



**Report 2015-2017**

**of the**

**Board of Prevention and Intervention**

**To the EFPA General Assembly in Amsterdam on  
July 15-16, 2017**

## Report 2015 -2017

### Executive summary

*Over the past two years we have increasingly focussed on the application of psychology in promotion and prevention. We have conducted a follow up to our pilot survey on how member associations are active in advocating for this field of psychology through training, dissemination of research and policy work. We have also surveyed psychology student's experiences and opinions through the EFPSA.*

*How we use psychology to intervene in promotion and prevention programmes has been outlined for children and young people in a draft guideline. We have produced a conceptual framework for psychotherapy in prevention.*

*We have new links with the prevention researchers through the European Society for Prevention Research. We have also made some initial contacts with the World Health Organisation to explore collaboration on prevention related issues.*

*We have highlighted the prevention work of the other EFPA working groups on our minisite.*

### Introduction

This report covers the activities of the Board of Prevention and Intervention performed during the period July 2015 – June 2017.

Over the past two years the Board has worked on surveys, guidelines and improving links with stakeholders. This work is summarised below.

### Activities

#### 1. **Planned: Variation in applied psychology in prevention across member associations.**

##### 1.1. Two member associations survey 2015 and 2016-17

- The aim of the 2015 survey was to get information about if, how and when psychologists and psychologist associations participate in prevention and promotion work and how they build competence for this kind of work in member countries of EFPA.
- The aim of the 2016-17 survey was similar, and necessary in order to expand the boards knowledge of this kind of activity and participation from psychologists in prevention. The 2016-17 survey also included a student version.

##### 1.2. **Achievements:**

- The 2015 member survey showed a big variation in how psychology, psychologist competence and psychological associations play a part in national prevention work. Some countries have a substantial effort, others have few or none. The prevention in countries with the more limited participation seems to be connected to a few areas of clinical practice, and not so much to community/universal and selective prevention practice.

- In the 2016-17 survey, we got 4 new thorough and informative templates from the UK, Norway, Portugal and France and four more responses from member countries that didn't reply in 2015. We are still waiting for some more (notified) responses. The results confirm the results from 2015. By early April 2017 prevention activities in 12 of the 19 member countries are still unknown to the board.
- Students' results 2017: In the students' version, the information was gathered from 33 European countries and different universities from some of those. The common view is that prevention as a topic is barely present at these universities and that is only mentioned during Clinical psychology and Health psychology courses. The results differ from country to country, however, most of the students expressed an interest for more practical and research knowledge in this field that they usually lack. There is a need for more information from different universities in order to have a complete understanding of the situation in one country.
- Survey of students experience of prevention in psychology education through EFPSA <http://www.efpsa.org>
- Survey links:
  - Member Associations <https://goo.gl/forms/VJSQhzs5hMs6G6Dz2>
  - Students <https://goo.gl/forms/a0rhGGUoLUyYaDcl3>

## 2. **Planned: To develop a conceptual framework for the role of psychotherapy in prevention**

- 2.1. The Board's terms of reference included a role in psychotherapy standards as part of the wider 'intervention' remit.
  - 2.1.1. The Board invested time in considering this issue, and in liaison with the EC and with the EuroPsy Specialist Register in Psychotherapy (S-EAC) has agreed a way forward that gives this issue the time and attention it needs.
  - 2.1.2. A conceptual framework for psychotherapy as an intervention in prevention was prepared and discussed.

### 2.2. **Achievements:**

- Following discussion in the Board and a decision by the EC, the Standing Committee on Psychology and Health will take forward the work on standards for psychotherapy together with S-EAC
- Achievements
- A paper on recommendations for psychotherapy was prepared by the French Association (appendix 2)
- A conceptual framework for psychotherapy in prevention has been agreed by the Board and posted on the minisite: <http://preventionintervention.efpa.eu/resources/guidelines/>

## 3. **Planned: Guideline on psychology and prevention in children and young people**

- 3.1. The goal was to create a set of guidelines that help psychologists whom work in the field of prevention with children and young people (in Europe).
- 3.2. **Achievements:** Starting point for the guidelines were the American guidelines developed by the APA "Guidelines for prevention in Psychology" (APA, 2014). At the moment (April 2017) the development of the guidelines is still work in

progress. So far, a first draft has been created and reviewed by all board members. We are now in the process of adapting the first draft.

