

Health Psychology

Handbook 2021



THE UNIVERSITY OF
AUCKLAND
Te Whare Wānanga o Tāmaki Makaurau
NEW ZEALAND

**MEDICAL AND
HEALTH SCIENCES**
SCHOOL OF MEDICINE

Health Psychology

Background

This field covers areas such as how individuals cope with illness and chronic disease, understanding and promoting healthy behaviours, psychological influences on the development of disease states, understanding and improving adjustment in health-care settings, patient-practitioner communication, adherence to treatment, determinants of health-related behaviours (diet, exercise etc), and understanding how individuals make sense of and react to health screening, symptoms and illness. The impetus for the development of Health Psychology has stemmed from the fact that many of these areas of research and practice have not previously been directly addressed by medicine. The field has been bolstered by the usefulness of psychological models in explaining health-related behaviours and developing effective interventions in areas that have been problematic in the health field. There is increased recognition of the need for health services to pay more attention to the psychological aspects of medical problems and to improve health care interventions. Increasingly, health professionals are dealing with chronic illness, psychosomatic illness, ageing and the problems of living with disability. All of these areas have major Health Psychology components. The University of Auckland is one of the first universities worldwide to offer a practitioner qualification in Health Psychology. Students who complete a Masters in Health Psychology together with the Postgraduate Diploma in Health Psychology are eligible to apply for registration with the New Zealand Psychologists Board. Graduates of the PGDipHealthPsych are currently working in hospital-based respiratory and diabetes services, rehabilitation services and pain clinics. Some are working in primary care for private health providers. Some graduates are also in private practice. Postgraduate study

in Health Psychology can also lead to research and health promotion careers within university, government, or hospital environments. Recent structural changes in the administration of health services in New Zealand have created a greater need for researchers well-versed in the health field to evaluate the benefits and liabilities of particular health service programmes and outcomes. At present there is a lack of skilled researchers to conduct these evaluations. The continued push for cost containment and justification will also draw health providers into developing more effective and carefully assessed treatment programmes from primary through to tertiary services. A number of our graduates are currently working in research positions in New Zealand and overseas.

Health Psychology facilities

There are excellent facilities and resources for teaching and research in Health Psychology on the Medical and Health Sciences Campus of the University of Auckland. The Medical and Health Sciences Campus has close proximity and contact with medical institutions throughout the region. The campus also has ready access to clinical populations of special interest to Health Psychology, such as oncology services, cardiac services, neurology, obstetrics and gynaecology, specialist pain services and other tertiary and specialty centres.

These features are complemented by the existence of many other relevant health and exercise related resources, including the School of Population Health, Occupational Medicine, Centre for Health Services Research and Policy, Department of Exercise Science, Adidas Sports Medicine, Audiology, and Speech Language Therapy.



Postgraduate Studies in Health Psychology

Research-based programmes at masters and doctoral (PhD) levels are available. In addition, there is a Postgraduate Diploma in Health Psychology (PGDipHealthPsych), graduates of which can apply for registration with the New Zealand Psychologists Board. Entry into all programmes is competitive and approximately 12-14 students are accepted into the basic Master of Health Psychology programme each year.

Master of Health Psychology

The Master of Health Psychology is offered by the Faculty of Medical and Health Sciences. The programme is taught by Health Psychology researchers working in the Department of Psychological Medicine at the Grafton Campus.

The programme is designed to give students a strong background in the theoretical, methodological and practical applications of Health Psychology. The courses aim to produce graduates with sound knowledge of health psychology and high quality research skills, who are able to design and carry out effective health psychology research and interventions in community and health-care settings. They will be able to evaluate the effectiveness of health intervention programmes using sophisticated methodological approaches in the health area.

University admissions and enrolment

Entry into the Master of Health Psychology programme is limited and applications for entry close 1 December. The minimum requirement for entry is a Bachelor of Science or Bachelor of Arts degree with a major in Psychology. A research methods course such as PSYCH 306 from the University of Auckland or an equivalent is normally expected for entry into the programme. Students who have completed the Bachelor of Health (Health Psychology) from Victoria University are also eligible for our programme. There is an interview selection process for the Master of Health Psychology; the interviews are held in early December.

