

SCHOOL OF PSYCHOLOGY NEWSLETTER: CONVERSATIONS IN PSYCHOLOGY



Comments from the Editor

Welcome to the third issue of our School newsletter! This issue starts with some school news including the announcement of our own school twitter page, some welcomes and congratulations.

This issue is filled with brilliant contributions from our students. We start with an article looking at the impact of nature on well-being by Thomas Cowan. This is followed by two articles on well-being in children; Siobhan Cleary examines both prenatal and postnatal influences and Shivon Sudesh explores the stressful impact of corporal punishment in childhood. Our final student article comes from Arwa Kabir who describes an adapted CBT tool which is suitable for individuals with Autism experiencing problems with emotional well-being, such as anxiety.

A new feature of the newsletter is the 'Dissertation Spotlight'; Sarah Miller, one of our MSc Psychology graduates, writes a short summary of her dissertation project which explored parenting for Arabic-speaking refugees resettling in the U.S.



Also included in this issue is a staff profile on Dr Adriana Soni, a career spotlight on the role of a Psychological Wellbeing Practitioner, a piece on publishing in peer-reviewed journals by James Bartlett and a piece on networking at conferences by myself, Holly Stokes.

I really hope you enjoy this third issue of the newsletter and finally, I wish you all an enjoyable and restful Christmas break!

If you would like to contribute to the next issue of the newsletter, please contact myself at hstokes@arden.ac.uk for more information.

I welcome any feedback and content suggestions also.

Holly Stokes, Editor.

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Congratulations & Welcomes

Sophie Ward: Deputy Program Team Leader

School Twitter Page



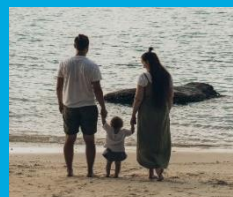
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SCHOOL OF PSYCHOLOGY NEWS

CONGRATULATIONS

Gail Steptoe-Warren, Head of the School of Psychology, would like to congratulate Holly Stokes, Editor of the newsletter, for graduating with an MSc with Distinction in Applied Psychology from Coventry University. A well deserved achievement!



Holly Stokes

WELCOMES

A big welcome to our new Academic Dissertation Leader, Sharon Watson, and to our new Lecturer and Deputy Programme Team Leader, Sophie Ward, whose introduction you can read below:

SOPHIE WARD: DEPUTY PROGRAM TEAM LEADER



Sophie Ward

I am currently working as a lecturer in Occupational and Business Psychology at Coventry University and will be joining Arden University in January 2020 as the Deputy Programme Leader for Psychology.

I possess a considerable amount of knowledge in relation to Psychology, having completed my BSc in Psychology, MSc in Occupational Psychology, and having taught on a range of Psychology-related courses. Over recent years I have also been undertaking my PhD which is due for submission December 2019, exploring the sources of and reactions to work frustration in the UK, expending previous models using mixed methodology.



Sharon Watson

I am really looking forward to joining the team at Arden in the new year to not only share my knowledge and experience, but to also learning from colleagues and students. Knowledge sharing is of high importance and I believe is one of the best things about working in academia.

SCHOOL TWITTER PAGE – FOLLOW US!

In November, our own dedicated School of Psychology twitter page was launched. You can follow us on twitter [@ArdenUniPsych](https://twitter.com/ArdenUniPsych).

This is a great way to stay up-to-date with any news and events, to make yourselves aware of any new opportunities and to join in on the conversation about different psychological topics!

Getting Back to Nature: The Psychological Benefits of the Colour Green

Thomas Cowan, MSc Psychology Student



The positive association between green environments and our mental health has long been established. The Greek physician Hippocrates is famously ascribed to have said, 'Walking is man's best medicine'. A medieval remedy for mental illness, apart from drilling holes into the head, was to look at pleasant natural scenes, and in the 18th century, asylums were built surrounded by extensive and well-planned grounds and gardens. The soothing power of nature has never been disputed but it is only recently in the wake of mass global urbanization and a growing public awareness of mental health issues that experts have specifically started to look at the scientific links between the environment and mental health, asking how nature-based therapies can be used to deliver sustainable, cost-effective, and safe outcomes for patients.

Mass Urbanization's Impact On Our Mental Health

According to the United Nations World Urbanization Report (2018), 55 percent of the world's population currently live in urban areas compared to only 30 percent in 1950. This number is projected to

keep growing, rising to almost 70 percent by 2050. The socio-economic benefits of living in urban areas are undeniable; jobs are more readily available; opportunities are greater and government services are easier accessed. However, with growing urbanization comes a greater exposure to the social and environmental risk factors associated with living in urban areas; poverty, pollution and lack of green spaces being just a few examples. According to a recent investigation into the impact of cities on our mental health, Gruebner et al., (2017), state that, "*urbanization is one of the main health relevant challenges humanity is facing in our time and will be facing in the coming decades.*" Their study found that the risks for some major mental illnesses are substantially increased due to life in the cities and that urban physical environments may likely increase stress levels and have negative effects on our mental health.

