

original article

The invisibility of international health psychology research**Keith J. Petrie** ^{1*}¹Department of Psychological Medicine, University of Auckland, New Zealand

When I was a graduate student in the States I used to turn out for the Los Angeles Rugby Club. Rugby in the US is a small but friendly sporting subculture with questionable health behaviours. The team comprised a number of California bankers, businessmen, teachers and, being LA, a few mostly unemployed actors. One of whom famously slept in his car for most of the season before finally getting a break by appearing in a Superbowl Toyota ad.

One weekend my team was playing in San Diego and I was travelling down the Pacific Coast Highway with the team hooker – which I should add is a position in the front row of the scrum. Also in the car was one of the locks and his 10-year-old son Tom. Tom was amusing himself by asking me the capitals of various American States and I wasn't doing so well:

“What's the capital of North Dakota?”

“Hmm, Cowtipperton,” I offered.

“No its Bismarck. What about Maine?”

“Ahh, Chowderville,” I tried.

“No, everyone knows it is Augusta. You don't know anything about capitals”

I looked around the car and the hooker and lock were nodding sadly in agreement. I decided to ask Tom some questions of my own. What was the capital of France? He didn't know. What about England? “No”. Italy? “No”. New Zealand? “What's that?” While Tom could name every US state capital, he did not know one of the capitals of any European country.

This experience will not be new to anyone who has spent time in the States or tried to find international news on TV or in the pages of American newspapers. If we constructed a homunculus to reflect the relative cognitive space represented by the world outside America, apart from the country where American troops were currently fighting, the world would occupy very little area compared to any one of the 50 States. I often think of Tom when I consider how the American insular view of the world has influenced the health psychology field by overvaluing research work

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produced within the US and rendering invisible a great deal of excellent work in Europe and other countries. While other fields of American psychology and psychosomatics have embraced international researchers, American health psychology largely ignores the work of non-American psychologists.

Mental Myopia Rules

The status afforded non-American researchers can be seen in the make up of the editorial boards on the major publications of *Health Psychology*, *Annals of Behavioral Medicine* and the *Journal of Behavioural Medicine*. Health Psychology's current list of associate and consulting editors comprises no psychologists at all from outside the US. *Annals of Behavioral Medicine* also has no non-Americans on its editorial board. The Journal of Behavioural Medicine fares little better. Of the 45 associate editors and members of the editorial board, just three are non-American, and two of these are from Canada.

Some American based scientific organisations in the health psychology area now regularly hold annual meetings outside North America to increase the membership's exposure to a wider range of international research. Over the past five years the American Psychosomatic Society has met in Hungary and Spain, interspersed with conferences in US cities.

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(Continued on page 51)

original article

Petrie, KJ (cont'd)

(Continued from page 50)

Overseas researchers as a result have achieved a higher profile in the Society's journal *Psychosomatic Medicine*. A similar process has occurred in the Psychoneuroimmunology Research Society, which now has a very healthy international contribution in the journal *Brain, Behavior, and Immunity*.

So how invisible are international researchers in American Health Psychology journals? The short answer is very. If we look at the articles published in *Health Psychology* in 2006, 83% of the first authors were from North America. This comprised 75% American papers and 8% Canadian. International articles made up only 17% of papers. A similar level (18%) of non-American papers was found in *Annals of Behavioral Medicine* in 2006. The *Journal of Behavioral Medicine* had an even lower rate of non-American papers. Of the total number of papers the journal published in 2006, 86% were from American authors, 4% were from Canadians and only 10% from international authors. We can compare these figures with the journal *Psychosomatic Medicine*, which in the same year published 41% of its articles from non-North American researchers.

States Dependent Learning

Unfortunately, the inability to acknowledge research conducted outside the States is not limited to American health psychology journals. American authors conducting literature reviews often miss or ignore publications from the international research literature. American introductory health psychology textbooks also give scant attention to work published by international researchers. The *Encyclopaedia of Health Psychology* (Christensen, Martin, & Smith, 2004) uses very few non-Americans in its articles written by "150 leading practitioners" as a result the reader would be excused for believing that very little has occurred in health psychology outside the US.

The argument can be made that perhaps non-American papers are simply not good enough to get into *Health Psychology*, *Annals of Behavioral Medicine* and the *Journal of Behavioural Medicine*. Perhaps American authors do better science and this is reflected in the proportion of papers accepted by these journals. However, this argument is hard to sustain given the higher rate of non-American papers in *Psychosomatic Medicine*, which has a higher impact factor than all of these journals.

So if the rate of non-Americans papers is lower than could be reasonably expected in these journals, what would be a reasonable level given the number and quality of health psychology research being conducted outside the US? This is a difficult question to answer but I suspect it is currently probably somewhere between 40 to 50%. One way to examine this issue is to look at key and classic papers in the field. Recently, Sage published four volumes of "key and classic" papers in health psychology (Weinman, Johnston, & Molloy, 2006). Using the Delphi technique the editors wrote to eminent health psychologists and asked them for a list of what they considered to be key and classic papers in the field. Using the same methodology a long list of 200 papers was cut back to the 82 papers making up the four volumes of theoretical frameworks, concepts, methods and measurement, and applications in health care. Of these key and classic papers, 37% were from Non-American researchers and most of these were more recent papers.

This percentage is much closer to the proportion of non-American papers accepted by *Psychosomatic Medicine* than it is to the rate accepted by *Journal of Behavioral Medicine*, *Annals of Behavioral Medicine* or *Health Psychology*. The fact that more the recent papers tended to be from international researchers suggests that while much of the work in establishing the field came from American researchers the field is now developing across a broader international base and a greater range of innovative work is coming from countries outside the US than previously.

Wonder Woman meets the Invisible Man

So what can be done to increase the visibility of international research in American journals and textbooks? There are a few things that I think are worth trying. The first and probably easiest would be to increase the visibility of international researchers on journal editorial boards and list of associate editors. This would be a healthy start as it encourages international researchers to submit to the journal and sends a signal that international research is valued. Moving the Society of Behavioural Medicine meetings or the APA health psychology Division 38 meetings away from North America on a regular basis would also help increase the presence and impact of international researchers at these conferences. I think

(Continued on page 52)



original article

Petrie, KJ (cont'd)

(Continued from page 51)

APA Division 38 could also invite more international keynote speakers to present at the US meetings. Conference symposia could be required to include at least one paper from an international researcher. This way, symposia would begin to showcase research teams from countries outside the US.

I think these are interventions that are worth trying but from my experience at organizing international conferences, the most powerful change in attitude occurs when researchers from different parts of the world sit down together in a relaxed environment and find common ground in their research work. It is here where real synergies occur and possibilities for future work or collaboration open up. Interventions that get to this important end point are likely to have the largest and most sustaining impact.

It is my impression that currently in the health psychology field the most innovative and productive American researchers have developed strong international relationships and collaborations. These relationships often become central to their later research enterprise and travel in unexpected directions. This is very encouraging as it shows that when Wonder Woman does find the Invisible Man, great things can occur.

References

- Christensen, A., Martin, R., & Smith, JM. (Eds.). (2004). *The Encyclopedia of Health Psychology*. New York: Kluwer Academic/Plenum
- Weinman, J., Johnston, M, & Molloy, G. (Eds.). (2006). *Health Psychology* (Vols 1-4). London: Sage Publications.

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