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Editorial

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Editorial

Our third issue of 2023 includes reflections from roundtable speakers at the European Health Psychology Society (EHPS) conference 2022 in Bratislava. This issue also includes reports from the grant winners attending the EHPS 2022 conference.

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

Alexandra Dima and colleagues provide a brief overview of the roundtable organised on during the EHPS 2022 conference aimed to discuss the EHPS engagement with international bodies on health policy and how the EHPS can continue and expand these activities in future. This article provides a summary of each of the contributions brought to the roundtable.

Monique Simons and colleagues reflect on the discussions at the roundtable on Just-In-

Time Adaptive Interventions (JITAIs) held at the EHPS 2022 conference. This article provides an overview of the shared insights in the opportunities and challenges on developing, evaluating and optimizing JITAIs for promoting healthy lifestyles.

In the five **reports** presented, grant winners (**Lerch; Acharya; Dilger; and Carvalho**) reflect on attending the **European Health Psychology Society conference 2022** in Bratislava and provide an account of key take home messages.

Hope you enjoy reading this issue!
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Position Paper

EHPS engagement with international bodies on health policy: current contributions and future opportunities

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Introduction

In recent years, the European Health Psychology Society (EHPS) has participated actively in several international NGOs and other UN organisations. This participation increased the potential to contribute to distinct health policy initiatives targeting important challenges for our global society. It has also allowed us to showcase and represent EHPS members in multi-stakeholder and interdisciplinary contexts and raise awareness of the value health psychologists can bring to problem solving of the wicked issues faced by humanity. Active participation with different organisations has led to knowledge translation for the benefit of evidence-based decision-making, using knowledge already generated within our discipline and generalising it to emerging societal issues that require health policy decisions. The Roundtable organised on August 25th during the EHPS 2022 conference in Bratislava aimed to inform attendees of some of the recent contributions and discuss how the EHPS can continue and expand these activities in future. The following sections are summaries of each of the contributions to the roundtable:

The role of the EHPS at the United Nations

Lucie Byrne-Davis

Since 2011, the EHPS has been formally associated with the United Nations, an intergovernmental organisation founded in 1945 to promote international diplomacy and dialogue for peace, security, sustainable development and uphold fundamental human rights, justice and law. At present, the UN has 193 member states and holds offices in New York, Geneva, Vienna and Nairobi. One part is the Economic and Social Council (ECOSOC), which coordinates international policy on topics such as work, poverty, health, education and human rights. In 2015, the EHPS was granted Consultative Status at the ECOSOC. In 2017, the EHPS UN Committee[1] developed a strategy for its contributions to the UN. The main goal is to support EHPS to collaborate in the application of health psychology to meet the global challenges of the UN agenda, in particular the Sustainable Development Goals (SDGs).

To pursue this strategy, the committee has led on several internal EHPS and external initiatives. Internally, a Special Interest Group was created on Equity, Global Health and Sustainability[2], focusing on low and medium income countries (LMIC), SDGs,

[1]The EHPS UN committee members as of August 2022 were: Lucie Byrne-Davis (chair), Vera Araujo-Soares (Past EHPS President), Jo Hart, Benjamin Ambuehl, Josianne Kollmann, Jennifer Inauen, Maria Karekla, Efrat Neter, Lucia Rehackova, Vica Tomberge, Philipp Kadel.
[2]https://ehps.net/equity-global-health-and-sustainability/

disadvantaged groups and environmental health. Several initiatives were started to showcase EHPS work aligned to the SDGs, such as tagging EHPS conference submissions, organising dedicated symposia, and including more colleagues from LMIC. The committee has also been working on internal organisation (membership, roles) and liaising with the EHPS Executive Committee. Externally, its members have been contributing to: a) meetings with key organisations that aim at sharing psychological knowledge at the UN (including the Psychology Coalition at the UN, detailed in the next section); b) working towards increasing health psychology representation at the Psychology Day at the UN[3]; c) communication on social media and EHPS website, and; d) collaboration with other psychological societies. An important part of the activity is complying with the special consultative status at ECOSOC, which allows us to write advocacy papers on our expertise on health-related topics.