Nature's Intrinsic Attraction

Although we may not know why we do it, every day we turn to nature to help reduce the stress of our everyday lives. People may sit in the park, walk along a river, water house plants or even stare longingly out of the window. Multiple studies have shown that we can significantly ameliorate stress just by simply viewing natural scenes out of our apartment or office window, and in clinical settings garden views from hospital beds have been shown to dramatically improve rates of patient satisfaction and recovery (Ulrich, 2002; Cooper-Marcus, 1999; Whitehouse, 2001; Kaplan 2001). Even 'green exercise' regardless of the intensity or duration has been shown to greatly increase both self-esteem and mood more so than just indoor exercise (Flowers, Freeman & Gladwell, 2018). Human beings therefore, seem to intrinsically appreciate being close to nature and this can be seen by the fact that house prices nearer to

publicly accessible green spaces in the UK are on average about 3.5 percent more expensive than similar property further away (UK office for National Statistics, 2019).

Health Benefits Of Forest Bathing

In search of cheap, effective and healthy therapeutic alternatives, scientists in recent years have turned their attention to research coming out of Tokyo (the largest city in the world by population) regarding the benefits of Shinrin-yoku or “forest-bathing”. This traditional Japanese practice, which is closely associated with nature therapy, encourages participants to mindfully walk through a forest using all five of their senses in order to immerse themselves in nature. Research has shown that the simple act of immersion in nature has a beneficial effect on the immune, cardiovascular and respiratory systems. That it can reduce the stress hormone cortisol and improve overall emotions particularly among populations with poor mental health (Hansen, Jones & Tocchini, 2017). Despite the association with several other interventions like mindfulness or adventure therapy, it is the combination of the natural environment and our connection with it that seems to make the act of “forest-bathing” so therapeutic. Studies by Morita (2007) and Song (2018) also found that forest environments can contribute to the maintenance of health and wellbeing more so than just exercise alone and that the act of just walking through forest areas was significantly more psychologically beneficial than compared to walking through city areas for 585 participants.

Several theories have been proposed as to why and how human beings seem to benefit so much from being close to nature, one of the most popular is the Biophilia hypothesis (Wilson, 1986, p.20) which proposes that human beings possess an innate tendency to connect with nature and other life forms. Despite having its detractors (Joye & Block, 2011), this hypothesis pushes the evolutionary connection we have with nature and argues that health issues may arise from a disconnection with nature.

Quantifying Nature’s Healing Power

Despite the large number of studies confirming the health benefits of our natural environments, no research has yet been able to quantify the amount or even the quality of “greenness” that is required within an urban environment for our long-term mental and physiological health (Gascon et al., 2015). The World Health Organisation (2012) suggests that no urban resident should live further than a 15-minute walk from a green space, however, when it comes to our mental health it may be a case of the greener the environment the better. Certainly for practitioners of Shinrin-yoku, total immersion in a forest surrounding for hours or even days is essential in order to gain full cardiovascular and immune response benefits.

Yet as pleasant as this may be, it is unfortunately not a practical solution for most city-dwellers and especially not in the UK where an unexpected rain shower may quickly increase stress-levels rather than relieve them. However, traipsing off into the woods may not be necessary all of the time; Hunter, Gillespie and Chen (2018) have shown that even as much as 20 minutes of nature experience in a park will significantly lower stress hormones and results from virtual reality experiments seem to suggest that even a virtual immersion in nature can lead to increased levels of vigour and decreased level of negative emotions (Yu, Lee, Luo, 2018). Research has made it clear that nature and the colour green do have multiple health benefits for residents living in urban areas. Shinrin-yoku and nature therapy can provide cheap, effective and sustainable forms of treatment for everyone regardless of health, age or gender. Positively reconnecting with nature can therefore only be a good thing and maybe ‘nature itself’ as Hippocrates also said, can indeed be ‘*the best physician*’.

Prenatal and Postnatal Influences on Child Well-Being

Siobhan Cleary, BSc Psychology and Sociology Student

"If there is anything that we wish to change in the child, we should first examine it and see whether it is not something that could better be changed in ourselves." — Carl Jung (1875-1961)

Each individual goes through a process of developmental stages from prenatal to adulthood. However, the way those stages are bestowed upon the child, beginning with primary caregivers, significant adults, and their environment, determines how they internalise the messages that will eventually become their subjective view of themselves, others and the world around them (Alison, 2016).

Prenatal: The Influence of the Mother's Well-being

Everything in the womb environment between mother and baby connects electrically through axons and dendrites at the synapse gaps. As the unborn baby's neurons develop, this is how mother and baby make internal connections. Hence, the importance of healthy connections (Cognitive Neuroscience Society, 2018). If the carrying mother is continuously experiencing negative and distorted thoughts that may cause emotional distress, so is the unborn child, so to speak. In the instance of constant stress and anxiety from the mother, the baby may be born with a higher risk of anxiety; the child's prenatal blueprint will have determined their body's fight or flight response before they are even born (Kinsella & Monk, 2009). Likewise, if a carrying mother is consuming toxins such as cigarettes, alcohol and drugs, or living in a negative environment, the unborn baby is experiencing that also. Thus, the prenatal environment is vital to the overall well-being (Maté, In Utero, 2015).

