The 11th EAOHP conference, organized in collaboration with Birkbeck College, University of London, was a big success thanks to the active participation and collaboration of 524 delegates from more than 40 countries. The theme for this year’s conference was, ‘Looking at the past – planning for the future: Capitalizing on Occupational Health Psychology multi-disciplinarity’ and featured a keynote debate on the future of OHP with Professor Robert Karasek and Professor Johannes Siegrist. The programme also featured keynote presentations by Professor Evangelia Demerouti and Professor Tom Cox, past president of the Academy, and five special sessions including those sponsored by the Division of Occupational Psychology (DOP) - British Psychological Society, International Commission on Occupational Health – Scientific Committee on Work Organization and Psychosocial Factors, European Agency for Safety and Health at Work (EU-OSHA).
Since occupational health psychology exists at the intersection of behavioural science and occupational health disciplines, it is inclusive of knowledge and methods from psychology, public/occupational health, organizational studies, human factors, and allied fields. The keynote presentations, five special sessions, 39 oral paper presentation sessions, 32 symposia, and 138 posters examined the key developments in the field and identified avenues to further consolidate and advance the discipline. Proceedings of the conference are now available on the Academy’s website. These include abstracts of all the presentations, posters and keynote speeches. To access the electronic book of proceedings please click on the “Publications” link at www.eaohp.org.

At each conference the Academy awards a lifetime Fellowship to an individual who, in the opinion of the Executive Committee, has made an exceptional contribution to the discipline of occupational health psychology. This year Professor Christina Maslach, University of California – Berkeley, Professor Robert Karasek, University of Massachusetts – Lowell and Copenhagen University, and Professor Tom Cox were awarded the EAOHP Fellowship. The Andre Bussing prize was awarded to Anne-Maarit Mäkikangas from the University of Jyväskylä, Finland.

The evening reception, sponsored by the BPS Division of Occupational Psychology, was held on the first evening of the conference at the Senate House, University of London. The reception provided delegates the opportunity to network while enjoying canapés and wine. The conference dinner was organized at the iconic Westminster Palace, UK Houses of Parliament and was hosted by Mr Mark Hendrick Member of Parliament. The evening began with a champagne reception where delegates could take in the views of the river Thames and the history of the setting. Between the courses Mr Hendrick and Professor Sergio Iavicoli, EAOHP President gave speeches and welcomed the delegates on behalf of the Academy.

During the conference, the International Coordinating Group for Occupational Health Psychology (http://www.icg-ohp.org/) met to discuss ongoing activities. The Academy also signed a Memorandum of Understanding with the International Commission on Occupational Health – Scientific Committee on Work Organization and Psychosocial Factors (ICOH-WOPS) to work collaboratively to promote the development of research, professional practice and education in the discipline.

Following the conference, the organizing team sent out an evaluation survey to assess delegates’ perceptions of the conference. Of the 121 responses received the vast majority were pleased with the arrangements and indicated they had an overall positive experience. The feedback also helped identify areas for improvement, which will be addressed in the organization of the next EAOHP conference in 2016. More details are available in the conference evaluation report (see p.4).

Save the date: The 12th conference of the European Academy of Occupational Health Psychology will take place at the Royal Olympic Hotel, Athens, Greece from 11-13 April 2016. Call for papers opens on 18 May 2015. Up to date details are available at: http://www.eaohp.org/conference.html
A very warm welcome to the latest issue of the Occupational Health Psychologist! We’d like to extend a special welcome to those of you who might be reading the Newsletter for the first time, as new members of EAOHP who have joined since our conference in April this year.

Since our last issue, Kelly Sivris has joined the Editorial Team as Editorial Assistant. We would like to welcome Kelly to the Team, and look forward to working with her.

We begin this issue with a report on the 11th EAOHP conference held at Birkbeck College, University of London, and the conference evaluation report. We were delighted that so many of you, from so many different parts of the world, were able to join us for this very successful event.

The conference presented a unique opportunity for Gail Kinman and me to interview Johannes Siegrist and Robert Karasek together about their respective work. For us, this was one of the highlights of the conference. Here we share with you an excerpt from our interview.

EAOHP is delighted to be an official partner of EU-OSHA’s 2014-2015 campaign, ‘Healthy Workplaces Manage Stress’. In her article, Cristina di Tecco tells us about the campaign and what it will mean for EAOHP.

We are grateful to Toon Taris for providing us with Work & Stress news. This includes some good news about the journal’s impact factor and an overview of the papers published in recent editions.

Our research report is written by Anne Mäkikangas, winner of the Andre Bussing Memorial Prize. Her report is based on the paper for which she was awarded the prize, and addresses the topic of the relationship between personality and occupational wellbeing.

Our ‘Focus on practice’ interview is with Emma Donaldson-Feilder, an OHP practitioner and director of two small businesses. Emma tells us about her background, how she became interested and involved in OHP, the nature of her work and how she would like to see OHP develop in the future.


We look forward to catching up with you in the New Year. In the meantime, we hope you have a relaxing break and wish you all health and happiness for the forthcoming year.

Sue Cowan, Editor
On behalf of the Editorial Team
Email: s.cowan@hw.ac.uk
Following the London 2014 EAOHP conference, the organizing team sent out an evaluation survey to assess delegates’ perceptions of the conference. This was done with an eye to improve our next conference in Athens 2016. We received 121 responses representing a response rate of 23%. We would like to take this opportunity to thank everyone again for replying to the survey, it is a critical tool for assessing our performance as an organizing team.

Below we share some of the results of the survey grouped into three headings: leading up to the conference; the venue and support; and what was on offer.

**Leading up to the conference**

Most delegates found the experience building up to the conference to be a positive one. The registration processes were rated as good or excellent by over 80% of the respondents. The abstract submission process fared slightly worse with only 76% suggesting it was good or excellent. We have already made several changes to this including how symposia are submitted (which was one of the main comments from the qualitative sections of the survey). One particular area which we will look to improve on at Athens 2016 is pre-conference website information. Although 68% or you thought it was excellent or good, 28% thought it was only adequate, and 4% rated it as poor or unacceptable.

**Venue and support**

The venue and support were rated fairly positively. Over 80% of you felt the reception desk team, organizing team, and conference venue quality were either good or excellent. As the team worked hard to ensure that the best experience could be provided to our delegates we are particularly pleased with this response. We will certainly look to maintain this standard and improve further in future conferences.

However, an area of improvement appears to be the adequacy of the presentation rooms. Only 56% of respondents felt the rooms were good or excellent, while a further 31% stated that they were only adequate, and 13% thought they were unacceptable. Many respondents added qualitative notes regarding the need to walk between buildings to get to different conference rooms. This was due to space constraints at the venue, however, taking on board this feedback we have ensured that in Athens 2016, all rooms associated with the conference will be under one roof.
What was on offer

The final set of questions evaluated delegate perceptions of the content of the conference. The keynote presentations appear to be a highlight of the conference, as 95% of you stated they were good or excellent. We have already sent out enquiries to ensure we can provide a similar standard of quality at our Athens 2016 keynotes. Furthermore, the quality of the oral presentations and the range of topics discussed were well received. Over 80% of you rated these as good or excellent.

