

UNDERSTANDING HEALTH AND ILLNESS, PSYCHOLOGICALLY!

Book review

Suls, J & Wallston, K A (Eds) (2003) **Social psychological foundations of health and illness**. Malden: Blackwell Publishing. ISBN 0-631-22515-3 hbk.

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The role of psychosocial factors in health and illness has emerged as significant determinants of health and well-being and is a focus for public health endeavours. Social and health psychologists have been able to respond to the increasing challenges posed by health and illness of modern lifestyles and poverty of both the developed and developing worlds. The theoretical and methodological frameworks within social psychology enabled the generation of evidence as to the aetiology, prevention, treatment and adaptation to physical illness. While it is not possible to do full justice to the many contributions of social psychology to the understandings of the psychosocial aspects of health and illness, the particular value of this volume lies in the overview it gives of the most significant theoretical and methodological contributions to health and illness. Moreover the volume is successful in stimulating further investigation into the relatively unexplored social psychological contributions.

Suls and Wallston were able to collect contributions from scholars that reflected not only new advances in theory but also the more classic theories and present both the classic and contemporary developments in the social psychology of health and illness. Research on symptom recognition, social support, social influence, coping, individual differences, gender, stress reactivity, health behaviours, risk perception, as well as attitudes and behaviour change are addressed. Each chapter is introduced by a brief overview of the classic developments in the area which is followed by a discussion of the author's research programmes or related research.

In reviewing the volume, the flexibility allowed in the presentation style that ranged from personal narratives to a more conventional format has made for interesting reading of what would otherwise have been a daunting task. An excellent introduction allows for clarity on the structure of the content presented and is certain to be of great appeal to readers interested in selective reading. The most important insights and evidence of the role of psychosocial factors in physical health and illness are presented in four areas. In Part One, the Models of health / Risk behaviour and behaviour change are presented. Part Two consists of social cognitive processes re health, Part Three focuses on Personality and health while Part Four deals with Adaptation to stress and chronic illness. While Part One provides valuable insights into individual behaviour change, the

lack of attention to change within group contexts is a limitation. The last two sections in the volume offered an engaging review and stimulated new ideas around the influence of context and interpersonal relationships on stress and coping. In the next paragraphs I will reflect briefly on the different chapters of the volume. The fact that some chapters generated more discussion than others is a consequence of my engagement with the material and not a reflection of the significance of the content.

Part One consists of seven chapters, falling into two subcategories, the first refers to the basic processes underlying health and risk behaviour with specific attention to the social contexts of people's lives and the psychosocial influences they have on decision making over the lifetime. Friedman argues that it would be more efficient and effective to introduce people into healthy life paths rather than educating them on things *not* to do. Weinstein's chapter reflects the work of a 20-year research programme looking at the interplay between risk perceptions and behaviour, but specifically at the inconsistencies between people's beliefs about their risks and actual risks. Salovey and Wegener provide thought provoking arguments, well grounded in the literature on effective health communication. The reader is alerted to the relevance of framing differences when developing appropriate health messages. The benefits of messages directed at adopting healthy behaviours rather than focussing on the risks of not adopting these behaviours are emphasised.

In the next four chapters of Part I, four models of health behaviour or health behaviour change are presented. The Information-Motivation-Behavioural Skills Model is discussed within the framework of social psychological understanding of health related behaviour. Convincing empirical support is offered for the application of the model across different health behaviours. Adolescent health behaviour is discussed in terms of the prototype/willingness model and provides a useful understanding of adolescent engagement in risky behaviours as well as its implications for prevention and intervention programmes. In the chapter by McCaul and Mullens it is argued that more attention should be paid to the affective determinants of self-protective health behaviours while most theoretical models tend to overemphasise the cognitive variables. The last chapter in this part describes the role of risk perceptions, outcome expectations, perceived self-efficacy and behavioural intentions in conjunction with a stage model. Post-intentional processes receive specific attention. A very insightful and critical discussion of the Transtheoretical Model of Behaviour (TTM) change highlights its limitations while useful alternative models, namely the Precaution Adoption Process Model and the Health Action Process Approach, are presented. In the last chapter in this section, Renner and Schwarzer stress the importance of accurate and effective processing of health information. They argue that personalised risk information could allow for more accurate and self-relevant risk assessment while information about coping resources at the more advanced stages of change will inform aspects of self-efficacy necessary for change.

Part Two consists of five chapters on the social-cognitive processes in health. In the first chapter, Martin, Rothrock, Leventhal and Leventhal explore how common sense models of illness influence symptom perceptions and decisions about illness self-management and treatment seeking. Symptom interpretation is explored as a function of the characteristics of the social environment. The influence of stereotypes about gender

and heart disease vulnerability in the misattribution of symptoms and in treatment delay for female heart attack sufferers is discussed.