Postnatal: The Influences of Parental Discourse

In the first seven years of life, the child learns how to play, walk, speak and think. The postnatal stage is a constant learning curve, and each child is susceptible to everyone and everything around them. In the instance that what they learn is dysfunctional, it is difficult to make changes in adulthood (Lipton, 2006). According to Lev Vygotsky, a Developmental Psychologist, language is one of the most influential forces of a child's life in the development of thought. (Vygotsky, 1962) Take conversations, for instance: if a parent is voicing negative opinions based on class, status, job, looks, the child acquires these unconscious biases, according to social learning theory (Bandura, Ross & Ross, 1961).

Children may also internalise what they hear and believe that if they do not fit these conditions of worth themselves, they are not good enough either. Furthermore, if a parent belittles or ignores their child's interests, this can cause a severe blow to the child's self-worth as their thinking doesn't align with their parent's. This kind of behaviour destroys a child's self esteem, creating a hurt and confused adult. The best alternative would be to find a silver-lining, to accept the child as they are and create a congruent relationship (Rogers, 1959). Although a child's inner voice can be changed, change is a lot more complicated than ensuring a good start. The external environment is so crucial as it influences how children internalise messages and store them, and that will determine the adult they will become (Vygotsky, 1962).

Adults need to be fully aware of the impact they are having on children's psychological and physical health, especially in the developmental stages beginning at prenatal and following through to postnatal. Adults should recognise how their characters shape the child, and in turn, create future generations. Children are so susceptible to everything around them - speech, eye contact, body language and behaviour - which unconsciously teaches them how to treat people themselves. This may show up in their adult lives as what Freud referred to as 'transference' onto others in inappropriate ways (Vollmer, 2010). However, every child internalises differently, which is why accepting individuality is imperative - ensuring a healthy start may just guarantee a healthy life span for the next generation.

Corporal Punishment: Should We Build Strong Children or Repair Broken Men and Women?

Shivon Sudesh, MSc Psychology Student

Frederick Douglass was an American social reformer who was born into slavery and, after escaping, became a national leader in the abolitionist movement in the 19th century. His early writings about the effects of childhood trauma are still relevant today: we are constantly bombarded with incendiary images of children affected by the Syrian civil war, alongside heart-breaking stories of hardship that have moved many citizens of well-developed countries to consider adoption. It is astounding, therefore, that the same populations are so willing to overlook child abuse occurring within their own country – and within their own homes. Recent evidence suggests that more than one billion children are exposed to violence every year, including both direct and indirect forms of physical, sexual and emotional abuse (Hillis, Mercy & Saul, 2017).

What are the Repercussions of this Childhood Trauma?

The Adverse Childhood Experience study is the pioneering epidemiological study that established a clear relationship between exposure to trauma in childhood and adverse physical and mental health outcomes. This included substance misuse, depression and suicidal attempts, as well as high rates of obesity, cancer, diabetes, stroke, heart disease and even premature death (Felitti et al., 1998). Why does something occurring during childhood have such diverse and long lasting consequences?

Stress is the answer! Just like stress manifests as headaches, tiredness and sleep problems in adulthood, adverse events in the environment of a growing child can affect brain development. The brain has a complex structure which is assembled in a slow process that begins before birth and extends into adulthood, and this process is shaped by a combination of nature and nurture: by our genes and the environment around us (National Scientific Council, 2007).

While the genetic part is largely out of our hands, the type of environment provided for the young brains during these crucial years of growth depend on the caregivers – both at home and within schools. When faced with adversity, children naturally seek comfort and protection from parents or teachers, building a secure relationship and allowing healthy brain development. However, if a child experiences severe adversity at the hands of adults whom they depend on for protection, it can produce what psychologists have named ‘toxic stress’ (Shonkoff, Richter, van der Gaag & Bhutta, 2012). If exposed to elevated levels of the stress hormone cortisol during the early stages of development, the brain can be damaged and this can lead to long-term social and behavioural problems (Gershoff, 2016).

Stress and the Young Brain

What exactly are the effects of hormones like cortisol on the young brain? Toxic stress has been linked to both changes in brain structure such as an abnormally small hippocampus – an area of the brain key in memory formation – as well as changes in brain functioning. Advances in medical technology have allowed researchers to visualize brain activation using functional magnetic resonance imaging (fMRI). Comparing brain function in children who had been abused with those who had a childhood free of maltreatment found several significant variations. For instance, abused children showed higher activity in error processing regions of the brain, a consequence of constantly monitoring their actions in order to avoid making mistakes that may result in painful punishment (Hart et al., 2018). Neuroimaging studies also found enhanced fear perception in abused children, which could be explained by excessive exposure to high-stress situations (Hart, Lim, Mehta, Simmons, Mirza & Rubia, 2018) as well as abnormalities in volume and thickness of grey matter (Lim et al., 2018).

The Effects of Corporal Punishment



Corporal punishment is defined as ‘any punishment in which physical force is intended to cause some degree of pain or discomfort, **however light** (United Nations, CRC, 2007). It is a source of toxic stress, and can lead to the altered brain development and the consequential health problems that we have already discussed. Nevertheless, it is a sad truth that hitting a child remains legal in the UK, USA and Australia (Rowland, Gerry & Stanton, 2017). We have established that a plethora of behavioural, emotional, mental and

physical health problems may develop due to maltreatment during childhood. Yet 60% of children around the world are legally disciplined with violence (UNICEF, 2015) and more than a quarter of caregivers are found to agree that corporal punishment is a necessity in raising and educating children (UNICEF, 2017).