The EHPS at the Psychology Coalition of Non-Governmental Organisations (NGOs) at the United Nations (PCUN) having Consultative Status with ECOSOC

Vera Araújo Soares

The PCUN[4] is a network of representatives of NGOs active in psychology or psychology-related fields and accredited (via consultative status at ECOSOC) or affiliated with UN entities. PCUN members collaborate to apply psychology to UN global challenges by advocacy, research, education, policy and program development. Since 2004, PCUN members have been active in two main entities: the ECOSOC Chamber and the Department of Global Communications (DGC), in particular in relation to NGOs - the DGC/NGO Relations Section, now the DGC Civil Society Unit. The DGC Civil Society Unit organises annual conferences across the world to raise awareness on current global challenges and solutions[5] and, when possible and relevant, psychological NGO's contribute to these. Psychology has had an important role in setting the UN agenda across the years. One of the most notable achievements was setting the SDG3 on Good Health and Well-Being and advocating for the importance of mental health and well-being.

The PCUN participates in many UN initiatives but the one that has more public international visibility is the Psychology Day at the UN, usually occurring in April and co-sponsored by countries' missions (e.g. Mexico and the Dominican Republic). This Psychology Day at the UN celebrates psychology in the context of the UN and provides an opportunity for psychology to share knowledge and practice with UN Permanent Missions, UN Agencies, NGOs and the private sector. During this yearly event the role of psychology in addressing concerns of global importance is highlighted. The Psychology Day brings together science and practice of psychology to discuss the latest psychological research on a specific topic. The aim is twofold: to share evidence-based strategies that can assist the UN and other groups to deal more effectively with a key challenge, on the one hand, and disseminate SDGs and global challenges within the psychological community on the other. The active engagement by EHPS UN committee members in the organisation of the Psychology Day at the UN has allowed the proposal of contributions from Health Psychology experts (and EHPS members) on core issues and current global challenges such as: multilateralism (2020, Prof. Susan Michie); building back better in a post-pandemic world (2021, Prof. Molly Byrne), and; climate action (2022, Prof. Ann DeSmet, Panel moderator Prof. Efrat Neter,

[3]https://www.ehps.net/ehp/index.php/contents/article/view/3399
[4]https://psychologycoalitionun.org
[5]https://www.un.org/civilsociety

Discussant Prof Vera Araújo Soares).

The PCUN, through its advocacy group, writes advocacy papers with the aim of raising awareness and collective action on key topics that are part of the UN agenda and often signalled by International Days and Decades, such as World Health Day (April 7), International Day of Happiness (March 20), or World Mental Health Day (October 10). One recent example of such a paper was the one issued on Psychological Perspectives on One Health and Planetary Health written to be released on World Environment Day (5 June 2022)[6] and that was led by an EHPS member (our colleague Philipp Kadel) and co-sponsored by the EHPS. In this paper PCUN proposes practical recommendations to policy makers for enacting a one health approach to planetary health. Members of the EHPS, through their active participation at the PCUN, have also collaborated in organising events targeting issues such as the integration, health and support of refugees and migrants, indigenous peoples, or the status and participation of women in global issues. Since 2017, the EHPS, via the EHPS UN Committee, co-sponsored several events within these initiatives.

The active participation of the EHPS in the several activities led and enacted by the PCUN has increased the visibility of the EHPS and the reach of the society's messages and outputs, leading to an increased potential for impact. It has also led to collaborations with other fields of psychology and other societies (e.g. American Psychological Association - APA; SPSSI - Society for the Psychological Study of Social Issues). These collaborations are crucial to share and generalise knowledge created within health psychology to other areas of psychology.

Contributing to the World Health Organisation health goals: examples from Romania

Adriana Băban

As a long-term WHO collaborator and EHPS member, the Health Psychology Research group at the Babes-Bolyai University, Cluj-Napoca, has been contributing for many years to data collection and policy recommendations in several WHO initiatives. One example is the Health Behaviour in School-aged Children (HBSC) study, a WHO collaborative cross-national study of adolescent health and well-being. Romania joined the HBSC network in 2003 and contributed to several data collection waves, which have led to national reports on adolescents' health and proposals for health policy. Romania has also participated in the European child maltreatment prevention action plan led by the WHO Regional Office for Europe, which has set up monitoring of prevalence across countries via instruments such as the Adverse Childhood Experiences International Questionnaires, as well as research into the determinants and consequences of child maltreatment and ways to take action at the policy level. The group has also delivered invited conferences and workshops to discuss evidence-based pathways to strengthening childhood immunisation, to inform concerted action on this topic.

Other contributions consist of methodology consultancy and support on study protocols for WHO, or national projects linked to international emerging challenges. One recent example is a project initiated at the start of the COVID19 pandemic to support rapid response of hospitals and health professionals. The project assessed the impact of an intervention on improving doctors'

[6]https://m.box.com/shared_item/https%3A%2F%2Fapp.box.com%2Fs%2F8infiwq0olsdhagfganm000vsuv2rp2k

self-efficacy and promoting adherence to recommended public health measures in the community. Two studies initiated in 2022 deal with assessing health needs of people fleeing to Romania due to the war in Ukraine. A rapid assessment of needs and healthcare access is complemented by a qualitative study to assess health service perceptions, experiences, barriers and drivers of health service uptake among Ukrainian refugees. The results are used to inform health policy in Romania and at European level concerning the organisation and delivery of health services to this population.

