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## News from the Editor

Dear ISBM-Members,

I welcome you to the current spring issue of our newsletter – the very last issue prior to this year's ICBM, which will be held in Groningen, the Netherlands.

In many of its texts, this issue is dedicated to the role of young people in research and practice among different cultures:

In his address to the society's members, our president particularly focuses on how to engage younger members in the ISBM and its committees.

With the discussion of the most interesting topics within the International Journal of Behavioral Medicine (IJBM), the journal's editor in chief, Christina Lee, mentions the special section about cross-cultural beliefs, attitudes, and dilemmas about vaccination. Among these analyses, many have been done in younger participants.

In the third section of this newsletter, featuring interviews with the most influential members of our society, in this issue Barr Taylor discusses what might be central for young researchers in order to get and to stay involved in behavioral medicine research. To me (I still do consider myself a young researcher :-), this interview and

the entire conversation with him were just highly interesting and very stimulating. I hope that you, as well, will enjoy reading the interview!

Personally, the international involvement of younger researchers and clinicians is a very relevant topic to me. Since the most recent referendum here in Switzerland, there is a slight panic in research-circles here, that international collaborations might now become more complicated. So in order to continue international research, we will have to find possibilities to keep our connections active and running. Sure - one possibility to do so is the upcoming ICBM! You will find the list of confirmed keynotes and planned activities at ICBM in this newsletter. Also, from April 1st until May 1st Rapid Communications Posters can be submitted to the conference. So we all are looking forward to seeing many of you in Groningen!

Best regards,

**Beate Ditzen**  
Newsletter Editor



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## Letter from the president

### New people

ISBM needs a better system to involve new people in the organization.

I am currently working with the Nominating Committee to identify nominees for the election of officers and chairs in August 2014. I have talked to several people who indicated that they would be interested in being nominated, provided they knew the organization better. They consider it a too big step going from not being involved in ISBM to having the responsibility of being an officer or chair. I understand their reservations: going from not being involved to a position on the Board is indeed a big step.

One option is for new people to first serve as member on one of our Committees. This would give them a chance to get to know the organization. They could then go on to become officer or chair of a Committee. This approach would have additional benefits for ISBM as well. With their expertise these people could make valuable contributions to ISBM.

The process of identifying nominees could be improved as well. I am in favor of a round of consultation by the President and chair of the International Liaison Committee, with each of the ISBM member societies.

Various issues could be discussed in these consultations, including the needs of the member society, the names of people who would be interested in becoming active in ISBM, plans for regional collaboration, etc., etc.

This round of consultation could be held every year or every two years: it would strengthen ISBM significantly. One of the outcomes would be a list of people interested in working for ISBM.

I will discuss these options in our upcoming Board meeting and Governing Council meeting, at ICBM 2014, in Groningen, the Netherlands ([www.icbm2014.com](http://www.icbm2014.com)). Meanwhile, do not hesitate to contact me if you are interested in becoming involved in ISBM ([j.dekker@vumc.nl](mailto:j.dekker@vumc.nl)).

*Joost Dekker*  
President of ISBM



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## News from the Editor-in-Chief of IJBM

The International Journal of Behavioral Medicine is going from strength to strength, and I am grateful to the hard-working Associate Editors, Editorial Board, Guest Editors, and reviewers, who do so much to maintain and improve its quality.

Our Impact Factor has been over 2 for several years (currently 2.4) and our h5 index has risen to 35 – meaning that in the past 5 years, 35 published articles have been cited at least 35 times.

2013 was our busiest year ever, with almost one new submission a day. In total, we received 359 submissions, and currently have final decisions on 92% of them. So far, 2014 has eased off slightly, but we still expect at least 300 submissions this year.

Our growing reputation not only means more submissions, it also means higher quality. From 2014 we have moved for 4 to 6 issues as year, as well as expanding issue size. The first issue for 2014 included a special series of qualitative papers seeking to contextualise country-by-country differences in the uptake of vaccinations (see below). Later this year we will dedicate an entire issue to behavioral medicine in China, a country with rapidly changing health needs and a strongly growing interest in health promotion, disease prevention and maximising the effectiveness of health care.