You might be thinking, however, that it’s a big jump from spanking a belligerent child as a way to reinforce a reprimand, to child abuse. Indeed, this is the justification of parents worldwide: that disciplining a child with ‘a good hard spanking’ is sometimes necessary (Child Trends, 2013). Indeed, 65% of American parents admit to using physical punishment (Walters, 2019). Why is this the case? An online study conducted by Taylor et al. (2016) found that the most frequent justifications for spanking are the following:

‘I was spanked and I am OK’

‘Spanking improves child behaviour’

‘Other forms of discipline are not as effective as spanking’

‘Spanking is discipline, not abuse’

Most interestingly, parents assert the efficacy of spanking in improving child behaviour. But where is the evidence behind this claim? A meta-analysis of data gathered from 75 studies involving over 160,000 children showed that spanking has **no significant effect** in increasing children’s compliance and is indeed associated with **increased** aggression and antisocial behaviour. Spanked children also experience several unintended side effects during adulthood, including mental health problems, damaged relationship with parents, low self-esteem and reduced academic performance (Gershoff & Grogan-Kaylor, 2016). Child maltreatment in general is also associated with intimate partner violence: where the abused becomes the abuser (Godbout et al., 2019).

Not only is the use of corporal punishment ineffective in improving child behaviour, children experience toxic stress when they are physically punished by a parent or caregiver, which can adversely affect brain development and lead to mental, behavioural and other chronic health problems in adulthood. Yet, many people around the world still agree that violence is an acceptable form of discipline. Perhaps the next time a parent is tempted to raise a hand against their child, they should remember Frederick Douglas’s words:

“It is easier to build strong children than to repair broken men.”

DISSERTATION SPOTLIGHT

Caught in Between: A Perspective on Parenting for New Americans

Sarah Miller, MSc Psychology Graduate

My research project, "Parenting as New Americans: Understandings of and approaches to parenting for Arabic-speaking refugees after resettlement", was a qualitative investigation focused on increasing understanding of approaches to parenting for Arabic-speaking refugees resettling in the U.S.

The Rationale

The number of displaced people worldwide is at a record high; 68.5 million have been forced from their homes and there are 25.4 million refugees, more than half of whom are below the age of 18 (UNHCR, 2019). Of this number, approximately 40% originate from the Middle East region, primarily from Syria, Iraq, and Palestine (Yahya & Muasher, 2018). Arab Americans are an historically understudied group and because of their classification within the U.S.' racial schema as white, they are often a largely invisible minority group. Arab Americans face the contradiction of being highly visible and stigmatized due to media representations and current events, while simultaneously being largely invisible in terms of documentation and policy. Despite the challenges that refugees have experienced before being resettled and continue to face in their new countries, there has been limited research on the effect of resettlement on parenting strategies, and none focusing solely on Arabic-speaking refugee populations. As an undercounted, under-recognized, and under-researched group, there is limited understanding of the unique and diverse needs of this population (Abuelezam, El-Sayed & Galea, 2018).

The Method

The study used two focus group discussions with parents, one with mothers and the other with fathers, in addition to key informant interviews with social service providers who work with Arabic-speaking parents. The mothers group was made up of five mothers, four of Iraqi origin and one of Lebanese origin. The fathers group was made up of six fathers, five of Iraqi origin and one of Emirati origin. Parents ranged in age between 33-74 years old, with several of the older parents being grandparents as well. The length of time that participants had been living in the U.S. ranged from 5 to 20 years. Additionally, seven service providers were interviewed through key informant interviews. All service providers were female, were between the ages of 30-58, and had been in their jobs for lengths of time ranging from 1 year to 25 years.

The Results

Data from focus group discussions was analysed through thematic analysis and this generated three major themes: experiences of parenting before and after coming to the U.S., parenting strategies used, and challenges faced. In the first theme, three salient subthemes emerged: hardship and resilience, values, and social connection. In the second theme, the subthemes of balancing freedoms and discipline emerged. For the third theme, two subthemes of challenges were identified: lack of resources, and difficulty addressing sensitive issues.

Data demonstrated that, although parents tried to maintain many of their cultural and religious values and transmit these to their children, this was often difficult due to conflicting values and priorities of U.S. culture. Parents also shared their feelings of a lack of



community support from neighbours, friends, extended family and teachers, which caused them to feel more isolated when parenting in the U.S. Challenges noted by service providers included lack of resources, both generally such as housing and childcare, and more specifically such as female Arabic interpreters. Another challenge noted by service providers was the difficulty that Arabic-speaking parents faced addressing sensitive issues with their children, which included a broad range of topics from homosexuality to mental health issues.

Overall, the research demonstrated that parents are often caught between two very different cultures and related social norms, trying to navigate a new culture and society while maintaining important values and traditions from their country of origin. This was consistent with previous research, which indicated that Arab American families often experience clashes between their collectivist cultures of origin and the individualist culture of the U.S. upon resettlement, adding to other post-migration stressors and potentially affecting parenting approaches and family functioning (Basma & Gibbons, 2015).