Students interested in applying for in the Master of Health Psychology need to complete an online application via Student Services Online AND submit two letters of recommendation, a personal statement and current CV.

www.auckland.ac.nz/applynow

General postgraduate enrolment information is available from Faculty of Medical and Health Sciences Student Centre.

The Student Centre

Building 503, Ground Floor
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85 Park Road, Grafton, Auckland

Phone: +64 9 923 4888

Email: fmhs@auckland.ac.nz

Open: 8.30am-4.30pm, Monday to Friday

Ben Harvey (until March 2021) Reena D'costa

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International students

If you are an international student (that is, you do not have citizenship or permanent residency in New Zealand or Australia) then you should contact the International Office for application information (international@auckland.ac.nz).

For information about the Master of Health Psychology programme

Dr Anna Serlachius

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Programme outlines

Master of Health Psychology (MHealthPsych)

The programme requires a total of 240 points of which 60 points are from compulsory courses (listed below).

Compulsory courses

HLTHPSYC 714	Health Psychology	Tu	1-3pm	G	Semester One
HLTHPSYC 715	Research Methods in Health Psychology	W	12-2pm	G	Semester One
HLTHPSYC 719	Health Psychology Assessment	Th	9-11am	G	Semester Two
HLTHPSYC 720	Health Psychology Interventions	W	10am-12pm	G	Semester Two

Elective courses

A further 60 points are taken from elective courses. We recommend taking the elective courses offered in health psychology, however it may be possible to take elective courses offered within FMHS with approval from the Director of the Health Psychology Masters program as well as the course coordinator.

Some relevant courses that students may consider are:

HLTHPSYC 716	Psychoneuroimmunology	Tu	9-11am	G	Semester One
HLTHPSYC 717	Emotions, Emotion Regulation, and Health	Th	2-4pm	G	Semester Two
HLTHPSYC 743	Psychopathology and Clinical Interviewing	W	10am-12pm	G	Semester One
HLTHPSYC 744	Research Topic in Health Psychology	TBC	TBC	G	Semester One/Two
HLTHPSYC 755	Special Study	TBC	TBC	G	Semester One/Two
HLTHPSYC 758	Technology and Health	M	10am-12pm	G	Semester Two

NOTE: Timetable subject to change. Please see Student Services Online for up-to-date information.

G = Grafton Campus, **T** = Tāmaki Innovation Campus, **C** = City Campus, **TBC** = To be coordinated.

A student must obtain an average grade of at least a B in the first 120 points from the coursework component before enrolling in the final 120 point thesis component: HLTHPSYC 796.

Course prescriptions

HLTHPSYC 714 **Health Psychology**

15 Points

Staff: Professor Keith Petrie

A review of the psychological factors involved in health and illness. Topics include: the understanding of patient behaviour in medical settings, preventative health behaviour, cognitive models of illness, stress and illness, communication and adherence to treatment, the psychology of physical symptoms, and coping with chronic disease.

HLTHPSYC 715 **Research Methods in Health Psychology**

15 points

Staff: Professor Elizabeth Broadbent

A review of the principal methods used in the design, conduct and analysis of studies in the health psychology area. This will include both quantitative and qualitative approaches to health psychology research.

HLTHPSYC 719 **Health Psychology Assessment**

15 points

Staff: Professor Nathan Consedine

This course extends content knowledge in health psychology through the development of skills, achieved through the assessment and evaluation of constructs commonly used in health psychological research and practice. Included is the consideration of general issues in psychometric theory and the specific assessment issues commonly confronting widely used health psychological research designs. Detailed coverage of specific content areas including illness

cognitions, health-related psychophysiology, emotions and health outcomes will also be covered.

Restriction: PSYCH 701, 747

HLTHPSYC 720 **Health Psychology Interventions**

15 Points

Staff: Dr Anna Serlachius

Reviews the underpinning theory base for approaches commonly used in health psychology interventions such as CBT, and applies these approaches to examples from the field of health psychology. Individual and group/community treatment targets will be considered, including common difficulties that impact on disease occurrence or management, and the psychological consequences of disease.

Restriction: PSYCH 701, 748

HLTHPSYC 743 **Psychopathology and Clinical Interviewing**

15 points

Staff: Professor Keith Petrie

A review of the common psychological disorders encountered in clinical practice and health settings. Practical teaching of clinical interview and diagnostic skills is completed in class.