We plan to time this to coincide with this year's International Congress of Behavioral Medicine, in Groningen in August. Another special issue, on dissemination and implementation, is in process. In addition, we have numerous excellent submitted manuscripts from many different countries, currently available in OnlineFirst (<http://link.springer.com/journal/12529/onlineFirst/page/1>) while awaiting assignment to an issue.

### Editor's Choice

Todorova, I. (2014). Introduction to the Special Section: Cross-cultural beliefs, attitudes, and dilemmas about vaccination. *International Journal of Behavioral Medicine*, 21, 1-2.

In this brief article, Irina Todorova introduces four research papers and a discussion on the theme of vaccination decision-making:

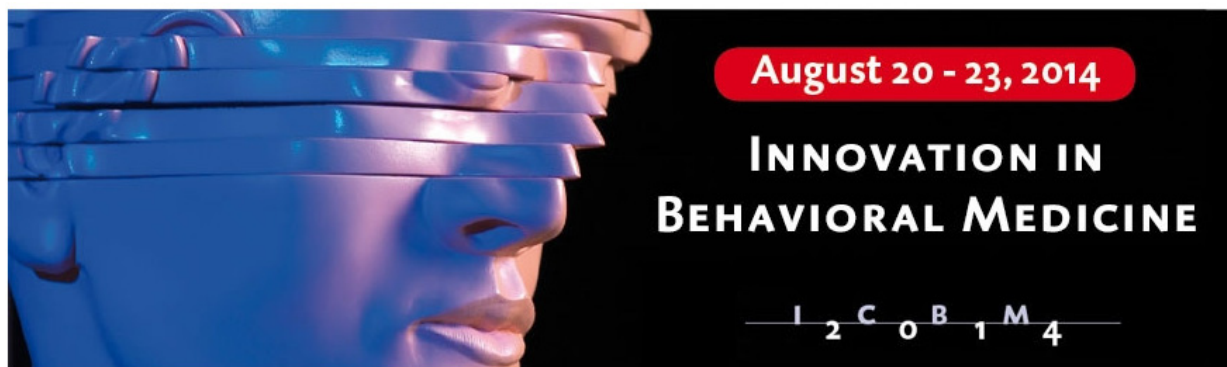
Kennedy et al. interviewed teenage girls, their parents, and health professionals on decision-making about MMR, H1N1, and HPV vaccines, identifying a number of doubts and uncertainties over the safety of vaccines and over who has responsibility for vaccine-related decisions. Brunton et al. compared attitudes and perceptions towards the HPV vaccine of young women in Scotland, Spain, Serbia and Bulgaria, demonstrating strong differences between Eastern and Western European cultures on several factors including trust in authority.

Pența and Baban analysed posts about the HPV vaccine on a Romanian online discussion forum, highlighting the ways in which the posts were embedded in broader cultural views of science, the healthcare system, and social inequality.

Todorova et al. examined the complex attitudes towards the HPV vaccine held by Bulgarian health professionals. Finally, Lyons reflected on these four papers with a discussion of the fundamental importance of understanding political, economic and healthcare systems in order to understand individual choice.

Together, this special section showcases the value of qualitative methods to complement more traditional experimental and epidemiological knowledge, and to put findings into a broader human context.

*Christina Lee*  
Editor IJBM



## Interview with Barr Taylor

**Craig Barr Taylor is a Professor of Psychiatry (Emeritus, Active) at the Department of Psychiatry and Behavioral Sciences, Stanford University School of Medicine, California, USA. Being highly interested in state of the art technology, he was one of the first scientists to integrate ecological momentary assessments into behavioral medicine research protocols. Today, he is known world-wide for his implementation research in the areas of smoking cessation, cardiovascular risk reduction and rehabilitation, and the prevention of eating disorders. Being a longtime active member and a past president of the US Society of Behavioral Medicine (SBM) he has also been involved in behavioral medicine policy.**

*BD: Dr. Taylor, thank you so much for agreeing to be interviewed for the ICBM Newsletter! I am very interested to learn about your views of the field of behavioral medicine in general, but also about your advice for young researchers in our field.*



6 | Stanford University, Palo Alto, CA USA

*To begin our interview: What was it that got you into the field of behavioral medicine? Did you have a mentor and, if so, what did you learn from this person?*

BT: I got into the field of behavioral medicine in the 70s because the area was so exciting and I had the chance to work with some amazing people. I was very lucky, because back then there was a lot of money around and an openness taking creative approaches to addressing problems.