The EHPS involvement with the WHO initiative on the International Classification of Health Interventions (ICHI)

Alexandra Dima

A more recent initiative has been reaching out on behalf of the EHPS to the WHO group developing an international classification with direct relevance to health psychology: the International Classification of Health Interventions (ICHI)[7]. A newer addition to the WHO Family of International Classifications, ICHI has been under development since 2007. It was preceded by the International Classification of Disease (ICD) and International Classification of Functioning, Disability and Health (ICF), both now routinely used by health systems for recording diagnoses and health states, determinants and outcomes, for both research and practice. The ICHI vision is to develop a shared language for collecting data routinely on health interventions across health systems, for monitoring performance, knowledge transfer and training. Practically, it consists of more than 7000 terms and definitions for describing a broad range of interventions, from surgery procedures to public health interventions. Health psychology assessment and interventions are included in ICHI and classified and coded in a standardised manner to indicate the action performed, its target, and the manner in which it is performed.

The long-term ambition of ICHI is to facilitate routine data collection on topics of global importance such as health system performance, patient safety and quality, universal health coverage and sustainable development - topics on which health psychology has a central contribution to evidence generation and practice. The EHPS can contribute to the development of ICHI by giving feedback on terms relevant for the discipline, as well as making ICHI known to health psychologists and working towards its effective implementation. An EHPS ICHI committee has been set up in October 2020 (Vera Araujo-Soares, Lucie Byrne-Davis, Jo Hart, Marie Johnston, Alexandra Dima) and a first contact has been established with the WHO ICHI development team around initial feedback on terms for health behaviours, determinants and behaviour change techniques. Further plans for continuing this collaboration have been drawn up, and several EHPS members have expressed their interest in contributing to this work.

Discussion and perspectives

Jo Hart and Marie Johnston

The contributions to this roundtable demonstrated that the EHPS has actively engaged with several international bodies to increase knowledge dissemination and translation reach. A stronger voice can lead to a more sustained contribution to international health policy. Other initiatives within the EHPS, such as the 2022 Synergy Expert Meeting on Behavioural Science and

[7]https://www.who.int/standards/classifications/international-classification-of-health-interventions

Public Health, facilitated by Marta Marques and Angel Chater, and the EHPS Working Group on engaging effectively with policy, chaired by Julia Allan and set up in 2022, add substantially to these efforts. Discussions included reflecting on what we have learnt from experiences to date, and considering how we have contributed through theory, methods of investigation and intervention development as well as with evidence for interventions (e.g. on mechanisms of change and behaviour change techniques). Attendees were keen to work collaboratively and be part of ongoing developments. As PCUN is now aiming to increase its representation on other European organisations, the EHPS UN committee is engaged in realising this aim by planning to engage with different UN agencies spread across Europe. An enabler is that members of the EHPS are based around Europe and Central Europe. EHPS members may contact the authors of this brief report if they are interested in volunteering to represent the society and actively contribute to activities such as those presented at this roundtable.

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Report

Personalised context-aware digital health interventions: crossing boundaries between data science, geoscience and health psychology

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Introduction

This paper reflects the discussions at the roundtable on Just-In-Time Adaptive Interventions (JITAIs) (Nahum-Shani et al., 2018) held at the European Health Psychology Society (EHPS) conference 2022 in Bratislava. JITAIs are a novel class of digital health interventions that capitalize on technological developments around wearables, data and data science methods to develop personalized context-aware health behaviour change interventions. This novel intervention design is promising because of its ability to capture the dynamics and complexity of health behaviours.

In this roundtable, convened by Monique Simons, four researchers with diverse disciplinary backgrounds (i.e. data science, health psychology, nutrition science, geoscience) shared their knowledge and experiences with JITAIs for promoting healthy lifestyles. Topics included reinforcement learning by Susan Murphy, geofences triggered behavioural support by Felix Naughton, opportunities and challenges of JITAIs in the healthy eating domain by Laura König, and spatial data by Arend Ligtenberg. By discussing and sharing with the EHPS community, we gained shared insights in the opportunities and challenges on developing, evaluating and optimizing JITAIs for promoting healthy lifestyles. In the current paper we combine and share these insights in order to expand our community and advance collaboration around JITAIs for promoting healthy lifestyles.

