

Participants had been in treatment for 40 months on average and had lost 16.4% of their initial weight. Greater success at reaching goal weight was associated with lower BD ($t(152)=-.30, p<.001$). However, more stigmatising experiences were associated with greater weight loss ($t(152)=.23, p<.005$). Greater weight lost was predicted by lower BD, but also by higher fear of fat and more stigmatising experiences ($F(3,168)=8.82, p<.001$). Therefore, body dissatisfaction does not appear to improve weight loss. However, elevated fear of weight gain and stigmatising experiences were associated with greater weight loss and maintenance. Though fear of obesity may be a useful motivator for weight loss, treatment efficacy may be enhanced by improving body acceptance.

Internet-based intervention for Postnatal Depression

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Internet interventions have been predicted to be a major force in the delivery of psychological treatments in the future. There is a small but growing body of literature that has explored internet interventions in relation to specific health issues as well as depression and anxiety. The results of these studies are encouraging, however further work is required. An area so far neglected in this small body of work, is postnatal depression (PND). Whilst face-to-face interventions have been found to be effective in the treatment of PND the reticence of women to seek treatment makes alternative treatments such as internet intervention of particular relevance. This poster will explore the viability of an internet-based intervention for postnatal depression and report on its development and pilot phase.

Consumer participation: From Urban Renewal Strategy to Mental Health Standard

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The evolution of consumer participation as a socially valued policy will be described. Its acceptance by health services policy makers was inevitable given the growth of the consumer movement, especially in mental health over the last 20 years. Yet there is no real consensus as to what it means or how it can be measured. The current tick-sheet approach used by some accreditation agencies leave much to be desired. The evidence for consumer participation as it relates to health outcomes will be reviewed. A model of consumer participation, which may guide clinical practice to satisfy standards will be presented. Whilst it is obvious that consumer

participation is more an organisation than a clinical outcome measure, its close relative, the consumer satisfaction survey is more difficult to interpret. Some of the issues will be discussed. How a recent consumer satisfaction survey of a psychiatric inpatient unit led to some improvement of services will be reported.

A comparative research on the mental character of novice, proficient and expert teachers

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Aiming at understanding well about the teachers' teaching development, we had used some scales to carry out two studies which involved 433 and 469 subjects respectively on the teaching strategies, achievement goal orientation, personality characteristic, professional commitment and job burnout of novice, proficient, expert teachers. The results showed that: For the issue of teaching strategies, achievement goal orientation and personality characteristic, the expert teachers are better than proficient ones, and the proficient teachers are better than novice ones. When you turn to the question of professional commitment as well as job burnout, the expert teachers achieve better than proficient teachers and novice teachers while there's no difference among the proficient teachers and novice teachers. The main features of expert, professional and novice teachers will be explored.

The role of the sympathetic nervous system in emotional stress induced humoral immunosuppression

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In the literature, most often, stress has been reported to suppress immune response and this suppression has been mainly attributed to an increase in adrenal cortical hormone, that is, to the hypothalamo-pituitary-adrenal axis (HPA) activation. In this study, the role of sympathetic nervous system (SNS) in emotional stress induced humoral immunity was examined. Emotional stress was induced by randomly giving empty water bottles to rats trained to drink water at set times and the neuroendocrine and immunological consequences were investigated. Data showed that emotional stress activated both HPA and SNS functions indexed by the increased levels of corticosterone and norepinephrine, and suppressed the level of specific antibody production to ovalbumine (OVA) immunization. A negative correlation between antibody and norepinephrine levels was found. Further, intraperitoneal injection of 6-OHDA (inhibition of SNS) but not metyrapone (inhibition of HPA function) completely blocked the

stress induced suppressive effects on anti-OVA antibody production. Propranolol, b-ADR antagonist, reversed the stress-induced humoral immunosuppression in a dose-dependent manner. These results suggest that SNS, not HPA, plays a major role in the emotional stress-induced humoral immunosuppression.

**Development of a health assertiveness scale:
Application to a heart disease population**

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Coping is an important aspect of the way in which individuals deal with chronic illnesses. Assertive behaviour has been shown to be a coping strategy that facilitates the maintenance of health in individuals throughout stressful life experiences, and therefore might be a useful coping skill for chronically ill individuals (Kenney & Bhattacharjee, 2000; Solomon, 1981). That is, the degree to which risk reducing behaviours are adopted could be moderated by an individual's level of assertiveness regarding their health. This concept will be labeled as "health assertiveness". Adaptation of the concept of assertiveness had been previously undertaken in the area of sexual health, whereby the term "sexual assertiveness" has been coined (Yesmont, 1992). The present study developed a health assertiveness scale, and investigated the role of health assertiveness in a heart disease population. Results indicated that in a sample of 113 patients who had been hospitalised for an acute cardiac event reported overall low levels of health assertiveness at one week (T1) and at 2 months (T2) post hospital admission. Although no significant correlations were revealed at T1, at T2 significant associations were found between health assertiveness and recreational and social activity levels, and personal control.

Young people who witness verbal bullying at school: How do they cope?

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Most students report having observed bullying at school, with verbal aggression and intimidation reported as the most common form. To date, relatively little attention has been given to peer processes, including how young people who witness these attacks cope. This paper discusses the results of a study conducted with Australian preadolescents that explored verbal harassment as a form of bullying, together with the role of peers as bystanders. The study sought to extend recent research by examining the extent to which the context could account for bystanders' responses. A specific goal was to investigate the factors that contribute to young

people's judgments about the likelihood of responding to different forms of verbal aggression. Using a within-sex experimental design that employed hypothetical vignettes depicting verbal aggression, two key influences on peer behaviour, perceptions, and emotions, were examined: 1) the relationship of the witness to the perpetrator and to the victim, and 2) the type of verbal aggression witnessed. Personal variables likely to contribute to young people's judgments about the likelihood of responding to different forms of verbal aggression were also of interest.

Supervisee experiences of poor and harmful clinical supervision

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Ninety-one Victorian probationary psychologists completed an internet questionnaire on their least positive past clinical supervision experience. Quantitative data were collected on the incidence of poor and harmful clinical supervision, and supervisee explanations for their occurrence. Measures of the supervisory relationship, role conflict and ambiguity, evaluation within supervision, and supervisor self-disclosure, were used to investigate whether poor and harmful clinical supervision might be distinct constructs. Approximately 28 per cent of participants described their least positive supervision experience as poor and 11 per cent described it as harmful. Relative to poor supervision, supervisees reporting harmful supervision were more likely to select multiple explanations for the experience. In a second part to the study, in-depth semi-structured telephone interviews were conducted with 10 participants, 5 who described their least positive supervision experience as poor in the internet questionnaire, and 5 who described their experience as harmful. Questions on the nature, causes, and consequences of less than positive supervision were used to extend understanding of poor and harmful clinical supervision, and to explore whether any themes differentiated the two types of less than positive supervision. Research findings are evaluated within the context of extant theory and empirical research on the effectiveness of clinical supervision.

Consciousness transformations: Growth enhancing or disintegrative states?

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The study investigated the prevalence of both growth-enhancing and dissociative consciousness transformations in a normal adult sample. A previous study (Hunt, 1995) demonstrated evidence for a