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Study 4 confirmed that emotions mediate the relationship between mental imagery valence and the willingness to engage in risky actions.

To conclude, we showed that (1) generating mental imagery could impact people's decisions concerning their potential involvement in risky actions, and (2) mental images are the source of emotions that regulate risky choices.

Paper number 492 | Poster | Health, Sport & Exercise

Relationships between self-efficacy and sedentary behaviors: the moderating effect of obesity status

Hanna Zaleśkiewicz, SWPS University, Wrocław; Anna Banik, SWPS University of Social Sciences and Humanities; Ewa Kulis, SWPS University; Zofia Szczuka, SWPS University; Maria Siwa, SWPS University of Social Sciences and Humanities; Dominika Wietrzykowska, Swps University, Wrocław; Aleksandra Luszczynska, SWPS University of Social Sciences and Humanities

Aims: This longitudinal study examined mutual relationships between three types of phase-specific self-efficacy beliefs (initiation, recovery, and maintenance) and time spent on sedentary behaviors (SB) in people with overweight and obesity.

Background: The Health Action Process Approach assumes that phase-specific self-efficacy enables individuals to initiate and maintain healthy behaviors.

Methods: The participants were 603 adolescents, adults, and older adults (65.2% women, aged 11-86 years old); 16.6% had obesity, 24% had overweight. Body mass index (BMI) was measured objectively, other variables were self-reported across four time points spanning 3 months. Participants included in the study were not knowledgeable about SB at baseline.

Results: Analyses conducted with people with BMI > 25 indicated that among people with overweight the relationship between higher maintenance self-efficacy (at baseline) and lower SB (at the last follow-up) was moderated by BMI; in particular, this association was significant among those whose BMI was between 25 and 27, but not those with BMI > 27.

Self-regulatory beliefs such as maintenance self-efficacy may help individuals with BMI ranging from 25 to 27 to reduce their SB; however, other beliefs or cues may be necessary to trigger a change in SB among people with higher BMI.

Limitations: The study relied on objective measures of body mass, but self-reported SB.

Practical implications: People with overweight may benefit from interventions boosting self-efficacy belief about ability to maintain a change in SB, regardless arising barriers. For people with obesity, whose SB habits are likely to be stronger, other types of interventions may be more effective.

Originality: This is the first study to show that links between self-regulatory cognitions and changing habitual behaviors as SB may vary depending on overweight/obesity status.

Paper number 1273 | Symposia Paper |

Time use and well-being among older European couples

Olga Zamalijeva, Vilnius University; Antanas Kairys, Vilnius University; Vita Mikuličiūtė, Vilnius University

Background: In light of rapid demographic ageing, research on older people's time use is not only considered to be of strategic importance for social policy, as it gives an insight into economic activity and work-leisure balance, but may also provide valuable information regarding gender equality and well-being in later life. Therefore, the aim of the current study is to test whether time use is a significant predictor of well-being among older adults.

Methods: The data on 10 546 subjects aged 65 and older was drawn from the Survey of Health, Ageing and Retirement in Europe (SHARE) Wave 8. Well-being was measured using the revised 12-item version of the Control, Autonomy, Self-realization and Pleasure (CASP) scale. Time use measures included household and administrative chores, leisure and voluntary activities, activities with the partner, helping relatives and sleep. In the second step of the analysis time use of the matching partner was used as a predictor of well-being.

Results: After controlling for demographic and health-related variables hierarchical linear analysis showed that for both, males and females, time spent with the partner, voluntary and household work positively associated with the well-being level. Time spent on personal care and time with children predicted better well-being in the male group, but time used to help partner was linked to lower well-being levels in the female group. While longer night sleep predicted better well-being, time spent napping and resting during daytime had a negative association in both groups. When partner's time use was included in the analysis, several variables turned out to be a significant predictor for males, but not for females. The way older adults spend their time is indicative of their well-being and some gender differences are evident, however time use within a couple are more likely to be important for males.

Paper number 892 | Oral Presentation | Equality, Diversity and Inclusion

Personalised health budget as tool of social and health integration: monitoring the process

Bruna Zani, EFPA; LUCA NEGROGNO, Istituzione MINGUZZI – Città metropolitana Bologna; Vincenzo Trono, AUSL- Bologna

The Personal(ised) Health Budget (PHB) is an innovative approach to mental health and a new integrated social and health instrument that supports the Therapeutic Rehabilitative Personalised Project (TRPP) for persons with mental disabilities. Two are the inspiring principles: social and health integration, and personalisation of welfare interventions. It is formed by all the resources of individual, family and community aimed at improving wellbeing and inclusion of disadvantaged people, as well as promoting their active participation and autonomous life.

We have analysed the introduction of the PHB in the social and health services of the Metropolitan City of Bologna (Italy), organising the training programme for professionals (2020-2021) and then monitoring the experimental period (2021-2022).

We will present the data drawing from the monitoring research conducted on the first 50 personalized project experimentally activated so far in the 6 Districts of Bologna. We made field observations during the 50 joint meetings of practitioners, to investigate in a qualitative way how the social and health integration was realised in practice.

Three critical issues emerged:

- 1) The proposal to activate a PHB can come from any point of the system (user, family included) and not only from the psychiatrist. This innovation needs to be further understood by all the practitioners
- 2) The PHB requires since the beginning the involvement of the user (and the family) in the choices regarding his/her therapeutic-rehabilitative process. This requires a new way of thinking to professionals' own role.
- 3) The PHB aims to offer more flexible interventions in collaboration with the community. This means an innovation in the organisation of the welfare system.

In conclusion, the PHB has promoted a culture of recovery in all the partners involved. However, much remains to be done to consolidate and promote the TRPP starting from the citizens-users.