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# October 2022 Editorial

**Angela Rodrigues** Our fourth issue of 2022 includes various articles disseminating the activities undertaken by the different subsections of the EHPS, more precisely UN subgroup and Synergy. This issue also includes a reflection from Vera Araújo-Soares on being part of the EHPS EC, an interview with Dr Jane Murphy and a report on a Behaviour change masterclass

**Pamela Rackow** University of Stirling, UK

A brief overview of the articles included in this issue can be found below.

**Vica Tomberge and colleagues** provide an overview of **Psychology Day at the United Nations** discussing climate actions and the role of the EHPS at the Psychology Coalition of the United Nations.

**Sinéad Moylett** (EHPS SYNERGY Grant winner) reflects on attending the **2022 Synergy expert meeting** entitled 'Behavioural science and public health: Enhancing impact through policy and practice during COVID-19 and beyond'. This article also provides an account of key take home messages.

**Vera Araújo-Soares** provides a reflection on her time on the **EHPS executive committee (EC)** as President Elect, President and, finally, as Past President. Vera ends her reflection with a question to all of us: Have you thought about it being part? Vera outlines various ways you can proactively engage with EHPS.

The October 2022 EHP issue also re-introduces the interview with an EHPS member feature. We have the pleasure of reading an **interview with Jane Murphy** on her exciting career journey to date and future endeavours.

Finally, we end this issue by providing a short report by **Angela Rodrigues** on the development and evaluation of a **behaviour change training** course.

Hope you enjoy reading this issue!

Angela Rodrigues & Pamela Rackow



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# Psychology Day at the United Nations discussing climate actions and the role of the EHPS at the Psychology Coalition of the United Nations

## Vica Tomberge

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## Kalyani Gopal

American Psychology  
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## Efrat Neter

Ruppin Academic Center,  
Israel

## Vera Araujo Soares

University of Twente, The  
Netherlands

The Psychology Coalition of NGOs at the United Nations having Consultative Status with ECOSOC held the 15th Annual Psychology Day at the United Nations, dedicated to the theme:



Psychology Coalition of NGOs at the United Nations, University of Twente, Netherlands) and Efrat Neter (Secretary at the Psychology Coalition at the United Nations, Ruppin Academic Center, Emeq Hefer, Israel) are representatives of the EHPS UN committee.

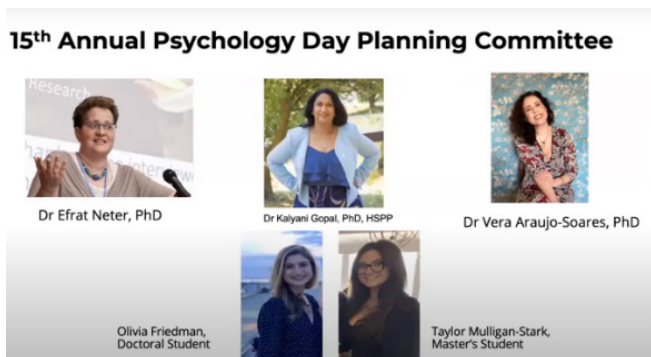
## "Building Hope: Psychological Contributions to a Roadmap for Climate Action".

The 2022 UN Psychology Day was organized by a 25-person committee and led by Kalyani Gopal, Efrat Neter, Vera Araujo-Soares, Olivia Friedman, Taylor Mulligan, and Josephine Juanamarga. Vera Araujo-Soares (Regional Vice President at the

## The Psychology Coalition at the United Nations (PCUN) and the role of the EHPS UN committee

The Psychology Coalition at the United Nations (PCUN) is composed of representatives of psychology and psychology-related organizations that have an official NGO status with the UN. Members of the PCUN collaborate in the application of psychological principles, science, and practice to global challenges of the UN agenda.

Since 2011 the EHPS has been associated with the United Nations, 'Department of Global Communication' / NGO section of the UN. This was the initiative of Irina Todorova, the then EHPS president. The EHPS advanced to a special consultative status in the Economic and Social Council at the UN (ECOSOC) in 2015. The goal of the EHPS UN Committee is to support the EHPS to collaborate in the application of health psychology to meet the global challenges of the UN agenda, and in particular those detailed in the Sustainable Development Goals (SDGs).



The 2022 UN Psychology Day organizational committee.