- 3.3. A list of preventative interventions for children and young people has been added to the minisite: (<http://preventionintervention.efpa.eu/resources/children-and-young-people-programmes/>). This list was originally included in the guidelines, but this made the work too extensive. Once the guidelines have been finalized they will be published through the website as well.

#### **4. Planned: Developing links with other stakeholders**

- 4.1. Improving the networking of the group to increase visibility the role psychology in prevention and promotion is a key component of the work of the Board.
- 4.2. **Achievements:** The European Society for Prevention Research ([www.euspr.org](http://www.euspr.org)) is an interdisciplinary organisation that was established in 2010 to address the lack of investment in prevention research. As they say on their website: "In the European countries there is a growing interest for evidence-based prevention to tackle determinants of disease and ill-health, which is not paralleled by investment in human resources and education." This echo's the rationale for the establishment of the Board of Prevention and Intervention. A number of members of the Board have joined EUSPR and work is progressing on building collaboration.
- 4.3. World Health Organisation. Initial contacts with the WHO were through the possibility of sharing information in our survey and a similar survey that the EFPA had conducted. This has not progressed. However, a new avenue of possible collaboration has come from crossover membership of the Convenor with the Board Human Rights and Psychology, though which new links with mental health and prevention have begun to be established ( see [http://www.who.int/mental\\_health/publications/disorders\\_prevention\\_promotion/en/](http://www.who.int/mental_health/publications/disorders_prevention_promotion/en/))
- 4.4. The European Public Health Association (EUPHA) is another group that the Board has begun to make some links with and this will hopefully result in some further collaboration. This group has produced the Vienna Declaration [https://ephconference.eu/repository/publications/Vienna\\_Declaration\\_final\\_version\\_update28112016.pdf](https://ephconference.eu/repository/publications/Vienna_Declaration_final_version_update28112016.pdf) that updates the Ottawa Charter on Health Promotion and our Board would like to propose that the EFPA endorses this with the use of its logo (see appendix 2)

#### **5. Planned: Incorporate behavioural economics (BE) into promotion and prevention.**

- 5.1. BE has been making a significant impact in policy areas and psychologists have played a key role in the development of this relatively new discipline. Government bodies ranging from local authorities to global agencies have taken up the ideas with some enthusiasm. Our Board will take a critical evidenced-based approach to this field as it has both opportunities and risks.

- 5.2. **Achievements:** We have been fortunate to have a new member appointed from the Belgium association, who is active in the field of behavioural economics. This is an important field of policy development in which applied psychology plays a very significant part, although often under the guise of behavioural science. As an example of the penetration of these ideas into policy making in Europe see the recent OECD summary <http://www.oecd.org/gov/regulatory-policy/behavioural-insights.htm>
- 5.3. We have begun working on guidelines for the use of BE in the field of prevention and promotion.

## 6. Other activities

- 6.1. We have recommended that the Board be renamed the Board of Promotion and Prevention (see appendix 1). This is to provide a clearer focus for our work. While psychotherapy remains an approach that is important in this field, the previous remit on psychotherapy will be transferred to the Standing Committee on Psychology and Health.
- 6.2. We have been planning a symposium and a round table at ECP 2017 on prevention science in a changing world. Our aim is to showcase some of the work of the Board, but also present examples of Board members research and other activities. The focus of the round table is to increase networking and provoke debate.
- 6.3. Papers for the ECP2017 Symposium illustrate some areas of work of the Board members:

*Anne Plantade and Barbara Craciun*

- Evidence-based treatments, clinical experience and patient uniqueness: towards a framework for psychotherapy in the field of prevention.