The quality of poster presentations was an area where improvements could be made. 26% of you suggested the quality to be adequate, with a further 2% stating it was inadequate or poor. The qualitative comments pointed to two overall issues: one surrounding the quality of material presented, and the second regarding the ease of navigating around the poster sessions, as well as their timing. In response to this feedback, we are improving and further detailing the assessment criteria for our scientific review committee, as well as improving the organisation around the poster session.

Finally, with 23% of you stating that opportunities for networking were only adequate and a further 4% suggesting they were inadequate or poor, this represents another area where improvements can be made. We will do our best to squeeze in additional networking events into an already packed schedule for our next conference.

Final comments

Overall we believe the conference was a positive experience, which is reflected by the evaluation survey. Based on your feedback, we have identified areas for improvement and are already taking actions to try and address these. Once again, the organizing team would like to thank you for attending our conference as well as taking the time to fill in the survey. We very much look forward to welcoming you in Athens 2016!
In this extract from our interview, Robert and Johannes describe the develop of their models of job stress, what has made their models so influential, how they are being further developed, and the contributions they believe they can make in the future.

J.S: I think there are different answers to these questions. One answer has to do with scientific network and actually in my case I had the privilege to organize a European scientific programme with the European Science Foundation together with Michael Marmot and we created a network of scientists interested in work and health and not only in work and health, in the social determinants of health, with workplace in an important role. So, there were around 50 distinguished young and energetic scientific people who went to these joint meetings, and one of the products of these joint meetings was to design studies to coordinate measures. So there was an opportunity to implement both the Demand-Control and the Effort-Reward Model into study designs, which were conducted across European countries. Actually, much of what we discussed, one of our starting points, was these IPD types of study, like the GAZEL study in France, the Whitehall study, which had started in 1992, I think, and some of the Swedish and Danish studies. So that is one answer. There was actually an opportunity within the European scientific network to disseminate. The second answer would be obviously these models have some power to explain things. Building a theoretical model is a risky choice and in a way we are lucky that these two concept approaches seemed to capture something that is essential for human health at work.

R.K: First: I do think that these two models, Demand-Control and Effort Reward, have captured, in a parsimonious way, quite different, but very important and complementary issues.

About my background: I first developed the Demand-Control model in summer 1974 when I was a sociology graduate student at MIT in Boston, but working as a research assistant in Stockholm. My Swedish mentors at the Institute of Social Research in Stockholm wanted the
psychosocial models to be simply understood as material wellbeing models, and so I formulated the Demand-Control model in very simple terms and then it was broadly tested, also in very simple terms.

A major step forward in the Demand-Control model research came in late 1979, when I revisited a set of my dissertation findings on job strain and heart disease symptoms. I contacted a new Swedish colleague: Tores Theorell. This later led to years of collaborative work, with the first step being my establishment of the Job Heart project at Columbia University, and then our publication in AJPH in 1981 of the job strain heart disease associations for Swedish males.

In the last decade with the Demand-Control Model, I have been attempting to understand, for example, at the physiological level, why Job Strain works and has worked, and not only for heart disease, but for a variety of other biological outcomes, since there was no single physiological pathway that was broad enough to encompass all of these outcomes. So I found myself going back to an even earlier education before my pre-sociology architectural background, which was in physics, and which finished off with thermodynamics. This addressed an extremely powerful set of theoretical formulations (some physicists would even derive the law of gravity out of the second law of thermodynamics). The central issue here, of energy and order, captured me at an early age. I left that career behind but it sort of recaptured me in the early 2000s, as I tried to come to an answer, why does the Demand-Control model work to explain disease? Why does Job-Strain predict diverse illnesses or depression, and so on?

Thus, I went back to the most general formulations, and it was the issue of energy and order. One had to maintain the stability and self-regulation in a situation, always needing to pull disordered energy, and to process and utilize it to maintain internal platforms, and then potentially take further actions. However, that was the only level at which the Demand-Control Model actually had its full, necessary breath of explanatory power. In other words, it required that level of generality. It is quite general about the issues relating to processes of transforming disordered energy, into ordered energy, which is linked to Demands. And the other requirement, maintaining the stability of a system, implies internal Control. This requires what we might call "control strategies," which are our skills. So, I finally came to the conclusion that it was only at the most general level that the model had an explanation, for example, of why many diseases were really diseases of dysregulation, and that those could leave you, -according to this new Demand-Control model explanation (Stress Disequilibrium Theory) - unfortunately, in a new equilibrium at a lower level of function which was “disease”.

J.S: I think I can follow on that line. One of the reasons for this interest, or if you want to say ‘success’ of the theoretical model is, of course, the recurrent production of new knowledge, and that is what attracts then the scientific community. There are also negative findings, but the majority of studies as far as I know, and of course you publish positives rather than negatives, but still the broad majority supports the notion that this model has explanatory and predictive power, and in my case I think it has to do with something quite fundamental. It has to do with some rather basic rules of the social grammar, of human behaviour, of interpersonal exchange, and that is why it is strong. If you invest something, which is good for another person, and s/he just simply takes without giving back, this is a violation of reciprocity. This is a fundamental source, and I think even in evolutionary terms, societies were successful if they followed these principles of collaboration, cooperation, and reciprocal exchange.

J.S: Yes, and then comes the biological, the biomedical component. With due respect for psychological research, much of it is just subjective reports, and you correlate something like a burnout questionnaire with something like a job questionnaire, and we said no, we need to understand what is going on in the organism, the human organism. And my first revelation in a way, was a book by the American physiologist, James Henry, in 1977, ‘Stress and Social Environment and Health’. Jim Henry, who later became a friend of mine, and Herbert Weiner, one of the founding fathers of the American Psychosomatic Society, both had training in animal research. They both did pioneering studies showing that even in animals, they can demonstrate how the social (social conflicts and social relationships) affect the body, immune systems, physiological systems, blood pressure,
heart rate variability etc. And I think the collaboration with Henry and Weiner was absolutely decisive in my intellectual development urging me to look for evidence. Linking something, which is produced by subjective data with physiology, either in terms of long-term outcomes, such as heart/corneal disease or depression; or with mediatory factors like high blood pressure, high lipids; or instantaneous measures like saliva cortisol, or natural killer cell levels in blood cells and in white blood cells, and so on. That is probably a little bit distant from the majority of psychological studies, which are very elaborate many of them, very fine, but they lack this linkage between the social structure, the individual, and bodily disease.

R.K: It is interesting, as I hear Johannes speak and Johannes hears me speak, to think about this new interpretation of the Demand-Control Model, which I call the Associationalist Demand-Montrol Model. I still think Johannes and I have very much complementary contributions. Actually, what is very important for both us is the human interaction interface, which is not about to be dropped from research for sure. I think the issues relating to democracy and equality and equity and fairness; are picked up better by Johannes’ perspective. At the same time, this new generalization I describe to you of the Demand-Control model, is based on a new form of systems theory terminology, and really does potentially cross many levels. It addresses psychological levels, where we have to talk about the integration of our emotional subsystems, our ability to integrate behaviour, whether we are able to maintain stability in that integration, or the mechanisms that we are using to integrate behavior. Maureen Dollard has recently applied this new perspective at the organizational level to understand how protective psychosocial climates could be created at the organizational level. So the Associationalist Demand-Control model has a sort of multilevel generality which I think is very powerful. However, these contributions should never be separated from the social equity, exchange reciprocity, and fairness issues that derive from the social interaction that Johannes is talking about in Effort Reward. So, our two approaches remain really quite complementary, even as they are, as we might say, dramatically expanded.