The EHPS is the only health psychology organization represented at the PCUN. Prior to joining the meetings, the coalition primarily included clinical, social and organizational psychologists located in the US / NYC area. The pandemic turned PCUN monthly meetings from hybrid to fully online, which facilitated the participation of the committee members.

After Irina Todorova and Nihal Mohamad attended some of the face-to-face meetings in New York, Efrat Neter and then Vera Araujo-Soares were the first representatives of the EHPS UN committee to join the monthly meetings of the PCUN in a hybrid format. Since the pandemic, more EHPS members and also early career researchers joined the EHPS UN committee and PCUN activity (for an overview of all EHPS UN committee members please see the committee's [webpage](#)). Vera Araujo-Soares is now Regional Vice President and Efrat Neter is Secretary at the PCUN. In 2020, the EHPS UN committee achieved - for the first time - that health psychology representation among the speakers at the UN Psychology Day. Susan Michie, Ph.D. (UCL, London) represented us. In 2021 Molly Byrne, Ph.D. (National University of Ireland Galway) presented, and this year at the UN Psychology day, a health psychology perspective on climate action was given by Ann DeSmet, Ph.D. (Université Libre de Bruxelles, Belgium). Vera Araujo-Soares, Efrat Neter and Kalyani Gopal moderated the ensuing speakers of the 2022 psychology day at the United Nations.

### **The 2022 Psychology Day at the United Nations**

This year's theme "Building Hope: Psychological Contributions to a Roadmap for Climate Action" was dedicated to climate change and focused on how psychology can contribute and support countries in implementing their climate pledges. 2677 people registered and 640 from 107 countries attended virtually via zoom.

During his opening speech, David Marcotte, Ph.D., President of the Psychology Coalition of



*Left: David S. Marcotte, Ph.D., President of the Psychology Coalition of NGOs at the United Nations. Right: Kalyani Gopal, Ph.D., President of Division 12 of the American Psychological Association (APA).*

NGOs at the United Nations, emphasized the importance of the PCUN network of NGOs to contribute to the fight against climate change and all contemporary challenges with transdisciplinary, international effort.

Further opening remarks were shared by Kalyani Gopal, Ph.D., President of Division 12 of the American Psychological Association (APA). Dr. Gopal stated that psychologists need to provide their knowledge on reducing environmental stress and fighting ecoharmful strategies to collectively reduce our carbon print.

Mr. Abdulla Shahid, President of the United Nations General Assembly, addressed the audience and emphasized the importance of hope, the central theme of his presidency, in addressing climate change, as hope is a common denominator for human collective action. He stated that psychological solutions are needed today more than ever and warmly welcomed PCUN's commitment to sharing how can psychological science contribute to tackle climate change.

Afterwards Ambassador J. R. de la Fuente, Permanent Representative of Mexico to the United Nations and founder of the Clinical Research Unit of the Mexican Institute of Psychiatry reaffirmed the view that combating climate change requires an international and coordinated response, including addressing the mental health consequences that may arise.

Following these remarks, a panel of six psychologists from five different continents and





Some of the Presenters on the Psychology Day.

varied psychological disciplines, emphasized the potential contributions of psychological perspectives to actionable solutions to the climate change.

As the first presenter, Wendy Greenspun, Ph.D., (Manhattan Institute for Psychoanalysis and the Adelphi University, USA) in *From Tears to Hope and Courage* described multiple forms of climate distress and trauma being experienced by individuals and communities worldwide. Dr. Greenspun particularly highlighted that young people face a foreshortened future and historically marginalized communities suffer layers of environmental harm and injustice. Building on this, Dr. Greenspun presented multiple ways of building emotional resilience such as calming, finding purpose and living connection and solidarity. In addressing the psychological needs of those in distress, traumatic impacts could be transformed into sources of hope and courage to face and engage with the unfolding climate crisis.

Talking about *Psychology and Climate Action* in the Global South, Brendon Barnes, Ph.D., (University of Johannesburg, South Africa) emphasized that psychology needs a clearer focus on the local realities of marginalized people in order to have increased global significance. In order to mitigate intersectional climate injustice and to allow climate movements to decentralize, he suggested the use of digital platforms. These could enable marginalized groups typically excluded from

democratic processes to participate, share information, and mobilize contestation and advocacy in a safe space. To support this, he points out four areas worthy of psychologists' attention in the global South: making climate and psychology evidence digitally accessible, developing digital technologies for interventions, actively changing digital media representations, and using psychology to enhance digital climate mobilization.