HLTHPSYC 716 **Psychoneuroimmunology**

15 points

Staff: Associate Professor Roger Booth,
Professor Elizabeth Broadbent

An outline of the nature of the human immune system, its measurement and the limitations of current practices and models. The main focus of the course is the extent to which psychological processes such as stress, emotions and social interactions have been found to influence immune behaviour and the implications of these findings for health and wellbeing. Various theoretical frameworks through which psycho-immune relationships might be understood are presented and discussed.

HLTHPSYC 758 **Technology and Health**

15 Points

Staff: Dr Anna Serlachius

This course explores the growing field of digital health and the impact that technology is having on psychological treatments, health psychology interventions and healthcare delivery. The course will cover eHealth and mHealth interventions in patient populations, wearables and behaviour change, chatbots and artificial intelligence, and the use of robotics in healthcare. Issues surrounding the development and successful implementation of digital health interventions, including user engagement, digital literacy, and user-centred design will be explored. The course will also focus on issues surrounding data protection and the ethical implications of the use of digital technologies.

HLTHPSYC 717 **Emotions, Emotion Regulation, and Health**

15 points

Staff: Professor Nathan Consedine

This course extends content knowledge in health psychology by focusing on the expanding literature linking emotions and emotion regulation with

health outcomes. The course provides an overview of the nature and functions of emotions, discrete versus dimensional approaches, developmental and cultural considerations, and the links between emotions and cognitive processes.

Specific topics include direct and indirect pathways linking emotions and health, links between emotions and health-deleterious behaviours, symptom detection, screening behaviour, treatment decision-making and adherence.

HLTHPSYC 744 **Research Topic in Health Psychology**

15 points

This course offers the opportunity for academic staff to provide a specific course of study for one or several students. It will allow students to study a particular topic in depth or to be an active contributor to an existing research project. Students interested in doing a special topic should do so by arrangement with one of the health psychology staff members. Topics offered by individual staff will be advertised at the beginning of each semester.

HLTHPSYC 755 **Special Study in Health Psychology**

15 points

This course offers the opportunity for academic staff to provide a specific course of study for one or several students. It will allow students to study a particular topic in depth or to be an active contributor to an existing research project.

Students interested in doing a special study should do so by arrangement with one of the health psychology staff members. Topics offered by individual staff will be advertised at the beginning of each semester.

HLTHPSYC 796A/B **Thesis in Health Psychology**

120 points

Research thesis conducted under supervision in either the Department of Psychological Medicine, or with permission, in the Department of Psychology.

Postgraduate Diploma in Health Psychology

Aim

This programme aims to train students in the skills that are necessary to function as health psychologists working with patient populations and the public in healthcare settings.

Graduates will have a sound knowledge of the social and psychological aspects of health problems and the application of suitable psychological interventions in physical health settings.

A goal of the PGDipHealthPsych is to provide a route to registration with the New Zealand Psychologists Board.

Eligibility

Students normally apply for the PGDipHealthPsych towards the end of the first year of their Master of Health Psychology.

Acceptance into the Master of Health Psychology programme does not guarantee acceptance into the PGDipHealthPsych programme. Application to the PGDipHealthPsych is a separate process, entry is limited, and applications for entry close 1 November in each year. Interviews occur towards the end of November. Students must apply online through Student Services Online. Upon acceptance into the PGDipHealthPsych programme, students are then required to successfully complete the pre-internship course (HLTHPSYCH 746A/B), usually alongside their Master of Health Psychology thesis. The pre-internship course requires students to attend teaching sessions and workshops and spend time on placement in various health settings arranged by the Department. This means that there is a one year delay between acceptance into the programme and commencement of the full-year internship (HLTHPSYC 745A/B).

Applicants will also have completed a course in Psychopathology and Clinical Interviewing, normally HLTHPSYC 743 at the University of Auckland. Students can also apply for entry into the PGDipHealthPsych programme later, after completing their Master of Health Psychology.

Enquiries

Students seeking further information about the Postgraduate Diploma in Health Psychology should contact:

Dr Lisa Reynolds
Director of PGDipHealthPsych

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For more information about the application process please contact

Email: fmhs@auckland.ac.nz.

Programme Outline

The PGDipHealthPsych involves the completion of University courses (HLTHPSYC 746A/B Pre-internship Placement and HLTHPSYC 742A/B Professional Practice in Health Psychology) and a full year internship (HLTHPSYC 745A/B Practicum in Health Psychology).

