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Health Psychologist**

Bulletin of the European Health Psychology Society

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Health Psychology and the Sustainable Development Goals



Editorial

Pamela Rackow

University of Stirling, UK

The last couple of months have been a challenging time for all of us. We have all been and still are adjusting to a “new normal” – a new way of working, handling our family lives and maybe even finding a new way of enjoying our free time. The article by Köning, Roomaney, and Cipolletta depicts this genuine situation we are in at the moment by reporting about the responses to Covid-19 by the National Delegates of the European Health Psychology Society.

Moreover, this issue showcases the excellent work that the EHPS as a society is doing on an international level. Muindi, Gitau, Hale and Michie report about their work in Africa. We also have two reports about the involvement of the EHPS in the work of the United Nations demonstrating the formal affiliation with the UN. This is accompanied by a call for submissions of papers focusing on the application of health psychology approaches in any of the areas of the UN Sustainable Development Goals.

Laura Köning, Rizwana Roomaney, and Sabrina Cipolletta report on behalf of the EHPS National Delegates about Health Psychologists' responses to COVID-19. Their report is based on a poll that has been administered via the National Delegate officer to EHPS national delegates. Three questions had been asked: 1. How is your country coping with COVID 19 emergency? 2. How are you personally coping? and 3. What else might be done? The current article summarizes and categorizes the responses and presents the conclusion that experts in health psychology form an important part of the healthcare team and play

a crucial role in restoring the mental health of people throughout the world.

Kanyiva Muindi, Hellen Gitau, Joanna Hale and Susan Michie write about “**Research in Africa: Lessons learnt from participatory research in Kenya**”. This article covers reflections and lessons learnt based on a roundtable discussion at the 2019 EHPS conference in Dubrovnik (Croatia). The authors emphasize that in low- and middle-income countries the research should increasingly use a participative approach with community partners to design research questions and interventions to make sure that the derived activities are being implemented. They summarize their recommendations in five lessons learnt, which are being described in the article. The authors conclude that it is important to communicate to stakeholders and non-academic partners what is realistic and deliverable throughout the project and what is not.

In her piece “**Healthy Planet, Healthy People – Reflections on the United Nations Association Web Talk**” **Josianne Kollmann** informs about an UN hosted web talk delivered by Inger Andersen, the Executive Director of the UN Environment Programme. In her talk, Inger Andersen stresses that climate change is still of utmost importance, even when facing a global pandemic. In her conclusion, Ms. Andersen stresses that the Covid-19 pandemic has the potential to help understand that humans have a vital impact on the environment and climate. This impact should be used for a sustainable change towards a healthy planet and healthy people. The Covid-19 pandemic has the potential to bring home to the public that humans have a vital impact on environment and

climate. This impact, however, bears not only responsibilities but also a huge chance for a sustainable change towards a healthy planet and healthy people.

Philipp Kadel reports about the UN Global Youth Townhall Meeting which aimed to gather the global youth's input for the UN75 declaration. It will be adopted in September 2020 for the UN's 75th Anniversary. The three most important issues that had been discussed during the meeting were, recovery from COVID-19, global peace and security and tackling climate change. An inspiring and diverse group of young speakers discussed these issues with the two co-facilitators of the UN75 declaration.

Through our formal affiliation with the UN, the EHPS works to support sustainable development through the implementation of health psychology research and practice to improve health around the globe. As a society, we are ensuring that the sustainable development goals are reflected in our research and projects. Therefore, **Lucia Rehackova and Maria Karekla** are inviting **submissions** of papers focusing on the application of health psychology approaches in any of the areas of the Sustainable Development Goals for publication in a special issue of the European Health Psychologist. More information about the scope and the review process, can be found in this issue.

Pamela Rackow



Pamela Rackow

Faculty of Natural Sciences,
Psychology, University of Stirling
pamela.rackow@stir.ac.uk

Health psychologists' responses to Covid-19, as reported by the National Delegates of the European Health Psychology Society

Laura M. König

*University of Cambridge,
United Kingdom*

Rizwana Roomaney

*Stellenbosch University,
South Africa*

Sabrina Cipolletta

University of Padua, Italy

Abstract

As a response to many member countries of the European Health Psychology Society (EHPS) being hit hard by the Covid-19 pandemic, the EHPS National Delegates were consulted

about how different countries were dealing with the crisis. Between the end of March and the beginning of May 2020, National Delegates from 18 countries in Europe, Asia, and Africa provided insights into 1) the current situation and the government's response, 2) actions taken by health psychologists to help the public and healthcare workers, 3) how the delegates coped with the situation, especially regarding teaching and research duties at their university, and combining work and family life (e.g., taking care of family members, homeschooling), and 4) ideas for further actions and collaborative approaches that could improve psychological care during the crisis. As of April 2020, most countries were heavily affected with thousands of Covid-19 cases. Governments had implemented social distancing measures and restricted public life, e.g. by closing shops, restaurants, schools and universities. Health psychologists in many countries were helping the public to deal with the consequences of these actions in several ways, such as providing online resources, counselling and therapy, and online teaching for students. At the same time, National Delegates reported to be struggling with some of the imposed actions, such as schools being closed, as they were forced to find new ways to reconcile

work and family life.

