Report

## One plus one equals three: Creating value and impact through sustainable partnerships

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delighted to We were 'Bring obtain the stakeholder' grant University of Aberdeen, UK invite Jillian Evans to the European Health Psychology conference in Bremen. Jillian is Head of Intelligence Health Learning Health Systems for NHS Grampian in the Kingdom. determines how public health resources allocated across the NHS Grampian health board based on evidence and impact and leads the NHS team with whom we have been collaborating the past 3 years. We used this collaboration as a case study for our EHPS conference session on with partnering stakeholders (Hubbard et al., 2023).

0ur alliance, which began during the COVID-19 pandemic has helped us work towards creating a sustainable partnership between academic health psychologists and NHS public health teams to develop theory and evidence based public health messaging. We had been Scottish Government

transmission reducing behaviours but were not in a position to share this with practitioners on the ground. Consequently, we established a partnership where we (academic behavioural scientists) advised our public health colleagues on how to optimise public messaging by incorporating theory and evidence-based behaviour change content, and they (public health teams) informed us about current public health priorities and challenges, which went beyond the original focus on transmission reducing behaviours. Since October 2021 we have been meeting regularly and working on a variety of public health priority behaviours including, 'staying home with COVID' and 'vaping initiation in young people'. This partnership represents a strong reciprocal way of working that supports rapid, timely and sustainable collaboration between health psychologists and public health practitioners.

A clear benefit of working with stakeholders in this way is that it focuses academic researchers on areas of need and current priorities, increasing the real-world relevance and potential impact of the research. There are benefits on both sides - public health stakeholders can access actionable, theoryinformed advice to inform decision making and academics learn about current priorities and gain access to target populations.

In participatory research, solutions are often codeveloped with the target population, emphasizing partnership approaches that focus primarily on these end-users (Den Daas et al., 2020; Halvorsrud et al., 2021; Noorman et al., 2023; Palmer et al.,

providing

2018). However, this approach frequently overlooks the involvement of other stakeholders who are crucial for aspects such as implementation and codesign of the intervention. In our EHPS session, we focused on stakeholder relationships, where the stakeholders in question were professionals aiming to affect change. This led to discussion about practical logistics and challenges, for example how you find the right people to partner with, make collaboration mutually beneficial, and maintain the partnership over time?

In answering this, we suggest there are key principles to consider regardless of context. First, involve individuals with the necessary authority to make decisions and manage resources, such as leaders of departments of the people in the partnership even if they do not participate in the partnership themselves. Partnership working takes time and commitment, so it must be endorsed and facilitated by both partners. Second, there must be clear benefits to both partners. To create this winwin situation we focused our efforts on national public health priority issues that were important to the stakeholders in the partnership. We then worked with them to use our behavioural science expertise, to develop bespoke solutions that were tailored to the needs of the local population in Grampian. A significant challenge to this way of working is achieving equal investment from both partners. Our partnership was initially led by the academics, but evolved such that our practitioner colleagues became equal contributors. For example, during our work on preventing vaping, the stakeholder presented local information suggested possible action points, and people to invite to the partnership. Key to this was the use of interpersonal and communication skills, being able to listen and translate our way of working to the needs of people with different backgrounds, interests, perspectives and crucially, responding flexibly to changing demands.

Once established, a partnership needs to consider the issue of its own sustainability -

surviving challenges such as changing contexts, staff turnover, and competing priorities. Starting with a health problem that is not acute and one which is likely to be relevant over time allows the partnership to mature and enables methods of working to be established. We initially established our collaboration during the pandemic, aiming to generate testable messages within a month. However, our NHS partners perceived this pace as slow, which was exacerbated by the urgent context of the COVID response. This situation highlighted an inherent challenge in our approach, exacerbated by academic norms, particularly the ethical approval process. By the time we secured approval, tested the messages, and prepared them for implementation, COVID-19 infection rates had subsided, rendering the messages less relevant. This experience underscores the importance flexibility around 'normal practice' in time-critical situations. For instance, streamlining ethical approval processes, providing advice based on existing evidence when possible, and fostering realtime decision-making to mitigate delays and enhance the relevance and impact of our interventions.

Working in a successful partnership is extremely rewarding and fulfilling. It creates opportunities to work on important health priorities, to positively and directly impact public health, and to work with people that are equally passionate about their work. Ongoing collaboration build trust and relationship, that increase sustainability of partnerships and can be leveraged for future projects. Collaboration with people with different perspectives leads to innovation and produces far greater benefit than would result from each partner working alone: one plus one can and does equal three.

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