

Wednesday, April 3, 2002

10:00 a.m.-5:00 p.m.
Pre-Meeting Seminars

Seminar #1

10:00 a.m.-5:00 p.m.

CAREER DEVELOPMENT: KEYS TO SUCCESS IN RESEARCH AND CLINICAL PRACTICE IN BEHAVIORAL MEDICINE AND HEALTH PSYCHOLOGY

William Gerin, Ph.D., Karina W. Davidson, Ph.D., Mount Sinai School of Medicine; Judith Ockene, Ph.D., University of Massachusetts; Susan M. Czajkowski, Ph.D., Peter Kaufmann, Ph.D., NIH/NHLBI; Julia Rowland, NIH/NCI; Lawrence W. Greene, CDC; and Robert M. Kaplan, UCSD, Editor-in-Chief of Annals of Behavioral Medicine

Establishing and maintaining a successful career in the area of behavioral medicine and health psychology requires more than being a good researcher and/or clinician. Understanding the ins and outs of grantsmanship, getting papers published, balancing research with clinical practice, knowing how to form lasting collaborations, are crucial to one's career. This 2-session seminar (both sessions on Wednesday, total of 6 hours) is aimed at those in the earlier stages of their careers—junior faculty, graduate and post-doctoral students (Ph.D. and M.D.), and clinicians seeking to increase their research involvement. However, researchers and clinicians at more senior levels would find several of the sessions extremely valuable as well. The seminar will be conducted by a broad range of speakers who have gone through the process and are willing to share their experiences. Speakers include William Gerin, MSSM, who will provide an overview; Judith Ockene, University of Massachusetts (Balancing Clinical and Research Interests), Karina Davidson, MSSM (Tips in Grantsmanship); Peter Kaufmann, NIH/NHLBI (Team approach: Strategies for Interdisciplinary Collaboration); Susan Czajkowski, NIH/NHLBI and Julia Rowland, NIH/NCI (From the Other Side of the Table, I and II); Lawrence Greene, Director, Office of Extramural Prevention Research, CDC (CDC Funding in the Behavioral Sciences); and Robert Kaplan, UCSD, Editor-in-Chief of *Annals of Behavioral Medicine* (Getting Your Work Into Print).

2:00 p.m.-5:00 p.m.
Pre-Meeting Seminars

Seminar #2

2:00 p.m.-5:00 p.m.

SMOKING INTERVENTIONS

Glen D. Morgan, Ph.D., National Cancer Institute; Patricia L. Fiero, Ph.D., Medical University of South Carolina; Scott J. Leischow, Ph.D. and Erik Augustson, Ph.D., National Cancer Institute

Despite significant reductions in smoking among Americans, it will undoubtedly remain the leading preventable cause of death and disability well into the next century. The stabilization of general prevalence rates and increases among sub-populations and in cigar use are striking evidence that

smoking control efforts must be re-doubled. Economic realities are prompting health care systems to look closer at promoting non-smoking among their customers. There is growing realization that prevention equals profit in a managed health care environment. Also, legislation, public sentiment, and insurance costs are (prompting) worksites to develop smoking policy and programs. Research and development in pharmaceuticals and computer technologies has infused new enthusiasm, enabling the evolution of new approaches to the smoking patient. Additionally, there is renewed interest in developing a new level of behavioral strategies that capitalize on our views of smokers from stages of change and health belief models. More than ever, health care practitioners across disciplines have the opportunity to help their patients who smoke. Behavioral scientists can make vital contributions to smoking interventions in research, consultation to health care organization and workplaces, as educators in graduate and post-graduate health care disciplines, and as practitioners.

Seminar #3

2:00 p.m.-5:00 p.m.

