OFFICIAL ABSTRACT SUBMISSION PROCESS FOR THE
31ST ANNUAL MEETING & SCIENTIFIC SESSIONS OF THE
SOCIETY OF BEHAVIORAL MEDICINE

The 2010 Annual Meeting & Scientific Sessions represents the 31st meeting of the Society of Behavioral Medicine (SBM). The meeting theme is Behavioral Medicine: Building for the Future. The 2010 Program Committee, on behalf of the Society of Behavioral Medicine, welcomes your abstract submission for review.

Submission Site Availability
The online submission site will open at 8:00 am ET, July 28, 2009. To be considered for presentation, all abstracts must be submitted electronically via the online submission site by 11:59 pm ET on September 17, 2009.

Special Abstract Instructions
Paper and Poster abstracts submitted for presentation must be based on empirical research and report actual (not promised) results along with relevant statistics and significance values. In contrast, abstracts for informational sessions such as, seminars, workshops, and symposia might include empirical and/or non-empirical contributions.

Prior Publication Policy
Papers that have been published or presented elsewhere prior to the time of presentation at the 2010 Annual Meeting & Scientific Sessions may not be submitted for consideration by SBM.

Thematic Submissions Encouraged
Submissions are especially encouraged that reflect the theme for the 31st Annual Meeting & Scientific Sessions: “Behavioral Medicine: Building for the Future.” The theme includes the following thematic areas: New Career Trajectories and Mentoring (e.g., career opportunities outside academia; new models of mentorship); New Technology (e.g., how can new technologies and social networking programs be used in health behavior change?); Basic and New Knowledge (e.g., a return to basic psychological principles and the development of new methodologies); Health Disparities and Ethical Issues (e.g., new scientific and policy efforts to reduce health disparities; ethical issues associated with personalized medicine).

PRESENTATION FORMATS AT THE 31ST ANNUAL MEETING & SCIENTIFIC SESSIONS OF THE SOCIETY OF BEHAVIORAL MEDICINE

The 31st Annual Meeting & Scientific Sessions of the Society of Behavioral Medicine feature a variety of formats including Poster, Panel Discussion, Papers, Seminars and Symposia. Descriptions of each format follow below.

Posters allow presenters to discuss their research with interested colleagues for 90 minutes in an informal setting. Poster submissions judged by the Program Committee to be especially original and significant will be highlighted as Citation Posters.
Rapid Communication Posters offer the opportunity for presentation of late-breaking findings in the field of behavioral medicine.

Please note: Posters are a very important and essential part of the SBM Annual Meeting. They are a great way for researchers to discuss their work with colleagues. The Society of Behavioral Medicine views Poster Presentations as important as Paper Presentations.

Panel Discussions are hour-long sessions designed to allow for discussion amongst presenters as well as provide a forum for interaction with session attendees.

Papers clustered around common themes will be presented for 18 minutes each (15 for presentation and 3 for discussion). Paper submissions judged by the Program Committee to be especially original and significant will be highlighted as Citation Papers.

Seminars are 2 hour and 45 minute sessions held on Wednesday (April 7, 2010). They feature presentations by up to three speakers who emphasize the theory and application of practical skills.

Symposia examine important issues from a variety of perspectives. These sessions last 90 minutes during which time alternative solutions, interpretations, and points of view on a body of knowledge within the field are presented and debated. Symposia that include presenters from different disciplines and include cross-cutting themes relevant to behavioral medicine as well as the Program Tracks are strongly encouraged. A symposium typically includes one chair, three presenters, and one discussant. The Chair can serve as one of the three presenters.

PROGRAM TRACKS
Corresponding authors are asked to select one track from the list below that best describes their abstract submission.

- Adherence
- Behavioral Medicine in Medical Settings
- Biological Mechanisms in Health and Behavior Change
- Complementary and Alternative Medicine
- Diversity Issues
- Environmental and Contextual Factors in Health and Behavior Change
- Health Communication and Technology
- Lifespan
- Measurement and Methods
- Population Health, Policy and Advocacy
- Prevention
- Psychological and Person Factors in Health and Behavior Change, including
  - Obesity
  - Physical Activity
  - Substance Abuse
  - Sexuality/Sexual Risk Behaviors
  - Other as defined by the submitter
  - Quality of Life
- Spirituality
- Translation of Research to Practice
DESCRIPTION OF TRACKS

Adherence
Adherence has been described as a patient’s tendency to follow medical recommendations. Non-adherence can lead to unnecessary disease complications, disease progression (including premature death), reduced functional abilities and quality of life, as well as substantial costs to the health care system. Abstracts that address etiologic factors (person, environmental, contextual) of non-adherence, measurement and methodological issues related to adherence, interventions designed to prevent or to remediate adherence problems, and examinations of theoretical models of adherence are appropriate for this track.

