

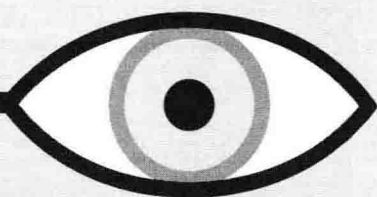
Health Psychology

Karen Rodham

**PALGRAVE
INSIGHTS IN
PSYCHOLOGY**

SERIES EDITORS:
**NIGEL HOLT
& ROB LEWIS**





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First published 2010 by
PALGRAVE MACMILLAN

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Palgrave Macmillan in the US is a division of St Martin's Press LLC,
175 Fifth Avenue, New York, NY 10010.

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ISBN: 978–0–230–24945–5

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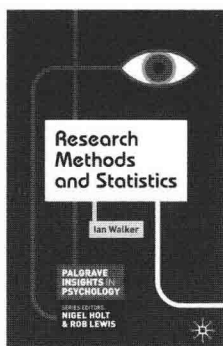
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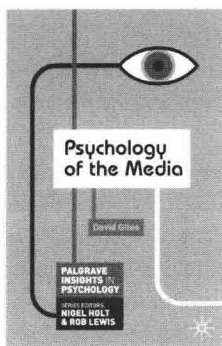
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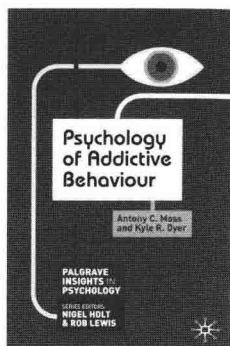
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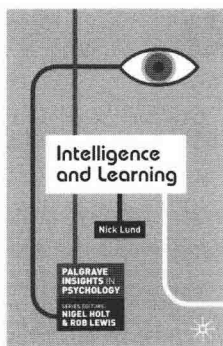
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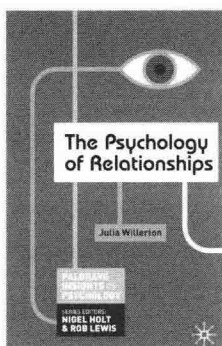
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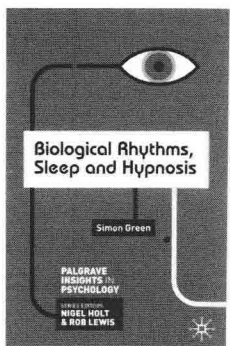
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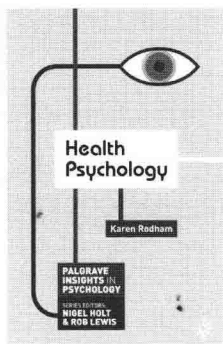
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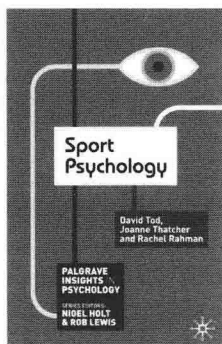
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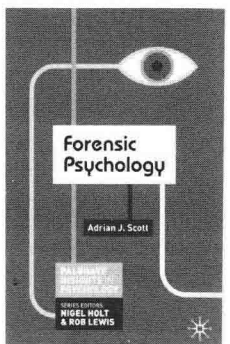
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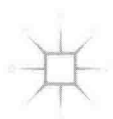


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For David John Gadd, my lovely Dad

Note from series editors

Health psychology has its origins in a number of different areas including sociology, medicine and the politics of policy-making. Karen Rodham draws all these areas into a single book with style.

Karen was chosen to write this book in the series because of the special demands that this title makes. We needed a writer who would be able to produce a book that would be relevant to a wide range of readers. She has not disappointed. Karen is blessed with a personality that is easy-going while remaining focused and this comes through in her book. She has managed to maintain a levity and energy throughout and we found her book extremely informative as well as surprising in places (watch out for the Zombies).

- *If you are reading this book as a preparation for university study* you will find material you will be studying here. Karen works, researches and publishes in health psychology and is well placed to translate the material into a form you'll find useful. Existing books can feel dry and disjointed but Karen has managed to produce a coherent and satisfying read.
- *If reading this book while at university* you are probably on one of the many courses that touch upon health psychology, and are in training within nursing, psychology, sociology, midwifery, or medicine to name but a few degree routes. Karen is aware of how her subject finds a home on many courses and has had this in mind when writing the book.
- *If you are reading the book as part of a pre-university course such as an A-level* you may well have found some of the material in this book

in your A-level textbook. This book includes the material you need and more and we hope it whets your appetite for further study. The Reading Guide at the end of the book tells you where different A-level specifications appear.