In the next chapter Suls explores Festinger's theory of social comparison of opinion and abilities and Schacter's extension to affiliation and emotions. The involvement of social comparisons in a range of illness-related phenomena is discussed as well as how interpersonal comparison can make people ill, affect prevention efforts and facilitate coping with acute and chronic illness. In the next chapter DeVellis, Lewis and Sterba, discuss theories related to dyadic processes and mood management, often neglected by health researchers. They first provide a brief historical overview of interpersonal and emotional factors followed by an overview of selected theoretical approaches with appropriate examples within health research.

Pennebaker and other researchers have been looking into the mental and physical health benefits of writing or talking about upsetting emotional experiences. I found Pennebaker and Seagul's discussion on the social, linguistic and health consequences of emotional disclosure informing. They argue that writing or talking about upsetting emotional experiences bring about improved social integration with accompanied cognitive and emotional changes resulting in improved health. Social integration is viewed as a dynamic process in which people share more openly in thoughts and feelings all of which seems to promote health and well-being. These understandings have implications for the role of support groups in health and well-being.

In the last chapter in this section Taylor, Klein, Gruenewald, Gurung and Fernandes-Taylor explore social support and the need to turn to others for advice and comfort as a way to cope with stress. They suggest that the health benefits of social support stem from physiological and neuroendocrine mechanisms. Evidence is reviewed of potential biological underpinnings i.e. the secretion of oxytocin, that may promote these social responses to stress, especially in women, as estrogen is believed to enhance the behavioural effects of oxytocin in relation to affiliation and relaxation. The oxytocin-based model they propose is still speculative and needs further examination especially in humans.

In Part Three, the chapters deal primarily with individual difference factors. However three chapters address what might be termed personality traits. Personality traits in combination with the social environment constitute risk of coronary heart disease (CHD) through mechanisms involving increased cardiovascular reactivity (CVR). Smith, Gallo and Ruiz propose a social psychophysiology of cardiovascular reactivity. Evidence is found for the role of psychological stress, personality traits and the social environment in CHD, but major challenges remain in studying the complexities of the interrelated nature of these factors. Despite limitations of the proposed circumplex model and transactional cycle, this chapter provides useful insights into the study of psychosocial determinants of CVR.

Helgeson examines gender-related traits and health in the next chapter and presents evidence of significant sex differences in health. The genetic or other biological factors seem to have limited explanatory power as many of these differences emerged during the course of development and have emerged over the course of the twentieth century. Helgeson explores gender-role socialization as a social explanation of these noted

health differentials with a focus on the influence of unmitigated agency and unmitigated communion on men and women's health.

In the chapter on self-regulatory processes and responses to health threats, Scheier and Carver describe a general model of behavioural self-regulation. This is followed by a discussion on the hierarchical organization among goals and the complexity of behaviour hierarchy as it relates to connections between actions at different levels. Interesting research is presented on how the variation in positive and negative expectations also referred to as optimism and pessimism impact on health problems and illness threats. They conclude that the testing of the implications of self-regulatory models is still at its infancy, and that further exploration is needed for the development of evidence.

Part IV deals with adaptation to stress and chronic illness. In the first chapter Smith and Baum discuss the importance of engaging in restorative activities as a means of reducing stress and promoting physical and emotional functioning. Restorative activities such as sleep, exercise, relaxation, vacation, social interaction and spending time in natural environments seem to reduce stress and promote improved mental and physical health. Smith, Wallston and Dwyer discuss coping and adjustment to rheumatoid arthritis and present some of their own work. It is argued that the large observable individual differences in the adjustment to chronic and acute medical conditions pose a challenge to health professionals in patient care. They suggest the combined use of coping inventories and qualitative measurements in the study of adaptation to stress and to chronic illness in particular.

A daily process approach in which psychosocial processes are linked to every day health, illness and health behaviours is presented in the next chapter by Tennen, Affleck and Armeli. They emphasise the ability of daily process designs to address clinically relevant questions, and evaluate a variety of methods and statistical approaches unique to daily process studies. The flexibility of daily process designs in answering phenomenologically and conceptually meaningful questions are explored. Daily processes in substance use (the last section of the chapter) provide for improved insight into difficulties that arise from making inferences about contingencies at one level of analysis from results that are obtained at another level of analysis (e.g. across-person associations and within-person associations).

In Revenson's chapter, the last in the volume, an ecological framework is presented for examining dyadic coping processes among married couples within the context of chronic illness. Coping patterns of couples are explored in terms of the interpersonal, medical and temporal contexts. The influence of gender roles on family coping processes is argued to have implications for both family functioning and health behaviours. The importance of extending the study of stress, coping and adaptation beyond the individual level of analysis to the whole family and even neighbourhood and community is advocated.

The volume is highly recommended as a significant contribution to understandings of health and illness and will serve as a valuable resource for academics and health promotion specialists engaged in health related studies and health promotion practice.