Background: Leveraging technological developments for healthy lifestyle interventions

Adopting and maintaining a healthy lifestyle is key to health and vitality. However, adopting and maintaining a healthy lifestyle is challenging. Hence, effective behaviour change interventions are urgently needed to promote sustainable healthy lifestyles.

Technological developments create new opportunities for the design of behaviour change interventions and the dissemination of interventions (Dallery et al., 2015). Digital and mobile intervention platforms (e.g. smartphone apps and smartwatches) in combination with wearables and smartphone built-in sensors (e.g. accelerometery, heart rate sensor, GPS), increase scalable opportunities to deliver health lifestyle interventions and make it possible to acquire real-time data on health behaviours in a continuous and non-obtrusive way, resulting in high resolution

and high dimensional data (e.g. environmental and psychological factors) (Marsh, 2021; Chevance et al., 2021). These highly individualised and contextualised behavioural assessments provide new opportunities for novel intervention designs such as JITAIs. By taking into account contextual factors and by adapting the intervention over time based on people's behaviours and responses to the intervention, we are able to develop precise and highly personalized interventions, such as JITAIs. Such precise and highly personalised interventions hold the promise of increased effectiveness and impact (Fisher et al., 2018). JITAIs can thus be seen as a concrete example of the emerging concept of personalised health (Collins and Varmus, 2015), which is aimed at shifting from traditional group-level approaches to approaches that are individualised, contextualised and timely (Hekler et al., 2020; Chevance et al., 2015).

Just-in-Time Adaptive interventions: challenges and opportunities

Challenge 1: Adding geographic space

As mentioned above, awareness of the context of a JITAI user is crucial for providing highly personalised interventions. For most current JITAI systems, support delivery is mainly defined by time, hence 'just in time'. Here we argue that for many, if not most JITAI applications, space/place is a key factor for defining context. Where we are and where we go strongly affects our behaviour and decisions. Additionally, spatial-temporal conditions are likely to strongly determine the effectiveness of an intervention. For JITAI systems with a focus on healthy lifestyles, location is considered to play an important role. Coupling the 'where' to the 'when' might help to raise the quality of interventions. As an example, Naughton et al. (2016, 2021) developed and tested a JITAI for smoking cessation using smartphones and geofencing techniques. Places where people were vulnerable to smoking (home, pubs, friends house etc.) were determined using a geofence. When a user entered or dwelled in such geofences, behavioural support, tailored to identified contextual cues specific to those locations, were delivered.

Besides these relatively straightforward geofencing techniques the domains of geography and geo-information sciences developed a whole range of additional concepts, methods and tools that are helpful to analyse interactions between people and their spatial environment (Shaw and McGuire 2017). Analyses that include the proximity, topology, density, and visibility of spatial features allows for a richer representation of the context and more targeted interventions. Challenges here are the complexity of the data. To be able to use the geographic context, spatial information from multiple sources are required, including data about the network, locations of intervention points etc. In addition, the accuracy of current built-in GPS modules in smartphones does not always provide the necessary accuracy, especially in urban areas. It is expected that in the near future, at least for Europe, smartphones that support the GALILEO system might overcome this problem (Fernandez-Hernandez et al., 2018).

Challenge 2: Adding adaptivity

Adaptivity in JITAI systems can be viewed on two levels: 1) the level of individual behaviour; i.e., how can interventions continuously be adapted based on the state of users, to fulfil as much as possible the needs of an individual user at a certain time and place. This requires precise knowledge of

the individual's goals and traits as well as the contextual factors that affect their vulnerability and receptivity to interventions; 2) the level of the system itself; i.e., how can a JITAI application be used to understand spatial-temporal and behavioural patterns and use that information to refine interventions at the individual level and/or increase understanding of the linkages between behavioural patterns and the spatial-temporal context where these behaviours occur.