BEHAVIORAL MEDICINE IN THE 21ST CENTURY: IMPLICATIONS OF THE HUMAN GENOME PROJECT FOR BEHAVIORAL MEDICINE

Redford B. Williams, M.D., Duke University Medical Center; Stephen Manuck, Ph.D., University of Pittsburgh; Peter Kaufmann, Ph.D., National Heart, Lung, and Blood Institute; Caryn Lerman, Ph.D., University of Pennsylvania School of Medicine; Jeanne McCaffery, Ph.D., Brown University; and Frank Treiber, Ph.D., Medical College of Georgia

Few scientific challenges exceed in importance or opportunity the prospect of elucidating the origins of psychosocial risk factors and biobehavioral mechanisms of disease at the level of the human genome. Recent advances in molecular genetics permit identification of major genes associated with human health and behavior, as well as the extent to which genetic polymorphisms contribute to variability in biobehavioral responses to differing environmental circumstances.

This seminar will provide a primer on genomic science to set the stage for a discussion of a range of potential applications of contemporary genetic research findings to research and practice in behavioral medicine. Dr. McCaffery will provide basic background information on genomic science. The remainder of the seminar will cover potential behavioral medicine applications, including the relation of serotonin-related polymorphisms to psychosocial risk factors and CV reactivity (Drs. Manuck and Williams); the relation of dopamine- and serotonin-related polymorphisms to smoking behavior (Dr. Lerman); the relation of adrenergic receptor polymorphisms to CV function at rest and under stress (Dr. Treiber); and implications for behavioral research and research funding (Dr. Kaufmann).

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Seminar #4**2:00 p.m.-5:00 p.m.****MOTIVATIONAL INTERVIEWING IN BEHAVIORAL MEDICINE: ADVANCED CLINICAL AND TRAINING APPLICATIONS**

Ken Resnicow, Ph.D., Emory University and Jacki Hecht, R.N., M.S.N., Brown Medical School and The Miriam Hospital

Increasingly, health promotion researchers and practitioners are using motivational interviewing (MI) to address an array of health behaviors and conditions, such as smoking, diet, physical activity, diabetes management, and treatment adherence. Based on the seminal work of Miller and Rollnick, we define MI as “an egalitarian, empathetic, and client-centered way of being that manifests through specific techniques and strategies, e.g. reflective listening, shared agenda setting”. Given the wide spread use of MI in behavioral medicine, there is a growing need to develop a cadre of highly trained professionals able to apply MI clinically as well as train others in its use. Based on a series of studies we have conducted over the past five years, this seminar will provide advanced skill building in:

- Mastering deeper level reflective listening
- Selectively reflecting positive change talk
- Demonstrating how to link core values to personal health behaviors
- Handling resistance clients
- Determining when to progress from discussion to “closing the deal”
- Handling brief encounters
- Training techniques

Seminar #5**2:00 p.m.-5:00 p.m.****THE IMPORTANCE OF CULTURAL COMPETENCY IN WEIGHT LOSS TREATMENT AMONG MINORITY WOMEN**

Melinda R. Stolley, Ph.D., Northwestern University Medical School, Marian L. Fitzgibbon, Ph.D., Lisa Johnsen, Ph.D. and Anita Wells, M.A.

Obesity is one of our nation's most serious public health problems and is particularly prevalent among some minority populations. Specifically, higher rates of obesity are seen among African-American and Latino women. Efforts that address the treatment of obesity in these minority populations are needed. However, the majority of current weight loss treatments appear to be more effective for whites than for minorities. It is likely that consideration of cultural differences and values might lead to more efficacious treatment programs. Development of such programs require the knowledge and skills of culturally competent clinicians and researchers. In recent years guidelines that address the issue of cultural responsiveness have been offered by various professional organizations. Among these the American Psychological Association has developed the “Guidelines for Multicultural Counseling Proficiency.” This seminar will provide an overview of these guidelines and relate the issue of cultural competence to the development of effective weight loss treatments for minority women. We will begin by addressing the principals of cultural competence that include specific therapist characteristics, as well as the components

of awareness, knowledge, and skills. We will then illustrate the importance of cultural competence in the development of weight loss programs by presenting information on different population groups including: 1) African-American women receiving hospital based weight loss treatment; 2) Hispanic women involved in a community-based dietary intervention; 3) African-American women who attended a community-based integrated breast health/weight loss intervention; and 4) African-American breast cancer survivors participating in weight loss focus groups. Following these presentations, participants will meet with a facilitator in small groups to discuss their issues and experiences in the application of cultural competence to weight loss interventions.