Anju Sara Abraham, MSc, BArch., (Council of Architecture and the Indian Institute of Architects) spoke about *"Using Architecture and Design to promote Mental Health and Enhance Positive Climate Action"* focusing on the relationship of architecture, health and sustainable development. She explained that sustainable architecture may not only respond to environmental characteristics such as overcrowding, noise, air quality and light and thus promote physical and mental health, but may 'nudge' users into positive behaviours and making better decisions. She explained that architecture can provide a range of incentives for behavioural change to be active and behave in a sustainable way, e.g. by incorporating 'walkability' within the city resulting in greater proximity to facilities and destinations or by designing indoors improving the air quality, temperature, and good daylight within the building structure in order to facilitate responsible use of resources.

Matthew Hornsey, Ph.D., (University of Queensland, Australia) talked about *Understanding (and reducing) Climate Change Skepticism*. He gave an insight on the psychological profile of climate skeptics, i.e. people who deny climate change and its causal relation with human behavior. Raising the concept of motivated reasoning he claimed that humans base their decisions on perceived desirability rather than an accurate reflection of climate evidence. Following this concept, he called for promoting climate-friendly behaviour by aligning with skeptics' underlying ideologies, anxieties, and identity needs instead of competing

with them by presenting 'the evidence'.

Finally, Ann DeSmet, Ph.D. (Université Libre de Bruxelles, Belgium) spoke about *Changing Health Behaviours by Addressing Spill-over and Shared Underlying Determinants*, pointing out how health and environmentally friendly behaviour can complement each other and promote the health of the planet. However, negative spillover effects (when one behaviour reduces the likelihood of adopting another behaviour) or positive spillover effects (when increased skills increase the likelihood of adopting an additional behaviour) must be considered. Building on this, she highlights the need for interventions integrating the insights from social, health and environmental psychology. Dr. De Smet pointed out that targeting a change in multiple behaviours is essential to create a planetary health impact. She emphasized that the most promising predictor across health and pro-environmental behaviours is promoting self-efficacy. Self-efficacy can be increased by helping people monitor their behaviour, increase their belief that they can do it by emphasizing the achievements they've already made, and by giving them a possibility for guided practice.

In response to these presentations, Dr. Vera Araújo-Soares integrated the contributions in *Bridging Intersectionality between Psychology and Climate Action*, highlighting inequities emerging as a central theme. Dr Araújo-Soares also presented



*Dr. Ann De Smet shared a health psychology perspective on this year's theme of climate action*

extensive evidence on the positive and negative role that health-related behaviors can play in climate change mitigation and adaptation. She called for behavioral interventions to specifically target health equity, use scientifically proven mechanisms of action, engage with users and stakeholders to ensure uptake, and consider contextual constraints. Finally, there was a Q & A session, moderated by Dr. Efrat Neter, with the audience either commenting or asking questions and getting responses from the speakers.

The United Nations Psychology Day was sponsored by the Psychology Coalition of NGOs at the United Nations having Consultative Status with ECOSOC and the Permanent Missions of the Dominican Republic and Mexico to the United Nations. Details on the Day appear at <https://www.unpsychologyday.com/> and the whole record of the event can be found online: <https://www.youtube.com/watch?v=NQwXPQ8mz4U>. Find out more about the EHPS UN committee and its members at: <https://ehps.net/ehps-un-committee/>.



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# EHPS SYNERGY Grant Report

## Sinéad Moylett

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I received this year's EHPS SYNERGY Grant to not only attend the SYNERGY Expert Meeting but to also assist with the organisation and running of the first hybrid SYNERGY Expert Meeting. The meeting entitled 'Behavioural science and public health: Enhancing impact through policy and practice during COVID-19 and beyond' was facilitated by Dr Marta Marques (Comprehensive Health Research Centre, NOVA Medical School, UNL, Portugal) and Professor Angel Chater (Centre for Health, Wellbeing and Behaviour Change (CHeWBeC), University of Bedfordshire, United Kingdom; Centre for Behaviour Change, University College London, United Kingdom). The meeting focused on the role of behavioural scientists (in particular health psychologists) in guiding and advising policy makers and public health officials on how to influence disease prevention behaviours effectively, with a particular focus on the lessons learned during the COVID-19 pandemic and what we can apply to other health concerns.