First cases of a novel respiratory syndrome caused by a novel member of the family of coronaviruses were first detected in Wuhan, capital city of Hubei Province in China, in December 2019. Common symptoms include fever, cough, fatigue, and loss of smell, but also more severe symptoms such as breathing difficulties and pneumonia may occur (World Health Organization, 2020b). Being primarily spread through respiratory droplets when being in close contact with other people (World Health Organization, 2020a), the virus quickly spread within the province and to other provinces within China before spreading to other countries in Asia and on other continents in the first weeks of 2020. The outbreak was finally declared a pandemic by the World Health Organization in March 2020.

As of the beginning of May 2020, more than 3.5 million cases of Covid-19 were confirmed worldwide, with almost 250,000 deaths being reported and figures steadily increasing in some countries (Johns Hopkins University Coronavirus Resource Center, 2020). Accordingly, concern regarding contracting the virus increased throughout March and April 2020 (Renner et al., 2020). The number of cases and fatalities, however, differed between countries. The US as well as several European countries including Spain, Italy, and France were hit especially hard and each reported more than 150,000 cases by the beginning of May, while the US alone have surpassed 1 million cases. Similarly, fatality rates differ largely between countries with case fatality rates ranging from below 0.01% in Qatar and Singapore to more than 15% in France and Belgium (Oke & Henegan,

2020). Several reasons for these differences are proposed, including variation in the number of tests, the onset of measures to limit the spread of the virus, and the capacity of the health care systems to manage patients with the virus (see also Al-Tawfiq et al. (2020)).

On 29 March 2020, the National Delegate officer asked the National Delegates via email to respond to three questions, although some chose to only reply to one or two of them:

1. How is your country coping with COVID19 emergency?

2. How are you personally coping?

3. What else might be done?

As of 3 May 2020, National Delegates (NDs) of the European Health Psychology Society (EHPS) from the following countries have responded: Austria, Belgium, Brazil, Croatia, Germany, Greece, Hong Kong, Ireland, Israel, Italy, Japan, Malta, North Macedonia, the Netherlands, Russia, South Africa, Turkey, and United Kingdom. We collated and categorized the responses according to the following themes: (1) government responses; (2) challenges to psychologists' professional life including actions taken by (health) psychologists and teaching at universities; and (3) challenges to private life. In this position paper we share these responses from delegates.

Government responses

Governments have implemented a range of measures to limit the spread of the virus and to prevent the health care systems from being overwhelmed. Around the world, major events were cancelled, and childcare facilities, schools, universities, and other public buildings closed. International travel was largely suspended, domestic travel discouraged, and many European countries reintroduced border controls or even partial border closures.

Some countries like Spain, Italy, or France,

orientated towards some of the draconian measures to prevent the virus from spreading that were introduced in the Chinese province of Hubei, such as confining people to their homes unless to get food or medical care. Many other countries, however, introduced softer "lockdowns". Still, most countries enforced rules of physical distancing to limit the number of in-person social contacts. Accordingly, working from home was strongly encouraged, if not enforced. Many countries discouraged or even prohibited leaving the house unless for essentials such as food, medicine, or health care, which initially led to panic buying in several countries including Israel, South Africa, the UK and Germany. Moreover, many countries saw other shops as well as cafés and restaurants close to prevent gatherings, with some exceptions like the Netherlands, where shops and bakeries were allowed to remain open as long as they limited the number of customers to allow for a 1.5m distance. Outdoor exercise and socializing with people who are not living in the same household regulations diverged more strongly between countries. For instance, in Ireland, one was only allowed to exercise within a 2km radius around one's home, in Italy, within 200m. In Israel, regulations were even more strict, allowing residents to only exercise within a 100m radius of one's home. Regulations differed even within countries, depending on the municipality or state. For example, in some German states, residents were still allowed to meet with one person who is not living in the same household, as long as general social distancing rules, such as keeping a minimum distance of 1.5m, were observed. In other states, one was only allowed to go for walks alone or with people living in the same household. Some governments have introduced a curfew. For instance, in North Macedonia, people were not allowed to leave the house on weekends and between 4pm and 5am from Monday to Friday. Several countries, including Malta, specifically encouraged the elderly and vulnerable groups to self-isolate. The introduction

of social distancing and the increased time spent indoors has raised concerns regarding mental and physical well-being, such as lack of exercise, depression and anxiety, and domestic violence (Brooks et al., 2020; Moccia et al., 2020; Qiu et al., 2020).