I started out with different directions: one was the community-based studies with Jack Farquhar and the other was more traditional studies with Stewart Agras. Both were important mentors. Jack taught me to try to tackle important problems and to be bold and imaginative. He also encouraged us to work in multidisciplinary teams. The Five Cities team included physicians, Nat Maccoby, a Professor of Communication, Peter Woods, a bio-chemist, and Bill Haskell, an exercise physio-logist. Stewart Agras was another important mentor. He taught me the importance of pro-grammatic research where a series of studies build a case for an intervention or some other outcome.

*BD: So, based on these positive experiences, can you name any specific advice for younger researchers and clinicians in behavioral medicine today?*

BT: Even in these times when it is difficult to get funding, I would encourage young people to think big and to think programmatically. What problem(s) do they want to solve and what is the best way to do it? How can one's research influence policy?





One of the most satisfying aspect of my work has been helping to create the evidence based for the effectiveness of in-hospital tobacco use cessation programs. This work helped influence the JACHO—the body that accredits hospitals—to require hospitals to offer these programs to all individuals who used tobacco before admission.

I also think young researchers and clinicians should consider working in defined populations. I started out working in the whole community but began to work in defined populations and settings, such as smokers in hospital and more recently women in college for our eating disorder prevention and treatment. For instance with our smoking cessation we started with smaller scale efficacy trials, then did effectiveness trials and then examined issues of dissemination and cost. These studies helped make the case for the policy changes I mentioned earlier. We are in the midst of a paradigm shift in which many questions can be answered by systematically studying the effects of interventions in large populations using modern designs (e.g. adaptive trials designs).

*BD: From early on, you started to integrate technology into your assessments and interventions. Is this because you are situated in Silicon Valley – in “tech-heaven” – here? What motivated you to use these technologies?*

BT: There is a little bit in me that just likes technology, so I keep a little museum here about the technologies ... (opens a drawer with some “antique” tech-devices). I was always interested in the technology. To me, technology is a tool to use and investigate the models that we were interested in.

The software programs we developed for hand-held computers 15 years ago are now being used in apps.

*BD: ... also in order to increase the reach of psychotherapy?*

BT: Yes, exactly. For example, one study was about women with breast cancer. I worked in lots of tiny towns and I have seen many people who had no access to health care. So we offered asynchronous group therapy on the internet which worked as well as face-to-face therapy I was impressed how open the women in these groups were.



Dr. Craig Barr Taylor

*BD: Any advice for those who want to use tech-based designs?*

BT: Yes, think across labs, across states, across countries. When you can create networks of like-minded people working on problems, you can do amazing things. One of my goals is to determine how technology can be used to make the lives of underserved people better. Technology can make research much less expensive and much quicker. We are now doing digital interventions on large populations and we may never see the participants.

I always liked working with cutting-edge technology, things that you might eventually put online. So, right now I am also interested in how virtual reality programs may eventually be used online for widely disseminated programs.

*BD: Talking to you clearly shows your enthusiasm about research and interventions. I assume in the US, being an emeritus, does not mean you have to stop working. What has changed for you being an emeritus?*

BT: This has allowed me to have time to focus on research questions and to have fun. Also, I don't have to do clinical work. I am a clinician and I love it - but it is so demanding. I have a large grant and just will be continuing my research.

*BD: So getting to our final – more personal – question: if you got to choose to have dinner with an idol of yours (no matter whether from the past or present time), whom would you choose for a dinner conversation?*

BT: I would love to have dinner with Charles Darwin. I just read "The Voyage of the Beagle". It's an amazing book. He is such a great writer. You see him entering a natural environment and seeing stuff most of us would miss. I would love to invite BF Skinner and Albert Bandura – and perhaps Freud to dinner? That could be fun.

... Who would you want to have dinner with?

*BD: Hm. I think I would love to have dinner with some of the contemporary writers I admire... Tom Wolfe, perhaps? Ian McEwan?*

BT: I have been very lucky because I did have dinner with these people!