J.S: Independently, I think we moved from the more restricted, work-related issues to a more macro perspective, integrating these macro notions into the lower level. That is interesting.

R.K: Both of us, we started at the macro level, and then we found we needed to answer these physiological questions. They were of interest to us. You know, the answers that came out were tangible. There were very clear phenomena, certainly stress-related, that had to be addressed. However, the answers we came to were not the answers that clearly existed in the field without our new entry points.

J.S: Maybe this finally answers your question about these two models, and why they have been so popular. I think particularly the Effort-Reward Imbalance Model has the potential to capture aspects of economic globalization, and because we talk about intensification of work, we talk about redundancy, cut down of...
personnel, downsizing, rationalization, job insecurity, also freezing, or even cutting back salaries; I mean very awful things, which happen right now. Some of these aspects are monitored in the model, and this is one reason why the model has been successfully applied in countries like China, South Korea, Taiwan, and Latin America, and so on. This may be another explanation why it was popular, and is popular.

R.K: And the way I would like to think about these future directions for this new Associationalist version of Demand-Control is that if you go in the positive, growth-related direction, extending the Demand-Control Active Work hypothesis, you get to what I call: Conducive Economy. In this case what you are really doing is taking a person’s (or organization’s) existing skill-related subsystems, and you are reintegrating them as you find a new source of external disordered energy in the environment that you can pull in, transform into ordered energy (Work), and then use for growth. But this describes a process that is actually the creation of another form of value. It is a growth-based value. It is a value within a person or an organization, anything that can grow. By contrast, the kind of value that is the basis of our current global economy is predicated on materialism, a materialism that we find our global economy pulling us ever further into, and at the same time, which is pushing out other explanatory frameworks. That is not to say that the above mentioned Conducive Economy, related to what might be called a capability development, would be the only future social solution, but it is integral to a socially living entity, either a person or an organization. And that offers a new kind of value. I think that is an essential next step. We must find these new goals for our work, for our social understandings.

J.S: I think we are close to Amartya Sen, the concept of capability, and actually in psychological terms, self-esteem is both a product and precondition of growth, psychological growth, and in order to nurture your self-esteem you need some positive feedback from the social environment, from significant others, and that is why recognition, appreciation, esteem is such an important experience.

R.K: So, you see both value creation, and a social context description, I think are interesting for us to think about. But the value creation is an absolutely essential next step for us now. It’s not so easy for many of us to figure out what our future will be like if we continue in the directions in which we have been moving in the global economy. We must be able to trace alternative pathways. I think it is important for people to think they are not locked, but can see new ways in which a new or evolving platforms could be created. You know, the Conducive Economy/Value model is also very entrepreneurial, and in that manner, an evolutionary version of many current economic dialogues. It is defined at a rather general theoretical level, but I think we must move in such broad new directions. Expanded visions are now necessary because we have not had enough new models in the recent decades. We have had instead had a sort of “vacuum” of new social paradigms. But new dialogues are necessary; otherwise the “vacuum” sends you only backwards to old and insufficient approaches. We have seen where the vacuum has sent us for the last decade or two or three. Not having new models employed, has not put us where I expected us to be when I first looked at successful Sweden at the very end of the 1960’s.

J.S: Yes, let's hope we will have some success, I mean we have at least strong and beautiful evidence from some of the progressive economists showing that the model on which the current economy is based, the model of economic man, fails to reflect what is actually going on in economic practice. So we need to correct this model, to change it.

R.K: Yes, such changes as we describe would represent a paradigm shift, but the shift develops organically out of the tools we have in use have today. These are the new forms of knowledge which are spread so broadly, and the emphasis on education and development. Those tools have come as what we might call the result of our global market capitalism, but at the same time they lead to a platform, which could change that system. Once you move to the direction of a new definition of basic needs based on skills and capabilities, you no longer have all the value captured in an object with a market price. You have now gone beyond materialism.
Work-related stress and other psychosocial risks represent a major occupational health challenge. They have a high prevalence, a high socio-economic cost to companies and society as a whole, as well as a recognized negative impact on workers’ health and wellbeing. As a consequence, the effective management of health and safety in the workplace is beneficial to workers, business and society.

The European Agency for Safety and Health at Work (EU-OSHA) launched its 2014-2015 campaign on “Healthy Workplaces Manage Stress” with the key aim of helping employers, managers, workers and workers’ representatives to recognize and manage stress and other psychosocial risks in the workplace. At a special session co-organized by EU-OSHA and held at the London Conference (April 2014) on 'Managing and Assessing Work-related Stress in Europe: State of the Art of National Strategies’, EAOHP announced its official partnership in the campaign. This role is in accordance with EAOHP’s purpose of promoting public knowledge and education in Occupational Health Psychology to improve workplace health and wellbeing.

Malgorzata Milczarek, Project Manager, EU-OSHA, highlighted the principles and activities related to the campaign at the special session. Thereafter, a debate among representatives of the main European methodologies and initiatives took place, and future steps and challenges in the management of work-related stress and other psychosocial risks in Europe were identified.

"Raising awareness of health, with a special focus on the impact of stress, violence and harassment in terms of health consequences, in addition to loss of productivity and related costs, remains one of the priorities in Occupational Health and Safety and a challenge for the future," said Sergio Iavicoli, President of EAOHP. He added: "The EU-OSHA campaign 2014-2015 represents a good occasion to help companies and workers to tackle psychosocial risks and manage work-related stress, and contribute to creating healthy and more productive workplaces." This partnership also represents an important opportunity to improve the international collaborating network to promote knowledge on Occupational Health Psychology in Europe.
With an unprecedented number of partners joining in June, Healthy Workplaces Manage Stress looks set to be EU-OSHA’s most talked about campaign so far. EAOHP is one of over 60 official partners supporting the campaign to raise awareness of work-related stress across Europe.

EAOHP has committed to spread the campaign’s message that psychosocial risks can be managed in the same practical, systematic way as any other occupational safety and health risk. In addition, it is promoting campaign activities and useful tools via its networks and communication channels, including social media (such as Facebook, Twitter’s EAOHP profiles).

Further information about the campaign along with associated tools and materials may be found at: [https://www.healthy-workplaces.eu/en](https://www.healthy-workplaces.eu/en)

---

**Announcement**

**Call for Papers on "Psychosocial factors and workers’ health and safety"**

BioMed Research International is calling for manuscripts for a forthcoming Special Issue on "Psychosocial factors and workers’ health and safety" edited by Sergio Iavicoli, President of EAOHP as Lead Guest Editor, as well as by the following Guest Editors: Stavroula Leka, (University of Nottingham, Nottingham, UK); Steven L. Sauter (National Institute for Occupational Safety and Health (NIOSH) Atlanta, USA); Giancarlo Cesana (The University of Milan Bicocca, Milan, Italy); and Maureen Dollard (The University of South Australia, Adelaide, Australia).