*Britt Randi Hjartnes Schjodt, Irena Stojadinović*

- Benchmarking psychology and prevention in EFPA member association countries.

*Jennifer Klop Richards*

- Social predictors of young adults wellbeing

*Margarida Gaspar de Matos*

- Why the dream teens ([www.dreamteens.aventurasocial.com](http://www.dreamteens.aventurasocial.com))?

*Roman Gavrhelik*

- Comprehensive Training in Prevention Science and Interventions: Implementing the International Universal Prevention Curriculum (UPC) in the Czech Republic World

## **Meetings (also videoconferences, or Skype meetings) during term 2015-2017**

- 1) 1<sup>st</sup> October 2015, Skype
- 2) 21<sup>st</sup> April 2016, Brussels,
- 3) 30<sup>th</sup> October 2016 Berlin
- 4) 16<sup>th</sup> March 2017 Brussels

Numbers attending have ranged from 6 to 10.

In addition to the above a number of individual and sub groups Skype meetings have been held to take forward work on projects.

We have noted that some members have found it difficult to obtain support (e.g. funding) for attending meetings from their national associations and perhaps this is an area that could be discussed further so we can be clear about how members are supported in this work. We have also considered succession planning, as some members will be standing down. The convener will be standing down from this role in July. A possible model for maintaining continuity would be for members of the Board to take different roles so that the convener role was shared.

## **Information & recommendations for GA & Member Associations**

The General Assembly is asked to take notice of the following:

1. The change of name from the Board of Prevention and Intervention to the Board of Promotion and Prevention (6.1.) as argued in the “Promotion and Prevention Concept paper” (appendix 1).
2. The development of an EFPA guideline on promotion for children and young people, and the continued work of including prevention for adults and behavioural economics (points 3 and 5)
3. EFPA is asked to support the Vienna Declaration as argued in the paper “Proposal to support the Vienna Declaration” (see point 4.3 and appendix 2) and to give permission to include the EFPA logo on the Declaration.

## **Proposals for decisions by GA**

The General Assembly is advised to accept the following proposals:

1. The Board change its name from the Board of Prevention and Intervention to the Board of Promotion and Prevention
2. The Board continues to develop guidelines in this field with particular emphasis on European research and practice.
3. The Board continues to develop the links with relevant stakeholders across Europe.

**Members of the group (2015):**

Nady Van Broeck	Belgium
Damir Lucanin	Croatia
Panayiota Dimitropoulou	Cyprus
Roman Gabrhelík	Czech Republic
Anne Plantade	France
Marcus Rautenberg	Germany
Sigrun Danielsdottir	Iceland
Guna Svence	Latvia
Jonas Eimontas	Lithuania
Jennifer Klop-Richards	The Netherlands
Britt Randi Hjartnes Schjodt	Norway
Aina Fraas Johansen	Norway
Margarida Gaspar de Matos	Portugal
Barbara Craciun	Romania
Mukhamedrakhimov Rifkat	Russia
Vita Postuvan	Slovenia
Francisco Labrador Encinas	Spain
Heloisa Martino	Switzerland
Tony Wainwright ©	United Kingdom
Irena Stojadinovic	EFPSA
Victor J. Rubio	EAPA
Matthias Ziegler	Liaison to board Scientific Affairs

**Members of the group (2017):**

Lieven Brebels	Belgium
Damir Lucanin	Croatia
Panayiota Dimitropoulou	Cyprus
Roman Gabrhelík	Czech Republic
Anne Plantade	France
TBA	Germany
Sigrun Danielsdottir	Iceland
Guna Svence	Latvia
Jonas Eimontas	Lithuania
Jennifer Klop-Richards	The Netherlands
Britt Randi Hjartnes Schjodt	Norway
Aina Fraas Johansen	Norway
Margarida Gaspar de Matos	Portugal
Barbara Craciun	Romania
Mukhamedrakhimov Rifkat	Russia
Vita Postuvan	Slovenia
Francisco Labrador Encinas	Spain
TBA	Switzerland
Tony Wainwright ©	United Kingdom
Irena Stojadinovic	EFPSA
Victor J. Rubio	EAPA
Ann Charlotte Smedler	Liaison to board Scientific Affairs