As of the end of April 2020, some countries including Germany have started to slowly ease restrictions, such as a partial re-opening of schools and shops. This decision certainly was influenced by decreasing numbers of new infections and the capacity of the health care system. However, it also acknowledges that some people struggled with keeping up the strict rules of social distancing and acceptance of measures was starting to decrease (Betsch et al., 2020; see also <https://projekte.uni-erfurt.de/cosmo2020/cosmo-analysis.html>).

Moreover, the measures are supposed to buffer the impact of the crisis on the economy, as certain economic sectors such as the local retail industry were faced with a sudden drop in revenue, which has already led to millions losing their jobs (e.g., textkernel, 2020). On the other hand, other countries including the UK and France later decided to elongate the lockdown as they had not yet seen a substantial decrease in new infections.

Challenges to psychologists' professional life

The Covid-19 pandemic, the introduced restrictions by the governments and their impact on the mental and physical health of the population presents a challenge to psychologists' professional life. First, it required - sometimes drastic - changes to work routines in both clinical and academic work. Second, it sparked an urge to use one's expertise to preserve mental and physical health in the population.

Changes to clinical practice

As face to face consultations are restricted in many places and patients might not want to leave the house, psychologists are exploring new ways to provide their services. Accordingly, around the world, counselling and psychotherapy are going digital. For example, Germany changed online psychotherapy regulations so that online sessions are now covered by health insurance. Similarly, other countries such as Croatia, Ireland, and Israel, clinical psychologists are offering their services online to protect their patients from risking infection. Accordingly, the ND from Austria expressed hope that the pandemic may result in an increased emphasis on telemedicine.

Changes to teaching at universities

All NDs reported that universities were closed and that online platforms such as Zoom, Skype, or Webex are now being used for classes and meetings. A combination of live online lectures and recorded lectures added to university platforms are being utilized. Even though the shift from in-person to online teaching required adjustment, NDs indicated that this was not too cumbersome and that they were pleasantly surprised by the level of interaction that could be attained. The ND from Russia indicated that the move to online classes has not reduced the quality of communication, as all attendees are given the opportunity to share their views. According to the ND, students seem to be optimistic about using these platforms but issues have been raised regarding student assessment. Universities in Belgium have endorsed online assessment. However, in Israel concerns regarding online exams and assignments have been raised. In Malta, discussions surrounding assessment were ongoing at faculty level, with

assessments being changed to assignments and questions being converted to the multiple choice format. NDs also demonstrated some innovation in their work with students. The ND from Croatia shared creative learning opportunities for students during this crisis by instructing them to develop short video clips on how they coped in an effort to emphasize positive coping styles.

Actions taken by clinical and health psychologists

Promoting mental health

Several professional psychological associations launched new initiatives to support the public during the pandemic. For instance, the British Psychological Society has released several new guidelines for psychological professionals, including guidelines on how to support specific groups such as teachers or the elderly (<https://www.bps.org.uk/coronavirus-resources>). Other societies created online resources for the public: the Professional Society of Austrian Psychologists created a handout on how to deal with isolation and translated the handout in more than 10 languages (<https://www.boep.or.at/psychologische-behandlung/informationen-zum-coronavirus-covid-1>). The German Psychological Association created a website covering numerous topics including rumination, substance abuse, or relationship conflicts (<https://psychologische-coronahilfe.de/>) in relation to Covid-19. The website also provides information specifically targeted towards families and children and adolescents. Health psychologists from Massey University, New Zealand, answer frequently asked questions around mental health and well-being during the Covid-19 pandemic on a blog (<https://sites.google.com/view/massey-health-psychology-short/home>). In Israel, health

psychologists provided pro bono lectures to professional and lay audiences.

Promoting physical health

Health psychologists also highlight the importance of behavioural science in this pandemic as individual actions such as washing hands thoroughly and regularly limits the spread of the virus (e.g., West et al., 2020). With this idea in mind, several countries saw the formation of health psychology networks bringing together expertise and resources from health psychology, public health and behavioural science to contain the spread of Covid-19. For instance, in the UK, Health Psychology Exchange (twitter.com/HealthPsychX) was founded, connecting more than 135 health psychology professionals who are willing to volunteer. They are now working towards providing helpful resources and synthesizing the evidence in rapid reviews. A similar initiative (Health Psychology Malta) has been founded in Malta.