The PGDipHealthPsych aims to produce graduates with the interviewing skills necessary for gathering data in face-to-face health contexts. The programme also aims to produce psychologists with the skills necessary to select, utilise and interpret assessment tools in health psychology, be able to produce testable formulations of the problems with which they are confronted and assist patients clinically with appropriate interventions.

The diploma programme also will give students an awareness of the responsibilities of psychology practitioners to demonstrate responsivity to the principles of Te Tiriti o Waitangi and the need to be sensitive to the importance of different cultural, religious, spiritual and other beliefs. Graduates of the course will be aware of, and conversant with, the need to work within clear ethical frameworks.

HLTHPSYC 742A/B **Professional Practice in Health Psychology**

30 points

This course provides an in-depth examination of the professional issues that impact the practice of health psychology, as well as training in the assessment and intervention skills necessary to practice health psychology. Models of practice, assessment, intervention, mental health diagnosis, ethics, the laws that affect practitioners, professional interrelationships, and cultural issues are all analysed using case information drawn from students' experience in HLTHPSYC 745A/B Practicum in Health Psychology. Where necessary, additional case material will be used.

Prerequisite: HLTHPSYC 746

To complete this course students must enrol in HLTHPSYC 742A and B

HLTHPSYC 745A/B **Practicum In Health Psychology**

90 points

The course provides supervised experience practicing as an intern psychologist over a twelve month period (1500 hours) in a variety of settings as approved by the Director of the PGDipHealthPsych and Head of Department of Psychological Medicine. The goals of the Practicum in Health Psychology are to develop the knowledge and clinical skills necessary to practice safely and ethically as an independent health psychology practitioner in a variety of health settings.

Prerequisite: HLTHPSYC 746

To complete this course students must enrol in HLTHPSYC 745A and B

HLTHPSYC 746A/B **Pre-internship Placement**

30 Points

Requires students to undertake 300+ hours in at least two approved clinical placements in addition to associated workshops and training over a twelve month period.

To complete this course students must enrol in HLTHPSYC 746A and B

Doctor of Philosophy (PhD)

Staff at this University also offer supervision for research based study towards a PhD. Most areas of Health Psychology are covered by staff interests, and students with good quality Masters degrees are encouraged to apply for entry to the PhD programme. The PhD programme is aimed at preparing students for a research or academic career in the field. PhD candidates will critically investigate and evaluate a specific topic in Health Psychology using appropriate research methodology, with the aim of making an independent and original contribution to knowledge.

More details concerning the PhD degree at the University of Auckland as well as guidelines and regulations can be obtained from the School of Graduate Studies:

www.auckland.ac.nz/sgs



Staff

Roger Booth, PhD

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Research Interests

Psychoneuroimmunology, self-determination and the immune system, immune networks in health and illness, emotional expression, immunity and health, immune regulators and symptom experience.

Recent Publications

Darragh, M., Yow, B., Kieser, A., Booth, R. J., Kydd, R. R., & Consedine, N. S. (2016). A take-home placebo treatment can reduce stress, anxiety and symptoms of depression in a non-patient population. *Aust N Z J Psychiatry*, 50(9), 858-865.

Darragh, M., Booth, R. J., & Consedine, N. S. (2016). Trait predictors of placebo responses in itch. *Psychol Health Med*, 21(6), 769-775.

Darragh, M., Booth, R. J., & Consedine, N. S. (2016). 'Oxytocin' for the outwardly oriented: Evidence for interactive effects in placebo responding. *J Psychosom Res*, 83, 10-15.

Fogarty, F. A., Booth, R. J., Gamble, G. D., Dalbeth, N., & Consedine, N. S. (2015). The effect of mindfulness-based stress reduction on disease activity in people with rheumatoid arthritis: a randomised controlled trial. *Ann Rheum Dis*, 74(2), 472-474.

Darragh, M., Vanderboor, T., Booth, R. J., Sollers, J. J., 3rd, & Consedine, N. S. (2015). Placebo 'serotonin' increases heart rate variability in recovery from psychosocial stress. *Physiol Behav*, 145, 45-49.