The Implications

The research demonstrated the need for creating networks for parents to help them feel more connected and supported in their parenting, improving communication between parents and schools, and enhancing culturally and linguistically appropriate services. Many parents expressed feeling isolated and alone in facing the challenges of parenting in a new country, so developing programs and support services to address this would be beneficial. This could include regular parent support groups for mothers and fathers, establishing mentoring-type relationships between new arrivals and Arabic-speaking parents who have been in the U.S. for longer and are more settled and established, and connecting Arabic-speaking parents to non-immigrant parents to help them understand and navigate the educational system. Improving communication between schools and parents and increasing opportunities for involvement is also an important area of focus as indicated by this research.

Many parents want to be more involved but don't know how; approaches to address this may include an Arabic-speaking liaison at every school with a significant Arabic-speaking population, monthly open houses when parents can come to the school and interact with the teachers, and an orientation at the beginning of the school year to establish relationships, discuss norms for involvement, and explain the workings of the school system. A final need is to develop more culturally and linguistically appropriate services and materials, including training more female interpreters, creating informational materials, and establishing programs targeting the needs of Arabic-speakers such as accessible and culturally responsive family therapy.

This study makes a valuable contribution to the existing literature. Although the topic of parenting is broad, complex, and personal, it is important for further research to be conducted on the topic in order to increase understanding and create supportive and informed services to support Arabic-speakers to be the best parents they can be as they integrate into their new communities in the U.S.

An Adapted Version of CBT for Individuals with Autism: The Coping CAT Technique

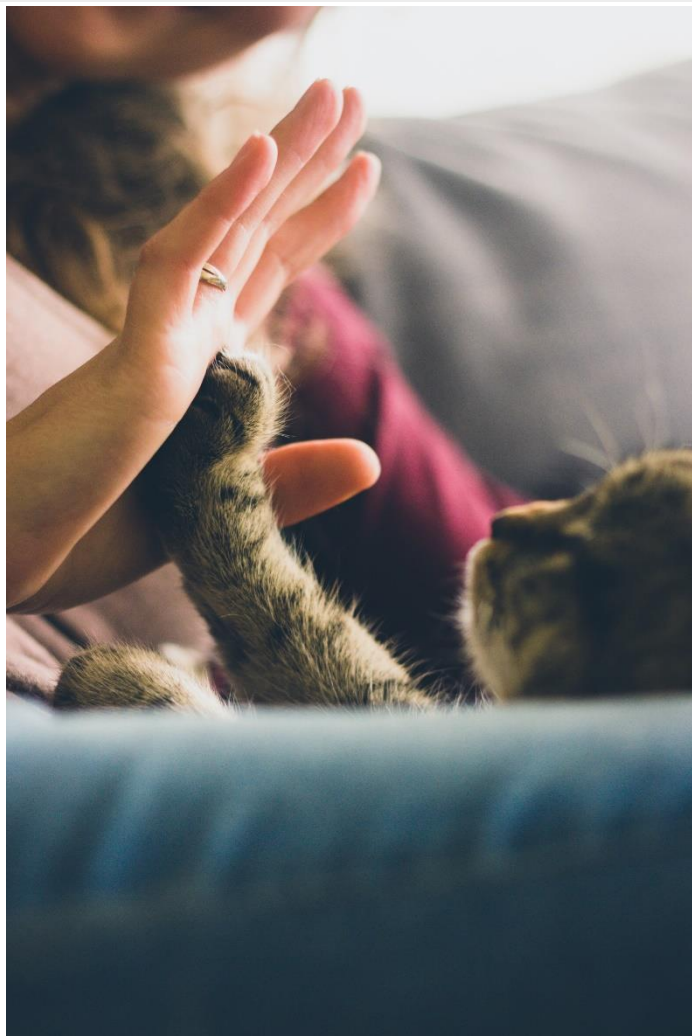
Arwa Kabir, BSc Psychology Student

Individuals with social and communication difficulties, such as those with Autism Spectrum Disorder, are often overwhelmed with information which is hard to cope with; anxiety is a co-occurring problem in individuals with Autism and high levels of anxiety can further hinder social and emotional development. Cognitive Behaviour Therapy (CBT) is lauded as the psychological therapy which has strong evidence and varied applications; young adults with Autism can benefit from social skills training using CBT tools for developing their social and emotional abilities (White et al, 2010). Though, traditional CBT may not be completely effective due to its verbal aspects (Chalfant, Rapee, & Carroll, 2007). However, a modified version called the Coping Cat Mechanism which aids skill acquisition for individuals with Autism is empirically supported (Albano & Kendall, 2002) as well as efficacious (Ollendick & King, 1998).

Adapting CBT for Individuals with Autism: The Coping CAT Mechanism

Coping CAT - Adolescent version is a CBT-based treatment program for children between 14 to 17 years of age which teaches techniques on dealing with anxiety (Kendall, 1996). The intervention can be carried out by using modified CBT worksheets, behavioural experiments with homework assignment and discussions during counselling sessions. The approach begins by having the individual understand the CBT model. This is done via large diagrams which are filled up with examples, such as putting down situations, automatic thoughts and behavioural consequences.