Other initiatives operate on an international level. The Practical Health Psychology Blog recently published a summary article on insights from behavioural science for the pandemic (Timmons, 2020) which is available in more than 25 languages. Moreover, an international team of more than 130 experts in behavioural science and epidemiology have launched an online tool that provides people with personalized feedback regarding their risk of contracting and spreading Covid-19 based on hand washing, keeping distance to other people, and staying inside as much as possible. The tool was made available in more than 25 languages (<https://your-covid-19-risk.com/>).

Finally, health psychologists speak out publicly about the important contribution that health psychologists and behavioural scientists can make to mitigating the crisis and contribute their expertise in scientific advisory committees. For instance, EHPS member Prof Susan Michie has

repeatedly provided an expert perspective on behavioural science and Covid-19 (e.g., <https://www.youtube.com/watch?v=rUdRXYRZPmA>) and advises the British government as member of the Scientific Pandemic Influenza Group on Behaviours.

Challenges to private life

NDs also reported to be affected by the pandemic personally. Besides worrying about themselves or relatives contracting the virus, many NDs had to adjust to changes and restrictions through the government-imposed measures themselves.

Closing schools and universities was part of the initial lockdown procedures adopted by governments in countries such as Ireland, Belgium, Japan, Malta, Macedonia, South Africa, and others. In Austria, schools remained formally open but parents were encouraged to stay home with their children. In Germany, there is an ongoing debate about whether reopening schools would pose greater risk on older family members and risk groups, and how to balance this risk with the challenges associated with home-schooling younger pupils. Online schooling has also been adopted in many countries. In Malta, the impact of Covid-19 on education has been substantial, with national school examinations cancelled and students automatically progressing to the next year.

NDs have reported that their respective lockdowns have resulted in them taking on multiple roles within their homes. In addition to teaching and supervising students from home, members indicated that they took on responsibilities related to their children's schooling and cared for elderly family members. Those with young children stressed that their schooling was an additional burden and that they would cope better working from home after their children returned to school. The ND from Greece indicated having double the amount of work at home compared to

before Covid-19. The ND from Israel reported that she found it challenging to manage her multiple roles as a parent to young children who required supervision with their schooling at home and her own academic work, while feeling concerned about her elderly mother who did not have anyone to care for her.

Several NDs mentioned the role of partner support during this time of crisis. The ND from Belgium indicated that his wife supervised their young children's schooling as she was an educator, making it easier for him. One ND, who was living alone, mentioned that she felt lonely, but this was eased with video calls with family and friends. Routine and online social interaction were reported as key coping strategies.

NDs shared their concerns, which in some cases were beyond themselves. For example, the ND from Ireland shared her concerns about the impact of the disease on vulnerable people such as those without homes and asylum seekers. The ND from Austria also mentioned the broader impact of the disease on the right to privacy.

Undoubtedly, Covid-19 presents us with numerous challenges. Despite the challenges, NDs seem optimistic and some mentioned potential benefits during the pandemic. For example, the ND from Belgium indicated that they live in the country and has recently acquired a bicycle to explore the quiet countryside.

Conclusions

Responses from delegates indicate that health psychologists take on multiple roles in times of crisis. These roles are located at a macro level, as experts in human behaviour advising and working with governments to reduce the infection rate whilst keeping an eye on the mental health of healthcare workers and the general public. Health psychologists have also had to be flexible in their academic work, by providing online lectures and

assessments to students. Within their micro-environments, i.e. their homes, national delegates reported fundamental changes to their ways of living.

While the current focus within the pandemic is on healthcare professionals, such as doctors and nurses, experts in health psychology form an important part of the healthcare team. We believe that health psychologists will play an even greater role after the pandemic crisis in restoring the mental health of people throughout the world.

Acknowledgements

We would like to thank the European Health Psychology Society's National Delegates for their valuable support, in particular Zuhai Baltas, Christian Borg, Joanne Hart, Stefan Höfer, Jasminka Lucanin, Fabio Lucidi, Olivier Luminet, Eimear Morrissey, Elena Nikolaeva, Antonia Paschali, Dimitra Peshevska, Eduardo Remor, Tina Rochelle, Yasuo Shimizu, Gil ten Hoor, and Noa Vilchinsky.

Statement of competing interests

The authors declare no competing interests.