Darragh, M., Chang, J. W., Booth, R. J., & Consedine, N. S. (2015). The placebo effect in inflammatory skin reactions: the influence of verbal suggestion on itch and weal size. *J Psychosom Res*, 78(5), 489-494.

Darragh, M., Booth, R. J., & Consedine, N. S. (2015). Who responds to placebos? Considering the "placebo personality" via a transactional model. *Psychol Health Med*, 20(3), 287-295.

Lillis, S., Yielder, J., Mogol, V., O'Connor, B., Bacal, K., Booth, R., & Bagg, W. (2014). Progress Testing for Medical Students at The University of Auckland: Results from The First Year of Assessments. *Journal of Medical Education and Curricular Development*, 1, 41-45.

Darragh, M., Booth, R. J., & Consedine, N. S. (2014). Investigating the 'placebo personality' outside the pain paradigm. *J Psychosom Res*, 76(5), 414-421.

Koschwanez, H. E., Kerse, N., Darragh, M., Jarrett, P., Booth, R. J., & Broadbent, E. (2013). Expressive writing and wound healing in older adults: a randomized controlled trial. *Psychosom Med*, 75(6), 581-590.

Elizabeth Broadbent, PhD

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Research interests

Stress and wound healing, illness perceptions, patients' drawings of their illness, risk perceptions, human-robot interactions in healthcare, embodied cognition, digital humans.

Recent publications

Johanson, D., Ahn, H.S., Lim, J.Y., Lee, C., Sebaratnam, G., MacDonald, B.A., & Broadbent, E. (in press). Use of humor by a healthcare robot positively affects user perceptions and behavior. *Technology, Mind, and Behavior*. DOI:10.1037/tmb0000021

Law, M., Jarrett, P., Nater, U. M., Skoluda, N., & Broadbent, E. (2020). The effects of sensory enrichment after a laboratory stressor on human skin barrier recovery in a randomized trial. *Psychosomatic Medicine*, 82(9), 877-886.

O'Donovan, C. E., Skinner, J. R., & Broadbent, E. (2020). The trajectory of anxiety and depression in people presenting to a cardiac inherited disease service: a longitudinal study. *Psychology & Health*, 1-15. DOI: 10.1080/08870446.2020.1836181

Loveys, K., Sebaratnam, G., Sagar, M., & Broadbent, E. (2020). The effect of design features on relationship quality with embodied conversational agents: A systematic review. *International Journal of Social Robotics*. DOI: 10.1007/s12369-020-00680-7

Alyami, M., Serlachius, A., Mokhtar, I., & Broadbent, E. (2020). The association of illness perceptions and God locus of health control with self-care behaviours in patients with Type 2 Diabetes in Saudi Arabia. *Health Psychology and Behavioral Medicine*, 8, 1, 329-348 DOI: 10.1080/21642850.2020.1805322

Law, M., Jarrett, P., Nater, U. M., Skoluda, N., & Broadbent, E. (2020). The effects of environmental enrichment on skin barrier recovery in humans: a randomised trial. *Scientific Reports*, 10(1), 1-11.

Jia, R., Ayling, K., Chalder, T., Massey, A., Broadbent, E., Coupland, C., & Vedhara, K. (2020). Mental health in the UK during the COVID-19 pandemic: Cross-sectional analyses from a community cohort study. *BMJ open*, 10(9), e040620.

Johanson, D., Ahn, H., Sutherland, C., Brown, B., MacDonald, B.A., Lim, J.Y. Ahn, B.K., & Broadbent, E. (2020). Smiling and use of first-name by a healthcare receptionist robot: Effects on user perceptions, attitudes, and behaviours. *Paladyn, Journal of Behavioral Robotics*, 11(1), 40-51. doi:10.1515/pjbr-2020-0008

Loveys, K., Sagar, M., & Broadbent, E. (2020). The effect of multimodal emotional expression on responses to a digital human during a self-disclosure conversation: a computational analysis of user language. *Journal of Medical Systems*, 44(9), 1-7.

O'Donovan, C., Ingles, J., Broadbent, E., Skinner, J. R., & Kasparian, N. A. (2020). How patient perceptions shape responses and outcomes in inherited cardiac conditions. *Heart, Lung and Circulation*. doi.org/10.1016/j.hlc.2019.11.003

Nathan S. Consedine, PhD

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Research interests

Discrete emotions (e.g., fear, embarrassment, disgust), emotion regulation, and health, cancer screening, health disparities and ethnic differences, medical help-seeking and decision-making, self-disclosure, lifespan socioemotional development, physician compassion.