For those with Autism, emotional run downs and confusion with their own strengths and weaknesses can lead to a lower self-esteem as the individual gets trapped into faulty thinking and assumptions which lead to a negative view of self (Fennel, 1997, 1999). A typical outcome of this kind of a belief system is that the individual believes that any task undertaken will be met with failure. They assume those thoughts are facts and have difficulty in differentiating the two. Hence, to begin with, daily thought recording is the first assignment that is completed with the student to make sure that they have understood how to fill it out. Moving on from here, as the individual identifies maladaptive thinking, they initiate self-exploration which is the first step towards embracing the CBT principles. Once they differentiate between the thoughts and actual facts, they are able to come up with alternative thinking.



Body map worksheets are also used as Autistic individuals with lower cognitive ability and social impairment often have difficulty understanding the connection between their bodily symptoms with the cognitive counterpart. The explanation that these physiological consequences have a reason and are associated with the thought processes makes it easier for these individuals to manage themselves more effectively. Drama tools can then also be incorporated; the individual takes part in a hypothetical role play of an anxiety-inducing situation. One of the tools from drama therapy is the masking technique where the individual utilizes masks to reduce levels of anxiety as they see the faces that they would see in reality. A scripted role play helps in working through the situation that raises anxiety and that is then followed up with discussion that helps in further exploring the maladaptive thoughts and challenging them. Some individuals have a support staff member who works in conjunction with the therapist. These individuals take the necessary steps of doing follow up on homework assignments that are sent home as these are considered as a cornerstone of success in CBT practices, playing a crucial role in reaching goals.

McNally Keehn, Alan, Lincoln, Brown and Chavira (2013) suggest that anxiety levels reduce significantly with regular use of this adapted version of CBT. A clinical study by Van Starrenberg et al. (2017) indicated that this could be a future choice for improving inclusivity in therapy accessibility. Generalizability was an important aspect considered in this study as it matched a “real life” setting. It is important to consider the findings of meta analytic studies such as Reynolds, Wilson, Austin and Hooper (2012) which found the Coping Cat technique was more effective and had longer lasting effects for an adolescent population than for children. Traditional CBT techniques that require verbal mediation have limitations in helping children with developmental and communication difficulties hence this modified Intervention for individuals with ASD by Kendall (1996, 2008) is a promising approach and is on its way bringing new hope for individuals with Autism experiencing emotional difficulties.

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PUBLISHING AND EMPLOYABILITY: PEER-REVIEWED JOURNALS

James Bartlett, Lecturer in Psychology

Throughout your course, your lecturers will encourage you to use articles from peer-reviewed journals. We say this evidence is the gold standard you should look for, but what process do articles go through for peer-review? I will outline this process from submission to acceptance before ending on some personal experiences of publishing.

The Process

The first step is choosing which journal you want to send it to. The corresponding author will submit the manuscript online and the editor will skim over your article and pass judgment on whether they would be interested in your article. This is more to do with whether the article “fits” with the journal’s scope. If the editor is not interested, it will be desk rejected and you will receive an email politely explaining its not quite what they are looking for. If they are interested, they will send it out for peer-review.



James Bartlett

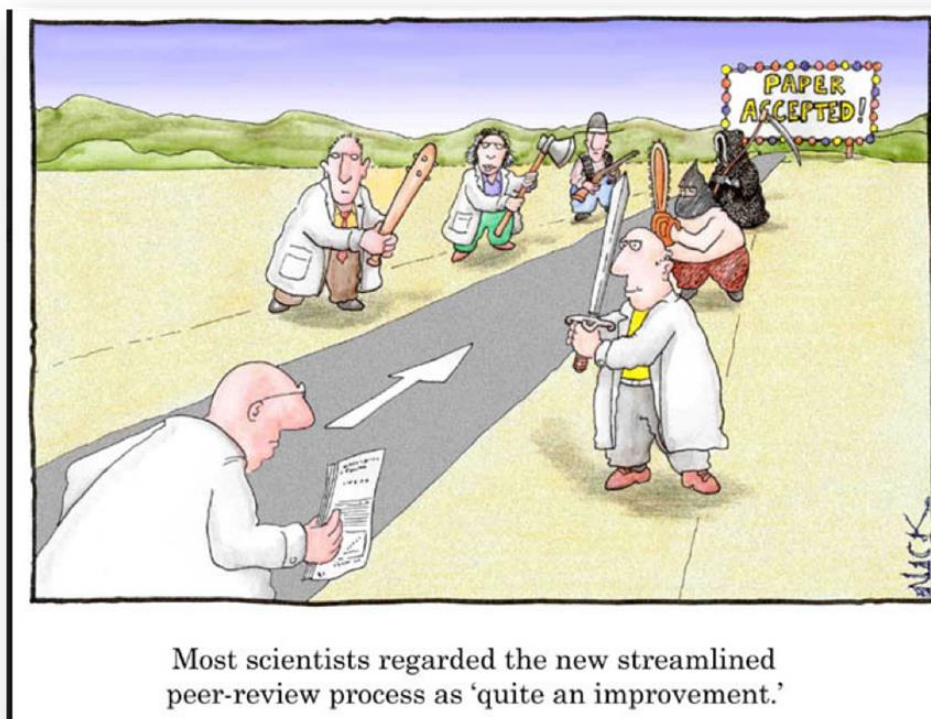
The editor will send your article to typically two or three researchers. These will be the reviewers they feel are best suited to reviewing your methods or subject area. The reviewers will independently look over your article and provide around 500 words of feedback. The peer reviewers also recommend to the editor whether the article should be accepted, revised, or rejected. The authors receive this feedback along with the editor’s comments.

