

# Health Psychology Practice in Europe: Taking Stock and Moving Forward Together

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## Introduction

According to the British Psychological Society Division of Health Psychology website “the goal of health psychology is to study scientifically the psychological processes of health, illness and health care. [and]... apply health psychology to the promotion and maintenance of health, the analysis and improvement of the health care system and health policy formation, the prevention of illness and disability and the enhancement of outcomes of those who are ill or disabled.” Health Psychology as a discipline emerged over 30 years ago after Engel’s (1977) seminal paper introducing the Biopsychosocial model of healthcare and illness. Within Europe, The European Health Psychology Society (EHPS) was established in 1986 to promote “empirical and theoretical research in and applications of health psychology within Europe as well as the interchange of information related to health psychology with other associations throughout the world (EHPS, 2016)”. These statements emphasise the broad scope of health psychology from theory and evidence to implementation, and the ‘scientist-practitioner’ role for health psychologists.

The EHPS is now a thriving international organisation which organises an annual conference with a full four-day scientific programme, attracting around 1000 delegates. There are also

preconference workshops including those organised by CREATE (tailored to early career stage delegates) and SYNERGY (tailored to more experienced delegates). During the EHPS members’ discussion forum at the 28th Conference of the EHPS in Austria in 2014, a number of delegates raised the issue that the EHPS is currently heavily focused on the academic and research aspects of Health Psychology, with much less engagement in issues more relevant to applied Health Psychology Practice. Using health psychology in practice is important to test and promote its value in the ‘real world’, disseminate knowledge, and facilitate empirical testing of theories and evidence, to feed back and strengthen the science overall.

Following on from the 2014 conference, we (MB and VS) organised an informal meeting at the 29th Conference of the EHPS in Cyprus in 2015 to discuss the role of EHPS in promoting the development of applied Health Psychology practice and careers. This meeting was attended by over 100 delegates, many voicing the opinion that EHPS could provide an ideal forum to support attempts currently underway within a number of member countries to promote and develop Health Psychology practice infrastructure in different contexts and different healthcare systems. Realising that we had limited knowledge about the current status of Health Psychology training and practice in these member states, we committed to conduct a survey of EHPS member countries to get a snap shot of current practice.

These data were presented at a Roundtable session at the 30th EHPS Conference in Scotland in

2016 facilitated by VS and MB. Here we present the findings of this survey.

## The survey

The online survey was created using Qualtrics Survey Software and was distributed to the list of 40 EHPS National Delegates in January 2016. Respondents were asked questions about education, training, practice and careers for Health Psychology Practitioners in their country.

## Results

Twenty-four participants from twenty-four EHPS member countries completed the questionnaire, giving a response rate of 60%. The respondents worked in predominantly research and academic settings with 23 stating they were lecturer/professor or researchers and no participants identifying as exclusively either a Health Psychology Practitioner or Clinician.

When asked about terminology, the term "Health Psychology" is used by 23 of the countries with the exception of Lithuania, which uses the term "Medical Psychology."

## Health Psychology Training

Health Psychology as a topic is taught in 20 (83%) of the 24 undergraduate courses in EHPS member countries. At a post-graduate level, 18 of the 24 respondents reported having Masters programmes in Health Psychology in their countries. When asked about the focus of their Masters Programmes, ten said their programme focused exclusively on academic content and eight said their programme contained a mix of academic content plus practitioner skills. Seventeen countries reported having Doctoral level

qualifications in Health Psychology: 12 of these were PhD programmes in Health Psychology, three were Doctoral level Practitioner Training in Health Psychology and two were defined as "other." See table 1 for further information on education and training in each of the EHPS member countries.