For myself personally attending the Expert Meeting was an incredible opportunity to learn from the many experiences shared by other attendees, invited speakers and facilitators in advising governments, policy makers and public health agencies. Since completing my PhD, I have worked in postdoctoral roles based in a wide range of healthcare settings including psychiatry and neuroimmunology – all with a heavy focus on translational research. How to effectively communicate research findings that are impactful

to non-research colleagues and lay communities is a constant challenge. This year's attendees came from Ireland, the UK, Belgium, Germany, Switzerland, Finland and Portugal across different settings including universities, public health advisory groups and government-backed agencies bringing a wealth of knowledge.

Along with the Expert Meeting attendees, a number of invited speakers also spoke during the two-day event on their experiences in policy and practice during the COVID-19 pandemic. On day one, we were joined online by Marijn de Bruin and Olivier Luminet from the Netherlands and Belgium respectively. Their talks were followed by a talk by Angel Chater (facilitator) on her role within the BPS COVID-19 Behavioural Science and Disease Prevention Taskforce. On day two, Molly Byrne joined us in person to speak about the Irish approach and the Behavioural Change subgroup within the Irish National Public Health Emergency Team. Online, Vivi Antopolounis from the Behavioural Science Policy Research Unit in the UK shared her experiences followed by Marta Marques (facilitator) who spoke about the COVID-19 Portuguese Behaviour Science Task Force. All speakers shared successes and challenges experienced over the past two years. Many spoke of the hours given up voluntarily in order to support their respective task forces trying to prevent the spread of COVID-19.

For the SYNERGY board, this year's Expert Meeting was the first time conducting the meeting in a hybrid format, and as the Grant and Liaison Officer of the SYNERGY board, I can say that we were definitely feeling the pressure. Following the

2021 online Expert Meeting, we had learnt a great deal about providing a good Expert Meeting to online attendees. The goal for this year was to combine that with the years of experience we have from in-person meetings in order to ensure everything ran smoothly in a hybrid format! Unfortunately for Marta, she wasn't able to attend the Expert Meeting and EHPS conference in-person; however, she still facilitated the Expert Meeting remotely online. Although I'm sure Marta would have much preferred to have been there in person – for us, it was a blessing in disguise. Marta's attention to online attendees, while Angel focused on those in the room in Bratislava, meant a fully realised hybrid experience for both online and in-person attendees. Some lessons for the future were learnt included: (1) the need more supportive technology that will allow easier discussion between online and in-person attendees; and (2) occasions for networking between online and in-person attendees needs to be included in the timetable.

The GROW model (Whitmore, 1992; 2017) helped form the structure of the Expert Meeting. Following the invited talks on day one, the attendees formed groups to discuss the goal and reality of bringing health psychology and behavioural science into policy and practice. On day two again following the invited talks, the groups discussed options (enablers to action and impact) and the way forward (recommendations). At the end of the second day, the whole group came together to begin forming a consensus on what should be included in the position paper. This position paper along with a SIG group will be the main outcomes of this year's Expert Meeting. For myself and the SYNERGY board, we'll bring everything we've learnt into next year's Expert Meeting at the 37th Annual Conference in Bremen, Germany!

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# EHPS EC: It was a pleasure serving the EHPS, have you thought of doing that?

**Vera Araújo-Soares**

*Twente University, The Netherlands*

It has been a pleasure as well as a privilege to serve on the EHPS executive committee (EC) as President Elect,

President and, finally, as Past President. I will now step down from this EC as its term concludes with the end of this year's conference in Bratislava. Wendy Hardman will serve as the new President, Evangelos Karademas as Past President and David French will be the new President Elect of this new EC. Nothing makes me happier than observing the functioning of our vibrant democratic society! Working on the EHPS EC continuously reminded me that there are a lot of excellent and competent people in the EHPS. I am sure the society will continue to be led effectively and grow in a sustainable way, supporting the scientific field of Health Psychology and contributing to scientific dissemination, inspiring scientific synergy, training and networking.

The work of a society such as ours is never finished, and this work is rich, fulfilling and innovative reflecting its members proactivity. The EHPS is in a very strong situation and I wish the new EHPS EC a continuation of the positive developments in recent years.