Behavioral Medicine in Medical Settings
Recent changes in medical practice have placed greater emphasis on primary health care. In order to have optimal impact in the changing health care system, behavioral health professionals must function effectively in this context. Abstracts that address psychological disorders as they arise in a medical setting and behavioral treatments for chronic illness are appropriate for this track. Abstracts with a focus on assessment and treatment of co-morbid psychiatric and medical conditions; consultation and collaboration with physicians; and cultural and ethical-legal concerns related to practicing in medical settings are appropriate for this track.

Biological Mechanisms in Health and Behavior Change
Abstracts that have a primary focus on bio-behavioral mechanisms and/or physiological risk factors of illness and disease. Investigations of the clinical and/or biological changes associated with these factors are encouraged. Specifically, submissions in the areas of psychoneuroimmunology (PNI), psychophysiology (e.g., cardiovascular reactivity), and psychoneuroendocrinology are appropriate for this track.

Complementary and Alternative Medicine and Spirituality
Abstracts that address mechanisms of health and illness and interventions that generally are outside conventional Western medical/psychological approaches are appropriate for the Complementary and Alternative Medicine Track. Interventions might include, but are not limited to, acupuncture, meditation, art therapy, Qi Gong, botanicals, special diets, or therapeutic touch.

Diversity Issues
Abstracts that illustrate the impact of culture, race, ethnicity, socioeconomic status, gender, sexuality, and other social factors on health and illness are appropriate for the Diversity Issues Track. Investigations of proposed determinants and biological mechanisms of health and illness, as well as studies describing novel approaches to prevention and intervention are relevant to this track. Studies that describe innovative approaches to the study of disparities at the individual or population level are of particular interest.

Environmental and Contextual Factors in Health and Behavior Change
Abstracts that address the relations between health and the environment are appropriate for the Environmental and Contextual Factors in Health and Behavior Change track. Abstracts may address the contexts in which psychosocial and behavioral interventions are delivered (e.g., family, workplace, schools, community-based agencies, health systems); the synergistic ways in which interpersonal, socio-cultural, physical, environmental, and systems factors affect health and well being; political, economic, and environmental determinants of health; and social and environmental factors implicated in the etiology, prevention, and treatment of a broad spectrum of health behaviors and illnesses.
Health Communication and Technology
Abstracts that focus on the impact of information and communication technology on health behavior outcomes and processes are appropriate for the Health Communication and Technology Track. Abstracts that address the use of print, phone, computer, Internet, and personal digital assistants (PDA) are appropriate for this track. Studies may address the use of these technologies by patients and health care providers, as well as the design, implementation, and evaluation of behavior change interventions delivered through advanced technologies.

Lifespan
Abstracts describing relevant research and clinical programs that focus on behavior change across or at specific periods or phases of the lifespan are appropriate for the Lifespan Track. This track is interested in abstracts that explore the ways in which individuals learn and practice health-promoting activities during specific time periods from cradle to grave, and the facilitation of healthy lifestyles over time. Abstracts that focus on illness and related behaviors at specific developmental time-points or over time would also be appropriate for this track. Two types of abstracts should be submitted to this track: 1) submissions with a focus on a particular age group that address factors relevant to health, illness, or behavior specific to that age group; or 2) submissions with a focus on health and behavior over time, or across age- or developmental-periods.

Measurement and Methods
Abstracts that focus on measurement or methodological issues related to behavioral medicine topics are appropriate for the Measurement and Methods Track. Relevant to this track are submissions that involve scale development, application of measurement techniques, or statistical approaches and applications. The focus of submissions to this track should be on the measurement issues or methodological techniques.

Population Health, Policy, and Advocacy
Abstracts that focus on health and behavior of large segments of the population are appropriate for the Population Health, Policy, and Advocacy Track. Studies or programs whose results would apply to a significant percentage of the population are appropriate for this track. The application of the results to large segments of the population is a more relevant factor in submitting to this track than is the size of the study’s participant pool. In particular, abstracts that include policy implications, that involve behavioral medicine in the political process, or that report outcomes at the population level (e.g., cost-effectiveness) are appropriate for this track. Finally, approaches and programs that involve all levels of advocacy are of particular interest to this track.

Prevention
Abstracts submitted to the Prevention Track should provide data from research that targets primary or secondary prevention health behaviors. Examples include, but are not limited to, assessment and/or intervention studies of health promoting/risk reducing behaviors (e.g., “healthy” eating behaviors, sun safe behaviors, smoking prevention, etc.) as well as of screening/early detection behaviors (e.g., adherence with self- or professionally delivered screening recommendations, etc.)