Recent publications

Baguley, S., Dev, V., Fernando, A. T., & Consedine, N. S. (in press). How do health professionals maintain compassion over time: insights from a study of compassion in health. *Frontiers in Psychology: Emotion Science*.

Boggiss, A. L., Consedine, N. S., Brenton-Peters, J. M., Hofman, P. L. & Serlachius, A. S. (2020). A systematic review of gratitude interventions: effects on physical health and health behaviours. *Journal of Psychosomatic Research*. DOI: [j.jpsychores.2020.110165](https://doi.org/10.1101/165)

Dev, V., Consedine, N. S., & Reynolds, L. M. (in press). The “Ick” factor: an unrecognized affective predictor of chemotherapy side effects. *Annals of Behavioral Medicine*.

Powell, P. A., Roberts, J., Gabbay, M., & Consedine, N. S. (in press). Care starts at home: emotional state and appeals to altruism reduce demand for overused healthcare services in the UK. *Annals of Behavioral Medicine*.

Burns, T., Hammond, E. R., Cree, L., Morbeck, D. E., & Consedine, N. S. (2020). Patient factors influence which blastocysts are frozen: the impact of patient factors on the likelihood of freezing an uncertain blastocyst. *Journal of Assisted Reproduction & Genetics*. DOI: [10.1007/s10815-020-01843-1](https://doi.org/10.1007/s10815-020-01843-1)

Dev, V., Fernando, A. T., & Consedine, N. S. (2020). Does self-compassion moderate the impact of stress on burnout and quality of life in healthcare personnel? A cross-sectional study of 1700 doctors, nurses, and medical students. *Mindfulness*, 11 (5), 1170-1181. DOI: [10.1007/s12671-020-01325-6](https://doi.org/10.1007/s12671-020-01325-6)

Thompson, L., Tuck, N. L., Pressman, S. D., & Consedine, N. S. (2020). Real men don't cry: Skill in expressing discrete emotions differentially predicts CVD risk in men and women. *Annals of Behavioral Medicine*, 54 (1), 49-60. DOI: [10.1093/abm/kaz024](https://doi.org/10.1093/abm/kaz024)

Dev, V., Fernando, A. T., Kirby, J. N., & Consedine, N. S. (2019). Variation in the barriers to compassion across healthcare training and disciplines: A cross-sectional study of doctors, nurses, and medical students. *International Journal of Nursing Studies*, 90, 1-10. DOI: [10.1016/j.ijnurstu.2018.09.015](https://doi.org/10.1016/j.ijnurstu.2018.09.015)

Fogarty, F. A., Booth, R. J., Lee, A., Dalbeth, N., & Consedine, N. S. (2019). Mindfulness-based stress reduction with individuals who have rheumatoid arthritis: evaluating depression and anxiety as mediators of change in disease activity. *Mindfulness*, 10, 1328 – 1338. DOI: [10.1007/s12671-018-1090-1](https://doi.org/10.1007/s12671-018-1090-1)

Powell, P. A., Jones, C. R., & Consedine, N. S. (2019). Feeling sick or going green? The role of disgust in willingness-to-pay for sustainable alternatives. *Food Quality & Preference*. Online First: 9th July, 2019. DOI: [10.1016/j.foodqual.2019.103737](https://doi.org/10.1016/j.foodqual.2019.103737)

Liesje Donkin

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Research interests

Digital healthcare; internet interventions; body image; adherence; suicide prevention; self-harm; supervision; wellbeing of medical teams; ehealth; disordered eating; emotional regulation

Recent publications

Thabrew, H., Stasiak, K., Hetrick, S. E., Donkin, L., Huss, J. H., Highlander, A., ... Merry, S. N. (2018). Psychological therapies for anxiety and depression in children and adolescents with long-term physical conditions. *The Cochrane Database of Systematic Reviews*, 1210.1002/14651858.cd012488.pub2
URL: <http://hdl.handle.net/2292/45650>

Karyotaki, E., Ebert, D. D., Donkin, L., Riper, H., Twisk, J., Burger, S., ... Zarski, A. C. (2018). Do guided internet-based interventions result in clinically relevant changes for patients with depression? An individual participant data meta-analysis. *Clinical psychology review*, 63, 80-92. 10.1016/j.cpr.2018.06.007