The Special Issue will be published in April 2015. You can find the Call for Papers at [http://www.hindawi.com/journals/bmri/si/909274/cfp/](http://www.hindawi.com/journals/bmri/si/909274/cfp/). The **deadline for submission is 16th January, 2015**. The Special Issue is open to both original research articles, as well as review articles.

BioMed Research International (formerly titled Journal of Biomedicine and Biotechnology) is a peer-reviewed, open access journal. This means that all published articles are made freely available online without a subscription, and authors retain the copyright of their work. Moreover, all published articles will be made available on PubMed Central and indexed in PubMed at the time of publication. The most recent Impact Factor for Journal of Biomedicine and Biotechnology is 2.706 according to 2013 Journal Citation Reports released by Thomson Reuters in 2014.
News

News from Work & Stress

By Toon Taris, Editor

Our last feature on Work & Stress for the Newsletter was in October 2013. In the meantime much has happened, and five issues of the journal have been published.

Editorship and Associate Editorships

In January 2014, I took over from Tom Cox as Editor of Work & Stress, becoming the second editor in the almost 28 years that have passed since the journal was established in 1987. As was reported in the last Newsletter, Tom (who is now affiliated with Birkbeck College, University of London) has taken on the role of Emeritus Editor. I am honoured to serve the journal in this position and will do my best to consolidate and extend its position as one of the leading journals in occupational health psychology.

Since the number of submissions to Work & Stress has increased steadily over the years, we have extended the board of Associate Editors with Nathan Bowling (Wright State University, Ohio), Paula Brough (Griffith University, Australia) and Morten Birkeland Nielsen (National Institute of Occupational Health and University of Bergen, Norway). I extend my thanks to all the Associate Editors for their hard work “behind the scenes”. Unfortunately, Michael O’Driscoll (University of Waikato, New Zealand), who was one of our first Associate Editors, has had to step down for personal reasons. Mike has served the journal in this role for five years and has been extremely active in helping Work & Stress to achieve its current status: thanks Mike!

2013 Impact factor

At Work & Stress we were very pleased to receive our 2013 impact factor, which was announced in the second half of July. Compared to 2012, our current impact factor (based on the number of citations in 2013 to papers that we published in 2011 and 2012) increased by 10% to 2.14, meaning that we now rank 15th out of the 75 journals in our category (“applied psychology”). Our five-year impact factor is 4.93, which is 5th out of 75 and the highest among the leading OHP journals. Evidently, Work & Stress is doing fine, and we thank everyone among you who made this possible (e.g., by submitting your papers to us or by reviewing for us).

Papers published in recent editions

Since October 2013 five issues of Work & Stress have been published. Here I will discuss the first four of those: volume 27 part 4, 2013, and volume 28 parts 1-3, 2014. These issues cover a wide range of themes and approaches. Some are familiar, e.g. bullying and conflict (5 papers), interventions and organizational change (5 papers), burnout (3 studies), and recovery from work (3 studies) have all frequently been studied over the past decade. Two other themes that have recently been addressed in Work & Stress concern the role of personal characteristics (4 studies) and the design and analysis of longitudinal studies (2 studies). These last two papers were included in part 1 for 2014, which was a special edition on longitudinal research. The following summarises the papers in these four editions.

Burnout

One well-examined issue in occupational health psychology concerns the antecedents and consequences of burnout. Claude Fernet and colleagues from Canada examine the assumption that in order to burn out, workers must first have been “on fire” (i.e., highly motivated). In their paper Fired up with passion: Investigating how job autonomy and passion predict burnout at career start in teachers (vol. 28: 3) they show that “harmonious passion” (which results from an intrinsic motivation for work) predicts low, and “obsessive passion” (resulting from a more extrinsic motivation for work) predicts high levels of exhaustion – the core component of burnout – across time.
Another possible antecedent of burnout concerns the way stressors are perceived by workers. In their paper *Cognitive appraisal as a mediator in the relationship between stress and burnout* (vol. 27: 4), Rui Gomes and colleagues from Portugal show that primary and secondary cognitive appraisals partially mediated the relationship between occupational stress and burnout at work.

The final paper in this theme also focuses on the cognitive aspects of burnout. However, rather than conduct a primary study, in their paper titled *Job burnout and cognitive functioning: A systematic review* (vol. 28: 2), Pavlos Deligkaris and colleagues from Greece conducted a systematic review, showing that burnout is associated with a decline in three main cognitive functions: executive functions, attention and memory.

**Longitudinal research designs**

The special edition on longitudinal research in occupational health psychology began with an editorial by Toon Taris and Michiel Kompier from The Netherlands, entitled *Cause and effect: Optimizing the designs of longitudinal studies in occupation health psychology* (vol 28: 1), which discussed a number of issues to be addressed in future longitudinal research designs. In addition to the editorial, two papers addressed methodological aspects of the research designs used in occupational health psychology. The first was *How do occupational stressor-strain effects vary with time? A review and meta-analysis of the relevance of time lags in longitudinal studies* (vol. 28: 1), by Michael Ford and colleagues from the US. These authors conducted a quantitative meta-analysis, examining how the length of the time intervals in longitudinal studies impacts the study findings. Generally, lagged effects were strongest for a three-year interval whereas synchronous effects tended to increase over time. Both lagged and reverse causation effects were highly variable for sample sizes under 500, indicating that large sample sizes are needed to detect longitudinal effects reliably.

In their paper *Relationships of individual and organizational support with engagement: Examining various types of causality in a three-wave study* (vol. 28:3), Amanda Biggs and colleagues from Australia and New Zealand focused on the longitudinal relationships between work engagement and three supportive job resources: supervisor support, colleague support and individual perceptions of the wider resource of work culture support, across a 12-month and an 18-month time interval. Work culture support predicted higher supervisor support, colleague support and work engagement over time lags of 12 and 18 months. Furthermore, work engagement was a significant predictor of work culture support over the two time lags.

**Bullying and conflict at work**

Although there are conceptual differences between bullying, conflict at work and workplace incivility, at a higher level these concepts have much in common: they all refer to potentially stressful interpersonal situations in which one party attempts to get the upper hand over the other. It is not surprising that these topics currently attract much attention in occupational health psychology. In their paper *An expanded typology of conflict at work: Task, relationship and non-task organizational conflict as social stressors* (vol. 27: 4), Valentina Bruk-Lee and her colleagues from the US present an expanded typology of conflict. They distinguished among task, relationship and non-task organizational conflict at work, showing that all three forms of conflict negatively impact well-being. A second paper in this category, *The effect of conflict at work on well-being: Depressive symptoms as a vulnerability factor* (vol 28: 1) by Laurenz Meier and colleagues from Switzerland, extends these findings by showing that people with relatively high levels of chronic depressive symptoms react particularly strongly to conflict. Their findings suggest that conflict may lead to depressive symptoms, which can make people even more vulnerable to conflicts, indicating a vicious circle with high psychological and economic costs. These costs may be high, as shown in *Depression in the workplace: An economic cost analysis of depression-related productivity loss attributable to job strain and bullying* (vol. 27: 4) by Wesley McTernan and colleagues from Australia. Based on a longitudinal telephone survey (N = 2074), they confirmed the idea that job strain and bullying affected productivity via depressive symptoms, and that even sub-clinical levels of depression represent a significant productivity and economic burden not previously recognized.