Seminar #6**2:00 p.m.-5:00 p.m.****MULTILEVEL MODELS FOR ANALYZING LONGITUDINAL DATA**

Michael D. Stensland, M.S., Eli Lilly and Company and Bruce W. Carlson, Ph.D., Ohio University

This workshop will provide an overview of the use of multilevel models in longitudinal analysis. Other names for these models include hierarchical linear models, random coefficient regression models, mixed regression models, growth curve models, and mixed effects models. They represent a relatively new statistical technique for analyzing longitudinal data. They are ideally suited for clinical trials in that they can readily handle missing data, easily incorporate moderator variables, and allow a variety of covariance structures. The objectives of the seminar are to provide participants with a conceptual understanding of multilevel models, including their advantages and disadvantages relative to more traditional regression and analysis of variance procedures. Participants will also learn how to build and test multilevel models using SAS and how to describe their analyses for publication. Statistical background will be kept to a level such that someone with a good regression course should be able to follow the discussion. Conceptual and practical issues will be prioritized over statistical issues.

Seminar #7**2:00 p.m.-5:00 p.m.****TRANSLATING THEORIES TO INTERVENTIONS OVER THE LIFE-COURSE: ILLUSTRATIONS FROM THE BCC**

Barbara Resnick, Ph.D., C.R.N.P., University of Maryland; Marcia Ory, Ph.D., TAMUS-HSC; David Dzewaltowski, Ph.D., Kansas State University; Geoffrey Williams, Ph.D., M.D., University of Rochester; and Mace Coday, Ph.D., University of Tennessee

Theory based evaluations have helped researchers to understand better the factors that influence health behavior and have led to the development of theoretically based interventions for children, middle aged and older adults. The Behavioral Change Consortium (BCC) is a group of 15 NIH funded projects. Drawn from prior theoretic and empirical research, these studies incorporate the strongest theoretical constructs to facilitate behavior change across the life-course. Moreover, these studies consider the theoretically based mediators that influence both initiation and adherence to behavior over time. Examples of how theory can facilitate the development of the interventions to change behavior

across the life-course will be provided, as well as a description of several theoretically based interventions with regard to: (1) improving diet in children driven by ecologically informed social cognitive theory; (2) smoking cessation in adults based on the self-determination theory; and (3) increasing exercise in older adults based on the theory of self-efficacy. While the development of theory driven interventions are essential to successful outcomes, the BCC investigators also recognized the challenges associated with recruitment and retention and have identified techniques to augment both recruitment and retention across the life-course. This interactive seminar will provide an overview of BCC research topics and designs, describe three innovative theoretically based interventions, offer techniques to augment recruitment and retention in behavior change studies, and help researchers in the development of appropriate theoretically based interventions to change behavior across the life-course.

Seminar #8**2:00 p.m.-5:00 p.m.*****BIOBEHAVIORAL APPROACH TO ASSESSMENT AND TREATMENT OF MIGRAINE AND TENSION-TYPE HEADACHE***

Donald B. Penzien, Ph.D., University of Mississippi Medical Center; Jeanetta C. Rains, Ph.D., Dartmouth Medical School; Kenneth A. Holroyd, Ph.D., Ohio University; and Gay L. Lipchik, Ph.D., St. Vincent Health Center

Recent years have witnessed a host of new developments pertaining to the causes and treatment of recurrent migraine and tension-type headache. Substantial challenges to accepted notions of headache pathophysiology have been forwarded, and the nosology for headache devised by the International Headache Society has become the contemporary standard. Research evaluating and refining nonpharmacologic headache therapies continues with increasing focus being placed upon enhancing their cost-effectiveness as well as establishing their effectiveness relative to standard pharmacologic therapies. In addition, overdue empirical studies designed to determine the efficacy of combined drug and non-drug therapies are now underway.