For both levels advanced machine learning (ML) techniques such as reinforcement learning (RL) are promising. RL algorithms allow the system to autonomously make intervention decisions (i.e. act as an artificial decision making agent). Hence, these techniques allow for a regular updating of the decision models to the needs and context of an individual, and thereby allowing the generation of personally tuned interventions. ML highly depends on the availability of ample data suitable to learn from. Currently, ML for these types of applications is in its infancy. The challenge here is having enough data to train such a RL algorithm to deliver personalised interventions that outperform the general/aggregated approaches (Hojjatinia et. al 2021; Perski et. al. 2022). How can we use behavioural theory/expertise to improve the speed at which a reinforcement learning algorithm can effectively personalize? How to use existing data to "warm-start" (Zhang et al., 2021), that is initialize reinforcement learning so that it will learn and personalize quickly? And in this way to shorten the learning process of the RL algorithm and minimize the burden for the users by collecting data during the intervention (Wang et al., 2021).
A complicating factor might be that it is not clear what data individuals are willing to provide in return for a higher personalisation level (i.e. personalization-privacy paradox), though this can be ameliorated when computation, and thus any personal data, can be undertaken and restricted to the device ('native app') (Naughton et al., 2021) instead of communicating with a remote server (Sporrel et al., 2021). A crucial avenue to advance this line of research further is to focus on the design and evaluation of JITAIs harnessing data-science approaches. Initial work on the development of requirements and frameworks for the use of RL algorithms for digital interventions are found in Trella et. al (2022).

Challenge 3: Evaluate the effectiveness of JITAI

The adaptive nature of JITAI applications and the quickly developing technology used to build them complicate their evaluation. Instead of traditional study designs such as randomised-controlled trials, more adaptive study designs are needed to adequately test their effectiveness, including within-person designs (Kwasnicka et al., 2022). Moreover, JITAI applications have the potential to generate large amounts of data such as intervention moments, user reactions, spatial-temporal recordings etc. These big, high dimensional and high-resolution data require advanced data analysis methods, beyond the common statistical methods in health research. Modern data science approaches provide tools to engage a Knowledge Discovery Process in Databases (KDD) process to extract valuable information out of the available data (Wachowicz et. al. 2008. Fayyad 1996). This information allows us to create models, often using ML, that learn about an individual's behaviour and 'risky moments' for unhealthy behaviours, so informing when a system or Artificial Intelligence can deliver 'just-in-time' support to facilitate or maintain health behaviour change.

When an RL algorithm is driving the adaptivity and personalization of the JITAI, approaches that inspect the performance of the RL algorithm at a finer level than the usual randomised-control trial are needed. These more fine-grained evaluations can take advantage of the large amounts of data

generated during implementation of the RL algorithm. To do this, measures of confidence that illuminate whether the decision-making behaviour of the RL algorithm can be attributed to learning versus chance are needed. This is particularly the case when considering the performance of the RL algorithm at the individual level.

Challenge 4: Developing JITAI for consumption behaviours

To be able to intervene just in time, JITAI systems typically use input data that is automatically collected, e.g., via wearable and smartphone sensors. While intervening based on time cues has already been implemented in the context of consumption behaviours including eating (König & Renner, 2019), it is much more challenging to intervene based on behavioural cues. This is because to capture the consumption of foods or drinks, manual user input is usually required, especially if the quality of the consumed products (i.e., healthy or unhealthy) needs to be taken into account (König et al., 2022). This tracking, however, is cumbersome for the user (König et al., 2021), and records may be incomplete or missed (Ziesemer et al., 2020). Advances in the development of automated input (e.g., via wrist-worn sensors, see Bell et al, 2020, for a review) and analysis algorithms are urgently needed for JITAI applications for consumption behaviours to gain traction. For the collected data to make sense (e.g., in terms of nutritional value which is typically the basis for feedback and interventionist messages), interdisciplinary collaboration between computer scientists, engineers, nutritional and behavioural scientists is crucial.

Conclusion and next steps

JITAIs are a promising and fast growing area in the field of intervention design for supporting healthy lifestyles. The challenges identified highlight how the field is at its infancy. More research and collaboration are necessary to advance the field and utilize more of the possibilities of data and technological developments. Promising avenues to take are: the use of GPS and GIS in JITAIs to not only deliver 'just-in-time' but also 'just-in-place' interventions; advance the application and performance of RL algorithms in JITAIs to create truly and real-time adaptive interventions; advancing the use and development sensors to acquire input data that is automatically collected, especially in the field of JITAIs to promote healthy eating behaviours.

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Report

The beginning of a new season - EHPS Grant Report 2022

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The EHPS Conference 2022 was my first in-person conference, where I had the opportunity to present some of my own scientific findings. The timing of its start could not have been better, as I love to learn, and the conference opened on my birthday. During the EHPS Conference 2022, I could harvest things I invested in in the past. Not only was I able to disseminate my research, but I also connected with people who had similar projects as I had, and we could exchange contacts. Through the conference I could enhance my scientific network. Between the sessions, I had several interesting talks with people I deeply respect about Open Science and other subjects. I was already able to implement some of the practical tips I was given at the Conference when I was back in Switzerland and now in Germany. I was happy to learn that there are simple things out there that I could implement by myself quickly – it gave me the feeling that I can contribute to promote Open Science. I learned other practical things at the Conference. I visited for example the workshop „The challenge of teaching health psychology in medical school." This workshop was a lot of fun and I received some great teaching tools that I already adapted for my context.

