What Does Training in Health Psychology Look Like Today? An Example from Lakehead University

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Most Canadian regulatory bodies include Health Psychology as a specialty practice area with associated knowledge, skills and training required for registration. As licensure/registration requirements become increasingly stringent, there is a need for Canadian psychology programs to fortify their health psychology training to support both student registration in the area and sustainability and growth in the field. To stimulate discussion and advancement of health psychology training among Canadian colleagues, we present a brief description of health psychology as taught at Lakehead University in Thunder Bay, Ontario.

Lakehead University provides a generalist training experience at the undergraduate and graduate levels. Within this model, students can elect to train in health psychology at both levels in a variety of ways:

Students at both the undergraduate and graduate levels can take specialized courses in health psychology and several sub-specializations of health psychology. Undergraduate courses include Health Psychology, Principles of Psychopharmacology, Drugs and Behaviour, Human Sexuality, and Addiction Processes. Graduate courses include an advanced Health Psychology course, Clinical Psychopharmacology, Addiction Interventions, CBT for Eating Disorders, and Behavioural Endocrinology, among others.

Students can also gain research experiences in health psychology through research placements for academic credit, thesis and dissertation work, the doctoral level clinical practice and research examination, volunteering in laboratories, and by serving as participants in research themselves. Examples of current undergraduate health psychology-focused thesis projects include a scoping review of research examining links between an estrogen receptor polymorphism and psychological variables (A. Dela Cruz); an analysis of provincial health administrative data examining links between surgery wait times and new mental health diagnoses among people with colorectal cancer (N. Maenpaa); and a study of attitudes and intentions towards organ donation (A. Tshilombo). Examples of current health psychology theses and dissertations included (but are not limited to) a cross-sectional examination of aging, alcohol use, and cognitive health using data from Canadian Longitudinal Study of Aging (CLSA) (K. Chafe); a psychometric analysis to improve quality of life measures for people with cancer and other chronic health conditions (J. Hawkins); and a study of heart rate variability as a predictor and mitigator of disinhibited eating among restrained eaters (L. McGeown).

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Students in our clinical psychology graduate program also gain **applied health psychology practicum experiences** in a variety of clinical settings including adult and childhood bariatric and eating disorders settings, an interdisciplinary pain management program, diabetes management program, adult and adolescent addictions services, and Indigenous specialty addiction services, although space and supervisor capacity sometimes limit placements at some sites.

Of course, our strength in health psychology is made possible by our **core and adjunct faculty** whose research and clinical service includes (but are not limited to) addiction, hormones and behaviour, integrated primary and behavioural (mental health and addiction) services, chronic disease management, eating disorders treatment, and human sexuality. Notably, Dr. Chris Mushquash holds a Canada Research Chair in Indigenous Mental Health and Addiction. Although we are a somewhat small faculty, through close collaborative relationships with community partners, we are able to offer students both breadth and depth in health psychology training.

A complete review of all that we do in health psychology is beyond the scope of what we can report here. To give you a more detailed understanding of how we approach health psychology training, instead, what follows is a detailed description of one of our newer yet fundamental components of health psychology training: our graduate course in the named field. We hope this whets your appetite to learn more and engage with us as we continue to develop health psychology training at Lakehead U.

**Graduate Course in Health Psychology**

In our graduate level health psychology course, clinical and psychological science students, as well as interested students in other disciplines (e.g., Nursing, Social Work, Health Sciences) can take a course in health psychology. In this course, students learn about the major theories driving current health psychology research, starting with foundational chapters from *The Handbook*

(Top to bottom) Drs. Deborah Scharf, Amanda Maranzan, Kirsten Oinonen and Mirella Stroink
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of Health Behavior Change (Hilliard et al., 2018). They then discuss academic papers from journals such as Social Science in Medicine, Annals of Behavioural Medicine, and Health Psychology, in several areas:

1. **Applications of health psychology theories to health and health care issues** in areas such as exercise, diet and weight, tobacco smoking, pain, sleep, and chronic disease management (e.g., Motta et al., 2018; Stevens, 2015).

2. **Advances in health psychology methods** such as ecological momentary assessment, ecologically valid laboratory settings (e.g., Shadel et al's 2016 Storelab) with the express purpose of expanding students’ ideas not just about what they can study but about how health psychology questions can be addressed.