References

- Al-Tawfiq, J. A., Leonardi, R., Fasoli, G., & Rigamonti, D. (2020). Prevalence and fatality rates of COVID-19: What are the reasons for the wide variations worldwide? *Travel Medicine and Infectious Disease*, 101711. <https://doi.org/10.1016/j.tmaid.2020.101711>
- Betsch, C., Korn, L., Felgendreiff, L., Eitze, S., Schmid, P., Sprengholz, P., Wieler, L., Schmich, P., Stollorz, V., Ramharter, M., Bosnjak, M., Omer, S. B., Thaiss, H., De Bock, F., von Rüden, U., Bruder, M., Eger, J., Schneider, S., Lieb, K., & König, H.-H. (2020). German COVID-19 Snapshot Monitoring (COSMO) - Welle 8. (21.04.2020). *PsychArchives*. <https://doi.org/10.23668/psycharchives.2883>
- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet*, 395(10227), 14-40. [https://doi.org/10.1016/S0140-6736\(20\)30460-8](https://doi.org/10.1016/S0140-6736(20)30460-8)
- Johns Hopkins University Coronavirus Resource Center. (2020). *COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)*. <https://coronavirus.jhu.edu/map.html>
- Moccia, L., Janiri, D., Pepe, M., Dattoli, L., Molinaro, M., De Martin, V., Chieffo, D., Janiri, L., Fiorillo, A., & Sani, G. (2020). Affective temperament, attachment style, and the psychological impact of the COVID-19 outbreak: an early report on the Italian general population. *Brain, Behavior, and Immunity*. <https://doi.org/10.1016/j.bbi.2020.04.048>
- Oke, J., & Henegan, C. (2020). *Global Covid-19 Case Fatality Rates*. <https://www.cebm.net/covid-19/global-covid-19-case-fatality-rates/>
- Qiu, J., Shen, B., Zhao, M., Wang, Z., Xie, B., & Xu, Y. (2020). A nationwide survey of psychological distress among Chinese people in the COVID-19 epidemic: implications and policy recommendations. *General psychiatry*, 33(2), e100213. <https://doi.org/10.1136/gpsych-2020-100213>
- Renner, B., Koller, J., Lages, N., Villinger, K., & Schupp, H. T. (2020). *Risk perceptions & behavior in the context of the current Coronavirus outbreak*. 3rd Report, May 07, 2020. https://euclid.dbvis.de/assets/pdfs/EUCLID_Report_3.pdf
- textkernel. (2020). *The impact of COVID-19 on the US Job market*. <https://www.textkernel.com/newsroom/the-impact-of-covid-19-on-the-us-job->

market/

Timmons, S. (2020). *Insights from behavioural science for the COVID-19 pandemic*. <https://practicalhealthpsychology.com/2020/04/insights-from-behavioural-science-for-the-covid-19-pandemic/>

West, R., Michie, S., Rubin, G. J., & Amlôt, R. (2020). Applying principles of behaviour change to reduce SARS-CoV-2 transmission. *Nature Human Behaviour*, 1-9. <https://doi.org/10.1038/s41562-020-0887-9>

World Health Organization. (2020a). *Modes of transmission of virus causing COVID-19: implications for IPC precaution recommendations*. <https://www.who.int/news-room/commentaries/detail/modes-of-transmission-of-virus-causing-covid-19-implications-for-ipc-precaution-recommendations>

World Health Organization. (2020b). *Q&A on coronaviruses (COVID-19)*. <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-coronaviruses>



Laura M. König

Behavioural Science Group,
Cambridge Institute of Public
Health, University of Cambridge,
United Kingdom

lk447@medschl.cam.ac.uk



Dr Rizwana Roomaney

Department of Psychology, Faculty
of Arts & Social Sciences,
Stellenbosch University, South
Africa

rizwanaroomaney@sun.ac.za



Dr. Sabrina Cipolletta

Department of General Psychology,
University of Padua, Italy

sabrina.cipolletta@unipd.it

Research in Africa: Lessons learnt from participatory research in Kenya

Kanyiva Muindi,

African Population and Health Research Center

Hellen Gitau,

African Population and Health Research Center

Joanna Hale,

UCL Centre for Behaviour Change

Susan Michie,

UCL Centre for Behaviour Change

Research at the intersection of health and sustainability challenges in low- and middle-income countries (LMICs) requires interdisciplinary and participatory ways of working, which bring together those 'on the ground' with researchers to develop actionable strategies with local and national policymakers.