## Employment for Health Psychologists

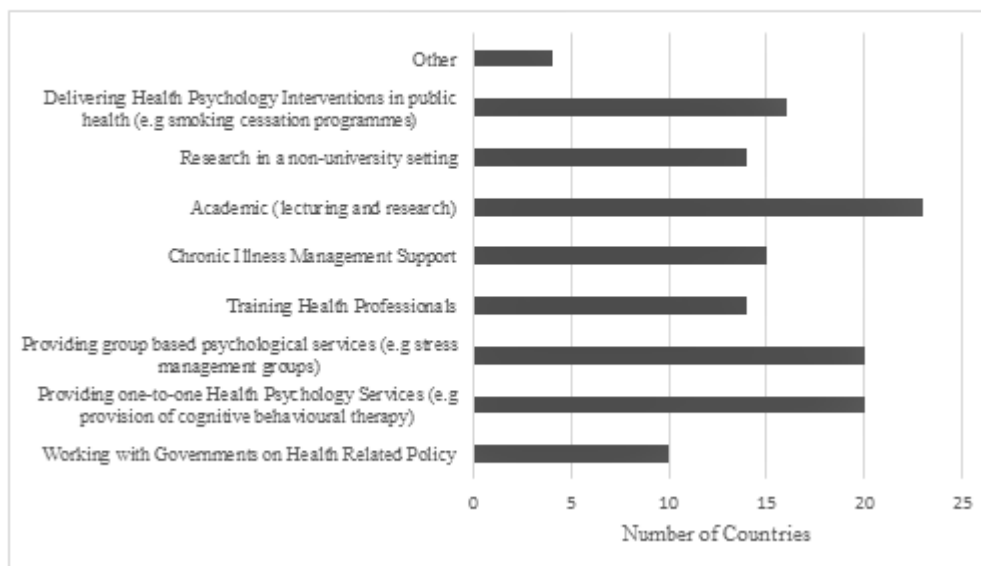
Career prospects and sectors of employment for Health Psychologists varied greatly across EHPS countries. Only eight respondents (33%) said there were jobs advertised specifically for Health Psychologists in their country; 13 (54%) answered that there were no health psychology posts. Table 2 shows the common sectors where Health Psychologists are employed. Note that this item was completed for sectors in which people with Health Psychology qualifications are employed, even if jobs are not actually advertised for 'Health Psychologists'. Third level education is the most common setting for Health Psychologists' employment (n=21; 88%), but high percentages of respondents reported that Health Psychologists were employed in secondary care or hospital services (71%) and public health (62%). It is noteworthy that fewer Health Psychologists are employed in primary health care settings (50%). Table 3 shows the types of jobs done by Health Psychologists. The most commonly reported type of job is lecturing and research in an academic setting, although relatively high numbers report Health Psychologists providing psychological services for clients at group or individual levels.

Table 1. Profile of Undergraduate and Postgraduate Health Psychology (HP) Programmes

Country	HP included in undergraduate Psychology course	MSc in HP: Academic only	MSc in HP: Combined Academic and Practitioner Training	PhD in HP	Doctoral Practitioner training in HP	Designated funding available to train as a practitioner in Health Psychology	Postgraduate programmes available which combine both 'Clinical Psychology' and 'HP' training.
Ireland	X	X		X	X		
United Kingdom	X	X		X	X	X	X
Israel							X
Luxembourg	X			X			X
Turkey	X	X	X				X
Greece	X		X				
Denmark							
Germany	X	X	X				X
Austria	X						X
Lithuania	X		X				
Bulgaria	X			X			
Croatia							X
France	X	X	X	X			X
Ukraine	X			X			
Slovenia	X	X				X	
Romania	X		X	X			X
Australia	X			X	X		
Latvia	X		X				
Poland	X	X		X			X
Brazil	X	X		X			X
Cyprus	X	X					
Finland						X	X
Japan	X	X		X			
Portugal	X		X	X			X
<b>Total % of countries</b>	83.33% (n=20)	41.66% (n=10)	33.33% (n=8)	50.00% (n=12)	12.50% (n=3)	12.50% (n=3)	54.16% (n=13)

Table 2. Sectors of employment for Health Psychologists (or those with Health Psychology Qualifications)

Country	Public Health	Third level Education (research and education)	Health Services (Primary Care)	Health Services (Secondary Care or hospital services)	Community Settings	Other
Ireland	X	X	X	X	X	
UK	X	X	X	X	X	X
Israel				X		
Luxembourg	X	X	X	X	X	
Turkey	X	X		X		
Greece	X	X		X		
Denmark						
Germany		X	X	X		
Austria	X	X	X		X	X
Lithuania	X	X	X	X	X	X
Bulgaria	X	X		X		
Croatia	X	X	X	X		X
France	X	X	X	X	X	
Ukraine		X				
Slovenia	X	X				
Romania		X				
Australia	X	X				
Latvia		X	X	X		
Poland		X	X	X		X
Brazil				X		
Cyprus		X				
Finland	X	X	X	X	X	
Japan	X	X	X	X		X
Portugal	X	X		X	X	X
<b>Total % of countries</b>	62.50% (n=15)	87.50% (n=21)	50.00% (n=12)	70.83% (n=17)	33.33% (n=8)	29.16% (n=7)

**Table 3. Types of Jobs done by Health Psychologists**

## Other Responses

One open-ended question allowed respondents to expand on their responses. Eight respondents (33%) added additional comments and four (17%) of these described current ambiguities in Health Psychology training and practice in their country.