However, aggressive behaviour from others does not always and necessarily lead to high levels of stress. In *Day-level fluctuations in stress and engagement in response to workplace incivility: A diary study* (vol. 28: 2), Larissa Beattie and Barbara Griffin from Australia examined how daily rude and discourteous behaviour at work...
affects daily well-being. They found that participants reported higher levels of stress on the days when they experienced more incivility, but high supervisor support reduced this effect. Similarly, in their paper *Bullying and health at work: The mediating roles of psychological capital and social support* (vol. 28: 3), Tony Cassidy and colleagues from Ireland showed that both psychological capital (a combination of high self-efficacy, optimism, hope and resiliency) and social support mediated the impact of bullying on health and well-being. These two studies offer handles for practical interventions addressing the impact of aggressive interpersonal behaviour on health.

**Organizational change, insecurity and interventions**

Five papers fall into this category. In their paper *Threat of losing valued job features: The role of perceived control in mediating the effect of qualitative job insecurity on job strain and psychological withdrawal* (vol. 28: 2), Tinne Vander Elst and her colleagues from Sweden and New Zealand examined the effect of qualitative job insecurity (i.e., being insecure about whether one will be able to maintain valued job characteristics such as career and wage progression) on well-being, finding that perceived control mediated the associations between qualitative job insecurity and lack of employee well-being.

It is well known that job insecurity may affect worker well-being. However, Tahira Probst from the US and her colleagues from Italy show in their paper *The relationship between job insecurity and accident under-reporting: A test in two countries* (vol. 27: 4) that workers who are insecure about their job tend to underreport accidents that have happened to them at work. The researchers suggest that employees who perceive their jobs as insecure consider reporting accidents as possible reasons for being laid off. Apparently, not only does job insecurity lead to lower levels of well-being: it is also possible that workers with insecure jobs tend to experience even higher levels of accidents than we are currently aware of.

Organizational change may induce job insecurity and can therefore lead to adverse outcomes for health and well-being. In their paper *Well-being in times of task restructuring: The buffering potential of workplace learning* (vol. 28: 3), Irina Nikolova and her colleagues from The Netherlands and Belgium showed that the adverse effect of task restructuring on well-being was mitigated if workers possessed opportunities for learning through reflection and experimentation. Interestingly, although some organizational changes are explicitly designed to improve worker well-being, such interventions are not always successful. Two papers address this issue. In their paper *A participative intervention to improve employee well-being in knowledge work jobs: A mixed-methods evaluation study* (vol. 28: 1), Ole Sørensen from Norway and David Holman from the UK show that in particular occupations – such as knowledge workers – well-established job redesign strategies may have adverse effects on well-being. For example, enriching job discretion may not be suitable in such jobs because they may increase already problematic levels of task uncertainty and ambiguity. Interventions may not be successful if the target population does not perceive that they have been exposed to these interventions. In their paper *An organizational-level occupational health intervention: Employee perceptions of exposure to changes, and psychosocial outcomes* (vol. 28: 2), Henna Hasson and her colleagues from Canada found that the perceived impact of an intervention was at least as important for health and well-being as actual exposure to this intervention.

**Recovery from work**

Previous research has shown that the degree to which workers can recover from work-related effort is an important antecedent of health and well-being. In their paper *The importance of sleep: Relationships between sleep quality and work demands, the prioritization of sleep and pre-sleep arousal in day-time employees* (vol. 28: 3), Marisa Loft from New Zealand and Linda Cameron from the US examine the relation between work-related demands, the priority given to sleep and sleep behaviours across an 11-day period. They found that high priority for sleep and positive emotions at work may promote sleep quality, whereas cognitive and emotional demands, or pre-sleep arousal may disrupt sleep patterns and, hence, recovery. However, recovery does not only occur after work. In their paper *How feeling happy during off-job activities helps successful recovery from work: A day reconstruction study* (vol. 28: 2), Wido Oerlemans and his colleagues from The Netherlands show that it is not just the time spent on on- and off-work activities but the subjective experience of such activities that plays a pivotal role in recovery: activities especially promote recovery when they are enjoyed. The latter is also emphasized in *Work to non-work enrichment: The mediating roles of positive affect and positive work reflection* (vol.
28: 1) by Stefanie Daniel and Sabine Sonnentag from Germany. They found that workers who reported higher levels of work engagement tended to reflect positively on their work experiences during leisure time, leading to higher levels of work-to-life enrichment. This should in turn affect their work.

**Personal characteristics and work outcomes**

A fifth cluster of papers focused on the effects of personal characteristics. In their paper *Presenteeism and health over time among Chinese employees: The moderating role of self-efficacy* (vol. 28: 2), Luo Lu and colleagues from China and the UK examine the longitudinal relation between presenteeism and health as a function of self-efficacy. They found that self-efficacy moderated the relationships between presenteeism and health. In their paper *The Job Demands-Resources Model in emergency service volunteers: Examining the mediating roles of exhaustion, work engagement and organizational connectedness* (vol. 28: 3), Jasmine Huynh and colleagues from New Zealand and Greece focused on three mediators in the relationship between job characteristics and volunteer happiness and turnover intentions: exhaustion, work engagement and organizational connectedness. They found that all three mediators accounted for part of the relationships between demands, resources and outcomes.

In their paper *Are job and personal resources associated with work ability 10 years later? The mediating role of work engagement* (vol. 28: 1), Auli Airila and colleagues from Finland and The Netherlands examined in a 10-year longitudinal study whether work engagement acts as a mediator between job resources and personal resources (self-esteem) on the one hand and future work ability (i.e. a worker’s functional ability to do their job) on the other. As hypothesized, engagement at T2 fully mediated the impact of job and personal resources at T1 on work ability at T2.

Finally, in their paper *It's all about me: The role of narcissism in exacerbating the relationship between stressors and counterproductive work behaviour* (vol. 27: 4), James Meurs and colleagues from the US found that the relationship between organizational stressors (such as interpersonal conflict and organizational constraints) and counterproductive work behaviour was stronger for workers reporting high levels of narcissism. In conjunction, the findings of these four studies show that scholars in occupational health psychology should examine personal characteristics as a potentially important antecedent of work behaviour.

**Now read the papers!**

The papers mentioned here were published in *Work & Stress* Volume 27 part 4 (2013) and 28 parts 1-3 (2014). These papers, plus those in in the latest edition – part 4 for 2014 – may be obtainable from your institutional library, or can be downloaded from the journal’s website: see www.tandfonline.com/toc/twst20/current.

**Coming soon— online access to Work & Stress**

From February 2015, Routledge will provide online access to the journal for all members of the Academy via a secure link from the password protected “members area” of the EAOHP website. The link will provide members with access to all content from volume 11 (1997) onwards, including latest articles published online ahead of being assigned to an issue, on www.tandfonline.com/twst.