Further, it was during the conference that I received the news of a job confirmation at the Insititute of Medical Psychology in Heidelberg, Germany. Beginning in October in Germany I would:

1. be paid to work at the Institute, and
2. be further supervised to finish my already progressed Ph.D. as planned.

In the months before the EHPS Conference, I felt like beeing in a state of limbo. The reason for this was that a couple of months before, I had to resign my well paid and more than half-progressed Ph.D. position, although I desperately wanted to finish my Ph.D. For this reason, I was looking for clarification on whether, how, and where my Ph.D. would continue. Therefore, I connected with several Professors from my field to see if they had:

1. possibilities to hire me, and
2. would be able to supervise my Ph.D. further.

As you might imagine, I endured much tension in the weeks before the EHPS. The days of the EHPS felt like a huge sigh of relief for me and left me very grateful because I could present my research despite not knowing if I would be able to do science in the future. My very first learning at the EHPS Conference was that other researchers also struggle. To hear and learn this in my particular situation was very helpful. Writing this Grant report down, it reminds me of Kristen Neff's „common humanity" component of self-compassion (Neff, 2003). The EHPS in 2022 was a time and place for me to learn to be more vulnerable and honest, even in the professional field of science. I also felt rewarded for having the opportunity to be at the conference because it had cost me a lot to sign up for the travel grant, as I had such a uncertain future working situation during the sign-up process. Receiving the EHPS grant was very rewarding and encouraging in a difficult time. It was one of the few things that kept me going in my scientific career and strengthened my self-

efficacy at that time. I learned that I hold power and that I am not entirely dependent on the uncertainties I experienced regarding my working situation.

In summary, the EHPS Conference grant made it possible for me as a – at that time – unclear affiliated early career researcher – to participate at the EHPS Conference and present my very first scientific findings. The grant enabled me to learn more about Open Science through targeted small talks between the sessions. Further, I received new ideas for my teaching responsibilities. But – and I think that is much more important – it also gave me opportunities to exchange with people who have had their struggles regarding some aspects of their professional careers. These exchanges shaped me personally as I realized I was not the only one in this kind of situation. It helped me decide to be more vulnerable about my experiences from now on. For me, the time point of the EHPS Conference marked the end of a difficult season and heralded a new season. It was a reward for the difficult decision to signing up when many things about my career were unclear. I am very thankful that I received this grant. It might just have been a small thing for the European Health Psychology Society, but it was an encouraging thing for me. It was one of the few things that kept me going. Thank you to all that made this possible and to all the special people I met at the conference.

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Report

EHPS Bratislava Conference 2023

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It was with some trepidation I attended the EHPS Conference in Bratislava. Although I was extremely grateful and appreciative for the support that enabled me to attend, as a clinician entering a health psychologist's domain, I was filled with feelings of imposter syndrome. Would I understand what was going on? Would I be lost in an ocean of complex theoretical frameworks and impenetrable mechanistic work? And what of my own presentation, would it be too simplistic? Fortunately, my concerns soon abated as I found myself in the swathes of a busy, but extremely informative and useful conference. One, which in retrospect, had a substantial impact upon my current and future research.

My work as a pre-doctoral student examines the use of behavioural science-informed interventions in screening programmes, especially amongst underserved groups. As a result, I was soon in familiar territory, attending one of my conference highlights: a symposium on cancer screening participation during the first day. Key to asymptomatic screening is the preservation of informed choice. From my own experience, there can often be concern from members of the public and screening programme commissioners regarding potential coercion by behavioural interventions in this context. It was therefore very interesting to hear Maren Reder's (Universität Hildesheim, Germany) presentation on how knowledge and attitude mediate the effect of a decision aid on informed choice, and uptake intention of mammography (Reder, 2022). Furthermore, a talk by Professor Katie Robb (University of Glasgow, UK) on the Integrated Screening Action Model (I-SAM) and its applications in two trials, led me to reflect upon my own work (Robb, 2022). It gave me insights into the use of novel frameworks for intervention development specific to screening, the need to appreciate the "screening behaviour process" and how this can be applied to develop targeted approaches. This was further highlighted by Marie Kotzur (University of Glasgow, UK), who presented her experiences on how to adapt research methodology to be inclusive of people of all abilities (Kotzur & Jamieson, 2022). Given the stark health inequalities seen within screening services, modifying research to make it more accessible is essential. Seeing how this could be achieved practically with simple aids was eye-opening and provided me with an impetus to use and share these approaches.