In a world plagued by several "wicked" problems, plenty of those with an impact on our survival as a species, the EHPS and its members want to be part of the solution, and we are working to that effect and will continue to do so.

Through my work on the EHPS UN committee, and as a representative of the EHPS-EC at the PCUN (Psychology Coalition of NGOs Accredited at the United Nations), we have promoted and strengthened the participation of EHPS members in

several of its standing committees (programme committee, advocacy committee, publication committee, outreach committee). As part of our engagement with the PCUN this year, 2022, myself, Efrat Netter and a colleague based in the US, Kalyani Gopal, have organized (with the support of the PCUN programme committee) the 15th Psychology Day at the United Nations in April 2022. You can see the whole event in the PCUN YouTube channel: <https://bit.ly/3NhTuAD>. Almost 3000 people registered for this event. On this event Prof. Ann De Smet represented Health Psychology, following on Professor Susan Michie that represented us in 2020 and Molly Byrne in 2021. Our colleague Philipp Kadel has led on the re-writing of an advocacy piece on "One Health" in celebration of the World Day of Health.

With colleagues at the EHPS SIG on Equity, Global Health and Sustainability, and led by Lisa Warner, we wrote a piece that aimed to give our conference delegates suggestions on "How to make EHPS Conferences More Climate -Friendly" , published here at the European Health Psychologist.

Leaving the EHPS EC in the hands of such capable people makes me feel very calm. If you ask me what future plans I would have for the EHPS I would say:

- Reinvesting in the Sustainability Task & Finish Group that has been inactive due to the pandemic.
- Continue working to make our society more climate-friendly.
- Continue working to assure that knowledge created by health psychologists on behaviour change and on implementation science is used to support the United Nations Sustainable Development Goals (SDGs).

- Continue working with colleagues from other societies across the world to disseminate the potential for impact of Health Psychology.

Being part of the EHPS I felt connected to a team that, shapes and proactively leads the development of the society and of health psychology in Europe. Working in a team where everyone has a voice increases the probability of success and expands our society's horizons. I am sure this will continue to happen.

My journey with the EC of the EHPS has come to an end. After six very active years I know that it is time to go and see this new EC thrive and further honour our members and our scientific branch of psychology. Of course, I will still be here for all that this society will need from me in my capacity as a Fellow of the EHPS.

In the end, I have no regrets about the time I dedicated working with the EC: I have gotten to know and work with amazing people. Hence, my question: Have you thought about it? There are plenty of ways of proactively engaging with EHPS. Think about CREATE, Synergy, the special interest groups (SIGs), and the EHPS UN committee, just to name a few (there is also our journals and the Blog!). There are plenty of opportunities to engage with the EHPS. I would encourage you to think about how you can contribute to further shape this society.

Vera Araujo Soares

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4th of August 2022



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# An interview with Dr Jane Murphy

## Jane Murphy

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Jane is a post-doctoral researcher on the Horizon 2020 SEURO project (Scaling EUROpean citizen driven transferable and transformative digital health) at Trinity College Dublin. She completed a MSc in Health Psychology at NUI Galway in 2017. In 2021, Jane completed her PhD research on digital health interventions to support medication adherence in young adults living with asthma, at the School of Psychology, NUI Galway. Her PhD was funded by the Irish Research Council and used a range of research methodologies as well as incorporating Public and Patient Involvement (PPI) to explore feasible digital health supports for young adults with asthma. Jane has worked on several research projects and co-supervised postgraduate students conducting research in digital health and self-management of chronic conditions across the lifespan including hypertension, type II diabetes and asthma. She has contributed to teaching on a range of programmes in the School of Psychology and College of Medicine, Nursing, & Health Sciences at NUI Galway. In SEURO, Jane is applying health psychology and behavioural science to the development and evaluation of digital health behaviour change interventions, focusing on older adults managing multi morbidity.

**EHP:** Tell me a little bit about yourself and the position you are currently in?

**JM:** I completed my undergrad, MSc and PhD in Health Psychology at NUI Galway – a great place to learn some Health Psychology tricks. I'm newly



finished my PhD - I passed my viva in December and I submitted my final thesis in January this year. My PhD thesis focused on digital health interventions to support medication adherence in young adults living with asthma.