## Appendix 1

Concept paper for a new Board of Promotion and Prevention

Introduction: The Board of Prevention and Intervention was established in 2010 as the EFPA had decided that applied psychology in prevention was underrepresented in the offers of psychology generally and within the EFPA working groups in particular. In **February 2014 Professor Robert Roe attended a ‘relaunch’ of the Board of Prevention and Intervention**, as it had not been functioning well. He gave a presentation to clarify the role and focus of the Board. As this was a specific brief from the President, this is described in the next section so that the context is clear.

### **Robert Roe’s outline:**

**Under the heading “A growing mismatch” Robert Roe made the following points:**

*Psychological knowledge and professional competence have grown impressively during the past decades. As a result, psychology has a huge potential to help understanding and alleviating human problems in society. However, the psychological profession as a whole has developed autonomously and gravitated towards health care, in particular individual mental health care. The result is a significant and growing mismatch between what society needs and what psychology offers*

He went on to outline the various problem areas where he felt psychology could and should be doing more. Examples he suggested were

*Smoking and drug addiction*

- *traffic accidents*
- *bullying and aggression*
- *depression and suicide*
- *obesity*
- *religious intolerance*
- *school dropout*
- *work conflict*

.. *“it was an objective for EFPA to narrow the gap – in the area of health as well as in other areas.”*

*“The reorientation chosen by the EFPA in 2010 places a strong emphasis on the need for prevention, next to various forms of intervention.*

*It does not make sense for European psychology to continue focusing on therapeutic interventions while largely ignoring prevention.*

*On the contrary, prevention should be expanded where possible, it should be **comprehensive and include all of psychology’s specialization areas, and it should be developed in relationship with corrective interventions.**”*

Future focus of the Board of Prevention and Promotion:

The Board of Prevention and Intervention has developed a number of work-streams built around the focus that Robert Roe set down, in particular making our aim the expansion and increased visibility of prevention in the areas outside health. To do this we have undertaken a survey of the working groups within the EFPA to identify where they are undertaking work in the area of prevention in order that we can both collaborate but also not duplicate work. For example the Board of Human Rights and Psychology will be working on how we might develop ideas on applying psychological approaches to the prevention of human rights violations perhaps through training (see <http://tinyurl.com/zbtblqh> for the expert meeting on human rights and psychology).

Similarly the Standing Committee on Traffic Psychology has one of its goals as improvement in safety. Other groups tell us they have not engaged with the psychology and prevention agenda and we will be developing plans with them. Outputs of this work are on our minisite <http://preventionintervention.efpa.eu/efpa-work-in-prevention/>

We also have undertaken one pilot survey of the work of member associations on their work in this area. We are repeating and enhancing this work with the aim of developing a benchmark of good practice. This survey has also included EFSPA <http://www.efpsa.org> so that the experience of learning about applied psychology in prevention can be directly obtained from the students themselves. The work will be reported at the Amsterdam conference ECP2017

We have also been drafting guidance of psychology approaches to prevention in children and young people and will do the same with adults.

Other work:

As an example of a prevention network, members of the Board recently attended the conference of the European Society for Prevention Research <http://euspr.org/euspr-2016/>. This is a multi-professional association whose president at the time of the conference is a community psychologist, Professor David Foxcroft <http://www.swph.brookes.ac.uk/professor-david-foxcroft>. The presentations were exactly in line with the objectives that Robert Roe had outlined. This association also was established, as there was a gap between the rhetoric of governments that prevention was very important and the lack of research funding and therefore effort going into this field. Collaboration with this organisation provides a potentially very effective link to researchers in 27 countries across Europe and beyond. It was clear that this group has experts with a very high level of excellence in their fields and we are hoping to develop a memorandum of understanding between the EFPA and EUSPR to take this forward. Professor David Foxcroft has offered to attend a Board meeting, or perhaps our Semester meeting, to present the work of the EUSPR.