This seminar, intermediate to advanced in scope and applied in focus, will provide a detailed overview of headache assessment and treatment that is firmly grounded on the relevant empirical literature and aimed at providing a foundation for clinical decision making. The format will be lecture with opportunities for participant interaction, and ample handouts will be provided. Handouts prepared by the presenters include: (a) the computer-aided Structured Diagnostic Interview for Headache; (b) the Headache Patient Information Form; (c) a summary of the International Headache Society headache nosology; (d) summaries of meta-analytic reviews of nonpharmacologic and pharmacologic headache treatment literatures; (e) suggested pharmacologic treatments for various headache disorders; (f) other headache treatment options and algorithms; and (g) summaries of recent headache treatment guidelines.

Issues specifically addressed during the seminar will include: (a) recent debates and findings regarding the pathogenesis of headache; (b) recent advances in headache

diagnosis and nosology; (c) the role of psychological/behavioral factors in headache; (d) nonpharmacologic and pharmacologic headache therapies; (e) the relative efficacy and integration of pharmacologic and nonpharmacologic headache therapies; (g) development of cost-effective nonpharmacologic headache treatment strategies; and (h) recent headache treatment guideline projects. Patient case examples will be thread throughout the workshop to illustrate the various issues.

Saturday, April 6, 2002**Seminar #9****1:30 p.m.-4:30 p.m.*****CHRONIC FATIGUE SYNDROME AND FIBROMYALGIA: METHODS OF ASSESSMENT AND TREATMENT***

Fred Friedberg, Ph.D., State University of New York at Stony Brook

Chronic fatigue syndrome (CFS) and fibromyalgia (FM) are controversial and poorly understood illnesses. This workshop is intended for clinical practitioners who see patients with CFS and FM in their practices. Also, this workshop will be valuable to researchers interested in learning about current trends in psychometric assessment and behavioral treatment of these illnesses. Although causal factors in CFS and FM are unclear, these illnesses appear to be a complex mixture of biological, social, and psychological factors. This seminar will begin with what is known both medically and psychiatrically about CFS and FM. Mind/body controversies will then be highlighted in the presentation of diverse theories of illness causation and persistence. The assessment module will explain clinical methods for assessment and differential diagnosis of CFS, FM, depression, somatization disorder, and generalized anxiety disorder. Furthermore, the important interactions between fatigue, pain, stress, and depression will be illustrated in order to identify targets for clinical intervention. Treatment techniques, including activity pacing, graded activity, relaxation training, pleasant mood induction, cognitive coping skills, and "envelope" treatment will be described. This seminar is based on the clinical experience and published work of the presenter as well as other relevant research on CFS and FM. The workshop will be structured so that participants will have the time they need for questions and interactive discussion with the presenter.

Seminar #10**1:30 p.m.-4:30 p.m.*****IMPLEMENTING BEHAVIORAL WEIGHT MANAGEMENT STRATEGIES IN A PRIMARY CARE SETTING***

Evelyn L. Lewis, M.D., M.A., Tracy Sbrocco, Ph.D., Christopher Robinson, Ph.D., and Sandra King, M.A., Uniformed Services University

Obesity and overweight are major health problems in the United States. A new treatment approach has demonstrated success with promoting long term weight maintenance and has implications for the physician in the primary care office based practice. Objectives: Participants will be able to: (1) delineate the differences between traditional behavioral treatments, very low calorie diets, and Behavior Choice Treatment in managing obesity; (2) discuss the interaction

between culture, and obesity; (3) discuss the major treatment components of Behavior Choice Treatment; and (4) Discuss implementation strategies of the basic treatment components in the clinical practice setting. Content: The problems of obesity and overweight will be defined and reviewed. Causes of obesity will be briefly reviewed along with the efficacy of current medical and behavioral treatment approaches. Reasons for the difficulty in maintaining behavior change will be presented. Treatment components for Behavior Choice Treatment will also be presented in detail along with case examples designed to illustrate key concepts. Behavior change in five key areas will be emphasized: nutrition, eating habits, physical activity, attitudes, and social support. An emphasis will be placed on reasonable goal setting and long-term management of the overweight/obese patient. A problem solving approach will be taken to generate discussion regarding implementation of program components in clinical practice settings. Participants will be expected to actively participate in small group discussion designed to generate a basic plan for implementing these strategies into specific practice settings (i.e. HMO, solo practice, academic setting). Prerequisite: this workshop is geared to the physician in primary care; there is no specific prerequisite knowledge of weight management or behavior therapy required.

