

task analysis methods and their application. Gladswell highlighted the ability of experts to reach conclusions and make decisions swiftly, based on limited data. Experts when asked to describe how they reached their conclusion omit large chunks of information unless deep probing using cognitive task methodology. Yet the content of the tertiary curriculum for practitioners is determined from the reflection of senior practitioners about what they think ought to be relevant to new novices. When expert practitioners gave instructions to novices to enable them to achieve their same results the novices could not replicate the expert's results. Indeed the information provided was less than 40% of that required. Employers often complain about new graduates not being ready to work as a practitioner and the profession recognises this by requiring a period of supervised practice. Cognitive Task Analysis methods offer two contributions to the development of professionals. One is to make explicit the thinking strategies of experts with a view to informing educational programs that develop practitioners. The second is to equip supervisees as action researchers who through observation and structured and deep questioning can work with their supervisor to uncover the cues observed, models and principles applied that enabled them to successfully respond to their clients. This Profession and Practice session will outline the relevant research, propose a method to test this proposition, report on a pilot with S.A. Organisational Psychologists and promote discussion on the implication of Cognitive Task Analysis methods for the profession.

**Moving from rational to irrational modelling: Predicting alcohol consumption**

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Traditional health behaviour models (eg. Theory of Planned Behaviour) rest on the assumption that behaviour is the result of a deliberate, rational decision-making process. These 'rational' models however fail to account for the situational influences of behaviour. Thus, the ability to explain spontaneous, irrational behaviour such as binge drinking is limited. A more appropriate theoretical framework has been outlined by Gibbons and Gerrard. The Prototype Willingness Model (PWM) accepts that behaviour is not always rational and may be influenced by a number of situational factors. Through the inclusion of an 'irrational' pathway to behaviour, the PWM has had success predicting health risk behaviours such as binge drinking, which are more likely to be subject to situational influences. The current study aimed to compare the Theory of Planned Behaviour (TPB) and the Prototype Willingness Model's (PWM) ability to predict alcohol consumption within an adult sporting sample (M= 30.15 years, SD= 12.48 years). Participants completed either a paper- or web- based anonymous questionnaire. The total sample (N= 319) included males and females from team and individual oriented sports. Sport type comparisons highlight the contrast between the social nature of team sports and individual sports where social pressures to consume alcohol may not be as prominent. Overall, team sports people's quantity of alcohol consumption was significantly greater than individual sports people's. Multiple Regression Analyses (MRAs) were conducted to examine the TPB and PWMs ability to predict team and individual sports people's quantity of alcohol consumption. As expected, the results suggest that the prototype was more salient for team sports people where hazardous alcohol consumption and prototype perceptions were significantly positively associated. The current study has highlighted the association between prototype perceptions hazardous alcohol consumption. Risk behaviour goes beyond the scope of rational forethought, thus the frameworks we employ must also acknowledge this. The important aspect of the PWM is that it provides a more enriched model upon which interventions can be based. It goes beyond the TPB by including social mechanisms that influence behaviour. Future research should now focus on manipulating prototype perceptions in an attempt to reduce hazardous alcohol consumption.

**"Movement as Medicine": combining theory and research to develop an online professional development training program and support materials to assist primary healthcare professionals intervening to increase physical activity in people with type 2 diabetes**

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The global prevalence of diabetes is projected to rise to 366 million by 2030, with much of this attributed to type 2 diabetes (T2DM). T2DM is an asymptomatic but devastating condition; persistently elevated blood glucose (BG) concentrations are associated with increased risk of blindness, kidney damage,