In July last year, I finally left NUI and began my current position – a postdoctoral researcher on the SEURO project in Trinity College Dublin. SEURO (Scaling EUROpean citizen driven transferable and transformative digital health) is an EU funded Horizon 2020 project which aims to advance the digital health platform called 'ProACT', and scale it up for delivery across Europe. ProACT aims to support individuals over 65 living at home with multimorbidity to better understand and self-manage their health and well-being.

My specific role within the project is to lead a behavioural science work package which focuses on the development of a Digital Checklist of the key steps that should be considered in the development and evaluation of digital health behaviour change

interventions. From my PhD work I can see the value in a comprehensive checklist like this, so I was invested from the get-go. And overall, the position felt like a nice 'next step' from my PhD – I wanted to stay in the field of digital health and chronic conditions but wanted to expand my research experience across conditions and from young adults to other stages of the lifespan.

**EHP:** *What is it like being a post-doctoral researcher (i.e., is it what you expected it to be? If not, how is it different?)? What are your typical day-to-day tasks? Do they vary much?*

**JM:** Day-to-day tasks can vary a lot, which keeps it both challenging and interesting. They range from organising and facilitating focus groups, workshops, interviews, project advisory board meetings, analysing data, writing protocols, deliverables and ethics applications, trial planning and attending meetings, either with the entire SEURO Consortium or individual teams within the Consortium depending on the task at hand.

**EHP:** *How would you compare it to being a doctoral student?*

**JM:** Naturally I think you're working as a more independent thinker and researcher to get your tasks done on a daily basis. But at the same time, there's a greater 'teamwork element' to working on a Consortium project – it's nice to work with a team that have an extensive range of expertise to learn from, and we can benefit from each other's strengths.

I also think the work is more structured – in your PhD you can somewhat structure your own timeframe and set personal goals and deadlines – whereas in this position there's more 'hard' deadlines set within the project, and for me that works well because I like structure.

**EHP:** *What were the main challenges in getting here (i.e., previous training, applying for post-graduate/post-doctoral positions, other responsibilities, etc.)?*

**JM:** The position I'm currently in is the first position that I applied for, so I can't speak too

much to the process of applying for positions. Thankfully, I was successful and started the position last July (2021). At this point, I still had PhD work to do - revise certain thesis chapters and write my discussion chapter. So for me the challenge was about balancing my dual role and time – thesis writing tasks, starting and settling into my first postdoctoral role.

Before this, completing the PhD during a pandemic also brought a host of challenges. I had a 7-month delay with recruitment through General Practice for my final study, which pushed it out much later than I had hoped. But I used this time to kick start writing my thesis and it worked out quite well, because when recruitment for my final study got the green light, getting the study started was a nice break from writing at that point

But what I found the most challenging during this time was the lack of dedicated office space for writing tasks and adjusting to working from home. And of course, not seeing my PhD pals every day – peer support is the absolute pillar!

**EHP:** *What aspects of the journey have you enjoyed the most (i.e., since you began third level education)?*

**JM:** I enjoyed many aspects of my PhD. Probably the thing I enjoyed most was the people that I got to meet - both my friends in Galway, people I worked with on the CREATE EC and those that I got to meet at the annual workshops and other conferences.

I also liked the diversity and range of areas I was researching – health behaviour, digital health, chronic conditions and developmental stages of the lifespan – there's a never-ending amount to learn! I also had a great working relationship with my supervisors. This made the 4 years so much easier and I just really enjoyed learning from them.

**EHP:** *Were you considering any other types of positions during/after your doctoral training?*

Answer: I think industry is another potential direction that's often considered if you're working in digital health. And I like the idea of sustaining

digital health interventions and working towards their integration into society and services. But my main interest lies in research and iteratively applying behavioural science to develop and refine these interventions.

**EHP:** *What advice would you give people who are considering applying for post-doctoral positions (i.e., dos and don'ts)?*

**JM:** •Do not be discouraged from applying for positions if you're at an early career stage – yes, experience is important, but so is relevant training, ability to problem solve and related topic knowledge.

•In the interview, demonstrate how you overcame any relevant challenges in your PhD/ other research. Challenges are inevitable in all research projects, so having experience of successfully managing them is essential.

•Be prepared to talk about your long-term career goals – what you want to achieve from the position and how it will help you achieve your goals. If your goal is to eventually apply for your own grant, show that you have thought about specific grants you may apply to.