Ebert, D. D., Donkin, L., Andersson, G., Andrews, G., Berger, T., Carlbring, P., ... Johansson, R. (2016). Does internet-based guided-self-help for depression cause harm? An individual participant data meta-analysis on deterioration rates and its moderators in randomized controlled trials. *Psychological Medicine*, 46 (13), 2679-2693. 10.1017/S0033291716001562

Cavell, S., Broadbent, E., Donkin, L., Gear, K., & Morton, R. P. (2016). Observations of benefit finding in head and neck cancer patients. *European Archives of Oto-Rhino-Laryngology*, 273 (2), 479-485. 10.1007/s00405-015-3527-7

Cavell, S., Broadbent, E., Donkin, L., Gear, K., & Morton, R. P. (2016). Observations of benefit finding in head and neck cancer patients. *European Archives of Oto-Rhino-Laryngology*, 273 (2), 479-485. 10.1007/s00405-015-3527-7

Donkin, L., Roger, M., & Rimmer, M. (2014). What difference does FBT make? Results of a service audit following the implementation of FBT. *Journal of eating disorders*, 2 (Suppl 1), O17-O17. 10.1186/2050-2974-2-S1-O17

Donkin, L., Hickie, I. B., Christensen, H., Naismith, S. L., Neal, B., Cockayne, N. L., & Glozier, N. (2013). Rethinking the dose-response relationship between usage and outcome in an online intervention for depression: Randomized controlled trial. *Journal of Medical Internet Research*, 15 (10)10.2196/jmir.2771

Glozier, N., Christensen, H., Naismith, S., Cockayne, N., Donkin, L., Neal, B., ... Hickie, I. (2013). Internet-delivered cognitive behavioural therapy for adults with mild to moderate depression and high cardiovascular disease risks: a randomised attention-controlled trial. *PLoS One*, 8 (3)10.1371/journal.pone.0059139

Keith Petrie, PhD, DipClinPsych

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Research interests

The role of patients' perceptions of illness and outcome in chronic illness; patient reassurance; symptom appraisal and delay in seeking medical care; the influence of psychological factors on immune activity; the effect of environmental worries and concerns about modernity on health perceptions and symptom reporting; fatigue in aircrew during international long-haul operations.

Recent publications

- MacKrell, K., Gamble, D.D., & Petrie, K.J. (2020). The effect of television and print news stories on placebo responding following a generic medication switch. *Clinical Psychology Europe*, 2(2), 2623. doi: 10.32872/cpe.v2i2.2623
- Evers, A.W.M., Petrie, K.J., Rief, W., Smeets, I., Wager, T.D, Wanigasekera, V., Vase, L., Kelley, J.M., & Kirsch, I. (2020). What should clinicians tell patients about placebo and nocebo effects? Practical considerations based on expert consensus. *Psychotherapy and Psychosomatics*. doi: 10.1159/000510738
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Research interests

Self-management in chronic illness, mHealth interventions, protective psychosocial factors in chronic illness (e.g. social support, optimism), stress and coping

Recent publications

Alyami, M., Serlachius, A., O'Donovan, C., Van Der Werf, B., & Broadbent, E. (in press). A Systematic Review of Illness Perception Interventions in Type 2 Diabetes: Effects on Glycaemic Control and Illness Perceptions. *Diabetic Medicine*.

Serlachius, A., Schache, K., Boggiss, A., Lim, D., Wallace-Boyd, K., Brenton-Peters, J., ... & Thabrew, H. (2020). Coping Skills Mobile App to Support the Emotional Well-Being of Young People During the COVID-19 Pandemic: Protocol for a Mixed Methods Study. *JMIR Research Protocols*, 9(10), e23716. doi: 10.2196/23716

Serlachius A, Badawy SM, Thabrew H. (2020). Psychosocial Challenges and Opportunities for Youth With Chronic Health Conditions During the COVID-19 Pandemic, *JMIR Pediatrics and Parenting*, 2020;3(2):e23057 doi: 10.2196/23057