Another opportunity would be to expand our approach to academic disciplines that can work synergistically with psychology and we have made a start in this area. A new member from the Belgian Association has joined us with expertise in the field of behavioural economics. This field has been pioneered by Professor Daniel Kahneman who won the Nobel Prize for economics for his psychological approaches to decision making under uncertainty. This has become a worldwide network of researchers, policy makers and practitioners (see <http://www.bx2015.org>) and represents a major shift in the application of psychology in the field of prevention and policy making (see <http://www.worldbank.org/en/programs/gini> for another example). A new journal <https://jbep.sdsu.edu/ojs/index.php/Behavioral> will publish articles in this field and our aim will be both review these, and perhaps contribute. See also Roberto and Kawachi (2016) Currently there is no lead on this area in the EFPA.

Promotion and Prevention:

The proposal to change the name to Promotion and Prevention is because there should never be one without the other and promotion comes first as it is more universal. That is the aim of a prevention measure will be to promote some public good, and it is essential that the promotion is made clear. It also helps to clarify methodical questions concerning outcomes, as it may be harder to measure something that the approach has prevented (as it will not have happened if the approach was effective), than to measure something positive that the approach intended. As an example you could say you are aiming to

prevent traffic accidents, but at the same time you might say you want to promote safe transportation.

European Prevention and Psychology:

A recent book (Rechel & McKee, 2014) set out the case for prevention as a significant area of development in public health policy across Europe where they show that investment in this area ranges from 0.5% to 6.3% of health spending where the data are available. The European Union has been working on improving standards in this area and the progress is summarised in European Observatory for public health <http://www.euro.who.int/en/about-us/partners/observatory> . Rechel and McKee's book is multidisciplinary and outlines the way different European countries have been approaching prevention. The field of Public Health, while having health in the title, covers a very wide range of issues and prevention and promotion and their psychology fits well within it. As an example, warfare and conflict have major public health impacts and the psychology surrounding conflict resolution may contribute in this field (see for example the journal of peace psychology, preventing conflict and promoting peace <http://www.apa.org/pubs/journals/pac/> )

Consequences for what the Board will be working on:

The current workplan has been based on the model presented by Robert Roe, so the **new Board's** plans would not be substantially different, simply enhanced and focused more effectively. The main areas we would likely expand are:

1. Multiprofessional links with prevention researchers and raising our game in the scientific aspects of this field.
2. Collaborative working with the SC of Community Psychology and other relevant working groups.
3. The evidence based strategies that psychology can offer in promotion and prevention will be made more visible, including the critiques of those approaches that have a compelling narrative, but are not effective.
4. The implementation problem will be highlighted, and examined, where promotion and prevention programmes are known to be effective but are not delivered.
5. Using more effectively world days – for example world day on safety at work (April 28<sup>th</sup>); World Sight Day (28<sup>th</sup> October), linking with prevention of diabetes and similar issues; May 4<sup>th</sup> Antibullying day and so on. All of these can be linked to psychology and promotion and prevention.
6. Climate change

Membership: The clear focus on this area of work means that the Board should ask its current membership if this is an area they wish to be part of, and if so that they can make the commitment to the meetings.

Conclusions:

Applying psychology in promotion and prevention, as outlined by Professor Robert Roe is a high priority. We need to focus our attention on fostering the multiprofessional collaborative networks that can raise the visibility of this field across Europe. There are some excellent examples of good practice that our Board members have illustrated and we intend to promote these in the future.

## Appendix 2

### **PSYCHOTHERAPY AND PSYCHOLOGICAL COUNSELING**

The purpose of this paper is to argue the need for further work on psychotherapy and psychological counseling.