Here we share reflections and lessons learned from research in Kenya, which informed a round table discussion held at EHPS 2019 in Dubrovnik. Traditionally, research in Kenya as in many countries across the global South has been top-down with researchers defining the research problem and the intervention and then going into communities to implement the research and program work. While this has worked over the years, many projects especially those with a component of action/intervention have faced sustainability and ownership challenges owing to a sense of disconnect by the study communities. Communities have expressed a feeling of alienation to the research and subsequent programs arising from this due to the research team's failure to engage with them in thinking through the research as well as the solutions.

Increasingly, the approach to research implementation is changing from being driven by the research team to participatory approaches where the study communities are partners in the

design of the research questions and interventions. This departs from the traditional approaches where study communities were recipients of the research and interventions whose design was largely led by researchers .

A participatory approach is being applied by the Complex Urban Systems for Sustainability and Health (CUSSH) project, an international collaboration partnering with six cities in Kenya, China and Europe. The CUSSH project seeks to deliver strategically vital research on the complex connections between urban development and health within city systems. One of the ways to achieve the project objectives is to use participatory methods to undertake continuous engagements with stakeholders in partner cities in order to test processes to help implement the transformative changes needed to meet sustainability and health objectives. In the Kenyan cities of Nairobi and Kisumu, the participatory approach has given hope to communities that there is change in the way researchers engage with them. It has also empowered them to raise critical questions to their local leaders with regards to government projects being implemented as well as the allocation and use (or misuse) of public resources. By holding workshops to discuss and prioritize the challenges the two cities of Nairobi and Kisumu are facing, the voice of city residents has been heard and their opinions taken into consideration in the decision to focus on spatial planning. Further, participatory approaches were applied in the decision to focus on waste-to-energy for Kisumu city in the application for funding from the Green Climate Fund (GCF).

Lessons Learnt

After two years of engaging with County governments towards the implementation of the project, we have had some learning:

1. Defining the research agenda: The CUSSH model of participatory research has been an eye-opener with regards to the future of research in Africa. Communities, including local leaders, were given a voice at the discussion table to think through what to focus on. The resulting list of challenges that were felt to be pressing in the County went through several iterations of discussion. It was evident from the community that they were happy to be treated as key stakeholders in deciding the focus of the program and there is hope that they will be proud owners of any programs arising from this work. An important part of this process is for non-local researchers to allow those with lived experience of the context to lead in shaping the project, and to take time to listen and fully acknowledge different cultures, concepts and language in the formulation of the research agenda.

2. Politics sometimes trump public good: For northern partners looking to implement work in Africa, there is need to accept that sometimes political interests supersede public good that the research hopes to achieve. For the case of the two Counties in Kenya – Kisumu and Nairobi, there is need to take cognizance of the fact that county leadership is political and therefore some decisions will be informed by political interests of the office bearers. This in effect may delay work progress as decisions tend to be made slower given that most considerations are made from a political angle. While this may not be spoken directly e.g. “what political mileage do I get from your work?” it may be communicated subtly through certain informal comments about what appeals to the electorate. The research team must develop some political intelligence to state their interests without appearing to downplay the opinions of the political

class. In addition, the research team must be patient as some of the phases in their work that may seem easy to implement could take very long owing to the political decisions made by government partners. In addition, individual partners on the project whose tenure is based on political cycles may be changed or removed from office at any time in the life of the project. This calls for the researchers to be flexible and responsive when such changes happen so that they can quickly engage with new office bearers and take them onboard to ensure continuity of the work. It is important for research teams engaging with political offices to also guard against the use of their work as campaign tools as this could send the wrong message to participating communities on the utility of research data they provide, and research in general. To navigate the politics within government partners, it would be important for northern partners to have a local research partner who has clear knowledge of the local context; while also having a focal person within the government to hold their hands through the red-tape that is part of political offices.

3. Expectations- the realistic and the outrageous: One of the lessons coming from our two year engagement with county governments has been the expectations both of the government and communities. The research funding scene in most African countries is very competitive and there are few or no local funding opportunities from the government. So the news of a successfully funded proposal is usually well received as it gives hope that funding gaps can be filled. However, it also raises the bar of expectations and some outrageous demands can be placed on the program. This calls for honest and clear communication of what the project/program can fund, how the funds shall be disbursed as well as any contractual requirements needed between partners.

4. Equal partnerships: Where the research work is a collaboration between local researchers (in LMICs) and those from the global North, there is

need to create an equal partnership where the thinking and developing of the proposal for funding is done in a truly collaborative way to avoid creating a feeling of superior research teams over others. Some form of understanding on how the partners relate is important and this discussion should be held early in the life of the project to avoid misunderstandings that could undermine the progress of the work. This is especially important when dealing with non-research partners who may feel slighted if their contribution to the work does not seem to receive any acknowledgements.