Boosted by a sense of enthusiasm and a newfound confidence from the first day, I spent much of the rest of the conference venturing out of my niche and exploring the many fascinating developments in health psychology. A symposium on the Behaviour Change Intervention Ontology was extremely stimulating (Michie, et al. 2020). It highlighted the novel ways of describing and connecting behavioural change entities that are being developed. This means of evaluation encourages a more in-depth understanding of individual behavioural interventions, as well as facilitating cross-discipline comparisons. Moreover, a presentation by Professor Janna Hastings (University of Zurich, Switzerland), suggested that

with advances in natural language processing and interpretable machine learning, there is the exciting potential to make algorithmic predictions about behavioural change interventions (Hastings, 2022). Given the numbers of screening interventions of varying effectiveness I have encountered in the literature, having an ability to predict what might work would be invaluable.

The roundtable on how to reduce social inequalities in digital health promotion was also illuminating. With growing numbers of digital change behavioural interventions, and concerns regarding the second and third level digital divides, the discussion was enthusiastic. Upon sharing experiences with other researchers it was clear to see that the difficulty in overcoming these challenges was ubiquitous. Hearing others explain the problems they had encountered, and potential approaches to address digital exclusion gave me food for thought. The group sessions have now led me to explore a new research theme, and offered the opportunity for new collaborations.

Despite initial anxieties, attending the EHPS conference was an extremely positive experience. Not only did I manage to present my work, and gain validation from the wider health psychology community, it helped set the direction for my future research. Inspired by the work of some esteemed colleagues, who were more than willing to share their experiences, I have broadened my research interests. In addition, I left the conference having networked with several aspiring young researchers, who I hope to work with in the future. More importantly, it has helped solidify my decision to continue to pursue academia in conjunction with my clinical work. As I now enter the final stages of my thesis, I feel invigorated and keen to apply some of the things I have learnt into practice. I would like to thank the EHPS Grants Committee for this great opportunity, and all those involved with the conference for making it such a fantastic experience. I hope to see you again in Bremen!

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Report

EHPS SYNERGY Grant Report

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I received last 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 focuses 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 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: (1) we 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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Report

EHPS Grant Report

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'Charting New Territories in Health Psychology' was this year's EHPS conference theme. When I first read about it, I noticed that it reflects the experiences I make on my current research path. As a PhD student who is a studied psychologist, I apply a health psychology approach in the area of rehabilitation sciences and health services research. I was thus very pleased that I was given the opportunity to attend the EHPS conference 2022 and to discuss my thoughts about combining two theoretical approaches from two differing scientific territories.

In my PhD project, I analyze the participation experiences of people with Multiple Sclerosis with gait impairment by combining the International Classification of Functioning, Disability and Health (ICF) (World Health Organization, 2001) with facets of the Social Identity Approach to Health and Well-being (Haslam et al., 2018) using qualitative research methods. The ICF defines participation as the "involvement in a life situation" (World Health Organization, 2001, p.14) and offers a system to categorize participation. However, a characterization of subjective facets of participation, i.e. participation quality or perceived participation, is lacking. In order to characterize subjective participation, facets of the Social Identity Approach to Health and Well-being (Haslam et al., 2018) were combined with the ICF. Due to the novelty of this approach, I was keen to discuss this approach with fellow psychologists and to discuss possible theoretical and practical implications of transferring a health psychology model into the field of rehabilitation research.

I can say that the EHPS conference increased my confidence (a) in the relevance of this research approach and (b) to follow this research path. This became specifically clear during two sessions. Firstly, in the session 'Implementation in Mental Health and Social Exclusion', Dr. Emily Oliver reported about their study in which they analyzed how characteristics of a specific form of care, in this case co-located mental health services, interact with the sense of autonomy of an individuum (Oliver, 2022). I follow a similar approach by analyzing how context factors such as the built environment or health services shape the subjective experience of a sense of efficacy, sense of meaning and sense of connection (Haslam et al., 2018). Secondly during my poster presentation, I had the chance to discuss the results of my research with various fellow researchers and found interesting points of connectivity between the different projects.

Apart from my insights that were specifically relevant for my PhD, I also had the chance to gain insight into current discussions in the field of health psychology. I was able to attend the Symposium 'Health Inequalities – why do they matter and how can we tackle them?' which was chaired by Prof. Wendy Stainton Rogers. An interesting discussion about the role of positive psychology in the context of living under stressful socioeconomic circumstances evolved during this Symposium. The different streams and perspectives within (critical) psychology became clear. It was encouraging to perceive the awareness of the relevance of the socioeconomic situation of an individuum for health psychologists and to discuss the possibilities and limits of different theoretical

approaches.