The range of areas in which health psychology finds a home are numerous and can include nursing, medicine, midwifery, social policy and social work as well as psychology and other related disciplines. Karen has managed to pull together material from a range of sources that will make the book an indispensable addition to many bookshelves. Whether reading the book as support for other books you read on your course, or whether reading this as the main text, we are confident that it will be useful and informative. We are very pleased to add it to our series.

NIGEL HOLT AND ROB LEWIS
Series Editors

Preface

This book is not a comprehensive description of the whole of health psychology but is an overview of some of the key issues within the discipline. In writing this book I have attempted to take on the role of 'tour guide'. What I mean by this is that usually when you take a 'package' holiday, on arrival there is a welcome meeting. At this event, it is the task of the chirpy holiday representative to give an overview of the different excursions available to you in the hope that they will whet your appetite enough for you to want to visit these places. My role is rather similar, in that I have a short amount of space in which to provide you with information so that you gain insight into the profession and discipline of health psychology. I hope that in sharing my enthusiasm for this discipline you will be tempted to delve deeper and read more about each of the topics highlighted.

Health psychology is concerned with the study of psychological processes in health, illness and healthcare (Kaptein and Weinman, 2004). Health psychologists study the behavioural factors that are associated with staying healthy, as well as exploring how people who are ill can be helped to adapt to, or recover from, their illness. The focus of the health psychologist is very much in the realm of physical disorders, for example chronic illness, cancer, pain, stress, smoking cessation and weight loss.

Many people confuse health psychology with clinical psychology, and it is perhaps useful to briefly highlight the differences between the two disciplines. Whilst clinical psychologists focus on mental health problems, for example phobias, anxiety disorders and depression, the

focus of health psychology is on physical disorders. Specifically, health psychologists apply psychological research and methods to four key areas: the prevention and management of illness; the identification of psychological factors contributing to physical illness; the promotion and maintenance of health; and the improvement of the healthcare system and the formulation of health policy.

The prevention and management of illness

The prevention and management of illness focuses on those who have been identified as being potentially at risk of disease and aims to detect symptoms at a stage early enough that the development of illness can be eliminated or slowed down through the implementation of psychological interventions.

The identification of psychological and behavioural factors contributing to physical illness

Health psychologists regard the relationship between psychology and health as direct and indirect. In other words, it is recognized that the way in which a person might experience their life can have a direct impact on their body, which in turn can have an effect on their health. Thus, feeling stressed can impact directly on the body's physiological processes. In contrast, an indirect relationship is represented by the way in which a person's behaviour can be influenced by the way they think; it is engaging in this behaviour, for example drinking/eating too much, which then impacts on their health. Health psychologists have researched many different illnesses and in so doing have identified the psychological factors that might contribute to the development or maintenance of illness. For example, coronary heart disease has been related to behaviours such as smoking, food intake and lack of exercise, whilst some cancers are linked to diet, smoking, alcohol and failure to attend for screening or check-ups (Ogden, 2007: 5).

The promotion and maintenance of health

The promotion and maintenance of health is directed towards healthy individuals in order to raise awareness of the ways in which health can be protected and maintained. This focus is usually on understanding and changing health behaviours.

The improvement of the healthcare system and the formulation of health policy

Health psychologists are also concerned with understanding the impact of the healthcare system and health policy on our behaviour. Although research in this area is not so abundant as in the other three, it is nevertheless an important aspect of the role of health psychologists. As such, the UK Division of Health Psychology of the British Psychological Society coordinates a database of expert health psychologists who are able to respond to government initiatives to ensure that the profession's concerns are addressed and included in new health-related policies.

Overview

Throughout the book, you will find that key terms have been emboldened to indicate that you will find them in the Glossary at the back of the book, which gives definitions of some of the more technical terms I have used.

This book is intended to provide you with an insight into health psychology. It is structured into three sections. The first section, Health Behaviour, contains three chapters. Chapter 1 considers what it means to be healthy and presents an overview of what health behaviours are and how they can be measured. Chapter 2 explores the variety of factors which are thought to influence our health behaviours, and Chapter 3 describes the different models that have been developed and explains how these might be used to predict behaviour change.