5. Data and products: There is need for discussions on who retains the data arising from the research and ensure access to these by all partners. The development of products from the research such as papers and reports also need agreements on who leads and who makes it to the author list. Inclusion of non-research/academic partners as co-authors may be necessary even though their actual contribution in the writing violates the principles of authorship.

Conclusions

The lessons we have learnt over the course of the CUSSH implementation remain crucial for other ongoing and yet to be implemented projects/programs in Africa. Research teams need to be well prepared to engage with governments that are quite political and whose decision making process can be rather slow, conflicting with project timelines. Further there is need to tame expectations so that governments and communities do not demand for deliverables that cannot be achieved within the time frame and funding of the project. Relationships that espouse equity are key to the success of programs implemented in the region and to cap it all, patience is a virtue that northern partners must cultivate alongside flexibility and responsiveness.



Kanyiva Muindi

African Population and Health
Research Center

Hellen Gitau

African Population and Health
Research Center



Joanna Hale

UCL Centre for Behaviour Change
jo.hale@ucl.ac.uk



Susan Michie

UCL Centre for Behaviour Change
s.michie@ucl.ac.uk

Healthy Planet, Healthy People – Reflections on a United Nations Association WebTalk

Josianne Kollmann
University of Konstanz

On May 11, 2020, the United Nations Association New York hosted a WebTalk as part of their online webinar series. On this edition, Inger Andersen, Executive Director of the UN Environment Programme (UNEP), talked about “Healthy People and Planet - Why Sustaining All Life Matters in a Post-Covid World”. She thus chose a topic highlighting once more how intertwined health and environmental issues are and that they need to be tackled together. The talk was moderated by Reem Abaza, Spokesperson for the President of the UN General Assembly.

In her vivid talk, Ms Andersen demonstrated that even if the world faces profound economic and social consequences as a result of the Covid-19 pandemic, now is not the time to give up on climate change. The pandemic, she pointed out, has made a sustainable systemic shift even more crucial as it clearly shows that humankind cannot continue on the current track of exploiting the environment. Andersen stated that there is a limit to how far we can “push nature into a corner”, as these days there exist more opportunities than ever for pathogens to pass from animals to people. With evolving climate change and the melting of the permafrost, even more viruses will be released, and diseases believed extinct will reappear. Evidence is also emerging that the greater the loss of biodiversity, the greater the zoonotic pathogen transfer.

As a central point of her talk Andersen underlined that the current recoveries observed in nature are only temporary and should therefore not be seen as a victory for environmentalism. On the contrary, the current pandemic poses an additional

threat to the environment, for example by the huge number of single-use items that are produced (e.g. face masks). Additionally, the economic crisis might lead to an unsustainable re-establishment of the economy. According to Andersen, the solution should lie in a switch to green technology. This can be best implemented in the areas of energy production, transport, and housing. Only in this way can emissions and pollution be lastingly reduced while at the same time re-establishing the economy.

Still, Ms Andersen concluded with a positive outlook. The Covid-19 pandemic has the potential to bring home to the public that humans have a vital impact on environment and climate. This impact, however, bears not only responsibilities but also a huge chance for a sustainable change towards a healthy planet and healthy people. The pandemic has already shown that listening to science is an essential prerequisite for tackling global challenges, and that we as scientists should raise our voices and participate in public debates to make sure that scientific knowledge is implemented in the general interest.



Josianne Kollmann

Department of Psychology, University of Konstanz

josianne.kollmann@uni-konstanz.de

The Global Youth is Making its Voices Heard – Reflections on the UN75 Youth Townhall Meeting

Philipp Kadel

University of Mannheim

On May 13th, 2020, at 9 a.m. EDT (3 p.m. CEST), the first virtual UN Global Youth Townhall Meeting took place. Young people from around the world followed the invitation of Jayathma Wickramanayake, the Secretary-General's Envoy on Youth, who hosted and moderated the event. It aimed to gather the global youth's input for the UN75 declaration that will be adopted in September 2020 on the occasion of the United Nation's 75th Anniversary. This declaration is not only meant to describe where the UN stands today and what has been achieved but more than anything about the future and which issues we need to focus on going forward. The digital format of the Townhall made it easier than ever before for young people from around the world to come together and share and discuss ideas, which made the event even more inclusive.