*BD (slightly jealous): Oh, that's incredible!*

*Dear readers, I will end the documentation of this interview here and omit the following conversation about writers whom I admire... and I would like to, again, explain my sincere thanks to Barr Taylor for this interview!*





## Keynote Presentations of the 13th International Congress of Behavioral Medicine

**Phyllis Butow**

**Title: "Communication and decision making  
in Oncology"**

Prof Phyllis Butow, BA (Hons) Dip Ed; MPH, M Clin Psych, Ph.D, has an international reputation in research into Psycho-Oncology and health communication. She is currently Professor and NHMRC Senior Principle Research Fellow at the School of Psychology (Faculty of Science), University of Sydney, Australia. She directs the Centre for Medical Psychology and Evidence-based Decision-making (CeMPED), and chairs the Australian Psycho-Oncology Co-operative Research Group. Much of her research concerns the impact of communication strategies on doctor and patient outcomes, and this has been translated into a number of communication skills modules for cancer health professionals. She has taken a leading role in Australia in promoting and facilitating communication skills training for Oncology health professionals. Prof Butow has over 300 publications in peer reviewed journals, most of which relate to psychological issues in cancer.



Website

<http://www.psych.usyd.edu.au/staff/phyllisb>



## James F. Sallis

**Title: "Collaborative International Research Is Worthwhile: Results from the International Physical Activity and Environment Network"**

James F. Sallis, Ph.D, is Distinguished Professor of Family and Preventive Medicine at University of California, San Diego, USA and Director of Active Living Research, a program of the Robert Wood Johnson Foundation. His primary research interests are promoting physical activity and understanding policy and environmental influences on physical activity, nutrition, and obesity. He is the author of over 500 scientific publications and was identified as one of the world's most cited authors in the social sciences. Time Magazine identified him as an "obesity warrior."

Website

<http://sallis.ucsd.edu>

## Andrew Steptoe

**Title: "Psychosocial aspects of ageing and the maintenance of function at older ages"**

Andrew Steptoe is British Heart Foundation Professor of Psychology at University College London (UK), and Director of the Institute of Epidemiology and Health Care at UCL. He graduated from the University of Cambridge, and completed his doctorate at Oxford University in 1975. He worked at St. George's Hospital Medical School, University of London for more than 20 years, becoming professor and chair of the Department in 1988, before moving to UCL in 2000. His work combines laboratory-based and clinical research with population-level studies, and he directs the English Longitudinal Study of Ageing. He is author or editor of 18 books, and more than 600 peer-reviewed articles and chapters. His primary research interests are in psychosocial aspects of physical health, ageing and wellbeing, and psychobiology.



Website

<http://www.ucl.ac.uk/psychobiology>

## Master Presentations of the 13th International Congress of Behavioral Medicine

**Peter de Jonge**



**Title: 'Deconstructing distress'**

Peter de Jonge is a psychologist-methodologist and a professor of psychiatric epidemiology at the University of Groningen. His research is focused on the inter-relationship between depression and cardiovascular disease, and on re-defining distress in general. He is co-director of the interdisciplinary center psychopathology and emotion regulation (ICPE). He has published about 200 international peer reviewed papers and has a H-factor of 30.

Website: <http://www.icpe.nl>



**Laura Fratiglioni**

**Title: 'Live longer and healthier. The role of lifestyles and health behaviors across the life-course'**

Prof. Laura Fratiglioni, MD Ph.D, professor of geriatric epidemiology at the Karolinska Institutet, Stockholm, Sweden. She is the Director of the Aging Research Center (ARC) and, since 2008, director of the Graduate School for Aging Research, an educational program with a biological and psycho-social profile. She is the principal investigator of The Swedish National Study on Aging and Care-Kungsholmen population study, the scientific coordinator of the Kungsholmen Project, and co-investigator in several European collaborative projects. Her major scientific contributions concern prevention of dementia, multimorbidity, functional impairment and longevity among the older adults. Her scientific production has led to 307 articles in peer-reviewed journals, 20 book chapters, and 12 reports. She has received several awards including the KI- Distinguished Professor Award, and the Sohlberg's Nordic Prize in Gerontology.