"we do not have basic legal regulations which would formally recognize psychology as a profession (requirements for being a psychologist, available areas of professional activities and so on). Thus, any further specializations within psychology are not systematically regulated as well . . . (regulation) has been ongoing 'work in progress' for more than 25 years now. Sad but I cannot see any chance for a breakthrough in the nearest future." (Poland)

"(Jobs are) mainly in occupational health psychology, usually "health psychologists" apply for interdisciplinary job ads, even professorship positions are interdisciplinary (e.g. faculty position for behavioural prevention." (Germany)

"... jobs advertised in health psychology are very limited, so mostly psychologists work on a freelance basis ." (Greece)

"Although there are some examples of Health Psychologists working in clinical roles in Ireland, the vast majority are working in academic/research roles." (Ireland)

These responses highlighted some frustrations with the lack of standardised international regulation of Health Psychology Practice.

## Conclusion

This survey aimed to document and describe the level of training and career opportunities for Health Psychology Practitioners within 24 EHPS member countries in 2016. The results highlight the variation in both training and practice internationally and the open-ended responses provided insight into the lack of progress and frustration experienced due to the issues with Health Psychology regulation in some countries. Even where regulation exists (e.g. in the UK) there is still a lot of interest in the potential role of Health Psychologists contributing to health and social care, but this has not been accompanied by

any sizeable increase in the number of practitioner health psychology posts. In the UK for example, there have been advances in the training of health psychologists in the health services and elsewhere, and there are some areas where health psychology practitioner services are continuing to develop but nevertheless remain small scale, and service provision is patchy.

Our study has some potential limitations. We did not receive responses from all EHPS member countries and we are therefore limited in our generalisability and representativeness. In addition, while National Delegates are likely to be well informed in relation to the questions they were asked, we did not verify their responses and it is possible some responses may have been inaccurate.

At this time a formal career pathway does not exist for Health Psychology in most EHPS member countries, and there is much variation in how teaching and training in Health Psychology is delivered. If we are to 'sell' health psychology to employers, it would be helpful to develop and benchmark consistent curricula, skills and competencies which characterise a health psychologist role across Europe. In most countries, jobs are not advertised for 'Health Psychologists', a less than ideal situation, which likely reflects this lack of coherent training structure and lack of post-qualification benchmarking of skills at a European level. There is a 'chicken and egg' situation here however, since the existence of practitioner posts is likely to showcase the 'added value' of health psychology practice to healthcare, and stimulate demand for more posts.

The 1990s has been dubbed the 'Decade of Behavior'

[https://en.wikipedia.org/wiki/Decade\\_of\\_Behavior](https://en.wikipedia.org/wiki/Decade_of_Behavior) with an increasing awareness of the centrality of behaviour change to any interventions seeking to promote health. Policy within many countries prioritises developing behavioural interventions to prevent and manage chronic illness. There is an

excellent and timely opportunity for Health Psychologists to help to deliver this agenda. According to our survey, primary care is currently a setting with relatively little input from health psychology; as primary care provides an ideal health care setting for the delivery of chronic illness prevention and management programmes, it is likely to be an area of opportunity and for growth for Health Psychology input in future years.

The EHPS is ideally placed to take a lead in promoting a more coordinated approach at a European and International level to training and careers in Health Psychology Practice. There is energy and interest currently among members to do this. Now is the time to move forward together.

## References

- Engel, G. L. (1989). The need for a new medical model: a challenge for biomedicine. *Holistic Medicine*, 4(1), 37-53.  
<http://dx.doi.org/10.3109/13561828909043606>
- The British Psychological Society. (2013). Health Psychology. Retrieved from <http://careers.bps.org.uk/area/health>
- The British Psychological Society. (2016). Division of Health Psychology. Retrieved from <http://www.bps.org.uk/networks-and-communities/member-microsite/division-health-psychology>
- The European Health Psychology Society. (2016). About the EHPS. Retrieved from <https://www.ehps.net/content/about-ehp>



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