**EHP:** *When you think about your area of expertise and your research, what is the way forward to make even more impact- in the research community as well as in society?*

**JM:** I think a key way of increasing impact is to increase reach – disseminate to both the research community and the public and through a number of avenues e.g., charity sector and events, policy briefs, media avenues (e.g., in Ireland we have RTE brainstorm, where the academic and research community can contribute to public debate and provide an informed view). Linked to that point, I think 'succinct' descriptions of the key findings/ implications of the research is an effective method of communication for several audiences – these may be efficiently presented through infographics, charts, or a short video. Additionally, taking a multi-stakeholder approach to our research field and incorporating all relevant expertise is

extremely valuable. This may include health psychologists, PPI representatives, healthcare providers, industry and human-computer interaction experts.

**EHP:** *With regards to how Covid 19 has impacted your research and teaching practices (i.e., remote work), what practices would you keep and what would you get rid of moving forward out of the pandemic?*

**JM:** I see huge value in face-to-face interaction, for research and teaching-relating tasks. However, the increased accessibility of online research events and conferences is also an advantage. Additionally, the potential to work remotely leads to increased job opportunities, which is another major plus. Moving forward, I think maintaining a hybrid/ blended approach to teaching and research would be ideal!

## Jane Murphy

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# The Behaviour Change Masterclass: a reflection on behaviour change theory and tools training

## Angela Rodrigues, PhD **Description**

*Northumbria University at Newcastle, UK*

The Behaviour Change Masterclass took place on the 30th Nov and 1st Dec

2021 at Northumbria University (UK). This training consisted of a two-day face-to-face course. The Masterclass has the following facilitators: Dr Angela Rodrigues (Course lead; Northumbria University, UK), Dr Shelina Visram (Newcastle University, UK) & Dr Grant McGeechan (Teesside University, UK).

The course was designed by health psychology and public health researchers (AR, SV, GM) with expertise in behavioural science employed by academic institutions in the North East of England.

The training covered issues relevant to interventions to change various behaviours related to health and well-being, inequality, and sustainability. It provided a practical guidance for developing, implementing and evaluating behaviour change interventions in the participants' areas of interest. The two-day face-to-face training course had the following learning outcomes:

1. Understand the basics of behavioural science and latest behaviour change theories and techniques;

2. Develop an understanding of which aspects of behaviour can be influenced/impacted by the individual and how it can be influenced by the behaviour of others and the environment;

3. Develop an understanding of the methodological approaches for the use of behaviour science and behaviour change theory in intervention design and the different stages involved in developing behaviour change

interventions;

4. Understand the different methodological approaches to evaluate behaviour change interventions.

The course was facilitated by three health psychology and public health researchers. The course lead (AR) convened frequently with the facilitators to discuss the course structure and approach, including planned group activities.

## Participants

The course was advertised to students, academics, and practitioners in the North East of England. It was advertised using several networks, through emails sent to policy and practice partners, on relevant websites, and social media posts.

All interested applicants were welcome to take part in the course regardless of prior training and experience. Prior to the course start, participants were asked to submit projects or problems that they would like addressed by the course.

## Course content

Behaviour change has become one of the most prominent topics of discussion within academic and lay circles in recent times. This behaviour change course was initially designed following a specific training request from practice and policy partners from across the region.

The two-day course was conceptualised using recent developments within the behavioural science field, including the updated MRC framework

(Skivington et al., 2021) and the Behaviour Change Wheel approach to designing behaviour change interventions (Michie, van Stalen, & West, 2011). It was designed with a focus on practical guidance for developing, implementing and evaluating behaviour change interventions, and to be interactive and promote interprofessional learning.

Additionally, course examples and activities were tailored to participants' identified problems and challenges (provided by participants in a pre-course questionnaire) to ensure that the course was applicable. The course facilitators encouraged participants to share experiences and best practice ideas.