Seminar #11**1:30 p.m.-4:30 p.m.*****eHEALTH TECHNOLOGIES FOR HEALTH BEHAVIOR CHANGE AND PROVIDER-PATIENT COMMUNICATION***

Tom Eng, V.M.D., M.P.H., EvaluMetrix LLC and eHealth Institute and Neal Sofian, Ph.D., The NewSof Group

eHealth is the use of emerging information and communication technology, especially the Internet, to improve or enable health and health care. Emerging eHealth technologies are being applied extensively in the area of health behavior change and communication.

It is important that application developers, users, and professional intermediaries understand the fundamentals of eHealth tools in this area. In this interactive session, the state of current technologies, eHealth tools, and multi-modal approaches and theories related to behavior change and provider-consumer/consumer-consumer communication will be reviewed. Various applications of technology to personalize content and build interpersonal support networks will be described. In addition, participants will engage in a team-focused design process to develop a behavior change or provider-consumer/consumer-consumer communication intervention using at least two modalities.

As a result of this session, participants will be able to:

- Identify emerging eHealth technologies and trends
- Describe how these technologies apply to behavior change, provider-consumer and consumer-consumer communication, and personalization
- Describe critical elements of and steps in the design process for developing behavior change and provider-consumer/consumer-consumer communication applications.

Seminar #12**1:30 p.m.-4:30 p.m.*****FACILITATING CHANGE IN CLINICAL PRACTICE: ACADEMIC DETAILING AND BEYOND***

Susan Swartz, M.D., M.P.H., Center for Outcomes Research; Judy DePue, Ed.D., M.P.H., Centers for Behavioral and Preventive Medicine, Miriam Hospital/Brown University; and Susanne Salem-Schatz, Ph.D.

The majority of behavioral and preventive interventions are delivered in primary care settings. Yet, medical practices are frequently not well set up to address such issues. Barriers include limited knowledge of effective interventions, lack of appropriate skills, belief that patients don't want the intervention, lack of reimbursement, limited resources and organizational support. A variety of strategies have been employed in research trials and in quality improvement efforts to facilitate clinical practice changes in medical offices. These include use of academic detailing, clinician feedback, peer comparison profiling, and revising office systems.

This seminar is intended for those currently conducting or wanting to conduct practice-based sessions to improve clinical practice. Presentations will review theoretical models and evidence on effectiveness of intervention strategies. Seminar discussions will also address logistical issues for practice recruitment and participation, methods to address organization dynamics, and a variety of outcomes with which to measure change. Using improvement in tobacco intervention as a model, the presenters will offer case examples, provide helpful and practical strategies, and discuss lessons learned. The session will be interactive and encourage sharing of experience from attendees. Specific objectives are:

- Review specific intervention strategies and effectiveness
- Identify strategies to enhance practice participation and provider motivation to change
- Examine practical approaches using comparative data feedback
- Identify outcomes to measure change

The first author is conducting practice interventions in Maine, and supported by AHRQ grant HS10510-01.

Seminar #13**1:30 p.m.-4:30 p.m.*****ENHANCING TREATMENT FIDELITY IN HEALTH BEHAVIOR CHANGE STUDIES: BEST PRACTICES AND RECOMMENDATIONS FROM THE BEHAVIORAL CHANGE CONSORTIUM***

Belinda Borrelli, Ph.D., Brown Medical School; Barbara Resnick, Ph.D., C.R.N.P., University of Maryland; Al Bellg, Ph.D., Rush-Presbyterian St. Luke's Medical Center; Gbenga Ogedegbe, M.D., Cornell University; Deborah Sepinwall, Ph.D., Brown Medical School; Denise Orwig, Ph.D., University of Maryland; and Susan M. Czajkowski, Ph.D., National Heart Lung, and Blood Institute