The second section, Health Promotion, consists of two chapters. Health promotion is one of the means by which health psychologists attempt to encourage behaviour change. Chapter 4 focuses on defining health promotion and explaining the different approaches that have been taken when implementing health promotion interventions. Chapter 5 explores the ways in which health promotion interventions are planned and evaluated. In particular, the factors which can influence the success (or otherwise) of interventions are discussed, along with a description of how we can know whether or not a health promotion intervention has had the desired effect.

The third and final section, Examples of Health Issues, consists of four chapters which cover two major topics in health psychology: stress and eating behaviour. Chapter 6 explains what stress is and outlines the

physiological systems through which stress is thought to operate. We also explore how stress can be measured and what its impact on us might be. Chapter 7 examines how we might best cope when we are stressed. A variety of coping styles and strategies are covered and the different variables that influence the relationship between stress and our response to it are explored. Chapter 8 considers eating behaviour. What we eat and how we eat plays an important role in our long-term health and in addition to a focus on dieting, this chapter explores biological, evolutionary and psychological explanations for eating behaviour. Lastly, Chapter 9 explores specific eating disorders, including anorexia nervosa, bulimia nervosa and the problem of obesity.

Lots of people have helped me to produce this book. Having already thanked them in person, I would like to take this opportunity to formally thank them in writing – you know who you are. Thank you.

Karen Rodham
December 2009

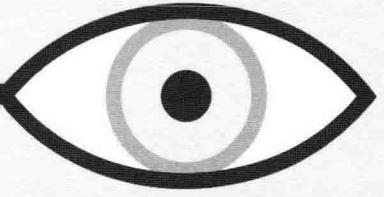
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Section One

Health Behaviour

- 1 What is health behaviour?
- 2 Influences on health behaviour
- 3 Explaining health behaviour

Chapter 1

What is health behaviour?



Introduction

Health behaviours are usually thought of as being actions we engage in with the intention of maintaining, attaining or regaining good health. However, they can also refer to actions we take in order to prevent illness. Health behaviours are extremely important because it is through encouraging them that we can enhance our opportunity to experience good health.

In this chapter, we will examine:

- What it means to be healthy
- What health behaviour is
- How we can measure health behaviour



What does it mean to be healthy?

In order to answer the question 'What does it mean to be healthy', it is necessary to first consider how 'health' is defined. The concept of health is extremely broad and embodies many different meanings. As noted by Naidoo and Wills (2003), there are commonsense views of health which are otherwise known as 'lay' or non-professional concepts of health. These are often 'passed down through generations as part of a common cultural heritage' (Naidoo and Wills, 2003: 6). Popular definitions of health were identified by Blaxter (1995) and include the following:

- *Health as not ill* – a person considers themselves to be healthy if they are not experiencing physical symptoms and rarely visit the doctor
- *Health, despite disease* – a person considers themselves to be healthy if they feel well, in spite of being diagnosed with a disease
- *Health as physical fitness* – a person considers themselves to be healthy if they are physically fit
- *Health as psychosocial wellbeing* – a person considers themselves to be healthy if they feel they are able to ‘live life to the full’ or if they ‘feel happy’
- *Health as function* – a person considers themselves to be healthy if they are able to do the things they normally engage in.

The way in which people explain and understand health can have important ramifications for their subsequent behaviour. Thus, a person who perceives health as being the absence of symptoms may be more likely to seek health advice if they begin to experience symptoms, whereas an individual who perceives health in terms of function may not seek health advice until their symptoms begin to impact upon their ability to engage in their usual activities.

Furthermore, the way in which we interpret health will be influenced by our cultural heritage. For example, Greenhalgh and colleagues (1998) explored the experience of diabetes in British Bangladeshis. In their paper, they note that ‘successful treatment of diabetes requires that we understand the lifestyle, beliefs, attitudes, and family and social networks of the patients being treated’. They reported that a commonly cited cause of diabetes among the 18 participants was ‘absence of sweating due to the cold British climate’, along with a belief that the diabetes would resolve if they were to return to a hot country. Greenhalgh and colleagues (1998) highlight the importance for health professionals to be aware of lay explanations for health (and illness) and suggest that treatment and education should be tailored to incorporate and build on the beliefs held. This is because health advice may be ignored if it runs counter to lay beliefs.

In terms of professional explanations of health, the definition which is most often used is that from the World Health Organization (1946):

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

Curtis (2000) suggests that such a definition takes both a positive view of health, suggesting that health is concerned with the presence of a