## Measures

To assess change in competence from pre-course to post-course, participants completed questions on satisfaction, logistics, course organisation and the following competence measures at both timepoints: 'Overall, how confident do you feel about the following?'. Participants answered on a four-point scale ranging from 'not at all confident' to 'very confident', for each of the following statements developed by Dixon and Johnston (2021):

- Understanding of the latest behavioural change theories
- Capacity to identify barriers to and facilitators of interventions
- Capacity to deal with barriers to and facilitators of interventions
- Knowledge of health behaviour and health behaviour problems e.g. differentiating when it is impacted by the individual or their environment
- Knowledge of intervention development models and ability to use them in practice
- Capacity to select and apply most appropriate intervention method
- Knowledge of the different methodological approaches to evaluate behaviour change

interventions and capacity to implement them

## Evaluation

The Behaviour Change Masterclass was attended by 20 participants (eight post-grad students; twelve non-students) from across North-East England. The course was fully subscribed with a waiting list for attendance. The non-student attendees ranged from academics (i.e. post-docs, professors) to public health and health improvement practitioners.

Only five (25%) of the attendees completed the post-course feedback survey. Therefore, the following statistics for post-survey measures are to be interpreted with caution due to the small sample size.

Participants were mostly very or somewhat satisfied with logistics, with none reporting that they were very dissatisfied. Satisfaction for the sessions overall was high with all participants selecting either 'very' or 'somewhat' satisfied. Change in competency is shown below for those that answered both surveys.

As shown in Table 1, confidence was highest in identifying barriers and facilitators of interventions before the course. Knowledge and implementation of both intervention development models, and evaluation models was low. As shown in Table 2, participants who responded after the course were at least fairly confident with all of the competencies.

Qualitative information on what participants learned are displayed in the quotes below. Additionally, comments were made about how to use and implement the behaviour change wheel.

*'No matter how well-presented the behaviour change model, a researcher or practitioner first needs to change their own behaviours to have the capabilities, motivation and opportunities to apply it equitably. Their practices and ways of thinking are habits which sometimes need to change, otherwise*

**Table 1: Percentage for each response before the course, sample size = 20.**

Competency	Competence (%)			
	Not at all	Fairly	Quite	Very
Understanding of theory	40	40	15	5
Identify barriers and facilitators	5	55	35	5
Deal with barriers and facilitators	30	45	25	0
Knowledge of health behaviour and problems	25	45	30	0
Knowledge and use of intervention development models	55	25	20	0
Select the appropriate intervention method	30	50	20	0
Knowledge and implementation of evaluation models	45	40	15	0

**Table 2: Percentage of each response within those who completed the survey after the course, sample size = 5.**

Competency	Competence (%)			
	Not at all	Fairly	Quite	Very
Understanding of theory	0	40	60	0
Identify barriers and facilitators	0	40	60	0
Deal with barriers and facilitators	0	40	60	0
Knowledge of health behaviour and problems	0	40	40	20
Knowledge and use of intervention development models	0	40	60	0
Select the appropriate intervention method	0	40	40	20
Knowledge and implementation of evaluation models	0	40	40	20

*the Behaviour Change models and tools can be used subjectively and selectively which can perpetuate unhelpful behaviours in the stakeholders whose powerful positions blind them to the fact that it's their behaviours which need to be changed to produce the desired public health outcome'*

*'Better understanding of the stages for intervention development and evaluation. This*

*amount of detail was not covered at my masters.'*

*'By observing the academics and practitioners applying the concepts, I learned about the importance of researcher positionality and the need for our own behaviours and beliefs to be considered and reflected upon. I was particularly struck by the reaction to [name] presentation on inequities - it*

seemed that this was the first time [participants] considered the implications of structural inequality.'

## Conclusion

Overall, the feedback from participants is reassuring and this two-day behavioural science training course was well-received by the participants.

A few aspects could be improved in future courses of this kind. More precisely, it would be beneficial to provide more in-depth content on the evaluation of behaviour change interventions component; and introduce a specific activity about identifying and engaging with relevant stakeholders.

Some logistic aspects of the course could also be improved, such as arranging more breakout rooms for group activities and improving the format of printing (support) materials. As a result, future courses will also need to plan ahead for issues around data sharing and intellectual property of content and materials.

Finally, attendees also made suggestions for future courses, such as advanced insights on health inequalities, and how to address the behaviours of authorities and powerful bodies.

The planning for the next Behaviour Change Masterclass (November 29th-30th 2022) is currently underway and more details can be found here: <https://www.northumbria.ac.uk/study-at-northumbria/continuing-professional-development-short-courses-specialist-training/behaviour-change-masterclass/>

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