

Future directions in Health Psychology Practice in Europe and other countries represented in the EHPS: Moving Forward Together

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This special issue includes four articles authored by a number of National Delegates (NDs) of the European Health Psychology Society (EHPS) on how Health Psychology is applied in various countries

represented in the EHPS. In order to attain an accurate and holistic picture, 27 EHPS NDs completed a survey. The survey focused on four issues related to the status quo of Health Psychology so as to suggest directions for the future: education, legislation, employability and cooperation with other disciplines (see Box 6.1). What are prominent in the articles in this special

issue are both the diversity and the communality characterizing Health Psychology across the various countries represented in the EHPS. In some countries, for example, research, education and clinical work in Health Psychology are better described, protected and visible than in others. Matters of legislation and cooperation with other disciplines also vary greatly from one country to another.

It is a fact that Health Psychology as one of the newer disciplines of psychology has matured considerably during the last decades. Moreover, the interest in the 'scientist-practitioner' role of Health Psychologists is growing. For example, *the Health Psychology Division of the International Association of Applied Psychology (IAAP)* is now its second largest division. Furthermore, the EHPS launched recently a blog called *Practical Health Psychology* (<http://practicalhealthpsychology.com/>) aimed to present how Health Psychology is applied in practice; this was undertaken in order to address

1	Develop a global consensus on <i>what Health Psychology is</i> and <i>what is a Health Psychologist</i> , as well as internationally recognized standards of practice (Hamilton et al, 2017).
2	Develop international standards for Health Psychology education to facilitate mobility (McSharry et al, 2017; Nieuwenboom & Andersson, 2017).
3	Legally regulate and standardize Health Psychology practice within the healthcare systems to inform education and training (Mc Sharry et al, 2017).
4	Define the distinct and unique knowledge and skill set that Health Psychologists possess (Hamilton et al, 2017) to increase visibility (Plass et al 2017).

Box 6.1 Overview of recommendations from the special issue related to applied Health Psychology

the growing interest in applied Health Psychology. On the other hand, a recent article in the *European Health Psychologist* (Byrne, Gethin & Swanson, 2017) concluded that there is a recognized lack of standardized international regulation regarding Health Psychology practice and a clear need for a more global and consistent narrative on who Health Psychologists are and what Health Psychology is, when applied in practice.

What do Health Psychologists do in applied settings?

Hamilton, Miglioretti and Plass (2018) in this issue suggested that there is variability between countries in whether Health Psychologists work under the title of 'Health Psychologist' or within the field of Health Psychology. In some countries, no specialised training in Health Psychology is required to be able to work, while in other countries specialist training is a legal and a regulatory requirement. This picture is further complicated by participants' reports, which suggest that many Health Psychologists end up working as Clinical Psychologists in clinical settings. This has major implications for the professional identity of Health Psychologists and the recognition of Health Psychology as a distinct applied profession. We recently organized a roundtable in the EHPS 2017 Annual Conference (Andersson, Gruszczynska, Kassianos, & Plass, 2017) that reconfirmed the fact that a unique identity is lacking, which is critical for the future development of the field in moving forward and clarifying the roles of Health Psychologists in applied settings, and general visibility of the profession in the society. Having a multidisciplinary nature is beneficial and does not preclude from having a clear identify as with all other fields which exist in a multidisciplinary context.

The question whether Health Psychology is a discipline of psychology was recently discussed in

an editorial in *Health Psychology*, the official journal of the Society for Health Psychology of the American Psychological Association (Freedland, 2017). The new journal Editor stated that Health Psychology belongs primarily to behavioral medicine, which in turn, belongs to medicine, healthcare and public health. This view was challenged in this special issue (Hamilton et al., 2018; Plass, Gruszczynska, Andersson & Kassianos, 2018). Although the definitions of Health Psychology that were most commonly used in the member countries varied widely, all definitions were similar in placing Health Psychology in the field of psychology rather than in medicine (see figure 1.1, p. X for key issues, and table 3.1, p. 383 for definitions).

Who do Health Psychologists collaborate with?

Health Psychology as a research area is multidisciplinary, thus bringing together a range of professionals who work in Health Psychology-related research. Nieuwenboom and Andersson (2018) suggested in this issue that equally in applied settings, Health Psychologists work with a wide range of professionals like physicians, nurses and physiotherapists and within different contexts like primary care and health promotion. This is important because recently secondary care was mentioned as a primary focus of applied Health Psychology (Byrne et al., 2017), but primary care can also be a context where illness prevention and management programs can be administered with the contribution of Health Psychologists.