Website: <http://www.ki-su-arc.se>





**Susan Lutgendorf**

**Title: 'From Mind to Brain to Cancer Cell: Biobehavioral Influences on the Tumor Micro-environment'**

Susan Lutgendorf is a Professor in the Departments of Psychology, Obstetrics and Gynecology, and Urology at the University of Iowa, USA. She completed her Ph.D in Clinical Health Psychology at the University of Miami. Her current work, funded by the National Cancer Institute, examines how biobehavioral factors are linked to tumor progression in ovarian cancer patients. Dr. Lutgendorf is the President of the American Psychosomatic Society, serves on the Council of the Academy of Behavioral Medicine Research and is a member of the NCI Network on Biobehavioral Pathways in Cancer. Her work has been recognized by a New Investigator Award from the Psychoneuroimmunology Research Society (2004), an Early Career Award from the American Psychosomatic Society (2002) and an award from the American Psychological Association, Division 38 for Outstanding Contributions to Health Psychology (2000).

[http://www.psychology.uiowa.edu/people/susan\\_lutgendorf](http://www.psychology.uiowa.edu/people/susan_lutgendorf)



**Akizumi Tsutsumi**

**Title: 'Application of behavioral medicine to occupational health from research to practice'**

Akizumi Tsutsumi is Professor and Director, Department of Public Health, Kitasato University School of Medicine, Japan. He is an active member of ISBM as current associate editor of International Journal of Behavioral Medicine. After graduated from Jichi Medical School, he engaged in general practices at regional hospitals (primary care and psychosomatic medicine). His research career started when involving in an epidemiological study to investigate the influence of psychosocial factors on health of community-dwelling residents. His main research topics include occupational health, work environment and cardiovascular diseases, and occupational stress. He conducted international collaborative investigations on occupational stress measurement.

<http://web.med.kitasato-u.ac.jp/edures/cat-47>



## Pre-conference Workshops (confirmed)

### 1. Behavioral Medicine in China

*Bo Bai, PhD, Chinese Society of Behavioral Medicine, Chinese Medical Association, China*

### 2. Designing and promoting interventions in psychosocial cancer care, organized by APA Division 38 (Health Psychology), Society of Behavioral Medicine (Cancer SIG), and International Society of Behavioral Medicine

*Prof Joost Dekker, VU University Medical Center, the Netherlands*

### 3. N-of-1 research design

*Prof Marie Johnston and Prof Derek Johnston, University of Aberdeen, United Kingdom*

### 4. How to improve eHealth interventions in Health Psychology and Behavioral Medicine

*Lisette van Gemert-Pijnen, PhD, University of Twente, the Netherlands*

### 5. Randomized Clinical Trials (Part 1)

*Peter Kaufmann, PhD, NIH, US*

### 6. Randomized Clinical Trials (Part 2)

*Peter Kaufmann, PhD, NIH, US*

### 7. Specifying the content of Complex Interventions to Improve health: Using a taxonomy behavior change techniques

*Wendy Hardeman, PhD, University of Cambridge, UK*

### 8. Quality and innovation in qualitative research for behavioural medicine

*Sally Sargeant, PhD, Bond University, Australia*

### 9. Self regulation interventions and a problem solving implementation in health care Practice

*Nynke Kuipers and Hennie Koelewijn, PCC Health Promotion, The Netherlands*

### 10. Applications of latent variable models in behavioral medicine research

*Maria Llabre PhD, University of Miami, US*

### 11. Using social media to write and promote your scientific papers

*James C Coyne PhD*

## Pre-congress Satellite Forum

### From Research to Reality: Lessons from Dissemination and Implementation Research Across the Globe.

Organised jointly by INSPIRE and the Organisational liaison committee

On behalf of the ISBM, the NBMF, the Department of Health Sciences, the Wenckebach Instituut of the UMCG and the Scientific Program and Local Organizing Committees, we warmly invite you to the 13th International Congress of Behavioral Medicine to be held in Groningen, The Netherlands August 20-23 2014. <http://www.icbm2014.com/>

We are delighted to report that we have received over 730 abstract submissions and the Scientific Program Committee and the Local Organising Committee are in the process of putting together an exciting program of outstanding behavioural medicine research.