The editor has the final say as one reviewer could like it and the other might not. Your article could be rejected based on the reviews. If the editor and reviewers like your study, they can ask for revisions based on their feedback. You usually have one to two months to resubmit it to the journal. The peer-reviewers look over your revised manuscript and see whether you have addressed their comments. If not, you might have to make more revisions and resubmit it again. Once it is accepted for publication, it will go through a copy-editing process.

Some Personal Reflections

I have experienced positive and negative sides of peer-review, so I will end on some of my experiences. One criticism of peer-review is it takes too long. Each step in the process takes one to two months, so an article that is accepted after one revision can take at least six months. I had one article that took an absurdly short twelve days before acceptance which included one revision. I also submitted an article in September 2018, and it has still not been officially accepted in December 2019. However, editors and.

reviewers are providing voluntary services on top of their daily obligations, so it can just be the case of waiting for them to find the time. A common pantomime villain in academic circles is the dreaded “reviewer two”. This is the observation that the second reviewer is the one to provide unnecessarily harsh criticism of your article (there is even a Twitter account @YourPaperSucks that reports particularly mean reviews). Nevertheless, not all reviewers are unreasonable. My manuscripts have improved after some incredibly thoughtful and helpful reviews.



Source: [Queen's University](#)

Hopefully this brief introduction to peer-review has provided some insight into the process. It is the cycle of reviewer feedback and revisions that adds the quality control. Your article has to convince the editor and several reviewers that it is a piece of research that would add value to your field of research. Although you might experience the odd “reviewer two”, peer-review tries to ensure as much flawed research is prevented as possible.

VIRTUAL PSYCHLAB

New materials and resources will soon be added to our [Virtual Psychology Lab on iLearn](#). This will include:



[COPE inventory \(Carver, 2013\)](#): Measures the coping strategies people use in response to stress. Also includes instructions regarding which items are summed for each scale.

[Positive Psychology Centre](#): Includes a range of questionnaires for free-use in research.

CAREER SPOTLIGHT : PSYCHOLOGICAL WELLBEING PRACTITIONER

What is the role of a Psychological Wellbeing Practitioner?

PWP's assess and support individuals experiencing mental health issues including depression and anxiety through the use of low-intensity, CBT-based interventions. PWP's work with large numbers of people, with each individual's session lasting around 20-30 minutes. Other common aspects of the role include managing referrals and directing individuals to alternative services.

What is the relevance of my Psychology degree?

The knowledge and skills needed for this role are directly linked to your degree:

- ❖ Understanding mental health difficulties and CBT-based intervention
- ❖ Assessing patients through patient-centred interviews
- ❖ Application of knowledge surrounding therapeutic interventions for clinical issues
- ❖ Verbal and written communication
- ❖ The ability to be self-reflective



How do I become a Psychological Wellbeing Practitioner?

Following your degree, you will need to complete a PWP training course or 'Improving Access to Psychological Therapies (IAPT)' low-intensity training course accredited by the BPS. To gain a place on one of these courses, you will need to be employed as a trainee PWP in a local IAPT service.

Trainee PWP posts are typically competitive but long-term experience working with those living with mental health issues (e.g. community support worker) is favourable as this is not only direct experience with the population you would be working with, but also demonstrates emotional strength and commitment. You can find your local psychological therapies service through [NHS Choices](#).

Case Study: Psychological Wellbeing Practitioner, Louise Sturgess

Taken from the [Prospects \(2019\)](#) website, Louise describes her experience as a PWP. Though Louise did not study Psychology, she completed 3 years experience working with those with common mental health difficulties which lead to her securing a trainee PWP post. She then studied a postgraduate qualification in low intensity psychological therapies alongside her working role.

Day-to-day, Louise assesses patients with common mental health difficulties and delivers a range of psychological interventions in a range of ways; face-to-face sessions, computerised CBT and group wellbeing improvement sessions. She particularly enjoys empowering others through guided self-help but acknowledges that assessing high-volumes of clients and referring them on correctly can be challenging. Louise's advice for those interested in pursuing this career includes being ready to demonstrate experience working with individuals with mental health difficulties, as well as the ability to manage the balance between studying and working.

GETTING TO KNOW THE PSYCHOLOGY TEAM: DR ADRIANA SONI

Can you summarise who you are and your role at AU?

My name is Adriana and I was born in Mexico. In 2012, I moved to the UK to obtain a PhD at the University of Bristol. I am a researcher in the area of neuroscience and education and a part-time lecturer at AU. I am the module leader for Behavioural Neuroscience and Brain and Behaviour. Currently, I support Introduction to Research Methods 1 and Key Studies in Psychology as a second tutor. Recently, I've joined the dissertation supervision team.

Can you tell the readers about your main research interests?