The NDs that were surveyed highlighted that collaboration with other professionals is more prevalent in research than in applied settings with lack of funding and competition with other professionals as serious barriers. The authors also argued that Health Psychologists working in primary prevention can fill important gaps in

existing healthcare and social work programs and that collaboration with other professionals can improve the development of interventions targeting a wide range of health behaviors like physical activity and tobacco use. Interestingly, the authors also presented another barrier for collaboration that exists in Switzerland: language that makes it difficult to work between different language-speaking areas. This can also be a barrier at a European level, and needs to be considered when thinking of future directions for Health Psychology.

What are the legal regulations of professional Health Psychology?

The third paper in this special issue (Berndt, Höfer, Kolesnikova and Vilchinsky, 2018) discussed the legal recognition of the profession and how Health Psychologists are certified in order to guarantee the basic quality of provided care. The authors reinstated the argument made earlier that Health Psychology knowledge should be available to a wide range of professionals but at the same time ensuring that psychologists who want to apply this knowledge are trained in the competencies required to be a 'Health Psychologist'. From the countries that were surveyed there were some with specific regulations for Health Psychologists (e.g. Austria) but the majority of associated countries had no legal regulations protecting the Health Psychology title. The authors suggested aligning profession-specific legal requirements with professional competencies and opening a dialogue with decision-makers involving local Health Psychologists in countries represented in the EHPS on regulatory and reimbursement issues for Health Psychologists.

How Health Psychologists are educated and trained?

When discussing the legal scope of Health Psychology, one of the most important issues is always how Health Psychologists are trained. Mc Sharry et al. (2018) in this issue provided an overview of Health Psychology education in various countries represented in the EHPS. Again, there is a wide range of educational requirements in different countries and that is not surprising. All NDs surveyed called out for further developments in their countries, especially in terms of quality of education provided including continuous professional development. The authors suggested that the educational variability also brings a positive aspect in that we can actually learn from each other. The authors also comment that education is not isolated from other issues like legislation and employability and therefore needs to be viewed holistically as these issues often overlap. Therefore, in thinking about the educational standards in various countries represented in the EHPS, one needs to take into account where Health Psychologists work and what legal standards exist.

Reflections and directions for the future

The limitations of the special issue need to be recognized. First, the articles were based on online survey responses from the EHPS NDs and others may have provided different responses. However, the EHPS NDs are professionals who are active members of their local psychology associations and have a holistic idea of how Health Psychology is implemented in their countries. Second, we need to recognize that not all EHPS NDs responded to the online survey and the articles represent mainly what exists in the countries that their NDs

responded. On the other hand, there was a satisfying response rate (27 out of 37 NDs in total, 73% and 27 out of 29 NDs who opened the online survey, 93%). Finally, we need to recognize that the articles were authored by EHPS NDs and others may have provided different interpretations. Despite these limitations, we are confident that this special issue provides an adequate picture of applied Health Psychology in countries represented in the EHPS and clear directions for the future.

This special issue builds on the article by Byrne et al. (2017) which recognized the variation in Health Psychology training and practice, lack of regulation, coherent training and formal career pathway for Health Psychologists and suggested that we need to move forward together as a profession. Also, the barriers that exist when Health Psychology is applied in practice that were identified in this special issue need to be taken into account. These include language barriers, competition with other professionals, lack of funding, as well as variability in training, education and legislation between different countries. It is our hope that this special issue, including the priorities and recommendations from a range of different countries represented in the EHPS, will stimulate further discussions of the development and application of Health Psychology practice as a vital part of Psychology. The EHPS could have an important role in ensuring that Health Psychology is globally defined, and advising countries represented in the EHPS on how they can better regulate the profession. In addition, the establishment of formal career pathway for Health Psychologists would increase their visibility in the society.

High-quality research, which is focused on providing strong evidence in the efficacy and cost-effectiveness of health-promoting interventions and the refinement of the Health Psychology theoretical models, may also strengthen the identity of Health Psychologists as applied professionals (Keefe and Blumenthal, 2004).

Finally, clarifying the settings where Health Psychologists can work may benefit how the Health Psychology principles can be applied in settings like primary care and health promotion (Thielke, Thompson and Stuart, 2011). We hope that this special issue will help future discussions on the application of Health Psychology, by providing priorities and recommendations from a range of different countries represented in the EHPS.

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