Psychological and Person Factors in Health and Behavior Change
Abstracts submitted to this track should focus on the relationship between psychological factors and health, health behaviors, and behavior change. Psychological and person factors may include motivation, emotion, cognition, learning, risk perception, information processing, personality, and coping. Abstracts that address these factors in a particular age group (e.g., children, older adults) or across age- or developmental-periods should be submitted to the Lifespan Track. Likewise, studies whose results may apply to a large segment of the population should be submitted to the Population Health, Policy, and Advocacy Track.
Quality of Life
Quality of life has been defined as the degree to which the expected physical, emotional, and/or social well-being of an individual is impacted by treatment for a medical condition or the condition itself. Abstracts describing research on quality of life are appropriate for this track. Submissions may include documentation of quality of life in persons with various medical conditions, interventions to improve quality of life, and predictors of quality of life (e.g., psychosocial, contextual, environmental.)

Spirituality
Abstracts that describe spiritually- or religiously-oriented processes, mechanisms, or interventions related to health and illness are appropriate for this track.

Translation of Research to Practice
Submissions to this track should describe quantitative and/or qualitative studies that focus on the mechanisms underlying the successful dissemination of research findings into ‘real-world’ practice. Although not a comprehensive list, data from demonstration, feasibility, effectiveness, and participatory studies would be highly suited for this track. Also appropriate for this track are abstracts that examine the reach and effectiveness of health behavior interventions, as well as setting level variables that may inhibit or facilitate delivery.
SUBMISSIONS STEPS AND IMPORTANT GUIDELINES

Abstract Submission
Opens: 8:00 am ET, July 28, 2009
Closes: 11:59 pm ET, September 17, 2009

Rapid Communication Posters
Opens: 8:00 am ET, November 28, 2009
Closes: 11:59 pm ET, January 05, 2010

Abstracts for the Society of Behavioral Medicine 31st Annual Meeting & Scientific Sessions need to be submitted according to the instructions that appear in this Call for Abstracts. ONLY those abstracts submitted via the official SBM abstract submission site will be considered.

Once you arrive at www.sbm.org, navigate to the 31st Annual Meeting & Scientific Sessions page and click on the abstract submission link. All abstracts submitted via the official site will be forwarded to SBM’s contracted vendor, ScholarOne. Upon receipt of your submission, ScholarOne will issue an e-mail confirmation to the submitting author. Authors can expect to receive the e-mail confirmation of their submission within 48 hours (or two business days) after submission. If you do not receive a confirmation email from the abstract system within 48 hours of submitting your abstract contact info@sbm.org.

All abstract submissions will be peer reviewed and may be submitted as an oral presentation or a poster presentation. All accepted abstracts will be published in the Annual Meeting Supplement issue of the Annals of Behavioral Medicine, the official journal of SBM. The supplement will serve as the official abstract publication for the 31st Annual Meeting & Scientific Sessions of the Society of Behavioral Medicine.
Important Participation Guidelines – Please Review

- Paper/Poster Submissions Please Note: Members may submit abstracts as “Poster Only”, “Paper Only”, or “Paper or Poster”. Members are encouraged to submit using the “Paper or Poster” option since all papers submitted under this option that are not selected for oral presentation will alternatively be considered for poster presentations.
- Each abstract should represent complete and original results. Submitting multiple abstracts in which the same data have been analyzed in different ways, or in which a study is subdivided into small sub-studies is prohibited and will result in those abstracts being rejected. In addition, this action may result in the individual abstract authors being prohibited from submitting abstracts for future SBM Annual Meetings.
- Abstracts submitted for presentation must be based on empirical research and report actual (not promised) results along with relevant statistics and significance values.
- Papers that have been published or presented elsewhere prior to the time of presentation at the 31st Annual Meeting & Scientific Sessions may not be submitted for consideration by SBM.
- Authors are limited to participation as “Presenter” in a maximum of three (3) abstract submissions.
- Presenters of accepted abstracts must pre-register for the Annual Meeting & Scientific Sessions by the early-bird deadline of March 10, 2010.
- Each presenting author is responsible for his/her registration fee(s) as well as travel and housing costs.
- Presenters who are unable to attend the Annual Meeting & Scientific Sessions should arrange for another individual to present the paper/poster in question. If changes to your presentation are necessary, please notify us at the SBM national office (414) 918-3156.
- Abstract presenters who withdraw a presentation may be denied the right to submit an abstract for the 2011 SBM Annual Meeting. The only exceptions to this policy are 1) absence due to weather related issues that hinder a presenter’s travel to the meeting, 2) absence due to work related emergency, or 3) absence related to personal injury or family health emergency. Please Note: Miscalculation of travel costs by the presenter does not qualify as an acceptable reason to withdraw one’s abstract. In the event this occurs, no refunds will be given.
- All abstract submissions must be in English. All presentations based on accepted abstract submissions must be made in English.

Abstract Acceptance Notification
All submitted abstracts will be notified of acceptance or regrets via e-mail on December 1, 2009. If you DO NOT receive an e-mail notification regarding your abstract submission on December 1, 2009, please send an e-mail to info@sbm.org.