Treatment fidelity refers to several key methodological concepts and practices to enhance internal and external validity and reliability of a study. The Behavioral Change Consortium (BCC), comprised of 15 National Institutes of Health funded projects investigating mechanisms of health behavior change, established a Treatment Fidelity workgroup in order

to advance the definition and measurement of treatment fidelity in health behavior change studies. The seminar presenters are members of the workgroup. They performed a comprehensive assessment of treatment fidelity techniques used within the BCC and, coupled with existing models of treatment fidelity, designed a set of best practices and recommendations for enhancing treatment fidelity. The model of treatment fidelity includes: (1) design (e.g., is the study consistent with the underlying theory); (2) training (e.g., provider skill acquisition and maintenance); (3) delivery (e.g., was the intervention delivered as intended); (4) receipt, (e.g., did the participant understand the intervention); and (5) assimilation, (e.g., is the participant able to incorporate the new knowledge in their every day life). Seminar participants will learn about the theory and practice of treatment fidelity, and techniques to enhance treatment fidelity will be illustrated. The seminar will help participants to incorporate treatment fidelity into their ongoing studies and future research proposals.

Seminar #14**1:30 p.m.–4:30 p.m.*****DESIGNING, REVIEWING, AND USING EVIDENCE-BASED BEHAVIORAL MEDICINE (EBBM)***

Karina W. Davidson, Ph.D., Mount Sinai School of Medicine; C. Tracy Orleans, Ph.D., Robert Wood Johnson Foundation; Evelyn Whitlock, M.D., M.P.H., Kaiser Permanente Center for Health Research; Bonnie Spring, Ph.D., University of Illinois at Chicago; and Kimberlee Trudeau, M.A., CUNY Graduate Center

Evidence-based medicine is defined as “The conscientious, explicit and judicious use of current best evidence in making clinical decisions about the care of patients...integrating individual clinical care with the best available clinical evidence from systematic review” (Eddy, 2001). Although most clinical interventions in behavioral medicine are based on evidence, the current evidence-based medicine movement evaluates treatments according to strict, explicit criteria. This seminar is designed in three one-hour sections which address research, clinical practice, and review considerations of EBBM.

HOOR 1: Research Perspective. Designing and reporting EBBM Trials

Contribution to the growing evidence-based literature in behavioral medicine begins with well-designed and accurately reported clinical trials, and informative reporting

of methods for recruiting participants, randomization, blinding/masking, adherence to statistical guidelines, and documentation for interventions and other operations.

HOOR 2: Review Perspective. Methodological developments for EBBM Systematic Reviews

Participants will contribute their expertise to the development of a growing methodology on EBBM systematic reviews, partially through critiquing draft approaches and instruments. Special attention will be given to methodological issues related to participant characteristics, adherence, intervention specification and outcome determination.

HOOR 3: Clinical Perspective. Using EBBM in your practice

Review of literature to conduct one's work as a clinician can be daunting. Participants will learn to find and use evidence-based resources and how to integrate these into their current practice. Issues such as generalizability, feasibility, net benefit, and clinical significance will be discussed.

Seminar #15**1:30 p.m.–4:30 p.m.*****THE APPLICATION OF MIND/BODY MEDICINE TO WOMEN'S HEALTH ISSUES***

Alice D. Domar, Ph.D., Beth Israel Deaconess Medical Center and Harvard Medical School

Women report significantly more daily stress than men which is attributed to a number of issues including having more stressors in their lives, issues of perfectionism, and issues with guilt over self-care. Stress can lead to numerous symptoms including insomnia, headaches, gastrointestinal symptoms, as well as exacerbations in PMS, menopausal symptoms, and infertility. The clinical application of mind/body medicine has been successfully applied to both decrease stress in healthy women as well as reducing symptoms in individuals experiencing a woman's health condition.

The seminar will include not only a comprehensive description of the relationship between stress and women's health but will focus on the clinical application of mind/body medicine to women's health issues. Eight mind/body skills will be described in an experiential manner and the efficacy of this approach with women will be presented. Research on the application of mind/body medicine to infertility, PMS, and menopause will be described.