An international conference such as the EHPS also offers time for discussing different methodological approaches which I was able to do during various conversations. Specifically, I was able to get in touch with colleagues from my alma mater, the Constructor University Bremen (previously called Jacobs University Bremen) about qualitative methods and their changing role in psychology in comparison to quantitative methodological approaches. The contact that was re-established because of the EHPS conference later yielded in an online qualitative research exchange group. A first meeting has taken place and it helped me to continue shaping my research network beyond the EHPS, but also to further elaborate on qualitative methods in the field of rehabilitation and psychology.

Overall, the EHPS conference 2022 was an important experience for me as an early-career researcher with regard to enlarging my scientific network and knowledge and I am very thankful that the EHPS Grants Committee made it possible for me to attend the EHPS conference in Bratislava. It was very valuable for me as a participant that the conference was very well organized which facilitated the exchange with other researchers. The glance at the cultural heritage of Slovakia through music and a speech given by the president of Slovakia that was broadcast during the welcome ceremony made the attendance of the EHPS conference 2022 especially memorable. I am already very much looking forward to the EHPS conference 2023 which will take place very close to my home University (the University of Oldenburg) in Bremen!

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EHPS Grant Report

Márcia Carvalho
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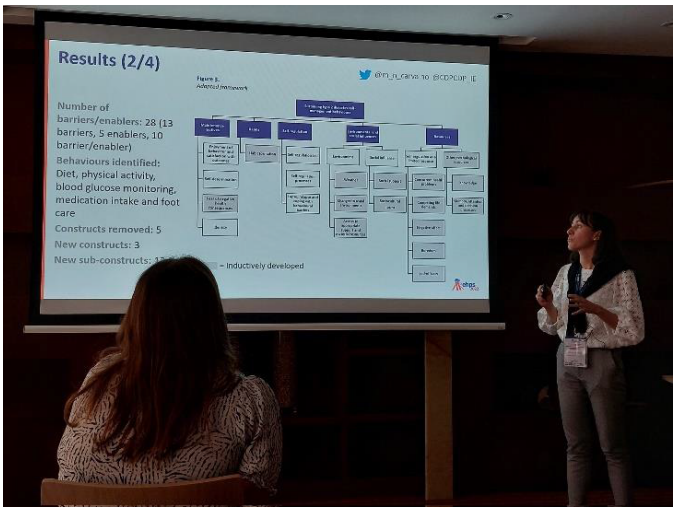
Dear European Health Psychology Society (EHPS) Grants Officer,

My name is Márcia Carvalho, and I was awarded a CREATE (Collaborative Research and Training in the EHPS) grant a few months ago to attend the 2022 CREATE workshop and the EHPS conference. I am writing to express my gratitude for the grant support. The CREATE grant enabled me to attend the CREATE workshop for the first time and participate in person at an EHPS conference, also for the first time. The opportunities afforded to me by this grant go, however, beyond the mere attendance at the CREATE workshop and the EHPS conference. This grant gave me a unique opportunity to enhance my research skills, improve my PhD project, network and increase my career opportunities.

The CREATE workshop on "Digitalising Health Psychology Research to enhance our science" was particularly relevant to my PhD project. The knowledge I gained in the workshop, particularly on programme theories and logic models, was instrumental in further refining the protocol for my PhD's second study – a documentary analysis to identify and describe the content of two structured type 2 diabetes education programmes. In the workshop, I also had the chance to gain new insights into possible new research interests and establish new networking relationships with fellow participants from all over the world.

Attendance at the EHPS conference was especially important as this was the first time I presented an oral presentation in person in such a reputed international congress. Attending the

conference in person also allowed me to chair two poster sessions. These opportunities will improve my CV and support me in achieving my long-term career goals, which include securing a post-doctoral position after my PhD. In addition, the opportunity to present and discuss the preliminary findings of



my review with other researchers at the conference helped me think about my review from different angles and reflect on its strengths and limitations. Therefore, it was an invaluable opportunity to polish and further improve the review manuscript I have been preparing for the last few months before submission. At the conference, I also established potential collaborative research links with other researchers with similar interests and expertise in methods I plan to use in my PhD.

Once again, thank you for awarding me a CREATE grant. It was a great honour to attend the 2022 CREATE workshop and EHPS conference. I look forward to using the knowledge and experience I have acquired in the CREATE workshop and the EHPS conference throughout my PhD and taking the most out of the opportunities this grant has given me.

Yours faithfully,

Márcia

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