

Wednesday, March 24, 2004

9:00 a.m.-5:00 p.m.

**Seminar #1**

*State of the Art in Risk Perception Research*

*Michael Stefanek, Ph.D., National Cancer Institute; Neil Weinstein, Ph.D., Rutgers University; Linda Cameron, Ph.D., The University of Auckland; Kevin McCaul, Ph.D., North Dakota State University; Valerie F. Reyna, Ph.D., University of Arizona; Robert Croyle, Ph.D., National Cancer Institute; and William Klein, Ph.D., University of Pittsburgh*

Risk perceptions are a part of nearly every important theory purporting to explain why people act to protect their health. Persons attending this preconference should come to a better understanding of how people appraise their risk, the role that such risk perceptions play in self-protective health behaviors, especially in the cancer arena, and potent ideas about needed research concerning risk. The preconference will include five invited talks, with substantial time devoted to discussion following each presentation and a general discussion at the end of the day. The session will open with general introductions from Michael Stefanek, NIH, National Cancer Institute (NCI; a contributor to the preconference expenses). Neil Weinstein, Rutgers University, will then open the day's presentations with a discussion of the definition and measurement of risk perceptions and the ways that different measurement approaches influence conclusions about the links between risk and behavior. Next, Linda Cameron, The University of Auckland, will place the notion of risk in the larger theoretical context of self-regulatory processes. After a lunch (included in the preconference registration), Kevin McCaul, North Dakota State University, will discuss risk communication, and strategies for improving the acceptance of risk feedback. Valerie Reyna, University of Arizona, will take up a similar theme from the perspective of judgment and decision making, with an emphasis on fuzzy trace theory. Finally, Robert Croyle, NCI, will tackle the general topic of risk perceptions and health cognitions as they specifically relate to needed research in cancer prevention and control. At day's end, William Klein, University of Pittsburgh, will lead a panel discussion of the day's presentations in interaction with audience members.

*Funded in part by the Division of Cancer Control and Population Sciences (DCCPS), National Cancer Institute*

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

**Seminar #2**

*Motivational Interviewing in Health Promotion: Where Do We Go From Here?*

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

Motivational Interviewing (MI), originally developed for addiction counseling, has increasingly been applied in public health, medical and health promotion settings. In this seminar, we will review the impact of specific MI strategies such as deep reflective listening and eliciting positive change talk on health behaviors such as smoking, diet, physical activity and disease risk reduction. We will also practice strategies that constitute the spirit of MI, e.g., conveying a sense of partnership, respect, and empathy to facilitate client self-exploration as a step

towards change. Furthermore, we will explore participants' experiences in using MI in behavioral medicine and public health settings and discuss where the field needs to move to meet the changing needs of society. We will also brainstorm ways to provide ongoing training and mutual sharing among health care providers to advance the science and ensure high quality applications to new settings, populations and health behaviors.

This interactive, experiential seminar will provide advanced training in mastering deeper levels of reflective listening, eliciting positive change talk, and enhancing client self-efficacy. Additional goals are to generate new ideas for future research and health care practice that will enhance our understanding of the effective elements of MI, and to facilitate new collaborations and collegial relationships among MI users.

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

**Seminar #3**

*Keys to Successful Career Development: Getting Funded, Getting Published, and Other Tips from the Pros*

*Justin Nash, Ph.D., Brown University/The Miriam Hospital; William Gerin, Ph.D., Columbia University; Alan J. Christensen, Ph.D., University of Iowa; Susan Czajkowski, Ph.D., Jared B. Jobe, Ph.D., Peter G. Kaufmann, Ph.D., National Heart, Lung, and Blood Institute; Mike Micklin, Ph.D., National Institutes of Health; and Anthony Spirito, Ph.D., Brown University*