After a welcoming introduction by Jayathma Wickramanayake, Lucy Fagan from the UN Major Group for Children and Youth (UN MGCY) presented results from a survey carried out before the Townhall Meeting to give the youth the chance to express their thoughts on the draft of the UN75 declaration. Five hundred people from 110 countries took part in the study, with 80 % being under 30 years of age. The three most important issues in the participants' view were 1) The recovery from COVID-19, including building more resilient systems and societies, 2) Global peace and security, solving ongoing conflicts, non-proliferation, disarmament, and preventive diplomacy, and 3) Tackling climate change, taking care of the oceans, and fostering sustainable

consumption. The majority of young people participating in the study felt that the UN is addressing the youth's priorities well, but that there could be even more intergenerational cooperation in tackling the challenges of our time.

These thoughts and suggestions were openly received by the two co-facilitators of the UN75 declaration, Ambassador Anna Karin Eneström, the Permanent UN Representative of Sweden, and Ambassador Sheikha Alya Ahmed bin Saif Al Thani, the Permanent UN Representative of Qatar. They emphasized the importance of the global youth in shaping a better future and assured the young people in attendance that their input will find its way in the UN75 declaration, which was an encouraging message.

A diverse group of youth speakers from several countries and organizations provided their views on priorities in the way forward for the UN. They highlighted that the current pandemic is not only a health crisis but also a social crisis, which should be a wakeup call to think about how we want to build the future. This should include strengthening global solidarity and reimagining the global economy. The inclusion of the youth into power was seen as necessary by all speakers, as well as building future systems in a more sustainable way and with equal opportunities for all, regardless of gender, sexuality, ethnicity, religion, or disabilities. We have to ensure accessibility and inclusiveness. The speakers emphasized multilateralism as crucial for overcoming our current and future challenges.

Jayathma Wickramanayake summarized the event by saying that the way forward is not about going back to what we consider as normal but about building a new and better normal. The global

youth is ready to co-lead this process together with and within the UN and governments.

It was inspiring to see how dedicated and enthusiastic young people from all around the world are participating in shaping the future of the UN and our planet as a whole and that their voices are being heard by officials like the two co-facilitators of the UN75 declaration.



Philipp Kadel

University of Mannheim

kadel@uni-mannheim.de

Health Psychology and the Sustainable Development Goals

Lucia Rehackova

Newcastle University, UK

Maria Karekla

University of Cyprus, Cyprus

Background:

The EHPS has a formal affiliation with the United Nations and works to support sustainable development through the implementation of health psychology research and practice to improve health around the globe.

Last year, we asked everyone submitting an abstract to the EHPS annual conference in Dubrovnik to map their work onto the Sustainable Development Goals (SDGs). The seventeen SDGs define the agenda of the member states of the United Nations until 2030. They address the global challenges of Sustainable Cities and Communities; Poverty; Hunger; Health and Wellbeing; Quality Education; Gender Equality; Clean Water And Sanitation; Affordable And Clean Energy; Decent Work and Economic Growth; Industry, Innovation and Infrastructure; Reduced Inequalities; Responsible Consumption and Production; Climate Action; Life Below Water; Life on Land; Peace, Justice and Strong Institutions; and Partnerships.

Unsurprisingly, the vast majority of the submitted abstracts were mapped onto the SDG "Good Health and Wellbeing", followed by "Reduced Inequality" and "Quality Education". However, there were many abstracts addressing many other SDGs, showing the potential of Health Psychology as a discipline to contribute to the progress within the SDGs.

Aim(s):

In line with EHPS's mission to support achievement of these SDGs through the work of health psychology research and practice, we would like to invite submissions of papers focusing on the application of health psychology approaches in any of the areas of the Sustainable Development Goals for publication in a special issue of the *European Health Psychologist*.

How to Submit:

We are looking for submissions of abstracts of up to 300 words. The full paper will have a word limit of 2,000 words. The submissions can be position papers, reports, reflections on using health psychology approaches in addressing SDGs, methodological issues, best practice ideas, ways of working, concept and others.

The deadline for abstract submissions is 30 September 2020. All submissions will be assessed before 15 November, and invitations for full submissions will be sent out before 30 November.

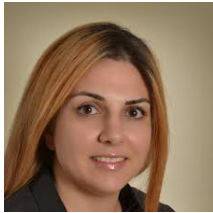
Contributions can be submitted by sending an e-mail to Dr. Lucia Rehackova.

For more information contact Lucia Rehackova at lucia.rehackova@newcastle.ac.uk or Maria Karekla at mkarekla@ucy.ac.cy.



Lucia Rehackova

Institute of Health and Society,
Newcastle University, UK
lucia.rehackova@newcastle.ac.uk



Maria Karekla

Department of Psychology, University
of Cyprus, Cyprus
mkarekla@ucy.ac.cy

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