My research interests lie within neuroscience and education. In particular, I am very interested in designing neuroscience informed educational interventions that may help alleviate the negative effects of experiencing low-socioeconomic status on cognition and brain function. This is inspired by my background and my understanding of the inequalities in education prevalent in many countries. In relation to this, I have become passionate about music and the effects it has on cognition and brain function, so I collaborate with researchers interested in this field and music teachers in Finland.



Adriana Soni

If you had to choose just one, what is your favourite academic experience?

Research at its every stage, as I think it is a transformative process. It is an opportunity to connect with yourself and your own conceptions of the world, as well as with others and their respective conceptions. For me, it is one of the most enriching experiences I've had and it has opened doors to work with international teams with different research lines. For example, I've collaborated with a research team in Argentina with a strong focus on poverty and education, and with a group of Finnish based researchers with a well-developed line of research in music and biopsychological methods to study it.

What is your favourite thing about being part of AU?

The commitment there is to learning across the university. For example, I have felt supported and encouraged to develop as a lecturer by the School of Psychology team; I've had the chance to work closely with a few members now and we are always happy to help each other. And, I feel overjoyed anytime students share that something I have done in my modules has resonated with them and how it has helped them acquire new skills. I should also point out that I've learned a lot from students too, it is amazing to see them gradually develop their own interests and becoming experts in their topics of choice.

CONFERENCES: THE SKILL OF NETWORKING

As Psychology students, we would love to encourage you to attend conferences, workshops and events where you can network with fellow students, academics and professionals. But the word 'networking' tends to strike fear into the hearts of many. Though a great way to promote yourself and the brilliant work you undertake, for many, it is a nerve-wracking experience which can be difficult to navigate.

Set Yourself a Goal

A good way to start building your confidence is to set yourself small goals for the event; this could be as small as speaking to 3 new people or as big as securing a potential new job lead.

Making Conversation

The part of networking most people tend to struggle with is making conversation – where do you start? The ARE strategy provides a three-step approach to making conversation; ARE stands for anchor, reveal and encourage. First, find your common ground with another individual, then reveal something about yourself which should encourage others to talk about themselves in response. It's also a good idea to prepare some topics of conversation in advance; be aware of current news, events and the upcoming schedule of the conference. Have simple questions prepared such as 'what brings you to the conference?'. Listen carefully to their response so you can pick up on common ground or new areas of conversation.

Don't worry if it all goes terribly wrong!

Showing your vulnerabilities is not always a bad thing. In Social Psychology, the Pratfall Effect (Aronson, Willerman & Floyd, 1966) states that those who make mistakes and slip-ups are sometimes found more likeable and memorable! Showing vulnerability can often make others around you relax, as its likely they'll be feeling nervous too. So if you stumble your words, or drop your drink, or turn up with your clothes inside out, this may actually work in your favour!



THE GREAT WORK OF OUR TEAM

Our Head of School, Dr Gail Steptoe-Warren, recently ran a workshop in Belfast for candidates looking to register as trainee Occupational Psychologists and will run the same workshop in Stratford in January. She will also provide supervisor training for those supervising these candidates.

Other great work includes that of our Program Team Leader, Matthew Hall, who took part in a roundtable discussion in Copenhagen with Nordic NGO's on teaching young people the dangers of online pornography.

DATES FOR YOUR DIARY

Arden School of Psychology Events

Lunchtime Lecture Series

- **Make Null Results Great Again, Pt. 2** by James Bartlett, 8th January 2020 at 1pm BST
- **A Talk on Occupational Psychology** by Dr Gail Steptoe-Warren, 5th February at 1pm BST

'A Day in the Life of...' Seminar Series

- **An Occupational Psychologist** by Gail Steptoe-Warren, 21st January 2020, 1pm BST
- **An Academic** by James Au-Yeung, date and time TBC
- **A Researcher** by Matthew Hall, date and time TBC
- **An ABA Therapist: Working with Children with Autism** by Holly Stokes, date and time TBC
- **A Clinical Psychologist** by Sarah Berger, date and time TBC

A link to join these lecture and seminar sessions will be shared at a later date.

BPS events

- [Emotions; how neuroscience and psychology can help us to understand what is really going on for ourselves and others \(Talk\)](#). 17th December, 6:30-8:00pm. Brighton, UK.
- [A Mental Health Approach in Gangs, Youth Violence and the Police \(Talk\)](#). 7th January, 2020, 6:00-8:00pm. London, UK.
- [Working with Emotional Systems: Building Emotional Capacity in You and Your Clients \(Workshop\)](#). 24th January, 2020, 9:30am-4:00pm.
- [Psychology in the Pub: Working in Rehab: "Treating the thinking before the drinking"](#). 30th January, 2020, 6:30-8:30pm.
- [Psychology in the Pub: Are idealised virtual bodies as potentially harmful?](#) 11th February, 2020, 6:30-9:00pm.

For other events including conferences, workshops, seminars and webinars, please visit the [American Psychological Association](#) and [British Psychological Society](#) websites.

Contributing to the next edition of the newsletter

I would like to thank all contributors to this issue of the School of Psychology newsletter. If you would like to contribute a topical Psychology-related article to a following issue, please contact myself at hstokes@arden.ac.uk for more information. Please also contact me if you would like a reference list for any of the articles in this issue. I look forward to hearing from you!

Next Issue: February 2020.