These practices are part of the specificities of practicing psychologists. For many colleagues working in different areas, they are also an integral part of their professional identity.

Several definitions of psychotherapy are possible. Most include the idea of "treatment" for enhancing wellbeing, based on theories, techniques, and a therapeutic relationship. The notions of "psychological counseling" would be placed in a rather educational and supportive register, while psychotherapy would be more in a register of self-exploration. Overall, it seems that psychotherapy and psychological counseling can be placed on the same continuum, with exploration at one side and education at the other.

Research indicates the value of specific therapeutic techniques in the treatment of given psychological disturbances. However, the link between research and practice remains complex. Research may be unrealistic and may be ill-suited to the subjective reality of the patient and to his specific situation. On the other hand, it is often difficult to bring practitioners to take an interest in the research and the innovations they introduce. The articulation of the two central pillars of the profession that science and practice represent need to be thought further (for psychotherapy and for counseling).

At the European level, practitioners' initial training vary. Training and continuing education training are central to the profession. Therefore it is essential to further think about it, respecting the diversity of all European countries.

Also, some guidelines could be developed around the practice of psychotherapy and psychological counseling. The objective would be to stimulate thoughts on this topic in the profession, instead of trying to standardize practices that will always remain diverse.

Finally, psychotherapeutic practices cannot be totally dissociated from their funding (diagnosis, prescription, type of funding - private / public / type of community care) and a comparative approach deserves attention.

Anne Plantade-Gipch

For the French Federation of Psychologists and Psychology Delegate  
at the EFPA Board of Prevention and Promotion

## Appendix 3

### **Proposal to support the Vienna Declaration (see point 4.3)**

The Board of Prevention and Intervention will be proposing to the EC and the GA in its biannual review to change its name to the Board of Promotion and Prevention to more closely capture the intention of the EFPA when it was established, and re-launched by Robert Roe <http://tinyurl.com/Robert-Roe-BPI-Relaunch> .

This related proposal is for the EPFA to add its logo to support the Vienna Declaration as requested by the European Public Health Association (EUPHA <https://eupha.org> ) and the Austrian Society for Public Health (ÖGPH <https://oeph.at>) that updates the Ottawa Charter on Health Promotion.

The first International Conference on Health Promotion was held in Ottawa on the 21 November 1986 and produced a charter for action to achieve Health for All by the year 2000 and beyond <http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>.

The Vienna Declaration was enacted in 2016 to reiterate the commitment to the principles of the Ottawa Charter on Health Promotion, taking into account new and emerging threats to public health that have arisen in the three decades since the adoption of the Ottawa Charter. The Vienna Declaration calls on all parts of the public health community, in Europe and beyond, working at all levels, local, national, regional and global, to recognise the multi-tiered determinants of health and opportunities for action.

#### **Rationale:**

The Board of Prevention and Intervention has been focussing its work on this area through developing links with new stakeholders.

The first was the European Society for Prevention Research (EUSPR <http://euspr.org> ) and its president, Professor David Foxcroft, who is a community psychologist working in public health. We also, through this work have made initial contacts with the European Public Health Association. Both of these organisations are multi-professional and fit well with the Board's mission since they both have a wider brief than health, as normally understood in terms of health services, and consider wider areas of concern, for example the impact of conflict and displacement, climate change, pollution and so on. All of these impact on people's health and wellbeing, and the focus is on promotion of the circumstances that would lead to people living lives where they can thrive, and preventing conditions that are obstacles to those goals.

#### **The Vienna Declaration**

[https://ephconference.eu/repository/publications/Vienna\\_Declaration\\_final\\_version\\_update28112016.pdf](https://ephconference.eu/repository/publications/Vienna_Declaration_final_version_update28112016.pdf)

We can express our support for this by contacting the EUPHA ([office@eupha.org](mailto:office@eupha.org)) stating our support and including our logo. They will then include this in their list of supporting organisations.