*Print access is also available to EAOHP members at a significantly discounted rate. See the membership page on the conference website.*
The main aim of this study was to gain a more comprehensive understanding of the associations between personality and occupational well-being. The study was motivated by the fact that, as a complete person, an employee simultaneously possesses many personality traits, all of which play a role in occupational well-being (Mäkikangas, Feldt, Kinnunen, & Mauno, 2013), whereas the previous occupational health psychology literature has focused largely on single personality traits or trait-like characteristics. In addition, occupational well-being research has tended to be polarized, focusing on either ill-being (e.g., burnout) or well-being (e.g., work engagement). To address these issues, this study adopted a person-oriented approach (Bergman, Magnusson, & El-Khoury, 2003). We first investigated the intra-individual constellations of both occupational well-being and personality, and then explored the linkages between the occupational well-being types and personality profiles in order to obtain more fine-grained and more pervasive information on their association.

Although a person-oriented approach is commonly used in other areas of psychology (e.g., developmental psychology), it remains rare in occupational health psychology. Most of the empirical work on occupational well-being has been variable-oriented, focusing on statistical relations between variables across individuals on the group level. In contrast, in the person-oriented approach used here, the individual is taken as the unit of measurement (Bergman et al., 2013).
The most typical group of employees. The Bored-out type was characterized by very low levels of job satisfaction, low levels of work engagement and relatively high levels of exhaustion. The levels of workaholism did not differ across the four types.

A notable finding was that these four occupational well-being types did not differ either in background characteristics (i.e., gender, working hours, occupational status) or, systematically, in the any of the Big Five traits. Instead, what turned out to be crucial was the combination of traits as a whole, as the strong interdependency between the Big Five personality profiles and the occupational well-being types found in this study showed (see Table 1).

The Resilient personality profile was the most favorable for occupational well-being: Resilient individuals typically belonged to the Engaged type. The Overcontrolled profile was the most unfavorable, associated with the Burned-out type, whereas the Ordinary personality profile was typically linked with the Ordinary well-being type.

**Conclusion**

The present results strongly indicate that no single personality trait is responsible for the associations with occupational well-being; instead what matters, is whole combinations of traits. For example, to be linked with favourable occupational well-being outcomes, conscientiousness needs to be associated with the other alpha factor traits (i.e., low neuroticism and high agreeableness; Digman, 1997), as in the Resilient or Ordinary profiles. Similarly, high levels of the beta factor traits, e.g., extraversion and openness to experience (Digman, 1997), are not enough by themselves to produce high levels of occupational well-being, if they are associated with low levels of conscientiousness, as in the Undercontrolled profile. To be successful in working life, an employee needs to have high emotional stability, take others into account (agreeableness) and act in a responsible way (conscientiousness). Overall, the study highlighted the importance of investigating and understanding personality as a whole, when exploring its links with multifaceted occupational well-being.

**Table 1**

Interdependency between the Four Types of Occupational Well-being and the Big Five Personality Profiles

<table>
<thead>
<tr>
<th>Occupational Well-being Types</th>
<th>Resilient</th>
<th>Overcontrolled</th>
<th>Reserved</th>
<th>Undercontrolled</th>
<th>Ordinary</th>
<th>Total N</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
<td>Adj. res</td>
<td>Adj. res</td>
<td>Adj. res</td>
<td>Adj. res</td>
<td>Adj. res</td>
<td></td>
</tr>
<tr>
<td>Engaged</td>
<td>22</td>
<td>4</td>
<td>2</td>
<td>6</td>
<td>20</td>
<td>54</td>
</tr>
<tr>
<td></td>
<td>3.5</td>
<td>-0.1</td>
<td>-1.2</td>
<td>-1.3</td>
<td>-1.4</td>
<td></td>
</tr>
<tr>
<td>Ordinary</td>
<td>19</td>
<td>3</td>
<td>8</td>
<td>15</td>
<td>33</td>
<td>98</td>
</tr>
<tr>
<td></td>
<td>-1.5</td>
<td>-2.5</td>
<td>0.6</td>
<td>-0.5</td>
<td>2.6</td>
<td></td>
</tr>
<tr>
<td>Bored-out</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>7</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td></td>
<td>-1.2</td>
<td>1.6</td>
<td>-0.2</td>
<td>2.9</td>
<td>-1.9</td>
<td></td>
</tr>
<tr>
<td>Burned-out</td>
<td>0</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>5</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>-2.1</td>
<td>3.2</td>
<td>1.2</td>
<td>-0.1</td>
<td>-0.5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>43</td>
<td>14</td>
<td>13</td>
<td>30</td>
<td>52</td>
<td>182</td>
</tr>
</tbody>
</table>
References


Anne Mäkikangas is an Adjunct Professor in Work Psychology and an Academy Research Fellow for the Academy of Finland. Her research interests include examining occupational well-being from the perspectives of personality, job stress, and positive psychology. In addition, she has expertise in research methodology, especially in person-centered methodology and longitudinal data analysis.
How did you first become interested in Occupational Health Psychology? What is your educational background, and what if any, previous relevant work experience have you had?

Having done my undergraduate degree in psychology, I spent 10 years working in the field of international relations and communications, including running the social sciences and humanities programme for the British Council in France, and political affairs for the Government of Quebec in London. During this time, although I wasn’t directly using my psychology knowledge in my professional life, I became very interested in the whole issue of health and wellbeing in the workplace. It seemed to me, as an employee and manager, that there was much more that could be done to help people handle work pressures and to improve how people are managed, in order to have a positive impact on their wellbeing.

I also maintained an interest in matters psychological during my spare time (various trainings in counselling and psychotherapy, working as a volunteer counsellor for a bereavement care charity etc.) and there came a point when I decided that I wanted to change career to do something more directly related to my interest in psychology. Given that by then I had a good chunk of experience working for a number of different organizations in the UK and overseas, and an interest in workplace health and wellbeing, it seemed like a natural next step to become an occupational psychologist, with a focus on occupational health psychology. So I went back to university and did the masters in organizational psychology, then became chartered with the British Psychological Society as an occupational psychologist (and now registered with the Health Care Professions Council too).

Could you tell us something about your current employment?

Currently, I am Director of two small businesses: Affinity Health at Work (http://www.affinityhealthatwork.co.uk); and Affinity Coaching and Supervision (http://affinitycoachingandsupervision.com). Affinity Health at Work is a workplace wellbeing consultancy and research group, which I co-founded with fellow occupational psychologists, Rachel Lewis and Joanna Yarker (Rachel is also Associate Professor at Kingston Business School). We are actively involved in both research and practice: this means that our research is designed to be directly applied in the workplace and our consultancy clients receive services that are informed and underpinned by approaches, methodologies and content that build on the latest research evidence. Affinity Coaching and Supervision is a vehicle for my coaching and supervision work, which is rather a different stream of activity, though all of it is concerned with the workplace and much of it relates to health and wellbeing issues too.

Could you describe some of the work initiatives/projects in which you have been, and are currently involved?