Understanding the keys to career development is critical for successfully building and maintaining a career in behavioral medicine. With the pressure to be productive right away, knowing how to create and prioritize professional opportunities is important. This full-day, two-session seminar provides the keys to developing a successful career and avoiding common pitfalls. The focus is on the practical tools of the trade, including the ins and outs of getting funded, getting published, building collaborative relationships, and managing competing professional demands. The seminar is geared to those at the earlier stages of career development. This includes junior faculty, postdoctoral and graduate level trainees, as well as clinicians seeking to increase their research involvement. Seminar presenters range from experts who are researchers, editors, and officers at major universities and the National Institutes of Health to professionals in the midst of establishing a career. One-half of the seminar will be devoted to the keys to managing competing professional demands, building and maintaining collaborative relationships, and getting your work in print. The other half will be devoted to grantwriting and the strategies to getting funded from NIH and other funding agencies.

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

**Seminar #4**

*The Next Big Step: Translating Specialty Behavioral Medicine Interventions to Primary Medical Settings Across the Life Span*

*Christopher L. Hunter, Ph.D., Scott A. Schinaman, Ph.D., Jeffery L. Goodie, Ph.D., Alan L. Peterson, Ph.D., and Anne C. Dobbmeyer, Ph.D., Wilford Hall Medical Center*

One of the challenges for behavioral medicine specialists over the next 10 years will be the adaptation of evidence-based behavioral medicine to primary medical settings. Medical

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providers, who often have little or no behavioral medicine expertise, are by default, treating health-risk behaviors and psychosocial aspects of illness in pediatric, family medicine, women's health, and internal medicine clinics. Translating interventions for use in these medical clinics is crucial if we are going to meet the population's needs, as tertiary care alone will not stem the tide. This seminar will focus on the crucial aspects of adapting interventions to these unique settings. Areas covered will include: 1) overview of models for working in primary medical settings; 2) instruction on brief assessments and interventions, emphasizing collaboration between the primary medical manager, patient, and behavioral medicine professional; 3) managing unique challenges when working with children, adolescents and their families; 4) minimal contact and motivational interventions for weight management and tobacco cessation; 5) early identification, intervention and management of chronic disease (diabetes), and medical problems (chronic pain); 6) brief treatment of insomnia; 7) women's health; and 8) lessons learned from behavior medicine practitioners working in primary medical care settings. Instruction will include a brief review of research, a discussion of how interventions are adapted to the unique challenges in primary medical settings, and review of real world video demonstrations. Lessons learned in practice will be discussed in an interactive roundtable format. Participants will be given several guidelines and patient education tools they can adapt to their work settings. This seminar is likely to be especially relevant to psychologists, social workers, nurses, and health educators.

**2:00 p.m.-5:00 p.m.****Seminar #5**

*Spinning a New Web: Translating Theory to Practice for Web-Based Health Promotion Tools*

*Lisa A. Sutherland, Ph.D. and Beth Fowler, M.S.I.S., University of North Carolina at Chapel Hill; Beth Bock, Ph.D. and Amanda Graham, Ph.D., Brown University*

It is estimated that 80% of the 140 million U.S. adults who are online have utilized the Internet to look for health information. Health and medical websites are popping up at an exponential rate, and in September 2003 using the search terms "internet and health" MEDLINE indexed over 5,200 research articles compared to 1,800 articles in 2000. Although a number of successes are reported in the literature, there have also been many obstacles and shortcomings to disseminating effective, widely-adopted programs. Failed interventions and applications often lack a theoretically-based framework to inform development, lack target audience involvement in the development phase, and inadequate process and/or evaluation measures and criteria. An area of opportunity for health care professionals and developers is the translation of science to practice to enhance the end-user experience and dissemination of online applications. The goal of this seminar is to provide an interactive forum for sharing successes and shortcomings of development and dissemination, and to create a 'hands-on' learning environment to teach knowledge and skills needed to develop and evaluate online applications. The aims of this seminar are threefold: 1) discuss the conceptualization and design phase, focusing on issues specific to diverse target audiences and creating a theoretical framework to inform development and evaluation; 2) introduce the practice of usability testing in the process evaluation phase and provide interactive role plays to demonstrate

skills and procedure; and 3) discuss the challenges of evaluating e-Health programs and provide universal evaluation criteria that can be used to either develop a program or assess an existing online program.