3. **Health psychology policy and finance** issues are also a major part of the course (e.g., Jacobsen et al., 2019).

4. **Conceptualizations of the future of the field** (e.g., Rothman & Sheeran, 2020; Klein et al., 2015), and

5. **Given Lakehead’s location in Northwestern Ontario, the course also includes papers that apply health psychology concepts and theories to pertinent community issues** (e.g., Goettke & Reynolds, 2019).

A most-loved part of the course is the written assignment in which students craft a research paper, commentary, book review, or grant proposal in the area of health psychology. Within purposefully flexible parameters, students are given the opportunity to do something that’s meaningful to them in the realm of health psychology, so long as it includes direct application of health psychology theory to the topic of their choosing. Why application of theory? Students in the course often have experience writing about health and healthcare issues but writing on these topics through a health psychology lens separates these products from others that address similar issues but from the perspective of another field (i.e., medicine, epidemiology, public health).

A strength of the written assignment is that students submit their written products to PeerScholar, an on-line software that facilitates an anonymous peer-review process that we run exactly like that of a peer-review journal. Students receive anonymous reviews from two peer reviewers and from the editor (the course instructor). They then respond to reviews, including the usual letter and point-by-point response and submit a revised document for a second round review. The result is that by the end of the course, many students have created a health psychology written product that is suitable for publication or funding. To date, three of the eighteen students in the two course cohorts have had their course papers published in peer-reviewed journals (Mascioli & Davis, 2019; McGeowan, 2019; Maunder, in press) or grant proposal funded by the TriCouncil (J. Hawkins). Several other papers are either under review or in preparation for submission to academic journals.
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Student papers focus on topics such as strategies to promote breastfeeding in Indigenous populations, the role of competitiveness in successful personal fitness routines, using self-efficacy theory to improve adherence to CBT for insomnia, and applying health psychology theory to improve paid sick leave policies to reduce the spread of COVID-19.

These include papers on strategies to promote breastfeeding in Indigenous populations (J. Kao), the role of competitiveness in successful personal fitness routines (A. Craig), using self-efficacy theory to improve adherence to CBT for insomnia (K. Fretz), and an application of health psychology theory to improve paid sick leave policies to reduce the spread of COVID-19. Although it is not a course requirement to submit the evaluative piece to these outlets, students’ follow-through on this suggestion demonstrates the relevance of the exercise to students’ interests (i.e., submitting a paper or grant), the quality of the products, and of course is an opportunity for students to contribute to the field.

This year, we eagerly welcomed two Queens University students to our course through the Ontario Visiting Graduate Student program, which allows them to complete a graduate course at another Ontario university, while remaining registered at their own institution (thereby bypassing the usual application and transfer of credit process). The student pays fees to their home university and is classified as a “visiting graduate student” at the host university where they pay no fees. With COVID-19 forcing most classes on-line this year, it was particularly easy to accommodate students from other institutions. The diversity of students’ training experiences made for wonderful class discussion. Importantly, the participation of non-Lakehead students in our course suggests the need for more health psychology courses across Ontario universities. We look forward to hearing from any interested students who might like to join us in the future (next offered tentatively in fall, 2023) and collaborators who want to advance the training, research, and practice of Health Psychology together.

We conclude here with a few quotes from the anonymous student evaluation of teaching surveys that illustrate students’ interest and investment in health psychology at the graduate level, and their desire for more opportunities in the area in the future:
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“I really enjoyed the diversity of readings for the course, which I found stimulating and relevant to the field of health psychology. They also gave me ideas of how to improve my research/broaden my research in other areas.”

“Although my main interest is in evolutionary and moral psychology, I have a larger interest in health psychology now and it’s definitely something I want to keep up with and possibly contribute to. [...] I plan on submitting my paper for peer review!”

“This course has really sparked my interest in health psychology and I feel that I have learned a great deal from it. [...] It is one of the best courses I have taken in my post-secondary and grad school degrees.”

We look forward to hearing from all colleagues, students and others stakeholders about how we can collaboratively advance Canadian research, teaching and practice in health psychology!

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References
Motta, M., Callaghan, T., & Sylvester, S. (2018). Knowing less but presuming more: Dunning-Kruger effects and the endorsement of anti-vaccine policy attitudes. Social Science & Medicine, 211, 274-281.