Affinity Health at Work’s research has explored a range of issues around workplace health, always with a strong focus on practical application, generating guidance and tools for managers, organizations and practitioners, all of which are freely available to download from sponsors’ websites. We are probably best known for the work we have done on management competencies for preventing and reducing stress at work (funded by the UK Health and Safety Executive, the Chartered Institute of Personnel and Development, Investors in People, and latterly, our Research Consortium). Following on from this, we have expanded the perspective on line managers to look at what management behaviours are needed both to engage employees, and to protect health and wellbeing. We call this combined construct, which includes engagement, health and wellbeing, ‘sustainable engagement’. We are currently conducting research to establish how employers can best support managers to develop the relevant capabilities and create an organizational context that is conducive to managing people in ways that enhance health, wellbeing and engagement.
In terms of our consultancy, we tend to be asked by clients to support them with strategic aspects of managing employee health and wellbeing. For example, we provided a project for a large energy company in which we reviewed their programme of interventions designed to improve employee wellbeing, and supported them to develop their strategy for the following five-year period. We have recently been involved in helping a large transportation company review how best to address health improvement for their employees – particularly around supporting employee behaviour change in the areas of physical activity and healthy eating. And we are involved in an on-going project designed to monitor resilience across a management population in one of the emergency services and to establish how to address issues that emerge as being detrimental to wellbeing.

Looking at my coaching and supervision practice, recent projects have included: supporting senior managers to improve how they handle pressure and interpersonal relationships at work; providing supervision for an individual running a programme of coaching and coach development within a healthcare technology company; and coaching the Chief Executive and Deputy Chief Executive of a charity to help them deal with a major transition project.

In addition to my research, consultancy and coaching/supervision work, I am also an author, conference speaker and media commentator. My writing and presenting mainly aims to raise awareness of our research outputs, particularly the freely available online guidance and tools for organizations/practitioners looking to improve employee health, wellbeing and engagement. My colleagues, Rachel Lewis and Joanna Yarker, and I have produced a book based on our preventing stress research called Preventing stress in organizations: How to develop positive managers published by Wiley. In addition, I am involved in the public policy domain, aiming to support evidence-based policy-making, including setting up working group on public policy within the British Psychological Society (BPS) Division of Occupational Psychology, representing the BPS on the UK Council for Work and Health, and representing the Council for Work and Health on the Shadow Board for a potential new pan-professional body for work and health.

What are the biggest challenges for you as an OHP practitioner?

During the recession, it was a real challenge to get employer organizations to understand the importance of continuing to consider and invest in employee health and wellbeing, even when finances are tight. To me, it seems clear that supporting individuals with their psychological wellbeing is, in particular, even more important in an economic downturn, but employers tend to become so focussed on survival and cost-reduction, that they don’t see that. Hopefully, as the economy improves, the resources (time, money, people) given to workplace wellbeing issues will increase, but I think we still have a way to go in convincing employers of the benefits to all (business case, societal case etc.) of having a healthy and psychologically well working population.

In what direction do you see OHP practice going in the future?

There are two areas in which I would like to see OHP practice develop, though whether it will or not is another question.

Firstly, I would like to see much stronger integration between OHP/employee health and wellbeing practice and more mainstream people management activity. In particular, I think it would be really beneficial if developing managers to manage people in ways that enhance employee health, wellbeing and engagement was seen as an essential and integral part of mainstream management development; and it would be invaluable if consideration of employee wellbeing was routinely integrated into all processes that impact on people at work, from organization development and change, to talent management, to performance management and appraisal.

Secondly, I would like to see a greater input from OHP practice into the OHP evidence/research base. I think practitioners have a lot of learning to contribute to the field that is not currently adequately captured and shared. Academic journals and research can be very narrow in approach. While I totally understand the need for rigour and high standards, I think this can lead the field
unintentionally to reject valuable evidence, knowledge and information. An evidence-based approach that drew in practitioner expertise, experience and perspectives would make for more rounded and useful outputs.

**What advice would you give to someone looking for their first job as an OHP practitioner?**

Whether you decide on a career in research or in practice, aim always to bring the two areas together. So, if you go into research, aim to ensure that what you do can be translated into meaningful advice and guidance for organizations, individuals and/or practitioners. If you go into practice, aim to keep up to date with the growing research and practitioner evidence-base, so that you can apply and learn from it to evolve and improve your work – and feed your experience and learning back into the OHP pool of evidence.

**What advice would you give to someone considering OHP as a career?**

Go for it! It is a really fascinating area and there is so much to be done.

---

**Books**

**Book reviews:**

**Salutogenic Organizations and Change: The Concepts Behind Organizational Health Intervention Research**

Georg F. Bauer and Gregor J. Jenny (Eds)

The book ‘Salutogenic Organizations and Change’, edited by Georg F. Bauer and Gregor J. Jenny aims “to provide an overview of current approaches to organizational health intervention research (OHIR)” (p.2). In the introductory chapter of the book, the editors begin by dichotomizing the range of research traditions in the field of organizational health interventions. They distinguish between research traditions that focus on stress management interventions that take a largely individualistic linear research approach, and those that focus on workplace health promotion and take a more context-driven approach to interventions, addressing the “non-predictable, non-linear and non-measurable” (p.2). This dichotomy between individualistic approaches and settings-based approaches to workplace health interventions is not new, but the authors take the concept a few steps further, developing a multidimensional framework for categorizing OHIR. The framework comprises three intervention approaches (universalistic, contingency and configurational), three evaluation types (outcome, process and context); associated evaluation research questions and four contrasting research paradigms (functionalist, interpretative, radical structuralist and radical humanist).

After presenting this fairly complicated framework, the authors argue that utilising this approach “allows us to map different organizational health intervention (research) approaches, to relate them to each other, and to reflect on implications of the diverse, basic assumptions about knowledge generation and type of change needed” (p.12). This is an ambitious undertaking which is reflected in the diverse contributions in the book and its length: the text comprises 18 chapters, each one describing a different model, approach and/or intervention.

The book is divided into four sections:

- **Section 1: Concepts of organizational health**
- **Section 2: Organizational concepts driving theory-driven interventions**
- **Section 3: Concepts of organizational health interventions and change;**
- **Section 4: Intervention and change concepts guiding theory-driven interventions**
While I could appreciate the underlying reason for this structure when reading the different contributions in each section, the commonalities across the chapters in each section did not seem sufficiently strong to differentiate clearly between them. What is more useful is that each chapter is structured in relation to three themes. The first addresses the authors’ understanding of what constitutes a healthy organization. The second theme deals with the authors’ approach to organizational change and the third presents the authors’ views on how to evaluate interventions drawing on their particular approach to healthy organizations and organizational change. This provides a common thread across the many chapters and allows the reader to get some sense of the authors’ thinking in relation to the specific topic that each chapter addresses.

The quality of both the writing and the actual content of the different chapters in the book is quite varied. Occasionally I would have liked to have seen more careful language editing, as well as more editing in relation to the flow and logic of some of the material being presented. Overall, however, the book presents some novel views on occupational health interventions and research from a salutogenic perspective. It also provides anyone who is new to OHIR with a range of interesting perspectives, approaches and examples to consider. It is a timely contribution to the literature as interest in both positive occupational health psychology and interest in OHIR continue to gain momentum.