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Scheier, M. F., Swanson, J. D., Barlow, M. A., Greenhouse, J. B., and Tindle, H. A. for the Optimism/Pessimism Meta-Analytic Consortium (Abatemarco, D., Abdou, C.,...,Serlachius, A.,...,Yi-Frazier, J. and Ylöstalo, P). (2020). Optimism Versus Pessimism as Predictors of Physical Health: A Comprehensive Reanalysis of Dispositional Optimism Research. *American Psychologist*. DOI: 10.1037/amp0000666 [Epub Ahead of Print]

Boggiss, A., Consedine, N.S., Brenton-Peters, J.M., Hofman, P.L & Serlachius, A. (2020). A Systematic Review of Gratitude Interventions: Effects on Physical Health and Health Behaviors. *Psychosomatic Research*. Doi: HYPERLINK "https://doi.org/10.1016/j.jpsychores.2020.110165"10.1016/J. Jpsychores.2020.110165. [Epub Ahead of Print]

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Research interests

Emotion and avoidance in cancer screening and treatment, medical help-seeking and decision-making, disgust, mindfulness, compassion.

Recent publications

Reynolds, L.M. & Harris, L. (2020). Stigma in the face of cancer disfigurement: A systematic review and research agenda. *European Journal of Cancer Care*. doi:10.1111/ecc.13327

Dev, V., Consedine, N.S., & Reynolds, L.M. (2020). The “ick” factor: An unrecognised affective predictor of physical symptoms during chemotherapy. *Annals of Behavioral Medicine*. doi: 10.1093/abm/kaa055

Reynolds, L. M., Bissett, I. P. & Consedine, N. S. (2018). Emotional predictors of bowel screening: The avoidance-promoting role of fear, embarrassment, and disgust. *BMC Cancer*. 18(1):518. doi: 10.1186/s12885-018-4423-5.

Reynolds, L. M., Bissett, I. P., Porter, D. & Consedine, N. S. (2017). A brief mindfulness intervention is associated with negative outcomes in a randomised controlled trial among chemotherapy patients. *Mindfulness*. Advance online publication. doi:10.1007/s12671-017-0705-2.

Reynolds, L. M., Bissett, I. P., Porter, D. & Consedine, N. S. (2016). The ‘ick’ factor matters: Disgust prospectively predicts avoidance in chemotherapy patients. *Annals of Behavioral Medicine*. 1-11. doi:10.1007/s12160-016-9820-x

Reynolds, L. M., McCambridge, S. A., & Consedine, N. S. (2015). Self-disgust and adaptation to chronic health conditions: Implications for avoidance and withdrawal. Chapter in Powell, P.A., Overton, P.G., & Simpson, J. (Eds.), *The Revolting Self: Perspectives on the Psychological, Social and Clinical Implications of Self-Directed Disgust*. London: Karnac Books

Reynolds, L. M., Lin, Y.S., Zhou, E., & Consedine, N. S. (2014). Does a brief state mindfulness induction moderate disgust-driven social avoidance and decision-making? An experimental investigation. *Journal of Behavioral Medicine*. 38(1). 98-109. doi: 10.1007/s10865-014-9582-5

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2021 Academic year

Semester One – 2021	
Semester One begins	Monday 1 March
Deadline for adding or deleting courses with a refund of fees (Semester One courses)	Friday 12 March
Deadline for adding or deleting courses with a refund of fees (Double-semester courses (A and B) - Semester One start)	Friday 26 March
Mid-semester/Easter break	Friday 2 - Monday 19 April
ANZAC Day	Monday 26 April
Graduation	Monday 3, Wednesday 5, Friday 7 May
Queen's Birthday	Monday 7 June
Semester One lectures end	Friday 4 June
Semester One study break	Tuesday 8 - Wednesday 9 June
Semester One examinations	Thursday 10 June - Monday 28 June
Semester One ends	Monday 28 June
Inter-semester break	Tuesday 29 June - Friday 16 July
Semester Two – 2021	
Semester Two begins	Monday 19 July
Course withdrawal deadline	Friday 30 July
Semester Two mid-semester break	Monday 30 August - Friday 10 September
Graduation	Tuesday 28 September
Semester Two lectures end	Friday 15 October
Labour Day	Monday 25 October
Semester Two study break	Monday 18 - Wednesday 27 October
Semester Two examinations	Thursday 28 October - Monday 15 November
Semester Two ends	Monday 15 November
Semester One – 2022	
Semester One begins	Monday 28 February

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