

EHPS 2018 Conference report

Rebecca K. Webster I am very thankful to
King's College London have been awarded one of

the 2018 EHPS conference grants which gave me the opportunity to attend and participate in the 32nd Annual EHPS conference in Galway. Having just completed my PhD this was an important conference to attend to support and establish my career as an early researcher. The EHPS conferences are renowned for their outstanding keynotes, high quality presentations and posters, and excellent social events, which attract international delegates from far and wide. And this year certainly did not disappoint, not least because of the unexpected, but brilliant, two conference dinners!

Starting off the conference I was spoilt for choice as to which parallel sessions to attend due to the variety of topics covering many of my specific research interests, but also broader methodological issues and discussions within health psychology that are useful to researchers across the field. It was very interesting to hear about the development of digital interventions and researchers' experiences of using such methods – these are undoubtedly going to become more prominent over the coming years given how digital interventions can be used within such a wide variety of populations and health areas. Marques et al.'s. (2018) talk on using theory based digital interventions for weight loss maintenance certainly expanded my knowledge and made me consider the potential for digital interventions in my own research. I also found the session on testing the feasibility and acceptability of interventions useful. Feasibility testing is imperative for leading

up to and justifying a full scale confirmatory trial, and I will certainly draw upon the presenters' methods, findings and experiences to help me with interventions I plan to do in the future.

In the parallel session I was presenting in, it was interesting to hear about other studies in the field of risk perception. Similarly to my work, the research presented on the trajectories for cholesterol related risk perception and how this changed after feedback on cholesterol levels (Lages et al., 2018) and the effect of whether feedback was congruent or incongruent with their risk expectations (Kollman et al., 2018), highlighted the importance of expectancies in the context of processing risk information. In addition, the audience were very engaged throughout our session and I was grateful for the chance to disseminate my work to the wider health psychology network and in return receive some useful comments and questions to think about for the future.

During the conference I was able to attend French's (2018) state of the art presentation on bias in complex intervention RCTs due to participant reactions to measurement. It was intriguing to learn more about question-behaviour effect and how measurement bias can come about through main effects, but also interactions with the intervention. I will be keeping an eye out for the upcoming set of guidance statements on how best to reduce bias due to measurement in RCTs of health interventions and will consult these when designing future trials.

I also welcomed the roundtable discussion on how health psychology influences health globally but also what more we can do to influence policy (Soares et al., 2018). It is something that we are all

trying to achieve as an end result of our research but only a few of us are successful in doing so. There were some useful suggestions discussed such as training researchers early during their undergraduate/postgraduate education to write for policy effectively. Professor Susan Michie also highlighted the launch of the new NIHR Policy Research Unit in Behavioural Science at UCL, one of 13 new research units designed to inform decision-making by government departments, the NHS and Public Health England over the next 5 years. Obviously, we aren't going to influence policy overnight, and most do not have access to a policy research unit, but I look forward to hearing further outputs from this discussion and the impact these units have over the coming years.

Throughout the conference, the talks were supplemented well by the varied and very busy poster sessions. I had fun hunting down the posters I had highlighted in the programme and discussing the research in a more informal setting. The poster sessions were also a great place to bump into other presenters I had listened to in the various parallel sessions and therefore provided a great opportunity to network.

The keynotes were excellent and well attended throughout the conference. Professor Molly Byrne's (2018) keynote on "Increasing the impact of behaviour change intervention research: Is there a role for patient and public involvement?" resonated with me the most. Patient and public involvement was a significant help in my PhD when designing nocebo research involving elements of deception, and it is becoming increasingly important. For example, it is now common for funders to ask for patient and public involvement plans in research proposals. Molly's keynote opened my eyes to different strategies that can be used for PPI to help ensure our research is important to the patients as well as moving the field forward, avoiding significant research waste. These strategies and Molly's experience of using them will influence how I approach PPI in the future.

Finally, I cannot finish without mentioning the highlight that were the conference dinners. It perhaps seemed like the organising committee's worst nightmare when we all descended to The Galmont on 23rd August for the conference dinner, with the hotel convinced it was booked the day after. However, the immediate response and support from the EHPS community was admirable, heart-warming and made me proud to be a member. The hotel soon admitted fault putting together a last-minute conference dinner for us all, and many of us who were still around the following evening came back for round 2, with plenty of energy left in our reserves to fill the dance floor again.

EHPS 2018 was thoroughly enjoyable and invaluable to my current and future career in health psychology, and I would like to thank the grant committee again for enabling my participation. It will certainly go down in EHPS history as one of the most memorable conferences, but for all the right reasons.

References

- Byrne, M. (2018, August). *Increasing the impact of behaviour change intervention research: Is there a role for patient and public involvement?* Keynote presented at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice and Policy
- French, D. (2018, August). *Developing MRC guidance: Reducing bias in complex intervention RCTs due to participant reactions to measurement*. State of the art talk presented at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice and Policy
- Kollman, J. (2018, August). *Change and Habituation in Risk Perception after Health Risk Feedback*. Paper presented at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice

and Policy

Lages, N. (2018, August). *Stable or currently changing? Visualizing the trajectories of risk perception over 1.5 years*. Paper presented at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice and Policy

Marques, M. (2018). *Designing and testing theory-based mHealth tools for weight loss maintenance: The NoHow Toolkit*. Paper presented at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice and Policy

Soares, V., West, R., Michie, S., Byrne-Davis, L., Walsh, O., Babant, A., & Hart, J. (2018, August). *Roundtable: making a difference: how health psychology influences health globally and what more can we do?* Roundtable discussion at the 32nd Conference of the EHPS: Health Psychology Across The Lifespan: Uniting Research, Practice and Policy



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