Reviewed by: Dr. Karen Milner, Associate Professor (Organizational Psychology), Department of Psychology, University of the Witwatersrand, Johannesburg, South Africa.

---

**Call for Book Reviewers**

AOHP is looking to expand our team of book reviewers. There are a number of benefits to becoming a book reviewer, including:

- access to the latest books, allowing you to keep up to date with your areas of practice, education and/or research, or simply those that interest you most;
- getting your name known in relevant circles;
- expanding your CV;
- and you get to keep any book that you review!

Book reviews should be approximately 500 to 700 words in length. Books for review will be sent to you, so you will not incur any costs. If English is not your first language, don’t let this put you off – if you need it, you will be provided with help to prepare your review. If you would like to join our team of book reviewers, please email the Newsletter’s Book Reviews Editor, Gail Kinman (Gail.Kinman@beds.ac.uk) with details of your interests.
# European Academy of Occupational Health Psychology Offices

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Sergio Iavicoli</td>
<td><a href="mailto:s.iavicoli@inail.it">s.iavicoli@inail.it</a></td>
</tr>
<tr>
<td>Past President</td>
<td>Tom Cox</td>
<td><a href="mailto:t.cox@bbk.ac.uk">t.cox@bbk.ac.uk</a></td>
</tr>
<tr>
<td>Executive Officer</td>
<td>Aditya Jain</td>
<td><a href="mailto:Aditya.Jain@nottingham.ac.uk">Aditya.Jain@nottingham.ac.uk</a></td>
</tr>
<tr>
<td>Finance Director</td>
<td>Stavroula Leka</td>
<td><a href="mailto:Stavroula.Leka@nottingham.ac.uk">Stavroula.Leka@nottingham.ac.uk</a></td>
</tr>
<tr>
<td>Membership Officer</td>
<td>Cristina di Tecco</td>
<td><a href="mailto:c.ditecco@inail.it">c.ditecco@inail.it</a></td>
</tr>
<tr>
<td>Research Forum Chair</td>
<td>Birgit Greiner</td>
<td><a href="mailto:b.greiner@ucc.ei">b.greiner@ucc.ei</a></td>
</tr>
<tr>
<td>Practice Forum Chair</td>
<td>Peter Kelly</td>
<td><a href="mailto:peter.kelly@hse.gsi.gov.uk">peter.kelly@hse.gsi.gov.uk</a></td>
</tr>
<tr>
<td>Conference Chair</td>
<td>Daniel Mari Ripa</td>
<td><a href="mailto:d.mari.ripa@gmail.com">d.mari.ripa@gmail.com</a></td>
</tr>
<tr>
<td>Education Forum Chair</td>
<td><strong>Vacant</strong></td>
<td></td>
</tr>
<tr>
<td>External Relations Officer</td>
<td>Gail Kinman</td>
<td><a href="mailto:Gail.Kinman@beds.ac.uk">Gail.Kinman@beds.ac.uk</a></td>
</tr>
<tr>
<td>Publication Officers</td>
<td>Sue Cowan</td>
<td><a href="mailto:s.cowan@hw.ac.uk">s.cowan@hw.ac.uk</a></td>
</tr>
<tr>
<td></td>
<td>Kelly Sivris</td>
<td><a href="mailto:kelly.sivris@nottingham.ac.uk">kelly.sivris@nottingham.ac.uk</a></td>
</tr>
<tr>
<td>Secretariat</td>
<td>Nicholas Andreou</td>
<td><a href="mailto:nicholas.andreou@nottingham.ac.uk">nicholas.andreou@nottingham.ac.uk</a></td>
</tr>
<tr>
<td></td>
<td>David Hollis</td>
<td><a href="mailto:David.Hollis@nottingham.ac.uk">David.Hollis@nottingham.ac.uk</a></td>
</tr>
<tr>
<td></td>
<td>Cristina di Tecco</td>
<td><a href="mailto:c.ditecco@inail.it">c.ditecco@inail.it</a></td>
</tr>
</tbody>
</table>

## Academy Publications

**the Occupational Health Psychologist:** Published three times per annum. ISSN 1743-16737 (Online). Back copies can be downloaded at [www.eaohp.org](http://www.eaohp.org)

**Work & Stress:** A journal of work, health and organisations. Published by Taylor & Francis in association with the European Academy of Occupational Health Psychology. ISSN 0267-8373

**Contemporary Occupational Health Psychology: Global Perspectives on Research and Practice:** A biennial series published by Wiley-Blackwell on behalf of the European Academy of Occupational Health Psychology and the Society for Occupational Health Psychology. Available from the Wiley-Blackwell websites and through large online retailers including Amazon.

---

### Information

Are you interested in chairing the Academy Education Forum?

Nominations for the Chair of Education Forum are open. If you are interested in undertaking this role, please email Aditya Jain at Aditya.Jain@nottingham.ac.uk to find out more details. The Education Forum aims to promote OHP education and training by advising on the development of education and training programmes, fostering partnerships for the development of such programmes, and working together with similar bodies in other OHP organisations to do so. The Education Forum deals with both academic and practitioner education and training issues. The Chair of Education Forum is responsible for arranging sessions at EAOHP conferences, work alongside representatives from external organisations to promote OHP education and curriculum development, provide a forum update for each issue of the newsletter and advise external organisations on the development of OHP courses and curricula.
GUIDELINES FOR CONTRIBUTORS

We are keen to publish many different kinds of articles, and we hope this will encourage a broad range of submissions. We welcome articles from people involved in practice, education and/or research in OHP and across the full range of contributory disciplines, and with a variety of levels of experience. If English is not your first language, don’t let this put you off – if you need it, you will be provided with help to prepare your item. We aim to publish three issues per year.

OHP research/practice

We welcome short reports (of no more than about 1000 words) of research findings, practice issues, case studies, brief literature reviews, and theoretical articles. This could be a valuable opportunity for you to disseminate information on your work both to academics and practitioners. When writing these reports please make them as accessible as possible to the broad readership of the Newsletter.

OHP briefings

We also welcome overviews of your OHP-related activities, or those of your research group, consultancy or organization. This type of article provides a useful insight into the sort of work that is being undertaken across the OHP world community. Additionally, this section enables the communication of policy developments that may have implications for OHP research, practice and education in your country. We ask that such articles are no longer than 1,200 words long.

Opportunities

We would be pleased to receive advertisements for job opportunities, internships or PhD studentships. If you have an opportunity that you would like to make our community aware of, please send a short description to the Editors.

Other articles

We welcome news, conference announcements, open letters regarding any OHP-related topics, responses to published articles and brief summaries (in English) of OHP issues that have been reported by your national news media.

We would be pleased to receive appropriate photographs to accompany your contributions.

Please email your questions, announcements or contributions to the Editor:

Sue Cowan: s.cowan@hw.ac.uk

The Occupational Health Psychologist Editorial Team:
The Editor, Sue Cowan is Lecturer and Programme Director, Heriot-Watt University
David Hollis (Newsletter Design) is an Associate of the University of Nottingham
Kelly Sivris (Editorial Assistant) is a doctoral student at the University of Nottingham