each patient. This allows for good communication between the different members of the team and ensures that we tailored our approach to meet the individual needs of the patients.

My health psychology clinic included a mixture of individual and group sessions, which aimed to explore how CRPS had impacted on patients' life, how well they were coping, and what we might be able to offer to help them to be able to live well in spite of their CRPS. I also prepared the people who had attended the in-patient programme for their return home. Going back to 'real life' can be challenging. Moving from the hospital where your condition is fully understood, and you are supported by health professionals and fellow patients who are knowledgeable about CRPS, to your normal life context where you need to start putting into practice all you have learned from the programme can be difficult.

Holding dual roles (academic and practitioner) was an extremely rewarding part of my career, not least because each role impacted on, and informed the other. For example, having identified the transition home as impacting on patients' ability to put into practice all they had learned whilst with us, we designed a research study. The findings enabled us to better tailor our approach (see, e.g., Rodham *et al.*, 2012).

Research then is a key part of the role of the practicing health psychologist. As well as designing and implementing research, health psychologists also share the learning, ensuring that it reaches patients as well as academics and other health professionals. This might involve dealing with media interest in your findings. The media may often be interested in the findings of health research and psychologists need to take time to explain research to

journalists and to ensure that media coverage accurately reflects research results (see Colour Plate 38.3 for an example of raising awareness of research via an online blog post). For more details, see Theory to Application Box 38.1.



COLOUR PLATE 38.3 An illustration of health psychology research in the media.

BOX 38.1 THEORY TO APPLICATION

Health Psychology and the Media

Acquiring research knowledge and skills is a core competency required by health psychologists and conducting research studies and evaluations is often a feature of their work in both academic and professional contexts. The research they conduct can provide important information which may be useful in helping health professionals (in their work with patients), health promoters (producing campaign materials), and members of the general public wishing to maintain healthy lifestyles. An important part of the job of health psychologists is therefore to ensure that their results are not just published in academic journals but reach much wider audiences. In fact, most research funding bodies now require that researchers plan how they will publicise their findings. One way to achieve this is via newspapers, magazines, broadcast media, and the Internet. Fortunately, there is considerable public interest in health psychology research.

Large organizations such as the BPS, the Economic and Social Research Council (ESRC) and individual Universities employ press officers who will work with psychologists to produce press releases of their research findings. Journalists also frequently attend psychology conferences to look for interesting news items. As a result, health psychologists often get the opportunity to discuss their research with journalists. This is likely to result in newspaper and magazine articles or sometimes, radio, or TV interviews. These are all important ways of making sure that the relevant audiences get to hear about research findings.

The opportunities to publicise our findings have rapidly increased with the growth of the Internet. Research conducted by some of the authors of this chapter (O'Connor *et al.*, 2008) provides a good example of how this can work. This was a large study in which 400 people completed daily diary questionnaires

about stress, health behaviour, and individual differences. Interesting results related to the negative effects of hassles on peoples eating behaviours and the negative effects of long work hours on a range of health behaviours. These findings led to a number of press releases issued by the BPS and the ESRC (who funded the research). This resulted in the researchers conducting interviews with a range of journalists including radio interviews. This included a summary of findings appearing on the BBC news website. There was also

further coverage of aspects of the research in newspapers and women's magazines. As a result of the initial wave of publicity, findings from the study have gradually appeared in much wider range of health-related websites worldwide. This includes sites concerning women's health, health in employment and self-help sites. This can be a very valuable and enduring way of ensuring our research has impact.

See **Colour Plate 38.3** for an illustration of how research can be publicised via the online world.

38.4 CONCLUSION

Health psychologists work to promote health and prevent illness. They are specialists in psychological interventions with expertise in behaviour change. They work in academic contexts such as universities, in healthcare environments such as a hospitals and clinics, and in industrial settings where they might conduct research into patient experiences and adherence to a new drug or behaviour change programme. Effectively and safely performing these roles requires health psychologists to

become competent and confident in a wide range of skills. To acquire these skills takes time and commitment. In the UK, this will involve them acquiring the Graduate Basis for Chartered Membership of the British Psychological Society by being awarded an accredited degree in psychology, followed by an MSc in health psychology and then completion of the stage 2 qualification, which will involve a minimum of two years of supervised practice. Once trained, health psychologists have a sophisticated skills base, which allows them to work on psychological and behaviour change in relation to a variety of problems and challenges.

SELF-TEST QUESTIONS

- List the key areas of expertise required to qualify as a stage 1 trained health psychologist.
- List five groups of competencies specified in UK Stage 2 Health Psychology training.

ESSAY QUESTIONS

- Describe the competencies health psychologists need to develop and explain why they need these skills.
- There are many roles that a UK trainee health psychologist wishing to complete their Stage 2 Qualification in Health Psychology could undertake. Choose one such job role and explain how it would allow them to gain experience in the Stage 2 competencies.
- Describe the skill set that a fully-qualified health psychologists can offer to a potential employer and explain how these skills can be applied to developing behaviour change interventions.

TEXTS FOR FURTHER READING

Michie, S. & Abraham, C. (eds) (2004) *Health Psychology in Practice*, Blackwell: Oxford UK.
 BPS (2019) Standards for the accreditation of Masters & Doctoral programmes in health psychology.
 Forshaw, M. (ed.) (2021) *Health Psychology in Clinical Practice*, Routledge: London.

RELEVANT JOURNAL ARTICLES

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RELEVANT WEB LINKS

- For the 'Career in Health Psychology' leaflet along with information about careers in health psychology
<https://www.bps.org.uk/member-microsites/division-health-psychology/careers>
- Further info about health psychology
<https://www.bps.org.uk/member-microsites/division-health-psychology>
- For an introduction to Lifestyle Medicine
<https://bslm.org.uk/>
- For examples of the role of health trainers
<https://www.healthcareers.nhs.uk/explore-roles/public-health/roles-public-health/health-trainer>
- For examples of press releases of psychology research (including health psychology research) <https://www.bps.org.uk/about-us/communications/news-releases>

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