**2:00 p.m.-5:00 p.m.****Seminar #6**

*Building Treatment Fidelity into Health Behavior Change Research: Lessons Learned and Best Practice Guidelines From the Behavior Change Consortium*

*Belinda Borrelli, Ph.D., Brown Medical School; Barbara Resnick, Ph.D., CRNP, University of Maryland; Albert Bellg, Ph.D., Appleton Heart Institute; Gbenga Ogedegbe, M.D., Cornell University; Deborah Sepinwall, Ph.D., Brown Medical School; Denise Orwig, Ph.D., University of Maryland; Denise Ernst, M.A., University of New Mexico; and Susan 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 Behavior 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 presenters are members of the workgroup. The workgroup developed a set of best practices and guidelines for treatment fidelity based upon prior research in this area and the experiences of the BCC. The guidelines outline practical treatment fidelity strategies across five areas: 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) enactment, (e.g., is the participant able to incorporate the new knowledge in their every day life). This hands-on seminar will describe the theory and practice of treatment fidelity as well as offer strategies to enhance treatment fidelity of the ongoing studies and research proposals of workshop attendees. An assessment tool for evaluating the degree of treatment fidelity will be presented.

**2:00 p.m.-5:00 p.m.****Seminar #7**

*Improving Our Science Through Better Data Analysis: A Brief Introduction to Seven Key Ideas in Regression Modeling*

*Michael A. Babyak, Ph.D., Duke University Medical Center*

A number of important advances have been made recently in the area of developing and testing multivariable regression-type models. These advances are relevant to many of the analytic approaches taken in behavioral medicine research studies, including multiple linear regression, logistic regression, and survival models. This workshop will review some of the key ideas that have been developed in the philosophy of statistical modeling in the past decade. Specific topics will include: 1) the prerequisites for a replicable model; 2) the pitfalls of traditional univariate pre-screening and automated selection of candidate predictors; 3) the dilemma between over- and under-adjustment; 4) the many dangers of dichotomizing continuous variables; 5) transformations and modern curve fitting, including cubic linear splines; 6) penalization and

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shrinkage techniques; and 7) bootstrap validation as a superior alternative to split-half replication. The workshop will use real world data and simulation studies to illustrate key ideas in each area. This workshop will overlap to some extent with my prior workshops in this area, but with greater emphasis on application of these techniques using dedicated software. The presentation will be non-technical and is aimed in particular toward "non-statisticians."

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

### **Seminar #8**

#### *Biobehavioral Management of Refractory Migraine and Tension-Type Headache: A Case-Based Approach*

*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*

Assisting patients to better manage the consequences of refractory recurrent head pain is a common undertaking for practitioners of behavioral medicine. The principles and techniques involved in the biobehavioral management of head pain are well established and enjoy solid empirical support. Nevertheless, the management of patients with refractory migraine and tension-type headache can prove substantially challenging even for very experienced clinicians.

This seminar is substantially revised and updated relative to previous SBM seminars by these presenters. It is advanced in scope, applied in focus, and designed to foster in-depth discus-

sion of the clinical issues involved in the behavioral management of patients with refractory migraine and tension-type headache. The format will be lecture/discussion with ample opportunities for case-based learning and participant interaction. The seminar will begin with a slide-based overview of the current issues in headache assessment and treatment that is firmly grounded on the relevant empirical literature. This overview will provide a foundation for the case-based discussion of issues involved in treatment planning and clinical decision-making that will follow. Case material addressed will include a combination of illustrative cases prepared by the seminar leaders, as well as case material provided by seminar participants.

Ample handouts 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 through overview and case discussion to include: headache pathogenesis, diagnosis and nosology, psychological/behavioral factors in headache, risk factors for refractory headache, efficacy of standard nonpharmacologic and pharmacologic headache therapies, cost-effective behavioral treatment strategies, and recent headache management guidelines initiatives.